Barnes Hospital, St. Louis, Missouri, October, 1980, Volume XXXIV, Number 10

Estel Powell, Jr., arrived at the Barnes heliport in critical condition only hours after receiving severe facial burns while burning trash at his Marion (Ill.) home.

The Barnes Hospital board of directors approved a 10.8 percent pay increase for all Barnes employees, effective September 7, as well as an upgrading of some positions including nursing and medical technology, and increases in vacation and tuition reimbursement benefits. The increase makes Barnes employees the highest paid hospital workers in St. Louis, with a minimum wage salary base of $4.17 per hour. (Currently federal minimum wage is $3.30.)

The wage and fringe benefit increases were approved upon recommendation from administrators at the hospital’s annual planning meeting held August 7-8. “Barnes plans to keep its employees’ wages and benefits at the top end of the St. Louis hospital market,” said hospital president Robert E. Frank. Last September, Barnes employees received a 7 percent increase and in December a 2 percent increase.

Effective Jan. 1, 1981, Barnes full-time employees in pay grades 1-14 will be given two weeks of vacation after one year of employment, three weeks after five years and four weeks after 15 years of service here. On employees’ 20th anniversary and every five years thereafter, staff will be given an extra week of vacation during those anniversary years only. Employees in pay grade 15 and above will receive three weeks of vacation after one year of employment.

Tuition policy has been extended to provide a 100 percent payment for Barnes employes currently in or pursuing professions which are in short demand, said dent Robert E. Frank. Last September, Barnes included skin grafts taken from Junior’s thigh to cover the burned areas, daily wound cleanings and physical therapy to prevent injured and grafted skin from becoming tight and drawn.

On August 26, only three weeks after the accident, Junior was discharged from Barnes and was looking forward to a plate of “Mom’s chicken and dumplings,” seeing his three younger sisters and returning to school with fellow classmates. Mrs. Powell, under the guidance of Barnes staff, will continue caring for the small wounds not yet thoroughly healed and will supervise daily exercise sessions. “I expect to hear a lot of whistling around the house for the next few months,” she said of one of the exercises Junior must perform routinely to keep his facial skin toned and supple. Regular follow-up visits to the Barnes burn clinic are also scheduled.

Barnes gives $3 million in free medical care

Almost $3 million in free medical care was provided by Barnes Hospital during the 1979-80 fiscal year ending July 1, according to the Washington University Medical Center annual report released in September. The $3 million figure represents almost half of a total of more than $6.5 million which was given by institutions in the Center including Barnes, Barnard Free Skin and Cancer Hospital, Jewish Hospital of St. Louis, St. Louis Children’s Hospital and the Central Institute for the Deaf.

Barnes kicks off United Way drive

Barnes Hospital’s United Way campaign kicked off its 1980 fund-raising drive October 13 with a goal of $75,000, representing approximately a 4 percent increase over the last three years’ average contributions, according to Rose Dunn, Barnes associate director and this year’s campaign chairman. (Rich Linneberger, associate director, is assistant campaign chairman.)

The Barnes campaign, which will conclude October 31, began this year with a series of informational rallies in the East Pavilion auditorium. The programs included tours for hospital department heads of various United Way agencies, demonstrations of in-house agency services, the showing of the United Way film and volunteer speakers.

“Each employee is asked to give a fair share. In the face of inflation and the growing number of unemployed people, unprecedented pressure has been placed on United Way agency resources. The demand for agency services jumped 17 percent last year, and this demand will continue to increase in 1981 as these agencies rise to meet the communities needs,” stated Clarence Barksdale, a member of the Barnes board of directors and this year’s metropolitan area campaign chairman.

“To meet the unprecedented demand for services brought on by unemployment, agencies are depending on employed workers to respond to this year’s campaign more generously than ever,” Mr. Barksdale said. “We’re depending on Barnes employees to give generously,” Mr. Barksdale said.

Employees can give in one of two ways: the full amount at one time or a deferred payroll deduction plan, with the first deduction beginning in November. Payroll deductions may be spread out over as long a period as the employee desires.

“The metropolitan area’s campaign theme, ‘There’s no better way,’ underscores the United Way belief in gathering money to meet a wide range of human needs. This theme reflects Barnes philosophy of serving the community in what (continued on page 2)
ever way we can. With the attitude of our employes, I’m sure we will continue providing this community service,” stated Mrs. Dunn.

Last year Barnes employes contributed $68,299 toward a St. Louis metropolitan area goal of $1,750,000. This year, 40,000 United Way volunteer representatives at Barnes and Missouri are working toward $2,250,000—$1,100,000 more than last year’s target.

Funds raised in the 1980 campaign will support 115 private and non-profit health and social welfare agencies operating more than 250 service centers in Missouri and Illinois. These agencies provide 24-hour lifeline emergency services; youth and family enrichment programs; individual and family literacy services; community and neighborhood development programs; and special child care and day care programs. Each year, 92 cents of every dollar contributed is returned to the community.

**Recruitment campaign attracts nurses**

At least 25 RNs have joined Barnes Hospital as a direct result of the recent nurse recruitment campaign and related open houses held in August.

Allen Palmquist, professional recruitment manager for Barnes, and Lois Vahle, nurse recruiter, said the tours gave Barnes an opportunity to show off the modern facilities and technology available to nurses at Barnes. “We are No. 1 in St. Louis in size, opportunity to specialize, and technology and now with the implementation of changing unit’s in the year’s annual planning meeting, we are also No. 1 in wages and benefits. We feel we are best and we want to attract the best,” Mr. Palmquist said.

Nurses have come on staff in a number of divisions including medicine, general surgery, neurology, neurosurgery, psychiatry and obstetrics/gynecology. There are also nurses working part-time as part of Barnes float pool. All attended a one-week formal orientation program as well as individualized orientation on the nursing floors.

“We have more RNs at Barnes now than we have ever had in the hospital’s history,” Ms. Vahle pointed out. “However, the increase in JCL’s and the emergence of primary care nursing, which allows direct one-on-one patient care by nurses, means we need even more dedicated RNs and LPNs to assure continuing high-quality patient care.”

**Lupus Awareness Week is October 15-19**

October 15-19 has been designated Lupus Awareness Week as part of the effort to inform the public about lupus erythematosus, a sometimes fatal skin disease that affects more than one-half million Americans, according to the Lupus Foundation of America, Inc., Missouri Chapter. Barnes Hospital has one of the few lupus treatment centers in the country. It is under the direction of rheumatologist Dr. Bevra Hahn.

Although the disease was officially recognized in the 19th century, little is known about its cause or treatment. “It strikes each individual differently, thus treatment must be individualized,” according to Dr. Hahn. “There are several theories as to its cause but no one theory is conclusive and a combination of two or three interrelated theories is probably more correct. LE may be caused by a reaction to certain drugs, a virus or sex hormones. Many think genetic predisposition is the determining factor since the disease mainly strikes women in their childbearing years, but this theory is certainly not the only one,” said Dr. Hahn.

Since the cause is uncertain, there is no specific treatment. Patients with mild cases can be effectively treated with aspirin. Cortisone is used in more serious cases, but this steroid can cause such side effects as facial hair, acne, weight gain or steroid osteoporosis. Antimalaria drugs have also been found to be beneficial.

“Other than the physician, our organization is the only source people can turn to to obtain updated, accurate information about lupus. Information such as this is not found in most libraries. It is vital for the Lupus Foundation to support research and help more LE victims, and this is possible only through more public awareness,” said Barbara Butler, secretary of the Missouri chapter.

According to Ms. Butler, lupus is a slowly progressive systemic skin disease that deteriorates collagenous tissues. An individual becomes allergic to some part of his own tissue, which can cause serious side-effects, she explained. Kidney failure, liver failure, degeneration of the nervous system, heart or lung disease, lesions of internal organs and sometimes wasting away by fever are common effects.

**Black employes attend “Yes I Can” dinner**

Twenty-four black Barnes employes were guests at the St. Louis Sentinel’s seventh annual “Yes I Can” dinner held September 18 at Stouffer’s Riverfront Towers.

Barnes employes attending included Velma Jones, policies and procedures consultant, nursing service; Peggy Jones, assistant head nurse, 4 Renard; Helen Russell, head nurse, 3 and 4 Renard; Margaret Caeser, assistant head nurse, new, 11,040; Jan Hawkins, assistant head nurse, emergency room; Aleaner Smith, head nurse, 9100; JoAnne Spencer, assistant head nurse, 8100; Terry Walker, assistant head nurse, 11,000; LaVonda Spencer, assistant head nurse, 13,000; Pat Cressie, assistant director, nursing service; LaFrances Cockrell, associate director, nursing service; Mildred Jarniesen, unit manager, 11,200; Wilhelmina Bateman, assistant head nurse, 4400; Gwen Walker, unit manager, 5300; and Bettyears, unit manager, 12,200.

Marva Johnson, manager, kitchens; Jim Kimble, manager, cafeteria; Londell Johnson, chef, kitchens; Wadis Evans, chef, Queeny Tower; Charleeta Williams, supervisor, outpatient medical records; Carol Smith, supervisor, cardiac diagnostic lab; Deloris Dock, evening supervisor, cardiac diagnostic lab; Nellie H. Tolliver, obstetrics/gynecology clinic nurse; and Margaret Henson, secretary, pastoral care.

Speaker at the dinner was Ernest Green, U.S. assistant secretary of Labor for Employment and Training. The idea for the “Yes I Can” dinner was conceived by the late Sentinel publisher Howard B. Woods more than six years ago to honor and identify minority achievers in business and industry in St. Louis, and to motivate and inspire young black people toward the pursuit of excellence by providing an opportunity for them to meet black men and women who have achieved success in their careers despite great obstacles.

Many companies require that their executives have annual physical examinations, but they have also found that these are frequently inconvenient and time-consuming for businessmen to whom time is money. Barnes executive physicals program, initiated in 1979, is filling the need for a convenient, efficient system to provide this service.

The program is designed to combine the advantages of a hospital-based physical examination with outpatient economy of time and expense. Joyce Rutherford, coordinator for the...
program, works with the company and the individual executive to schedule lab tests, EKGs, chest x-rays, etc., for early in the morning so that the results are in the examining doctor's hands the same day, providing him with all the information necessary to complete the physical. The program is not rigid, but is tailored to meet the specific needs of each company. Results are forwarded to the executive's personal or company physician and the company is billed by Barnes accounting department.

"This program is well-designed and very efficient. It is as successful as any good community service can be," Mrs. Rutherford said. "When a physical is done by a private doctor, the lab work frequently has to be sent out and the results are not usually available the same day, so often more than one visit is necessary. Here, we have all the resources of a major teaching hospital at our fingertips," she said.

An added convenience for those executives coming from out-of-town is the availability of hotel-like rooms in Queeny Tower, where they can spend the night before returning home. "Some executives have even brought their wives with them for physicals because of the convenience and because they feel they are getting the very best treatment by coming to a hospital such as Barnes."

The number of executives and companies participating in the executive physicals program continues to increase and now includes persons from as far away as Texas and Kansas as well as those from Missouri and Illinois. Companies such as 7-Up, Western Electric, Anheuser-Busch and Monsanto use the service. Additional information about the executive physicals program, along with a brochure, is available from Mrs. Rutherford at 454-2255.

Volunteers can update knowledge at workshop

Barnes volunteers can update their knowledge about the hospital as well as gain new insights into plastic surgery at the annual volunteer workshop in Wohl auditorium Thursday, Oct. 16.

The 13th annual workshop will get underway with registration and coffee at 9:15 a.m. Robert E. Frank, Barnes Hospital president, will give an update on the medical center, including a progress report on the West Pavilion.

The theme of this year's workshop, "Advances in plastic surgery," will be discussed by Dr. Jeffrey L. Marsh, Barnes plastic and reconstructive surgeon, followed by a review of volunteer services at Barnes, "Natural resources and endangered species," by volunteer director Debbie Bobinette.

The workshop will conclude at 2 p.m. Mary Barnekamp, volunteer service chairman, and Mrs. Bobinette are coordinating the program. Previous topics discussed at volunteer workshops include arthritis, heart disease, transplants and intensive care units.

New HAMSTL president named

Stephen E. Dorn, executive vice-president of the Chicago Hospital Council, has been appointed president of the Missouri Association of Metropolitan St. Louis. The appointment, which is effective October 24, was announced by Anthony L. Bunker, chairman of the association's board of directors. Mr. Dorn succeeds the late Gerald J. Malloy, who died in March.

Pavilion doctors offices, second tunnel open

Outpatients of some Barnes medical staff are now seeing their doctors in new quarters located on the 16th floor of the East/West Pavilion after occupancy of the area October 1. An outpatient laboratory as well as the second of two substreet tunnels joining the subsurface garage with the hospital were also opened. Additional offices on the 16th and 17th floors will open later this month.

Studies have shown that patient care is enhanced and costs curtailed when doctors on staff at a teaching hospital have offices close at hand. "The new offices were incorporated into the plans for the West Pavilion as a convenience for our doctors who see outpatients and care for inpatients hospitalized at Barnes," explained Beth Uhlman, Barnes planning coordinator. "Location of these offices at the hospital will help to best utilize the doctors' time so that more of their day can be spent with patients and not in traveling back and forth from office to the medical center."

An outpatient laboratory was also completed earlier this month for use by doctors and patients in the new area and in Queeny Tower. The lab is located on the first floor red carpet area of the main east/west corridor and is staffed by Barnes employees.

"As an added convenience to outpatients seeing the 16th/17th floor doctors, free parking (up to three hours) is provided on the blue level of the subsurface garage, located across the street from the hospital," Ms. Uhlman added. Fifty parking spaces are also reserved on the blue level for doctors with offices in the East/West Pavilion. The two substreet tunnels connecting the blue level with Barnes assure patients they do not have to brave inclement weather to visit their doctors. Wheelchairs are also available at the tunnel entrance. Elevators at the end of either tunnel provide direct access to the doctors offices.

East/West Pavilion private office space ranging in size from 750 to 3,000 square feet is available by contacting Ms. Uhlman.

Wendell G. Scott lecture given

The Ninth annual Wendell G. Scott Lecture was given by Dr. A. Everette James, Jr., professor and chairman of the department of radiology and lecturer in legal medicine at Vanderbilt University. The lecture "Considerations of Law and Medicine," was held September 8 at Mallinckrodt Institute of Radiology.

With the cell saver, the patient will benefit both physically and financially. Transfusing a patient's own blood back into his system reduces the risk of contracting serum hepatitis and the possibility of transfusion reactions or sensitization to future transfusions by the recipient.

Besides being better for the patient, the instrument serves a second purpose: it saves money. "Currently an open heart surgery patient at Barnes requires approximately six units of donor red blood cells transfused. With the cell saver, we can cut the amount of transfused blood to three units. Decreasing the amount of donor blood we transfuse will substantially cut costs for the patient. We have estimated by comparing the total blood transfusion charges to the cost of the cell saver, we can still reduce the patient's blood processing charges by 10 to 15 percent," said Dr. Laurence Sherman, director of Barnes blood bank.

The cell saver will be used primarily for open heart surgery. "However, the instrument is also applicable to certain kinds of trauma patients where massive blood loss occurs. Depending on the success of the cell saver, the hospital may purchase a second instrument for use in other areas," said Dr. Sherman.

Haemontics cell saver benefits patients two-fold

Open heart surgery patients at Barnes will soon benefit from an innovative blood harvesting concept that not only reduces the chances of donor blood transfusion reactions but also decreases individual blood costs.

The blood harvesting concept, better known as the Haemontics Corporation Cell Saver, is basically an instrument that collects and purifies a patient's own blood for transfusion back into the body during surgery. In a 10-minute procedure, the instrument can remove a patient's discarded blood from the field of operation, spin out all the impurities and then, in safe form, transfuse the red blood cells back into the patient's system.

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October 11 is National Jogging Day, but true joggers will little note nor long remember that fact. They consider every day national jogging day and neither rain, nor sleet, nor cold of winter day can keep them from their appointed rounds . . . although sometimes the elements do send the less hardy indoors to run on oval tracks such as the one on the fifth floor of the IWJIR in the WU medical center.

Running addicts ascribe multitudinous benefits to the activity, including all manner of mental, emotional, physical and even social well-being. (The purist will argue that running and jogging are two entirely different activities, but in the interest of provoking reader response, this article will lump them together.)

The mystique of running is paradoxical. The sport requires no special expertise, physical ability, size or talent, yet the devotee is in the same enviable position as a football player or chess champion: he or she can do something that not everyone else can do—in this case, run several miles without collapsing in a heap.

A 70-year-old man who has suffered a heart attack can be better at this sport than a 30-year-old who is uninitiated in running. (Some joggers will insist the activity is noncompetitive, but don’t believe them for a minute.) A 110-pound woman cannot aspire to play major league baseball, but she can finish the Boston Marathon, the world series of running. The sense of well-being, achievement and one-upsmanship this inspires is self-evident and is difficult for the sedentary to refute.

Probably no two of the nation’s 40 million joggers would give the same reasons for their having taken up the sport. Mary Grace Clark, an RN in Barnes recovery rooms, runs for weight control and participates in two or three races every year. Her husband and children join her in what is becoming a family activity for many households.

Dr. Fernando Arias, a Barnes obstetrician, credits running with giving him a feeling of well-being and health. He and running mates, Julio Happa and Dr. Walter Bauer, surgical pathology, all participate in marathons and run anywhere from 40 to 70 miles a week. Although Dr. Arias denies that running is boring, he says running in a group is more entertaining because it gives him someone to talk to. (Talking to oneself, singing, and especially wearing radio headphones is frowned upon.)

Rich Schellhase, budget director, took up running when an ankle injury forced him to give up basketball about five years ago. He usually runs on his lunch hour to stay in shape and keep feeling good. He most often runs alone and enjoys having the time to himself.

Running is not without its dangers. Being tackled around the ankles by a 20-pound dog growling and baring its teeth is as frightening—and dangerous—as being tackled by a 250-pound football player. Other pedestrians, runners, cyclists, curbs, and parked cars are also hazards for the runner who is not on his toes.

Taking to the woods to avoid hazards can be just as dangerous for the unwary runner. Protruding tree roots, wet, slippery leaves, rocks, logs and low-hanging limbs can be a runner’s downfall. Poison ivy, chiggers, snakes and other critters may make the runner wish for the friendliness of a snarling dog.

A runner’s foot strikes the ground about 1,000 times a mile with a force three times his weight.
This repeated jarring can cause stress fractures, shin splints, knee problems, heel bruises, and pulled hamstrings. A soft running surface like dirt or grass is not so bad on the feet and legs as asphalt or concrete, but the proper shoe will also help. Some running shoes, with flared heel and extra cushioning, are made for use on hard surfaces.

Good shoes have a firm sole and good arch support with adequate padding under the ball of the foot. The upper back should be rigid to keep the heel firmly in place, but there must be plenty of room for the toes.

Doctors agree with the common man that jogging seems to be healthful, although clear-cut scientific findings are minimal. There’s no question it tones up the muscles and may make one look and feel slimmer, but the number of calories expended in jogging is less than in many other types of exercise, according to Dr. Allan Jaffe, a Barnes cardiologist.

“There is no question that running can change heart function. A runner’s heart is larger and his pulse slower so the heart is working less hard and more efficiently. We like to think that those things are beneficial to the heart, but we can’t prove it.” Dr. Jaffe said. He added that patients who have suffered heart attacks benefit psychologically from exercise under controlled conditions, such as running on the JWJIR track while being monitored. “It gives them a sense of pride and well-being and runners seem to live longer although studies are not definitive yet.”

The pulmonary benefits of running have been proved in children and young adults with cystic fibrosis, an emphysema-like disease that clogs the air passages in the lungs. Running not only increases the lungs’ vital capacity but it also encourages coughing, which helps clear the lungs and make them healthier. With this new evidence, Dr. Donald Strominger, Barnes pediatrician and director of the Cystic Fibrosis Center at Children’s, is planning a National CF Run to be held in St. Louis next spring as part of a total program to interest CF patients in running.

Dr. Michael Gast, a Barnes obstetrician and a runner himself, said that running could be a good exercise for a woman to continue in early pregnancy, although it should not be begun during pregnancy. He also advised against jogging late in pregnancy and pointed out that weight gain and a changing center of gravity may make falling a risk or heighten the chance of ankle or knee injury.

Dr. Siddhesh Gowda, also a Barnes cardiologist as well as a marathon runner who chalks up at least 30 miles a week, said that for him running is a mental catharsis that helps relieve tension. He believes running conditions the cardiopulmonary system and maximizes the utilization of oxygen. “Also, I can eat whatever I want.”

The social advantages are as individual as the runners themselves. Running is advocated as a great way to bump into someone new. It can also be used as an excuse for not having time to do something or go somewhere one wants to avoid.

An overriding advantage for anyone who has ever had a dead battery, flat tire or octopus date is that jogging two or three miles to get home is a breeze for someone who runs every day just for fun.
Patient’s daughter commends nursing care

The daughter of a recent Barnes patient wrote the following letter to commend the nursing care provided her father during his hospitalization. Although at press time it was not possible to identify this particular nurse by name, it could describe the professionalism, expertise, compassion and care exhibited by many Barnes nurses.

I was visiting my father in room 9105 last night when I noticed an extraordinary nurse. Her professionalism and expertise belie her years. My father has been a cancer patient and over the last weekend there was a dramatic change in his behavior. He was having hallucinations and was very uncooperative.

When we arrived at the hospital, the nurse assured me that my father was doing much better; that he was quieter and seemed more content since the restraints were removed. Also, she said she had been getting him to drink quite a bit of water and had used some ointment on his lips. His lips had been so dry and had cracked in several places.

She also came into the room quite often and encouraged him to drink some of the liquid meal (which she had placed in the freezer so that it would taste better). She also came in his room and fed him some of his food; she also encouraged us to try and get him to eat something. She said if we needed her for anything to let her know. Also, she said to keep the tray in the room and she would remove it later.

When I asked at the desk later for some help in rubbing his back and hip with some ointment (because of the needles in his arm I was afraid to do this without some help), she came in the room in just a few minutes and rubbed my father and rubbed his back and hip with some ointment. She said that he was developing a spot on his hip and that she would order some medication for it. She also said that they would have to keep him on his side to allow this spot to heal.

When I asked the nurse how long she had been a nurse, I was surprised to hear her say she had just finished three years of training. She was so efficient and capable that I was certain she had been a nurse for quite a few years although she looked to be only 18-22 years of age.

Her concern for her patients are genuine; if there was ever a beautiful person, this nurse is certainly that person. If this is the way this nurse works every day (and I am sure it is), she certainly must be a pleasure working with—not only for the doctors and other nurses, but also the patients and their families.

I don’t know if I will ever see this nurse again, and I don’t even know her name . . . but I do know that I will never forget her kindness to me and my family.

PEN combines studies with work experience

Thirty-eight juniors and seniors have begun part-time duties at Barnes as participants in the Practical Education Now (PEN) program, sponsored by the University City and Rosati Kain High Schools. This is the second year Barnes has participated in the program.

“Students learn to work and work to learn” said Sue Courtois, instructor in the hospital’s education and training department and coordinator of the PEN program here. “As members of PEN, students get practical clerical experience at local businesses to supplement classroom studies and learn about the different kinds of jobs in the business field. They can also make valuable contacts for possible employment or business reference when seeking a job after graduation.”

Barnes departments active in the program include dietetics, respiratory therapy, telecommunications, nursing service, social work, clinics, dispatch, internal audit, medical records, laboratories, print shop, pharmacy, activity therapy, plant engineering, security, education and training, and the school of nursing.

Chaplaincy program complements training

In some respects, seminary training is very much like any other schooling: it is merely “book-learning.” It is experience in the real world that helps ministers, rabbis or priests develop the understanding and empathy that is essential to their future ministries.

The student chaplaincy program at Barnes helps fulfill that need, according to the Rev. Adveint Melksede, a native of New Guinea, who recently completed his work here. “The people I have worked with and the patients I have come into contact with at Barnes have taught me a great deal. I am especially impressed with the employees here; they are always willing to help the patients.”

Mr. Melksede will travel to Germany, Tanzania, Hong Kong, Japan, Switzerland and Norway before returning to his own country where he hopes to become a chaplain in the Lutheran Social Services or in a correctional institution.

Patient thanks Barnes for the royal treatment

Thomas Duncan, a mathematics teacher at a St. Louis County school, stayed on 7400 while he was in the hospital for eye surgery. He said he got the royal treatment at Barnes. “I am most pleased with my stay, and I’m very proud of the job you people are doing here at Barnes Hospital,” Mr. Duncan said. He explained that it was not just one or two people who took the ball and ran with it—everyone “gave the kind of care that your own family would give.”

During his first encounter with the hospital in admitting, Mr. Duncan said employees were extremely gracious and helpful through what can occasionally seem to be a long process of paperwork, chest x-rays and blood tests. He added that up on the floor, the nurses he met “went out of their way” to make his stay as pleasant and as comfortable as possible. “I really appreciated their professional attitudes, also,” he added.

But the TLC at Barnes went beyond that given by the hospital’s health care personnel, according to Mr. Duncan. Housekeepers were commended for their friendly, courteous attitudes, and dietary staffers astounded Mr. Duncan when they remembered his request to put his food tray by the window or set it in a place where he could watch television.

“People here are fantastic,” Mr. Duncan concluded. “Everyone was very solicitous of my welfare. It just seems that Barnes employees are very interested in their patients.”

Judy McLear named labs technical director

Judy McLear has been promoted to technical director of Barnes diagnostic laboratories effective as of September 11. She was formerly chief technologist in the clinical chemistry lab, where she had worked five years.

Ms. McLear received her BS degree from the University of Missouri at Columbia in 1975 and has earned her masters degree in education from Washington University since joining Barnes. She is presently enrolled in the WU hospital administration program.

As technical director, Ms. McLear is responsible for managing the business facets of the laboratories. Dr. Jay McDonald, medical director, has responsibility for the medical care aspects of the diagnostic labs.

Little children appreciate Barnes security demo

“Thank you for coming to are class. They really apri- shat you comming to are class, but I wasn’t here when you two were talking and I bet you two would make a good pair.”—Franne

“Thanks for cumen. You are a good man. You stand straight and tall.”—Jerry

“You are care nice. You tall the troth. Thank you for cumen.”—Jerry

“You are rise. Really nice. Good day, good day. You can pray. Say do you like to pray? Keep on doing well!”—Jason

What’s it like to be only seven years old? Well, besides skinned knees and no front teeth, it’s a special time of learning how to say thank you.

A special time that two Barnes security officers can tell you about—and especially how much a thank-you means from Mrs. Vishino’s second grade class at Fox Elementary School. Here’s their story.

The planning stages began at the persuasion of Larry Hinckley’s girlfriend who asked him to give a demonstration of what it’s like to be a security officer to her son’s class. But, to us, it’s 2 p.m. Friday, April 25. Off-duty officers Hinckey and Mike Massey arrive at the school in full dress uniform carrying two Johnson radios. They also have an assortment of student handouts including a map of the Barnes complex, what to look for in identifying a suspect and an example of an arrest report sheet.
Hospital notes

The following are reported on staff: Dr. William C. Sharer, Dr. Leonard D. Guarn, assistant urologic surgeons; Dr. Krishna Chunduri, Dr. Gary E. Hirschberg, assistant anesthesiologists; Dr. Alex E. Dienes, Dr. Ray E. Clouse, Dr. Steven A. Lauter, Dr. Julio E. Perez, assistant physicians; Dr. Robert J. Schneider and Dr. Sharon F. Tiefenbrunn, voluntary assistants, outpatient department only, all effective July 1, 1980.

Barnes pediatrician Dr. Virginia Weldon was elected vice-president of the Washington University Medical Center’s board of directors during the annual meeting held September 9.

Rose Dunn, an associate director of Barnes Hospital, was installed as president of the 500-member Missouri Medical Records Association for the 1980-81 term at the association’s annual meeting held in Kansas City, September 12. As president, Mrs. Dunn will also serve as a Missouri delegate to the annual meeting of the 24,000-member American Medical Records Association to be held in October.

Gifts to Barnes Hospital

Listed below are the names of persons (honorees in boldface) who have made recent contributions to the various funds at Barnes Hospital. Because Barnes is a private hospital and does not receive public funds, it relies on the gifts of individuals to continue providing quality patient care and to support research aimed at improving the lives of our patients.

Donations to the hospital may be made through the Barnes Hospital Auxiliary or the Community Relations office. The Auxiliary coordinates the Tribute Fund which is used for specific hospital projects. The various other funds are part of the development program of the Community Relations office.

Tribute Fund

IN MEMORY OF:

IN HONOR OF:

IN MEMORY OF:

IN HONOR OF:

IN HONOR OF:

Patient Care Fund

Mrs. Elise Trauffer
M/M CharlesTurigiaitto
Albert Fleisher
Arbie Kindle
Sybol Palmer
R. M. Rosemann

IN HONOR OF:

CCU and 13100 Nurses
Mrs. Ruth A. Kane

IN MEMORY OF:

Charles M. Jungers
Staff of 12000

Planned Gift

Mrs. Myrtle Anderson
M/M Josh Barnes
John Bonaak
Elizabeth Bruninga
Virgil A. Buchanan
Oscar Burkemper
Fannie M. Exum
Cory Gray
Mrs. Tam Yau Kam Chu
Henry Mezyk
Cecelia O’Brien
Victor Packman
Frances A. Parrish
Odessa Robinson
Almeda M. Watson
Flossie Taylor
Carl W. Adams
Eleanor B. Egley
Emil Carabelli
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IN HONOR OF:

Cherie, Jessie and My Parents
Roger S. Hanson

IN MEMORY OF:

Marguerite Anderson
Lewis Anderson
My Daughter, Theta Tucker
Mrs. Ann Tucker

Hospital notes

The following are reported on staff: Dr. William J. Powers, assistant neurologist; Dr. Madhav Vinjamuri, Dr. Ravi S. Kumar, assistant anesthesiologists; Dr. Jeffrey I. Gordon, Dr. Alfonso U. Icocha, Dr. Douglas Tollefsen, assistant physicians, all effective July 1, 1980. Dr. Elvis E. Winstead, voluntary assistant outpatient department only (no admitting privileges), effective July 7, 1980; Dr. George F. Wooten, Jr., assistant neurologist; and Dr. Ehud Ben-Galim, assistant pediatrician, effective August 1, 1980.

Dr. Charles Anderson, chief of Barnes transplantation service, was recently elected to the American Surgical Association which has a limited membership of 350. Other Barnes doctors who are members include Drs. Henry Schwartz, Clarence Weldon, Walter Ballenger, Thomas Ferguson, Richard Clark, Harvey Butcher, Minot Fryer and Fred Reynolds. Dr. Eugene Bricker, a Barnes surgeon-emeritus, is also a member.

Dietetic associate director Cynthia Foster was a guest speaker at the Hospital, Institution and Educational Food Service Society annual convention in August. The society is a professional organization of 12,000 food service managers from hospitals, nursing homes and schools nationwide. Barnes associate director Rose Dunn also attended the convention.

Barnes ophthalmologist, Dr. Jack Hartstein, served as visiting professor of ophthalmology at the University of Texas Medical School in San Antonio, Aug. 22.

Robert E. Frank, Barnes president, has been appointed to a three-year term on the American Hospital Association’s council on finance. The council serves as the advisory body to the General Council and Board of Trustees on financial issues.

"I called one of the students up front by name. As soon as he came up, I took hold of him by the shoulders and said: 'hey, got your eyes about the size of silver dollars. Then, I had him call Mike in on the radio who was outside watching the whole thing through the window,' ” said Officer Hinchev.

From that moment on, the class’ attention was focused completely on Officers Hinchev and Maxey. For thirty minutes they listened while the officers adlibbed on the “kids’ level” about a Barnes security job. “The hardest part was dropping the speech to a second grade level. But, if you use 5,000 words, they aren’t going to understand. You have to break the words down. And when you have 20 to 25 kids who have their eyes and ears on you, you have to sneak around and catch them off guard,” said Officer Hinchev.

They told them about the importance of language. The kids were told security has to have good grammar and spelling to write routine reports, and that students must learn to write well now so they can get a job later on. The class was also told how everyone likes to be identified by name. Kids should always carry some sort of identification—just like Barnes Hospital employees—so people will know they belong and who they are. And, “eyecatching” demonstrations, such as talking on the radio and handcuffing, were used to show what a Barnes security officer’s job consists of.

The officers likened their jobs to that of city police officers. “We have the same power as a police officer on the premises as long as we are doing the job. We make arrests, write reports, help the lost, and much more. We also have to go through training at the St. Louis Police Academy’s Watchmen’s Division and be licensed,” said Officer Hinchev. The jobs are similar, and with the recent demonstration at Fox, Barnes security and city police officers have another goal in common—the desire to teach children respect for law and order. The St. Louis Police Department has an Operation Crime Prevention program available to area schools. The Barnes program—which may broaden if more officers volunteer—often has to conduct in classroom demonstrations—

As for the security officer demonstration, “it was beautiful, I enjoyed it as much as the kids,” said Officer Maxey. And, the kids, well they said it all with childhood insight—and spelling—in the thank-you notes we received: “It was fun listenin’. Hop you come agen.”

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Babies are such a beautiful way to start people...