Dillon Trulove promoted to Barnes vice-president

When Dillon Trulove was elected a vice-president of Barnes Hospital at the April meeting of the board of directors it marked but one more milestone in his 34-year career at the hospital.

That career began as an orderly job in 1946, soon after Sgt. Trulove was mustered out of the medical corps. But the pattern had been set even before then. He had had prior experience running a laundry and, after basic training, he had been assigned to the quartermasters corps, where he had responsibility for such things as laundry facilities and supply. However, just as his unit was about to be shipped out, he contracted rheumatic fever and was hospitalized for eight months.

"During that time I really came to appreciate and admire the people who cared for me in the army hospital. During my recuperation I helped out formidable. The thought of being part of administration never crossed my mind when I came here. My philosophy has always been to do the best at whatever job I have at the time; to stick to it and get it done possible along the way, without worrying about moving up. Good work will be recognized, and you also know better what goes into a certain job. Often it is more than meets the eye. You also have a better overall view and a feel for how the various areas intertwine to make the whole organization work for better patient care," he said.

Mr. Trulove was asked the question: "Could a young man or woman starting at Barnes today as orderly rise as he has to vice-president?"

"Absolutely! It really depends on a person's outlook and how hard he or she is willing to work. The thought of being part of administration never crossed my mind when I came here. My philosophy has always been to do the best at whatever job I have at the time; to stick to it and get it done no matter what it takes, and to learn as much as possible along the way, without worrying about moving up. Good work will be recognized, and appreciation in the form of increased pay, promotions, etc., will come. These things don't happen overnight, however. They must be earned. But they are there for anyone willing to do the very best job they can do at whatever their present assignment is."

Hal Dean receives leadership award

R. Hal Dean, a member of Barnes board of directors and board chairman and chief executive officer of Ralston Purina Co., received the Downtown St. Louis Inc.'s Levee Stone Award for leadership in revitalization of the area. The award was presented at the association's 22nd annual luncheon meeting June 24 at which Mr. Dean was honored for his achievement in business leadership and civic commitment.

"Hal Dean is an individual whose energy and vision inspired the rebirth of the LaSalle Park neighborhood," said Robert Hyland, chairman of the organization and vice president of CBS and general manager of KMOX Radio.
Commonsense medicine:
The sting

It's that time again! With the return of sultry, summer days comes insect season, a malady better known as the sting.

The insect sting, in most cases, is only mildly irratating. It is characterized by redness around the sting site, some swelling and localized itching. Both the itching and swelling subside in a short time. The redness cleans-up as the sting heals.

However, insect stings of the Hymenoptera order—bees, wasps, hornets and yellow jackets—can be fatal, especially if an individual suffers from allergic reactions. Severe systemic reactions related to insect stings can develop within a few minutes. The victim may begin to swell, break out in hives and experience shortness of breath, wheezing or asthma. A drop in blood pressure can cause fainting. Death results from the body's inability to supply blood to the brain or by asphyxiation because of hives in the throat, larynx or back of the tongue.

Each year, forty to fifty deaths from stings are reported, but doctors fear the death toll may be higher since sudden death brought on by a sting can be mistaken for a heart attack. An estimated two million Americans a year suffer allergic reactions that require medical attention.

For the non-allergic individual, treatment begins with removing the stinging apparatus with tweezers. This is necessary, because once embedded, the stinger is neither absorbed nor disintegrated. The sting site should also be cleansed with soap and water. Cold compresses can be applied to reduce pain and swelling. Immobilization and elevation of the afflicted extremity may bring comfort. Occasionally, antihistamines are prescribed to relieve accompanying symptoms and itching.

Treatment of the individual who suffers severe systemic reactions is more acute. An injection of adrenaline into the thigh is essential to block the allergic reaction. If an individual is known to be allergic to insect stings, adrenaline kits can be prescribed by a physician. Kits containing self-injecting apparatus—either by needle or by transcutaneousneedleless drug injector known as EpiPen—are available.

A new vaccine made from insect venom, approved by the Food and Drug Administration last year, is also available. The vaccine should be considered for anyone who has had a life-threatening reaction to a sting and is found by a skin test to be allergic. The odds that a second such reaction will occur are 60 percent. The vaccine reduces this risk to 3 percent. However, the immunization procedure is a long and expensive process; maintenance boosters are required every six weeks.

The percentage of individuals suffering from severe allergic reactions is few, and the number of cases involving insect stings could be reduced even further by heeding a few precautions. Bees and wasps are by nature usually timid. They will not harm you unless you invade their territory. Honeybees and yellow jackets, both of which may swarm, are notable exceptions. The yellow jacket also secretes before stinging, thus, adding insult to injury. And wasps can inflict multiple stings since the lancet is unbarred.

However, a little commonsense can protect you. Do not go barefoot outside. Be careful when mowing the lawn, cutting vines and pulling weeds. Wear a hat, gloves, long pants and sleeves. Do not wear perfumes, hair sprays, suntan lotions or bright colors unless you want to attract insects. And, stay away from the hives!

Dr. Furlow dies; neurosurgeon emeritus

Dr. Leonard T. Furlow, Barnes neurosurgeon emeritus, died June 2 at his home in Crystal River, Florida. He was 78 years old.

Dr. Furlow had served as president of the Missouri State Medical Society, both the St. Louis Medical and Surgical Societies, The Society of Neurological Surgeons and the Harvey Cushing Society (now the American Association of Neurological Surgeons).

He was named president of the American Board of Neurological Surgery in 1959 after serving as its secretary for six years. Because of his concern over the high failure rate of doctors examined by the board, he accepted chairmanship of a study commission in 1962 which produced the first neurosurgery training examination in 1964. He received the board's Distinguished Service Award in 1969.

Dr. Furlow is survived by two sisters, Mrs. William W. Baldwin and Mrs. Thomas H. Wheelis, of Madison; a son, Dr. Leonard T. Furlow, Jr. of Gainesville, Florida; a daughter, Mrs. Edward V. Stephenson of Rockledge, Florida; and four grandchildren.

Dr. Goldring elected to neurological office

Dr. Sidney Goldring, Barnes neurosurgeon-in-chief, was named president-elect of the Society of Neurological Surgeons at its annual meeting May 25-28 in San Francisco.

The society, founded in 1920, was the first neurological organization established in the world. Its first president was the late Harvey Cushing, the renowned neurosurgeon from Peter Bent Brigham Hospital and Harvard University. Dr. Henry Schwartz, neurosurgeon and former neurosurgeon-in-chief at Barnes; and the late Dr. Leonard Furlow, former neurosurgeon at Barnes Hospital, also have served as presidents of the prestigious neurological society.

Doctors to be honored for 25 years of service

On July 8, a total of 21 doctors will be honored in ceremonies inducting them into the ranks of those doctors who have served 25 years or more on the active staff of Barnes hospital.

Dr. Benard Adler, ENT; Byron J. Beare and Richard Carlin, GU surgery; Leonard Berg, neurology/psychiatry; H. Marvin Camel, Justin Kramer, Laurence Maze and Joseph O'Keefe, obstetrics/gynecology; Marshall Conrad and Arthur Stein, orthopedic surgery; Arnold Dankner, Ralph Gieselman, Harold Joseph, David Lieberman, James Nickell, Stanley Wald, and Hugh Waters, medicine; Mary Cox, psychiatry; Fleming Harper and Robert Lund, general surgery; and Paul Painter, pediatrics/psychiatry, will join the doctors whose names are inscribed on the 25-year plaque in the Barnes corridor.

The 21 doctors and their spouses will be the special guests of honor at awards ceremonies at 5 p.m. Tuesday, July 8, in the Queeny Tower pool area. Barnes board chairman Harold E. Thayer and hospital president Robert E. Frank will present the honorees with 25-year pins.

The guest list will include 152 doctors who have already celebrated their silver anniversaries, Barnes board of directors and administrative staff, Auxiliary board members, Barnes Hospital Society officers and the chiefs of service for those being honored.

Pacemaker clinic offers thorough follow-up

The Barnes pacemaker clinic offers a frequent, careful follow-up service for persons who have received pacemakers here and elsewhere. The clinic was instituted in 1975 to serve pacemaker recipients because the units must be monitored to assure continued proper function after they are implanted.

Toward the end of the life of a pacemaker battery, a frequent check must be made for indications that the battery is running down. Often, the life of the battery depends on the recipient needs to use the pacemaker, according to Barnes perfusion technician John Brooks. The older pacemakers had mercury-zinc batteries, and their lifespans ranged from two to three years, he said.

Today, most batteries are made of lithium, Mr. Brooks said, which allows the pacemaker to use less energy in emitting electrical impulses to the heart. Thus, lithium-battery pacemakers last from six to ten years. Although the lithium batteries have a greater ability to store energy, he said, they are so new that their life expectancies can be calculated only by pacemaker clinics—there is little or no first-hand experience on which to base predictions. When the batteries do reach end of life, he said, the rate of depletion is much less rapid than that of a mercury-zinc-battery pacemaker.

Both private and WOH clinic patients are referred to the follow-up clinic, located in Queeny Tower. Nurse Lynn Smith said the clinic has followed an average of 125 pacemaker patients per year since its inception (approximately 200 pacemakers are implanted in Barnes patients each year).

Barnes cardiologist and pacemaker clinic director Dr. Allan Jaffe said many private physicians follow-up on their patients' pacemakers with little trouble. However, some physicians may not have the sophisticated equipment required to thoroughly evaluate difficult cases or complications.
in pacemaker therapy, Dr. Jaffe said. Also, some private doctors wish their patients to have frequent monitoring, and thus rely on the type of care for which the Barnes follow-up clinic is well-equipped.

The clinic has the ability to measure and display pacemaker output parameters. When frequent testing is necessary, the pacemaker clinic patient may have his pacemaker checked by telephone transmissions. In this method of follow-up, a patient receives a transmitter which relays a picture of his heart’s activity and his pacemaker rate to a receiver in the clinic.

Such tests allow the clinic to predict more accurately the end of the pacemaker’s battery life, rather than having to rely solely on the information the pacemaker manufacturers provide, Dr. Jaffe said. "There is a trend among pacemaker clinics to follow most patients very closely out of concern that pacemaker battery life may not be as long as it is supposed to be," he said. The clinic has found the converse to be true as well, he said, because sometimes the unit batteries last far longer than the manufacturer claims they do.

"We are more useful in the long-term follow-up process," Dr. Jaffe explained. "We can do much better checking on a patient over a series of months and years than we could do on a recipient whose pacemaker history is not available to us," he said.

Media relations workshop held at Barnes

Barnes Hospital and Washington University School of Medicine hosted "Introduction to Media Relations" June 5 to help prepare interested medical center administrative, nursing and medical personnel for various aspects of television and radio interviewing. More than 80 persons attended the workshops conducted by Burroughs-Wellcome Co. as part of their nationwide seminar program.

The one-hour workshops included brief introductions on the do’s and don’t’s of interviewing etiquette and techniques, followed by a videotape interview which was then played back for critiquing by participants and interviewer alike.

Last year Barnes staff members responded to more than 550 questions and requests for interviews channeled through the public relations office by newspapers, magazines, radio and television stations.

A $30-a-plate dinner dance was held June 14 on the rooftop of the new West Pavilion for friends and contributors of the hospital. Highlights of the evening were a multimedia slide show titled "Dreamers" and music by Jack Engler and his orchestra.
Chinese spectacles of the late 19th century were a sign of wealth and education.

Wearing mid-19th century Benjamin Franklin split-glass bifocals, Dr. Okun (above) holds a pair of pince nez split-glass bifocals of the same era. "Tea steamer" snow goggles (right top) of the 19th century with folding metal flaps utilized pinhole over pinhole to block the sun’s glare. Decorative cases (bottom) include the lacquered, sharkskin and leatherette case (designed to hold a pince nez which folds lens over lens for better storage).
Four thousand years ago a Chinese emperor peered through an amethyst to study the stars. Today, a young woman slips thin plastic lenses into her eyes, transforming them from pallid blue to striking violet.

What is this fascination with visual aids? A growing fascination, centuries old, that has thoroughly captivated a small audience—like Dr. Edward Okun—known as antique spectacle hobbyists.

Dr. Edward Okun, Barnes ophthalmologist and retina specialist, says the antique spectacle bug hit him in the late 1950's—the old days when old eyeglasses were considered little more than junk. The days when collecting was a cheap hobby costing as little as $2 to $5 a pair. The days when Dr. Okun's wife persuaded him to explore antique shops, shows and fairs with her in search of Early American pressed glasses.

"I bought my first pair in 1957. I remember it well; a wire rim silver spectacle with small oval earpieces which slide back and forth adjusting to various head sizes. Horn rims, pince nez, clip-ons, half-glasses for close work and bifocals are all part of the collection. And one must not miss the lorgnettes popularized by none other than Napoleon, the spectacles dating back to as early as the 1800's with the original glass intact. To him, a spectacle with new glass substituted loses its value. It's also a disappointment. "Glasses without the original lenses are less interesting. Studying the original lenses for bubbles, imperfect grinding techniques and uneven refractions tells me so much about how the quality of lens-making has progressed. It also helps date glasses to a specific time period," said Dr. Okun.

Dr. Okun has added 10 pairs of eyeglasses to his collection which were given to him by his patients. These additions are usually family heirlooms, passed down from grandparents and great-grandparents to succeeding generations, sent by patients with accompanying notes telling who owned them and when.

For persons interested in collecting, Dr. Okun suggests stopping in various antique shops to browse. If you just want to look at collections, he suggests the Smithsonian Institute in Washington, D.C. Or closer to home is the collection at the St. Louis Medical Society Museum on Lindell.

Dr. Okun believes the fun is in collecting and cataloging the eyeglasses by date. "I enjoy the search—the trips I've taken looking for eye-glasses. We used to go out for a drive and if we came across any antique shops with a pair of old spectacles, I'd buy them. The hobby just grows with you from one pair to another," said Dr. Okun.
needs it than be wasted," said Mrs. Marcee. Be-
would rather my time be used for someone who

a hospital volunteer?

"I got so tired sitting around doing nothing when

own suffering, did Mrs. Marcee decide to become

veloped chronic liver and kidney problems at age

Mrs. Marcee's second born, Robert Eugene, de-
tially caused by the kidneys rejecting proteins,
which is believed to be a hereditary disease par-

In the midst of coping with her daughter's illness,

dren's to Barnes. Linda is now 32.

daughter's records were transferred from Chil-
more serious the illness, and finally, at age 17 her

decided not to take the neighbors'

ticed anything at all until she got to be around
two or three. Friends would come over to play

doing awful large. We didn't want to believe it.

acted normal, laughed and played, so we didn't

see any reason to take the neighbors' word. Then, at age eight she started throwing up,
having diarrhea and losing fluid," said Mrs. Mar-
cee. At first, they brought their daughter to Chil-

She is a woman of many facets, and

Mrs. Marcee, who has accumulated 2,744 hours

of volunteer service to date, is always busy. On
duty, besides helping out in central service, she
has also worked briefly in Nearly New, the re-
sale shop run by Barnes volunteers, that sells
used clothing, furniture and personal items at
small cost. Even off-duty, Mrs. Marcee will al-
ways be a volunteer.

"I remember one patient in the kidney center.
She had been down there waiting to be taken
back to her room. I can imagine she felt just like
Linda does after she gets off the machine—weak
and tired. So I asked if I could help her. She
wanted me to take her back to her room and I did.
After that, I took her back other times. One day
she sat down there waiting for me, but I wasn't
working," said Mrs. Marcee.

And, "there was the old lady on the 10th floor.
She just wanted someone to listen as she talked
how big the hospital is and how easily you can
get lost. We also talked about her kids and how
they didn't seem to be there when she needed
them. She seemed more at ease after our talk and
didn't feel she was alone.

Volunteers receive no pay. Their only compensa-
tion is heartfelt appreciation. But Mrs. Marcee
has received every award possible from the vol-
unteer department. After her first 100 hours
served, she received a white bar. Then came the
gold bar for 500 hours of service. A gold disc was
next for 1,000 hours worked and for each addi-
tional 1,000 hours a volunteer receives a diamond
chip in the disc. At present, Mrs. Marcee is work-
ing on a second diamond chip.

"The real reward is not in medals though," she
said. "It's in knowing you're needed and
wanted." Elsie Allen, an aid in central service,
sums it up best as to how important Wilma Mar-
cee is to Barnes, "she's just lovely. She's such a
help to me and very conscientious. You wouldn't
know she had any personal problems. She loves
helping people, and she's helping out in the way
she can."

The Marcees have been familiar with the hospital
complex since their firstborn, Linda Louise, de-
veloped kidney problems as a child. "I never no-
ticed anything at all until she got to be around
two or three. Friends would come over to play
cards and say something about her stomach be-
ing awful large. We didn't want to believe it.

as a medical complex go back much further.

In the midst of coping with her daughter's illness,
which is believed to be a hereditary disease par-
tially caused by the kidneys rejecting proteins,
Mrs. Marcee's second born, Robert Eugene, de-
veloped chronic liver and kidney problems at age
21. Ten years later he is unable to work and also
relies on dialysis. So, why in the midst of her
own suffering, did Mrs. Marcee decide to become
a hospital volunteer?

"I got so tired sitting around doing nothing when
I could be of some help to people who need it. I
would rather my time be used for someone who
needs it than be wasted," said Mrs. Marcee. Be-
sides, having been surrounded with so much ill-
ness in her life, she's "pretty concerned about the
sick. If I ever get sick or can't get around, I
would like someone to come talk to me."

As a Barnes volunteer, her time is never wasted.

"I've been a volunteer for almost three
years, but her experiences with Barnes as a medi-
cal complex go back much further.

The Marcees have been familiar with the hospital

Stephen Ronstrom named
administrative resident

Stephen Ronstrom was recently appointed ad-
ministrative resident at Barnes, where his duties
will be split between projects in personnel and
budgeting, including general administrative re-
sponsibilities. Mr. Ronstrom will receive his
master's degree in hospital administration next
spring from St. Louis University after finishing
his service here at the end of this year.

During the next few months, Mr. Ronstrom will
focus on personnel relations projects, said John
Tighe, assistant director of personnel. Later, Mr.
Ronstrom will take on budgeting work in the con-
troller's office. He holds a bachelor's degree in
arts and health sciences from the College of St.
Scholastica, Duluth, Minn.

New writer joins
public relations staff

Sheila Witherington has joined the Barnes staff as
public relations assistant. Miss Witherington is a
1977 graduate of The School of the Ozarks with a
degree in mass media. Prior to joining the Barnes
staff, she wrote medical-related advertising copy
for The C. V. Mosby Company.

Her work experience includes approximately
tree years of news/feature reporting for weekly
newspapers. She began her career as a public rel-
lations tour guide and news release writer in
college. During her sophomore year, she was
promoted to assistant editor of the school's stu-
dent newspaper, Outlook, and later advanced to
associate editor. As associate editor her duties
entailed in-depth news reporting, copy editing
and supervision of practicum reporters.

After college graduation, she worked as a sales
representative for Minuteman Press, a small
instant type printing company. In 1978, she was
named area news editor of the Cahokia Journal,
a 14,000 circulation weekly publication owned by
the Journals of Southern Illinois Corporation.

As a Barnes public relations assistant, Miss With-
erington writes news copy for the Barnes Bulletin
and Newsletter, coordinates media events, pre-
paries news releases and handles hospital tours.

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Charlene Bancroft, Editor
Joan Rice, Writer
Sheila Witherington, Writer
Daisy Shepard, Director

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Barnard Hospital receives $13,000 from Gridiron

The Advertising Federation of St. Louis has donated $13,000 for cancer research to the Barnard Free Skin and Cancer Hospital at Barnes. The contribution was the result of proceeds from the organization's 1980 Gridiron show held March 26.

This year's Gridiron donation will be used to buy a flow cytometer, a cellular research apparatus which defines and separates different populations of cells within myeloma tumors, based upon their staining with specific dyes. The flow cytometer can detect and isolate cancer cells of the breast, uterus and prostate and make possible the study of the body's normal defense against malignant cell growth through the analysis of both normal and malignant cell populations.

Over the years, the federation's contributions have generated more than $1 million for cancer research at Barnard.

One man's definition of good patient care

In speeches, in training, in orientation, in personal dialogue, hospital employees are constantly told and told one another that professional medical care must be complemented by compassionate understanding. But no where has this been stated more eloquently than in the following excerpt from a letter from a Barns pa
tient to the nursing staff on 7200.

There is no one who wants to be confined in a hospital. The fact that we are there means, almost always, that there is something very wrong with our bodies. Sometimes we know what it is and sometimes we do not. In either event, we are confused about what is happening to us, and we are very often afraid. It is this human condition which should be considered and dealt with in the same fashion as is the physical condition. In this regard, I am saying only that the staff should exhibit compassion for the patients, and not indifference.

Those of us who do not need special treatment generally do not want it. I know that the time of all of you can be greatly hard-pressed, and that is why I am certainly not suggesting that you engage in any sort of unnecessary special "hand holding" of patients. I simply feel that people in your profession should always keep in mind the fact that the rooms of your hospital are filled with human beings who happen to be patients, not patients who incidentally happen to be human beings, and that you should treat these patients accordingly.

Applying the foregoing philosophy to my recent stay on your floor results in high marks for you. A smile and pleasant behavior by you was the rule and not the exception, and that is so important. When I was awakened during the night to take medication or for any other reason, it was done gently and kindly. I received a full explana
tion of hospital procedures for all matters pertaining to me. The nurses never forgot the nature of my injury, and, therefore did not make thoughtless requests for me to do things I could not do. More than once, a nurse would take the time to research the medication I was receiving so that she could explain to me the reason I was taking it. A housekeeping supervisor stopped by to inquire as to whether the room was being cleaned to my satisfaction. A Blue Cross representative was helpful in explaining my insurance benefits, and a volunteer organization offered to run er

rands for me. In short, I was treated with the compassion and kindness set forth in my afore
said philosophy, and for that I am extremely grateful.

In closing, I would ask that my thanks be con
veyed by you R.N.s to all of the others who helped me while I was at Barnes. Please never forget how much a patient appreciates and needs your kindness and compassion.

It is my sincere hope that I never see any of you again, unless it is in a setting far removed from any hospital!

Memorial fund honors Elizabeth Rosenbaum

A fund has been established at Barnard Hospital School of Nursing to honor Elizabeth Rosenbaum, a former head nurse at Renard, who died of cancer June 7, 1980. The Liz Rosenbaum Award Fund will assist outstanding candidates for nursing de
grees.

Mrs. Rosenbaum, 43, was the wife of Dr. Herbert E. Rosenbaum, a Barnes neurologist. She was a 1957 graduate of Washington University School of Nursing (later Barnes), specializing in psychi
atric nursing care.

After her retirement from nursing in 1976, Mrs. Rosenbaum became a life member of the Barnes Hospital Auxiliary and did volunteer work at the hospital.

Tribute Fund

The following is a list of honorees (names in boldface) and contributors to the Barnes Hospital Tribute Fund from May 16 to June 15, 1980.

IN MEMORY OF:

Shirley H. Esrock
Richard Fisher

Mrs. Charles Clagg
Barnes Hospital Auxiliary

Clara Reilly
Barnes Hospital Auxiliary

Elizabeth Bressen
Barnes Hospital Auxiliary

James Rion

Jan McCarthy
Howard Hehner
Howard Hedrick
Carl Weatherford
Don McGeehan
Charles Felthman

Moe Schwartz
M/M Leonard Hornbein

Lucille Batson
Thomas B. Ferguson, M.D.

IN HONOR OF:

Phil Kopitsky's 75th Birthday
Marcia & Frank Kopitsky

Elayne Liebermann's Birthday
Stanley & Natalie Wald

In Expectation of Gloria Lund's Recovery
Lawrence W. O'Neal, M.D.

In Expectation of Patsy Walker's Recovery
Lawrence W. O'Neal, M.D.

Patient Care Fund

Mary Burnman
Virginia Lee Carter
Greg Giford
Orval M. Green
Margaret Muenchelbachs
Frances Rudin
Mrs. Park J. White
Eula M. Willis
Ken Archer
Dorothy Borg
Mrs. M. J. Boettenger
Barbara Booth
Mrs. Rose Brooks
Bessie Burge
Carroll F. Burton
Leon Carr
Carole Carter
Tullio Ciotti
James T. Edwards
Ruth A. Elssasser
Martin Feit
Nelle M. Ferguson
Mrs. Clara Z. Glasner
William Grohmann
Virgil W. Handlang
Ruby E. Haney
Annie B. Henry
Fred Hobelmann
Mrs. Rose M. Hoffman
Bessie Hupert
M/M Calvin T. Jones
Chuter Jones
John E. Jones, Sr.
Ernest A. Kamp
Mrs. Therma B. League
Robert E. Lee
Mrs. Matilda Littlejohn
Mrs. Rosemary Lynn
Mrs. M. E. Mierens
Mary Louise Murray
Isadore Pearlstein
Donna Pratt

M/M J. Pretsky
Mary Ruckdeschel
Mrs. Georga Lavon Seymmer
Cletus N. Shaw
Mary A. Sheldon
Alice G. Shen
Paul Sliger, Jr.
Mrs. Blume C. Smucker
James Snider
Leonard L. Sparks
James E. Stevens
Miss Martha J. West
George Wiebe, Jr.
Crawford Yeager
Estella R. Collins
Mrs. Frank McCormish, Jr.
Mrs. Michael Petkas
Anne Lukowiak
Arthur Rascon
Miss Esther Schelp
Mr. Jesse Smith
Tucker Strool
Vincente Gomez
M/M Rufus Bailey
Lizzie Banks
Robert H. Hosken
George Murphy
Magdalene Nickles
Francis E. Reese
M/M Russell F. Scheufler
Mildred D. Shaw
Dorothy M. Walsh
M/M William
Witherspoon

In Memory of John
Kathirk
Barnes Hospital School of Nursing Faculty

Annual Charitable Fund

Harry Kolker
Elise Trauffer
Mrs. Mary Aksamitus
D/M Robert M. Bell
Emil Carabelli
Mrs. E. G. Corbinonner
Fannie Davis
Raymond E. Gill
Mr. R. Gilman
Dr. Cranberry, Jr.
Edward F. Zak
Otis Heardman
Gertrude A. Henny
Mrs. Leona Hussmann
Albert Kerr
M/M G.E. MacDonald
Mr. M. G. McDaniel
Albert B. Meyer
Alex Mitchell
Mr. T. A. Moorman

Sams Pisoni
Charles M. Poynter
Agnes B. Rubl
Beatrice Sinton
Ernestine F. White
Mrs. Rose H. Zimmerman
Dorothy D. Halen
Henry A. Mezyk
M/M Josh Barnes
M/M Allen G. Calvin
M/M Norman Kneenan
M/M Walter C. Propst
Roxie L. Woods
Carl W. Gunserkey
Mrs. Jane K. Seiler

In Honor of the Speedy Recovery of Tobias Lewin
D/M Theo Haimann

Memorial Endowment Fund

Jackie Parlow
James A. Taylor
Angelo Oldani
Morris Gibson
Walter F. Winkelman

In Memory of Mrs. Fred Hosna

Mrs. Shirley Geringer

In Honor of the Speedy Recovery of Mrs.
Evelyn Becker

Ann Sachs

Mr. & Mrs. Louis S.
Jablown's Anniversary

Mr. & Mrs. Louis S.
Jablown's Anniversary

In Honor of the Anniversary of Mr. &
Mrs. H. Brod
Ann & Paul Lux

In Memory of Daughter,
Theta Tucker
Mrs. Ann Tucker

In Honor of Kind
Treatment Received from Doctors
and Nurses of Barnes Hospital
M/E Leslie Fishel

Scott Jablown Endowment Fund

In Honor of Mrs. Hope
Komm's Birthday, Mr.
& Juliane J.
Jablown's Anniversary,
Orientation for new junior volunteers was held June 9.

Junior volunteers are back to lend a hand

More than 100 new and returning summer junior volunteers joined the ranks of Barnes Hospital personnel in June, according to volunteer director Deborah Bobinette. These junior volunteers will be working in fifteen different areas at Barnes, including nursing divisions, admitting, radiology, clinics, pharmacy, respiratory therapy and the Wishing Well gift shop.

An all-day orientation, conducted by the volunteer and education and training departments was held June 9 for all new teenagers entering the junior volunteer program.