New cafeteria servery opens for staff, visitors

Ribbon-cutting ceremonies highlighting the opening of the cafeteria’s new serving and seating areas were held April 21, prior to the Barnes Hospital Society’s spring dinner meeting. The ceremonies marked the end of phase one of the two-part cafeteria renovation project, which is scheduled for completion late this summer.

Scatter food lines featuring an expanded menu and selections ranging from chicken smothered in white sauce to chocolate eclair are located in different areas of the servery and allow hospital staff and visitors to buy a complete meal, grilled specialty sandwich or just a cup of coffee without walking through an entire line. The customer simply makes his selection and then pays at the centrally located cashiers.

“The new servery is designed for fast service and to allow each customer to move through at his own pace,” said Gil Sherman, dietetics director.

Hours have also been expanded, with breakfast being served between 5:45 a.m. and 9:30 a.m., lunch from 11 a.m. to 1:30 p.m., and dinner from 5 p.m. to 7:30 p.m. The cafeteria is also open for light snacks from 9:30 to 11 a.m. and from 1:30 to 5 p.m. The night shift supper is from 10:15 p.m. to 1:30 a.m.

The new seating area is tastefully decorated in a maroon and beige color scheme with contemporary “tube” lighting, wall coverings and art work. Quarry tile and carpeting accent the floor, while individual tables that seat from two to six comfortably and built-in, upholstered seating create a cozy and inviting atmosphere for dining and conversation.

The final phase of the renovation plan includes the completion of 350 additional seats, which will be located in the area of the old cafeteria serving area. The additional seating area will feature smoking and non-smoking sections, designated visitor seating, a carpeted dining area and easy-listening background music. The main entrance to the cafeteria is now located south of the old entrance in Barnard corridor.

Over 500 take advantage of Centerre health tests

Over 500 people were screened for hypertension and pulmonary function during the month of April at two different Centerre Bank locations by members of the departments of education and training and respiratory therapy. Centerre had chosen April to honor Barnes in its monthly customer salute.

Education and training screened 237 people for high blood pressure on the first and second Wednesdays of the month, while respiratory therapy tested 283 people for pulmonary function on the third and fourth Wednesdays of the month. The screenings were held at the Centerre Bank located at the corner of 10th and Market streets and the one at 510 Locust.

“We screened several people who had high blood pressure and were not on medication, were taking it irregularly or whose medication was ineffective,” said Linda Knight of DET. “One person went directly to his doctor’s office on our recommendation and then stopped by to thank us. His physician had altered his medication after verifying our reading.”

Members of DET, respiratory therapy, diagnostic laboratories, Auxiliary and volunteers, nursing, medical records, security, dietetics and School of Nursing personnel regularly conduct tests for hypertension, pulmonary function, vision, anemia, and glaucoma, as well as speak on health-related topics such as fitness and diet, at corporate and community health fairs. For more information, contact DET director Walter Klein at 454-3561.
Relief a sneeze away for allergy sufferers

Over 70 million Americans suffer from the sneezes, coughs and watery eyes which are symptoms of allergies to plant pollens, animal dander, foods, dust and many other everyday objects and materials. And, unfortunately, their suffering usually increases during the spring and summer when plants begin to blossom and mold spores begin to grow.

Allergy sufferers can find some relief for their miseries by surrounding themselves in air-conditioning and by avoiding the allergens, such as cats, grass, house dust and straw, that cause their reactions to occur. They also can receive relief by using over-the-counter antihistamine drugs.

Allergy sufferers, however, eventually grow tired of avoiding softball games, family picnics and barbecues. They also tire of making frequent visits to the local pharmacy. They are then faced with two alternatives for long-term allergy relief: One, they may move to an area where plants, animals and molds are not found, such as the desert or the polar ice cap. Or, second, they may make an appointment with an allergist in hopes of receiving allergy desensitization shots.

During the appointment, the allergist will question the sufferer about his reactions and about his home and work conditions. Once the allergist determines that the patient’s symptoms are most likely allergy-related, he advises the patient to have an allergy skin test performed. Most of the allergists treated by Barnes/WU allergists have their skin test performed at the Barnes allergy clinic.

The skin tests are performed by one of the technologists working at the allergy station in the clinical immunology lab. During the procedure, the technologist injects small amounts of allergens into the patient’s arms. Then, for the following 15 minutes, the technologist carefully watches the injected areas and records the amount of redness and swelling that develops on each. The results are recorded on a zero to four scale; four being the most sensitive.

Upon completion of the test, the technologist consults with the physician on the patient’s skin reactions to the various allergens. The physician, in turn, speaks with the patient. If enough significant reactions occur during the skin test, the patient usually begins receiving a series of desensitization shots.

Once again, the allergy lab technologist assumes a role in the sufferer’s treatment. The technologist is responsible for the preparation of the extract prescribed by the physician, which will be administered to the patient in his shots. “Each extract is prepared individually in the lab and contains only the allergens decided upon by the allergist,” said Roger Urbani, chief technologist of the immunology lab. “The prescribed allergens are those to which the patient reacted the most severely.”

Most of the allergists agree that working at the allergy station is an enjoyable experience because it involves working with patients, doctors, and nurses—an unusual experience for most lab employees, whose work normally affords little opportunity for patient contact.

After a patient’s extract has been prepared, it is forwarded to the clinic. There, the patient is given his desensitization shots by a registered nurse. The shots, given in a series on a regular basis, may continue for two or three years depending on the individual patient.

“If our involvement with the allergy patient usually ends after the patient completes the series of shots, it is a good feeling for us to know we may have helped provide relief to many people who have been suffering from allergies for years,” said Mr. Urbani.

The purchase of the YAG was made possible through the gifts of Mr. and Mrs. Albert Blanke, Jr., of Ladue and Mr. and Mrs. Arthur Niemoller of Sunset Hills, who contributed approximately 80 percent of the laser’s total cost, according to Jim Hubbard, a Barnes assistant administrator and director of development.

All lasers function by converting electrical energy into optical (light) energy and many use heat absorption to burn or “cut” tissue. The YAG laser, developed in Europe, is considered a “cold” laser in that it works by ionizing tissue into electromagnetic plasma.

The YAG beam, which is invisible, is used to “cut” clear or opaque tissue within the eye, such as the lens, that was previously inaccessible except through traditional surgical techniques. Other laser systems currently in use can only treat tissue, like the iris, that is pigmented. In addition, the YAG is faster and more precise than other lasers and allows ophthalmologists to “cut” all intraocular (inner eye) tissues without damaging adjacent tissue.

The eye’s lens can be compared to a pea in that it has a soft, inner portion and a hard, outer shell (capsule). During cataract surgery, the soft, inner portion that has become cloudy with age or disease is removed. Following cataract surgery, vision is sometimes still impaired because the posterior (back) portion of the lens capsule, which is left intact to reduce the incidence of cataract macular edema, has also become opaque. Using the YAG, ophthalmologists can now non-surgically “cut” or dissolve this cloudy tissue, either immediately following planned cataract surgery or at a later time.

The YAG will also be useful in cutting the anterior (front) portion of the lens capsule in preparation for cataract surgery without surgically opening the eye. Ophthalmologists can use the laser to open the anterior portion of the lens capsule up to 24 hours before surgical removal of the cataract, potentially cutting down on operating time and reducing the risk of infection and other complications.

Early clinical investigations also show that the YAG may be effective in supplementing traditional treatment for glaucoma, retinal detachment and diabetic retinopathy.

YAG laser treatments can last anywhere from 15 to 45 minutes and can be performed on either an inpatient or an outpatient basis, depending on the procedure. Normally, YAG treatments require only a topical or local anesthetic (to keep the eye from moving). The patient experiences no pain, but may have a slight, temporary sensation of blurred vision following treatment.
Hospital president Robert E. Frank congratulates 45-year employee Alice Marshall.

Veatrine Larry, a part-time employee and honoree (right) takes a moment to talk with Debbie Mentz, 9400 head nurse (left), and Essie Becton, 15-year honoree (center).

Luennettie Bradford, twenty-year honoree, accepts her pin from Robert Frank, hospital president, and Dillon Trulove, a Barnes vice-president.


Pat Granger, assistant head nurse in the premie nursery, chats with Mary Ann Sansevere, registered nurse and one of the many part-time employees honored for 15 or more years of service.
Cardiothoracic surgery patient education

Heart to

This could be the scene: You're scared, really scared . . . in fact, terrified would be more accurate . . . because tomorrow is the BIG DAY, the day you're scheduled for open-heart surgery.

You're scared because you're not quite sure of what's going to take place. Strange thoughts pass fleetingly through your mind. Will I be in the hospital for a month or more, perhaps never returning to a "normal" lifestyle? Will I ever enjoy sex again? Will I live or die? By now, you've worked yourself into a frazzle. The more you previsualize the situation, the more panic stricken you become.

At Barnes, much effort is directed toward avoiding this added and often unnecessary stress. Comprehensive instruction, both before and after surgery, has been developed to relieve fears of the unknown and to prepare patients and their families for the inevitable side-effects of open heart surgery.

Barnes' innovative teaching program is intended to reduce the anxiety of heart surgery by making apparent what's typical for most patients. The preoperative individual teaching and the more formal postoperative classes are structured by the cardiothoracic patient education subcommittee headed by Dr. John P. Marbarger, Barnes/WU cardiothoracic surgeon. Actual instruction is conducted by nurses from the cardiothoracic floors and cardiothoracic intensive care unit located on the second floor of the West Pavilion and Rand-Johnson (2300, 2300 ICU, 2200), a social worker and a dietitian.

"Open-heart is a type of surgery that's very scary to many patients and their families," said Linda Knight, patient education coordinator for the department of education and training. "We've discovered that informing the patients and their families reduces anxiety about the diagnosis and the procedure. And, it's important for them to have the information so that they can take care of themselves once they are discharged."

On the night before surgery, the first step in patient education is made by the 2300 ICU nurses. Armed with medical histories, they seek out individuals scheduled for open-heart surgery and brief them on the upcoming procedure. The families, and the patients, too, if well enough, are invited to tour the unit where they get a chance to see others who have already undergone surgery.

"It's really important for them to see someone who's already gone through the surgery so that they realize it's not unusual when it happens to them," said Beverly Campbell, assistant head nurse on 2300 ICU. "If you tell them what to expect, it makes it less frightening. It also makes the family feel more secure."

The preoperative instruction is important not only for the patient who awakens with tubes and machines attached to his body, but also for the family members who must adjust to seeing a loved one in such a situation.

Following surgery, patients and their families are encouraged to attend daily educational classes.

"We try to help the patients understand the heart and home care after heart surgery. People are thankful that the time is taken to explain things to them," said 2300 head nurse Robyn Garner. "And, it is important to us that they know how to take care of themselves."

2300 nurses teach the Monday, Tuesday and Friday postoperative classes. Patients learn how the heart works, risk factors for heart disease, how the surgery was performed, how to take care of themselves at home, how the medications affect the heart and what the various medications do. They are also taught how to take their pulse and temperature and how to identify signs of infection.

"Patients say that the classes are very informative, especially the part on how to take care of themselves after going home," said Michele
Bush, registered nurse on 2300. “It’s important to let them know about their surgery and what to expect following it. We tell them about the risk factors, but it’s up to them to change their bad habits. They know the options and what to expect if they go back to their old ways.”

“Most people are eager to ask questions,” said Nancy Hummert, registered nurse on 2300. “They want to know how quickly they will progress. Some are surprised that they can do things so fast.”

On Wednesday, the class is taught by social worker Anne Harter, A.C.S.W., who discusses the special feelings that patients experience following surgery. “Different emotions, such as sadness, hopelessness, helplessness, guilt, anger, fear and worry, emerge after the surgery,” she said. “People go through surgery because they often have no other choice.

It’s the largest crisis in their lives. So, their emotions are put on hold. They can’t deal with them until after the surgery. The most important thing to them at the time is staying alive. Then, these emotions hit them after they’re out on the floor. There is a surge of emotions once they realize that they’re going to be OK.”

Ms. Harter’s approach also takes a look at the type “A” personality, that person who lives life with a sense of urgency, who is often successful at what he or she does and who is also frequently ripe for heart disease. “I like to provide them with as much information about stress as I can so that they can control their lives,” she said.

One person who was very impressed with Ms. Harter’s lecture was Ruth Klinger, whose husband, Thomas, had bypass surgery at Barnes. “I was very interested in the class on stress and the emotions,” she said. “Some women who didn’t attend the class were very upset when their husbands experienced these emotions after surgery. It’s frightening if you don’t know what to expect. The classes are not only very informational, but they are also presented so that the average person can understand them.”

On Thursday, a dietitian discusses diet and the heart, including diet-related risk factors like diabetes, high cholesterol, obesity and hypertension. “I like to provide a general guideline of what is a good diet for the heart,” said Connie Tobben, R.D., M.S. “Not only is it a good diet for the patient, but it is also good for the whole family.”

Doctors, nurses, social worker, dietitian—all work together against the heart disease risk factors. Barnes’ approach to open-heart patient education is a complete, comprehensive combination of preoperative and postoperative teaching.
Media spotlight

Highlights of the media's coverage of Barnes Hospital during the last month are as follows. Readers desiring a photocopy of newspaper or magazine articles about Barnes should contact the public relations department at (314) 454-3515.

Television

Dr. Jay Marion, Barnes/WU hematologist/oncologist, will be discussing AIDS (acquired immune deficiency syndrome) on a new, live-magazine program on American Cablevision. The segment will air on the “America Alive” show from 6 to 7 p.m., Friday, June 10.

Cardiothoracic surgery patient Thomas Klinger and his wife, Ruth, were interviewed by KSDK-TV for a special mother’s day story. The segment aired on KSDK’s 10 p.m. news show on May 8.

Print

A United Press International story on what makes Barnes Hospital one of the top ten hospitals in the country was published in the May 11 edition of the Democrat Advertiser in Sikeston, Missouri.

Kidney transplantation was the subject of a May 5 article in the St. Louis Globe-Democrat. St. Louis attorney Sam Goldenhersh and his son, Mark, were featured in the article which highlighted the special bond that exists between family members who donate lifesaving organs to each other.

Dr. John Knesevich, Barnes/WU psychiatrist, was interviewed by the St. Louis Weekly for a story on anorexia nervosa. The article, which discussed the varying medical viewpoints concerning the disease and the different treatment options available in the St. Louis area, was published in the May 4 edition.

The Auxiliary’s recent donation of $312,958 for the construction of new emergency department facilities at Barnes was the focus of a May 4 article in the South Side Journal.

Drs. Jeffrey Marsh, Barnes/WU plastic surgeon, and Michael Vannier, Barnes/WU radiologist, were featured in an article in the May issue of Discover magazine. The article discussed the pair’s pioneering work in face-craft, which combines plastic surgery with advances in computed radiology.

St. Louis Commerce magazine’s May issue included an article on Stella Henderson, an 85-year-old grandmother who knits tracheotomy floor. The story honored Mrs. Henderson as a 30-year veteran of Barnes. Mrs. Henderson is one of the Auxiliary’s key employees. She became a licensed practical nurse in 1969.

Bob Shirdiff, a Barnes vice-president, was interviewed by the St. Louis Business Journal for an April 25-May 1 article on hospital renovations and the construction industry.

Dr. Gregory A. Sicard, Barnes/WU general surgeon, was the subject of an article in the South Side Journal’s April 27 edition. The story focused on Dr. Sicard’s recent appointment to the board of directors of the Boys’ Club of St. Louis.

The Auxiliary’s donation for the new emergency department facilities was also highlighted in the “Daybreak” column of the St. Louis Globe-Democrat on April 25.

James L. Gray, III, named pharmacy services director

James L. Gray, III, has been named pharmacy services director for Barnes Hospital, effective May 15. Mr. Gray fills the vacancy created when Allyn O’Byrne was named an assistant administrator in October. Miss O’Byrne had been pharmacy services director since 1977.

Prior to joining Barnes, Mr. Gray served as associate pharmacy director for the Park Plaza Hospital in Houston, Texas. He holds a bachelor of science in pharmacy from the University of Pittsburgh in Pennsylvania, and a doctorate in pharmacy from Duquesne University, also in Pittsburgh. Mr. Gray is a member of the American Society of Hospital Pharmacists, the American Society of Parenteral and Enteral Nutrition and the Rho Chi National Pharmacy Honorary Society. He has published articles in Pharmacy Practice and Drug Therapy.

In his new position, Mr. Gray will direct Barnes inpatient and outpatient pharmacy facilities. Last year, the pharmacy filled approximately 4 million prescriptions.

Walker, Boien and Spier honored on retirement

Maron Walker and Kathy Boien recently retired from Barnes Hospital with a combined total of 51 years of service. Both Mrs. Walker and Mrs. Boien received certificates of appreciation and checks from the hospital administration. The Rev. Charles Spier also recently retired as Presbyterian chaplain at Barnes, a post he had held since 1967.

Mrs. Walker, whose entire Barnes career was spent on the fifth floor of Rand-Johnson, began as a nurse assistant in 1957. She became a licensed practical nurse in 1969. Her advice for new employees? “If you like what you’re doing, it doesn’t seem like work,” she said. “That’s why I’ve always liked nursing and why I’ve always enjoyed 5200. I’ve never been bored!” She retired on March 24.

Getting plenty of rest and taking short trips to Michigan to visit relatives are part of Mrs. Walker’s retirement plans. She is also hoping to spend more time with her two sons and her four grandchildren, and to increase an already active church life.

Mrs. Boien, a unit clerk on the 5400 maternity division, recently retired after 25 years of service. Mrs. Boien began in 1958 and has always worked on an obstetrics/gynecology nursing division. “I came to Barnes hoping to become a nurse assistant, but they took one look at my educational background and assigned me the job on seven Maternity,” said Mrs. Boien. “I was offered promotions, but I never wanted to leave ob/gyn."

Mrs. Boien, who is retiring early because of illness, will be spending a lot of time with her husband, Leo, and hopes to visit her three grandchildren and five great grandchildren whenever possible. “5400 won’t be the same without her,” said Dr. Michael Gast, Barnes/WU obstetrician/gynecologist. “I’ve always counted on her to get the job done.”

The Rev. Charles Spier recently retired from his position as Presbyterian chaplain at Barnes. During his 15 years at Barnes, Chaplain Spier visited with hundreds of hospitalized patients and their families, as well as with many employees.

“I’ve always enjoyed my work as a chaplain,” he said. “It’s been a pleasure assisting people in whatever way I could.”

A member of the Second Presbyterian Church, Chaplain Spier will continue residing in the St. Louis area. His retirement plans include frequent visits to his brother’s family, and spending more time enjoying his favorite sport: fishing.

Hospital notes

The following are reported on staff: Drs. Catharine H. Rice, assistant anesthesiologist, effective May 1, and Klaus Sartor, associate radiologist, effective June 1. Effective July 1: Drs. Frank Bruce, assistant ophthalmologist; James L. Cox, cardiothoracic surgeon-in-chief; Jay P. Heiken, assistant radiologist; David Ling, assistant radiologist; Mark Michael, assistant ophthalmologist; Jon Frederick Moran, assistant cardiothoracic surgeon, and Bruce Redler, assistant ophthalmologist.

Dr. Joseph W. West, Barnes/WU otolaryngologist, has been elected president of the Missouri Ear, Nose and Throat Association, for a two-year term.

Dr. Gregorio A. Sicard, Barnes/WU general surgeon, has been elected to the board of directors of the Boys’ Club of St. Louis. The Boys’ Club, which is affiliated with the United Way and the Boys’ Club of America, provides daily programs for more than 3,500 boys.

Mary Jane Meyer, Barnes School of Nursing di-rector, has been elected by the National League for Nursing to serve a three-year term as an alternate member on the Board of Review for Diploma Programs.

Dr. Stephen R. Crespin, Barnes/WU physician, was recently elected treasurer of the Harvard Club of St. Louis, a chapter of the national alumni association.
Gail Schirmer joins PR, communications specialist

Gail Schirmer has joined the public relations staff as a communications specialist. Her responsibilities include writing for the quarterly magazine Barnes Health News, producing promotional brochures and assisting with a variety of marketing campaigns.

Mrs. Schirmer returns to Barnes Hospital from Norrman Osteopathic Medical Center of St. Louis, Inc., where she served as director of community relations for three years. Before that, she was employed in public relations at Barnes.

New automatic doors are sliding into action

Automatic doors are being installed this month at the main (East/West Pavilion) entrance for the convenience and benefit of those entering and exiting the hospital. The automatic doors will especially benefit those in wheelchairs, said Robert Shirciff, a Barnes vice-president. Automatic doors have already been installed at the discharge waiting exit located at the conjunction of the West Pavilion and Queeney Tower.

The doors are one of several new services recently initiated at Barnes to make things easier for physicians, patients and visitors. A special service officer provides assistance at the main entrance, while valet parkers are now stationed at both the main and Queeney Tower entrances from 9 a.m. to 9:30 p.m., seven days a week. The number of private rooms in all services has been increased, and a surgical waiting area and discharge waiting suite, staffed by a registered nurse, were opened to help take some of the stress out of hospitalization for patients and their families.

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Gifts to Barnes Hospital

Listed below are the names of persons (honorees in boldface) who have made contributions during the period April 8 to May 9 to the 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 Development office. The Auxiliary coordinates the Tribute Fund, which is used for specific hospital projects.

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New darning machine boosts laundry's savings

A $1,800 purchase of a new darning machine for the laundry and linen services department should result in savings of approximately $5,000 a year, according to the department's director, Gene Bonine. The savings will be realized in the number of torn thermal blankets that can now be mended and recycled for patient use.

The thermal blanket's open weave prevents seamstresses from applying the normal "hot" patch—precut patches treated with glue that fuse to the garment when heat is applied. With the new darning machine, department seamstresses can duplicate the blanket's weave and thus repair it without adding a patch.

Such cost-saving measures are not new to the laundry and linen services department, which manufactured 17,258 surgical shoe covers, 4,947 operating room gowns, 6,552 bed pads, 1,090 baby sheets and 707 dietary aprons, plus hundreds of other garments in 1982. When these products become worn, stained or torn, they are either mended or recycled into other useful items for the hospital.

Surgical gowns that have ripped or damaged sleeves will either have new sleeves added or will be cut into strips of material that are later used for surgical shoe covers, for example. Bath blankets (made out of a thin, flannel-like material) that are spotted or torn are salvaged and used for baby blankets in the newborn nurseries, unusable sheets become pillow cases and bath towels that can no longer be used by patients are cut, dyed blue and then given to the housekeeping department to use as cleaning cloths.

“We try to recycle whatever goods we can,” said Mr. Bonine. “While the initial savings are not that large, it really adds up over a year’s time.”

Updated Barnes fact cards are now available in PR

What are Barnes room rates? How many operating rooms does the hospital have? How many meals are served each year? How many doctors are on Barnes staff? And, how many pounds of linen are processed here annually?

The answers to the above and many other helpful, informative facts about Barnes, with current statistics, are now available to employees and the public on a convenient, wallet-sized card. This is the second printing of the cards, which were initiated last year to provide hospital employees, physicians, patients, visitors and others with quick answers about one of the nation's top ten hospitals. The cards are available in the public relations office, ground floor Queeny Tower, 454-3515.