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A Critical Analysis of Hospital Organization

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Director, Barnes Hospital, St. Louis

Every successful enterprise must have organization and a head. Everything which succeeds must and does have organization; without it, all things fall to pieces. Be it a store, or an Army, or a church, or a hospital, it must have organization and a head.

If a hospital's primary function and obligation is to serve properly the sick and injured members of the community, then in a democratic country, it must have as its policy-making body, a board composed of representatives of the community who should determine the general policy of the hospital, the fiscal policy, and the selection of a competent administrator and a competent medical staff. Such a body is commonly called the board of trustees.

Clear Objectives Needed

Trustee groups are made up of lawyers, business leaders, public officials, newspaper editors, clergymen, labor leaders, and others who have intellectual capacities and habits of discipline of high order. They may also have clear objectives and deep attachment to the objectives to which the group is committed. In addition, they may have acquired a degree of skill in community organization that enables them to move steadily forward in their efforts to influence other groups. They do, however, need the specialized assistance that the administrator's education, training, and daily experiences equip him to supply. In addition, he should be able to furnish facts and professional judgment which the trustees need to consider in forming plans and carrying them out.

The administrative head should be carefully selected, well-trained and given administrative responsibility and authority. The responsible administrative officer—commonly known as the superintendent, director or administrator—should not have any trustee functions but should attend all

meetings of the trustees so that he may know the implied reasoning behind the policies which the trustees form and ask him to carry out.

Considering that the primary responsibility of the hospital is to afford proper medical and nursing care to its patients, the trustees have a definite duty to the patients and the community to provide a competent medical staff. Neither the trustees nor the superintendent, even if he is a medical man, can make a diagnosis or prescribe treatment. Therefore, it is necessary for the trustees to look to the medical staff to care for patients. To that end, a definite set of rules has been developed. One of the purposes of these rules is to protect the character of the hospital. These rules have been carefully worked out by the American College of Surgeons, the American Medical Association, and the American Specialty Boards and are acceptable to the medical profession.

To summarize, the trustees should, after careful consideration of each candidate, appoint well-trained and demonstrably competent physicians to the staff. Inasmuch as the board of trustees is morally and legally responsible for the conduct and quality of the hospital service, only a closed staff can guarantee the authority and mechanism to enable the board to assume this important responsibility. (By closed staff, I mean both attending and courtesy staff, but definitely appointed staff whose members have been scrutinized by the medical advisory committee and appointed by the board of trustees. I shall later amplify this statement relative to the importance of a closed staff.)

**Functions Are Defined**

The function of a medical staff should be the clinical care of the patient, the internal control of its own membership, and the nomination to the trustees of competent physicians for appointment to the staff. The internal control of the professional staff should be in the hands of an advisory medical committee comprised of the chiefs of the clinical services or the officers of the medical staff with the administrator attending ex-officio. It is customary for the administrator to be the chairman of this advisory medical committee. No member of the medical staff should have any trustee function. "This is by reason of the fact that all or nearly all of the physicians in the community will be treating patients in the hospital, and to single out any one or two or more of the physicians, places not alone the physician, but the board itself in an invidious position in relation to the physicians who are using the facilities of the hospital, but who are not members of the governing board. Likewise, there is a nice legal question whether a person acting as trustee of trust funds should be permitted to derive personal financial profit from such trusteeship."*
Is this organization of a hospital not somewhat similar to the three divisions of the American government? By analogy, the trustees, the policy-making group, may be called the legislative body; the administrator, the chief executive; and the medical advisory committee, the judiciary. Certainly in all clinical matters, the medical advisory committee is the judge of clinical excellence, professional skill, therapeutic measures, and is the examining board for appointments to the medical staff. In other words, in clinical matters it is the supreme court. If this analogy is correct, then the various members of the three branches of government cannot and should not have any of the functions of the other two bodies. The trustees shall legislate; the superintendent shall administer; and the physicians shall judge as well as give the quality of professional service to the patient. All three must work in peace, harmony and concord toward a common goal, but each in his special field.

Skilled Leaders Required

We have said that leadership is necessary for success. We may go further and say that a hospital organization cannot grow and mature unless it has the benefits of solid and skillful leadership. However, it must have excellent administration and high quality professional service. There are two kinds of leadership—symbolic and creative. Symbolic leadership occurs more frequently perhaps in political organizations where one man represents the group and acts in its behalf often in an authoritative manner. Creative leadership (the best type of which is group or democratic) requires participation and cooperation of each member of the group to carry out a specific program which results in directed efforts much more powerful and constant than could be exerted by an individual.

It is creative leadership and high quality service which a hospital should give. Leadership can seldom be exercised by any hospital that has a reputation for unsatisfactory work. In fact, it is doubtful that any hospital which has a reputation for inferior work can long survive. Group leadership needs a specific program and sustained effort to give the community the best type of medical and nursing care that is possible within the financial and physical limitations of the hospital and the community. This type of group leadership requires such a degree of unity among the trustees that they can, in their corporate relationships influence the acts of other individuals in the community. Such a degree of leadership then extends beyond the hospital which the trustees control.

Where does the administrator fit into this organizational picture? If we may again resort to analogy, we may say that a hospital in operation is similar to a military task force which has a general headquarters—the trustees; a commander—the administrator; and operational and specialized
units—personnel. In a task force, units such as naval, air, artillery, infantry, quartermaster, communications, reconnaissance and military units are represented in a hospital by the medical and surgical staff, the intern and resident staff, nursing, anesthesia, laboratory, telephone service, admitting office, social service, accounting department, etc. If all of these units are highly specialized and yet responsive to central control and command, the aim of the task force—our hospital—may be attained.

It is the responsibility of the commander—the administrator—to see that each of these units is not only highly specialized but geared to serve the community as a unit under his direct command. It is the administrator who is to carry out the policy of strategy set by the trustees—the general headquarters.

The task of the hospital administrator is to conduct the hospital along the policy laid down by the trustees using the personnel, material, and money available. This is a simple statement of a complex problem which deals with supply and demand, the law of diminishing returns, and public relations—a problem which is instantaneously and lastingly complex. The problems of human life and death, pain, suffering, incurable diseases, rapid changes not only in medical science and medical art but in the hospital field as well, the lack of beds, and the lack of funds must be dealt with by the administrator.

One of the first tasks of a hospital administrator is to sell the public as well as his own personnel on what his hospital has to offer in the way of service. This selling includes the board of trustees, as well. How can the hospital administrator do this job of selling? There are two ways of leading people—one by organization and manipulation; the other, intellectual—by argument, by demonstration of principles, and by a clear exposition of ascertained facts. Both are necessary but the latter is most desired.

**Calls for Clarity**

Never has there been a time when administrators stand more in need of a power of lucid statement, readily intelligible to a public that possesses no technical medical knowledge. There still clings to medicine much of the mystery of a craft incomprehensible to any but its votaries, and some of this must be true of every profession. To instruct the public, hospital administrators must be able to express themselves in a way that can be understood and with a force that carries conviction. To do so, they must be in contact with the current of human thought. They must themselves be interested in things outside the limits of their own profession and must have at their command as large a part as possible of the aspirations, the attainments, the traditions and the accumulated wisdom of our country. This is what is called general culture, and other things being equal, the
more the administrator has of it, the more persuasive and compelling his influence will be.

May we return to the medical staff: Primarily, the board of trustees of the hospital is responsible for the type of medical care rendered. It is their duty to see that only qualified physicians are members of the staff. In no other way can the board of trustees control the quality of medical care rendered. The American College of Surgeons in its standardization program recognizes the need of appointing only qualified men to the staff. The American Medical Association is even more stringent in its requirements for hospital approval for training interns, residents, and fellows, and the American Specialty Boards require still higher standards of approval for the hospital and the medical staff.

There is a widespread clamor on the part of the public and physicians for more hospital beds. The medical profession raises this question: “How can every qualified physician have access to a hospital?” The answer is, in general terms, quite simple—provide more hospitals beds. There is, however, another question that really is arising throughout the country and which has not been stated. It is: “How can every doctor have access to a hospital?” Or, more pointedly still: “How can unqualified doctors have access to a hospital?” The latter question is one than can be answered by time.

**Schools Lacked Uniformity**

In 1910, surveys of medical schools in the United States by the American Medical Association and a report by Abraham Flexner for the Carnegie Foundation drew attention to the great need for sweeping reorganization of medical education. That reorganization was well under way in 1914, and the first graduates of Grade A medical schools came about 1918 and 1920. Unfortunately, in the history of these United States and particularly before 1920, there were insufficient hospitals beds to provide intern service for all of the medical graduates. In addition, it was not until 1926 that the last Grade C medical school went out of business. There was a combination of lack of uniformity in medical schools as to standards of education and training, and the marked lack of intern service for postgraduate medical training of all of the doctors who graduated.

Naturally, many physicians who graduated prior to 1925 did not have the good fortune to receive the necessary training in order to qualify for staff appointments to a hospital which is approved by the American College of Surgeons, the American Medical Association, or the specialty boards. This situation has slowly improved. Now all medical school standards of education and training are fairly well uniform and of high quality, and there are many more hospitals for intern and residency training.

There still remains, however, the necessity of selling to many hospital
boards of trustees and medical staffs, the idea that the hospital should institute at least intern training, and, in many instances, the training of residents and fellows in the various medical specialties. If sufficient hospital beds can be provided to take care of qualified physicians, the real question is how can all doctors become qualified? The answer is time and intern training in an approved hospital.

Let us return to the question of the closed staff. The assumption on the part of many that the closed hospital staff limits the number of qualified physicians is in most instances not entirely true. The closed staff is and should be a limiting factor in the appointment of unqualified physicians and not a limiting factor in the appointment of qualified physicians. Certainly in the larger hospitals with ample bed capacity, there is little question about appointing qualified physicians to the staff. Given sufficient hospital beds, most hospital boards and staffs will recommend qualified physicians for appointment.

Without sufficient beds, it is difficult for all qualified physicians to have hospital facilities, even if they are presently members of a closed staff. Our hospitals with a closed staff of physicians carefully selected and qualified are at times unable to provide beds. This is one of the greatest challenges to hospital trustees. Unless they meet it, there is great danger that the federal government will attempt to furnish the hospital beds.

The Veterans' Administration is anxious to obtain qualified medical men, interns, and residents. The Veterans' Administration realizes from war experience that qualified physicians, particularly those certified by the American Specialty Boards, give the type of medical care that the people demand and should obtain. With the young men returning from military service who have had excellent medical education and almost invariably some intern service, there should be no difficulty in the appointment by the hospital trustees of qualified physicians.

I predict that in the next ten years, the improvement in medical care will be startling, if not amazing. The record speaks for itself. In the war from which we are just emerging, the quality of medical care was much higher than in the first world war, and the improvement is due almost entirely to the improved quality of medical training and not to plasma, and sulfanilamide, and other therapeutic drugs, agents, and devices. Immediate evacuation to properly equipped and conducted hospitals where such qualified men could work was a major factor.

**List Publications**

I have not gone into detailed discussion of the responsibilities of the trustees, the administrator, and the medical staff. Such information is adequately set forth in such publications as:
The 1945 Hospital Review, a brochure published by the American Hospital Association in the September, 1945.

The Code of Hospital Ethics, approved and adopted by the American Hospital Association and the American College of Hospital Administrators.

Hospital Management and Organization by Dr. Malcolm T. MacEachern, which every trustee and hospital administrator should have.

The Medical Staff in the Hospital by Dr. Thomas Ponton, published by the Physicians Record Company.

The Hospital in Modern Society by Dr. A. C. Bachmeyer and Gerhard Hartman.

The Code of Ethics for Hospital Trustees as presented at the Trustees Round Table Conference at the convention of the American Hospital Association in Dallas, Texas in September, 1938 and published in the 1938 Transaction of the American Hospital Association.

What we have tried to do has been to present a critical analysis of the subject and to attempt to visualize it for you as a complete subject in simple exposition, and to stimulate your interest to the extent that you will consider the problem and refer to the abundant and detailed literature on the subject.

There Is a Real Need for Public Guidance

Jerome E. Cook, M.D.

Instructor in Clinical Medicine, School of Medicine

Who today, can read the daily press or the many periodicals without being keenly aware of the public’s enthusiastic interest in things medical. In its desire to read anything with a semblance of scientific flavor that will inform it about disease, its prevention and treatment, the public may acquire many erroneous and even ridiculous concepts of medicine and the practice of medicine.

No one doubts that the various syndicated medical “columns” and special articles are printed to satisfy a real desire for guidance on the part of the public and not to gratify any missionary zeal of the publishers.

The medical profession long has been criticized for its indifference to informing the public on the problems and accomplishments of scientific medicine. How much of this criticism is just I shall not attempt to say. The task of imparting to the people at large understandable information

* Reprinted with permission of Hospitals 20: 43-44, April 1946.
on scientific subjects is not an easy one. It can not be done in a few minutes or in an offhand manner.

It would seem that the hospital offers a suitable forum for a properly planned educational program designed for the lay audience. The hospital audience will probably be in a more or less receptive and sympathetic mood. They will not be pressed for time, they will not have to bestir themselves from a cozy fireside on a frosty evening to get the message. The field is not entirely untilled; the opportunities have not been entirely neglected. Here and there about the country a maternity ward or a diabetic clinic has done more than give advice to single individuals on their specific problems by organizing classes and demonstrations for a broader understanding of the scientific background.

Here and there a clinic, by means of posters and displays, has attempted to bring home to the visiting patient some lesson in preventive medicine or rational therapy. But these are, for the most part, isolated programs which lag far behind the need. They touch only a limited field and reach restricted groups. They are not making use of that wide inquisitiveness about medical science which is almost universal.

At one time or another we have all visited some exposition or fair and have been impressed by the interest shown in the scientific exhibits devoted to medicine. While this type of approach is probably ill-suited to the educational program which a hospital might offer, it should give encouragement as to the possibilities and the wide fields of interest which could be evoked by any program of similar aim.

Any educational program on the part of the hospital must be predicated upon a proper staff organization and spirit. The day when a hospital, large or small, can be said to be fulfilling its function by mere housing, nursing and medical attention is rapidly passing; in fact, it has passed. The hospital must become increasingly an institution of learning and its staff must adopt the attitudes and habits of such institutions.

Among these attitudes may be mentioned willingness to conform to schedules, willingness to confer and advise with associates and willingness to teach. This means, in short, that members of the attending staff must be willing to give up an appreciable amount of time to the group effort—organization, study, instruction.

In many hospitals this program of lay education will not necessitate any radical change from present policies. Many of the lectures and demonstrations in the course for nurses training could be used for such an end. Medical house officers could probably simplify some of their tasks by talks to special groups instead of to individuals. Most patients want to have some information as to the significance of the tests employed, the indications and
limitations of therapy, the meaning of convalescent care, hygienic living
and the like.

Many hospitals give patients on admission a sheet or pamphlet explaining
such matters as visiting hours, the use of radio, telephone, electric fans and
similar devices, and some explanation of the various departmental services
offered. Such a pamphlet could profitably be expanded into a larger one or
even a series, setting forth the diagnostic and therapeutic significance of the
tests and procedures offered.

Today, I received from our hospital administrator a letter concerning our
newly established blood bank—"Will you not assume your share of respon-
sibility in this matter and urge the families of patients to donate blood to
the bank?" Of course I shall, but I wish that I could hand them a brief
bit of instructive writing on such subjects as transfusion, blood-matching
and blood banks.

One of the bars to such group instruction in the past—the private patient,
private room attitude—has been dented considerably by our experiences of
the past half dozen years. Our young people of Army training are used to
the group type of approach in medical as well as in other forms of instruc-
tion. The crowded condition of our hospitals has made the lay public less
exacting and less sensitive to the necessity for group care. It would find no
objection to group instruction properly presented.

We are asking the public to invest increasingly large sums for medical
care and hospitalization. We should give them the instruction which will
allow them to appreciate the necessity for such expenditures.

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**Excerpts from Letters on Opportunities in Rural Medicine**

**Rothville, Missouri**—"We are in dire need of doctors in this part of the
country. Sumner, about 10 miles away, has one elderly doctor and Meudon,
seven or eight miles away, has two very elderly doctors. Marcelin, which is
10 miles away, has one elderly doctor and here in Rothville, there is one
elderly doctor who has recently been very ill.

"Roads are good, and the people are fine to work with. My husband
(C. D. Stratton '83, deceased) was born and raised and set up a practice
here. He made a good living. If you can do anything for the country
around, it would be greatly appreciated by many and I would be more than
thankful."—*Mrs. C. D. Stratton.*
Tamaroa, Illinois—"I am in search of a physician who desires to engage in country town practice of medicine. When I say that, I mean in the way that he would live and the class of patients he would be called on to treat. There are hospital facilities in nearby towns that seem to answer the purpose all right.

"Tamaroa is a town of 1000 population, 85 miles southeast of St. Louis on the main line of the Illinois Central Railroad and branch line of the Missouri Pacific. It is nine miles north of Du Quoin, Illinois, which has a population of 7500, and eleven miles northeast of Pinckneyville which has a population of 3500.

"This town has always had two physicians, for many years had three, and at one time even had five. None of them ever starved, in fact, most of them died from overwork and old age. One physician, an able man with an enormous practice, left here for California recently. This town and surrounding territory needs a physician badly and some physician can make some real money here.

"There are three physicians in Pinckneyville and six in Du Quoin, but none of them want additional work, and when they are prevailed to come here it is a matter of personal favor, and their fee is beyond the reach of most people, except in desperate cases.

"I operate the only drug store in town, and I shall be glad to cooperate with and help any new physician who might elect to come here."—R. E. Marlow.

New Florence, Mo.—"Please give some sort of course in your school on Rural Medicine, so we can get some of the young M.D.'s out here and they will be able to practice without being stuck in a hospital. This is a very serious thing. Whole counties are without physicians."—J. O. Helm, M.D.

Hartville, Missouri—"There is a great need for some young doctors in our county. Wright County has a population of some 18,000. Mountain Grove, on Highway 60 is the largest town in the county with about 3000 persons. It borders Texas County.

"In Mountain Grove there is an opening which ought to be attractive to two or three young men who are interested in setting up a clinic. There are three medical doctors in Mountain Grove. One, past 70, limits himself to office practice. Another, who has worked until he is on the verge of collapse, must cut down on his practice. The other, also past 70, has closed a small private hospital which he has operated for several years. He wants to sell the building and equipment for $15,000, and I think he will make terms.

"This little building has little to commend it for a hospital, but it could work out nicely for a clinic for two or three doctors. It has an excellent
heating plant, fairly good x-ray with dark room, and living quarters for one or two nurses could be arranged in the back of the building. There is a good electric sterilizer and a small operating room for minor surgery. There is a good x-ray technician in the community whose services could be secured on a part-time basis, I believe.

"The community is becoming awakened to the need for better medical service, and various civic clubs are working to offer the people of the county Blue Cross service and to build a hospital. We are hoping for a modern 50-bed plant. While the work is hard here, the doctors have always made very good livings, and are, of course, among the very important men of the town.

"Wright County is rapidly becoming an important milk-producing area. There are Kraft Cheese plants at Mountain Grove, Mansfield and Hartville. The building space for a million-dollar whey processing plant has been purchased. Brown Shoe Company has a factory here, and the trading center extends as far as 25-30 miles in all directions from Mountain Grove."—Mrs. Elva Jane Decker, R.N., Wright County Public Health Nurse.

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Dr. Graham Is Featured Speaker at Anesthesia Anniversary Celebration

Dr. Evarts A. Graham, professor of surgery and head of the Department at Washington University School of Medicine, was one of four featured speakers at the One Hundredth Anniversary Celebration of the First Public Demonstration of Surgical Anesthesia at Massachusetts General Hospital in Boston, October 16.

Dr. Graham represented the field of surgery and Dr. Henry K. Beecher, professor of anesthesia at Harvard University School of Medicine, represented anesthesia. The two other featured speakers are Dr. Raymond B. Fosdick, president of Rockefeller Foundation, who spoke on "The Need for Wider Research," and Dr. Karl T. Compton, president of Massachusetts Institute of Technology, who spoke on "The Medical Interest in Radioactivity from Becquerel to Bikini."

Forty-three men from all over the United States were invited to participate in the three-day anniversary celebration of the first public demonstration of ether. Dr. Edmund V. Cowdry, professor of anatomy at Washington University School of Medicine, spoke October 14 at the symposium on "Progress in the Study of Degenerative Diseases," on "Aging of the Skin."

Dr. Graham followed Dr. Beecher's "Emergence of Anesthesia's Second
Power,” with an address entitled, “Ether and Humbug,” at the closing session of the celebration.

The first chapter of surgical anesthesia took place in an operating room in Massachusetts General Hospital in 1846. Dr. J. Collins Warren, surgeon, performed an operation on a patient’s jaw to remove a bony tumor. Dr. Charles Morton, dentist, administered the anesthetic.

Dr. Warren, at the close of the successful demonstration, stepped back and surveyed the group in the room, with the remark, “Gentlemen, this is no humbug!”

In reference to this, Dr. Graham remarked that in 1946, Dr. Warren might have said, “Gentlemen, this is no baloney!”

“We of a later age, whose privilege it has been to see medicine established on a firm scientific basis, can scarcely appreciate its state at the time that Dr. Morton and Dr. Warren conducted their experiment,” Dr. Graham said.

“In 1846, there was no surgery in the modern sense,” he said. “No specialization in medical practice had occurred, and every doctor was a general practitioner. In that day, the operations that were performed were mostly on the extremities, in addition to the removal of bladder stones. The abdominal and other body cavities had been rarely invaded. Speed was considered to be one of the most important factors in the success of an operation, chiefly because of the absence of satisfactory anesthesia.”

Dr. Graham said that what was needed to advance surgery to make it safe and practical were first of all a more scientific attitude towards medicine as a whole, with the elimination of the humbug, and more specifically—a satisfactory method of removing pain, the control of infection, and the satisfactory prevention and treatment of surgical shock.

The abolition of pain during an operation, through the discovery of the use of ether, removed one of the three obstacles to the development of surgery. The surgeon, Dr. Warren, and the dentist, Dr. Morton, who conducted the experiment at Harvard in 1846, could hardly have foreseen that a century after their demonstration, a separate division of medicine known as anesthesiology would arise, Dr. Graham said.

It is only in the last 50 years, Dr. Graham said, that there has been a definite movement to train professional anesthetists. The slipshod practice of having it conducted by internes and, still worse, by the referring physicians, gave way to the employment of professional anesthetists, albeit nurses. This long delayed move is in the right direction, he said.

“Some anesthesiologists would eliminate the nurse anesthetist,” he said. “It seems to me that this is a most unrealistic attitude to take. There are seven thousand hospitals in this country, but at most only a few hundred professional physician anesthetists. They can conduct only a small fraction
of the anesthesias in the country. The best solution to this problem then is to encourage the training of the nurse anesthetist until there are enough physician anesthesiologists to fill the demand."

"There are also those people in the new profession of anesthesiology who would, if they could, abolish all opportunities in our hospitals for the nurse, or anyone not possessing an M.D. degree, to obtain instruction in the art of anesthesia," Dr. Graham said.

In conclusion, Dr. Graham asked, "What would Dr. Morton, the dentist, think of that—the man whose epoch-making work we are celebrating today? Let us not have any humbug in affording the benefit of that work to all people."

Medical School to Advise on Health Services, Research at Los Alamos

Washington University School of Medicine has concluded an agreement to advise on the health services and research carried on at the Los Alamos Project near Santa Fe, N. M., Mr. Charles Belknap, vice-chancellor of Washington University, announced recently.

A Medical Advisory Board, composed of a representative of the medical section of the Manhattan Project or District, the acting dean of the School of Medicine, and six persons nominated by Chancellor Arthur H. Compton, and approved by Dr. Norris Bradbury, Los Alamos project director, and Col. Herbert Gee, commanding officer of the post, has been established.

Members of the Board are Dr. Philip Shaffer, Distinguished Service Professor of biological chemistry, Dr. Carl V. Moore, professor of medicine, Dr. Frank Bradley, director of Barnes Hospital, Dr. Otto Brandhorst, dean of the School of Dentistry, Dr. Nathan Womack, associate professor of clinical surgery, Dr. James Nolan, assistant professor of obstetrics and gynecology, and Dr. Robert A. Moore, acting dean of the school of Medicine.

Dr. Nolan is executive secretary of the Board. Dr. Bradbury and Colonel Gee are ex-officio members.

The Board will make recommendations for professional staff appointments on the medical services at Los Alamos, the recommendations to be approved by Colonel Gee and Dr. Bradbury. Members of the Board will also be available for consultation concerning medical care at Los Alamos.

The medical services at Los Alamos consist of four groups: hospital, industrial health, medical research and public health.

Aside from the contribution of the Medical Advisory Board, other staff members from the School of Medicine will be available to these four
medical groups on a consultation basis, either in St. Louis or Los Alamos.

Some of the facilities of the Los Alamos project will be available to qualified staff members of the School of Medicine for research. The research program is primarily concerned with development of the relation of biology, medicine, and biophysics as they concern atomic energy.

The Medical Advisory Board will assist in the formulation of the research program, to be approved by the Medical Section of the Manhattan District, and Dr. Bradbury.

Facilities for medical care at Los Alamos now consist of a hospital, including an outpatient clinic and a dental clinic, and a small infirmary. Dr. William C. White is the director of the Los Alamos hospital. Plans are being made to enlarge the research facilities and the service in industrial medicine.

Drs. Shaffer, Nolan, C. V. Moore and R. A. Moore visited Los Alamos November 15-17 to confer on the proposed affiliation. At this time they met with Colonel Gee, Dr. Bradbury, Colonel James Cooney, chief of the medical section of the Manhattan Project, Major Richard Brundage, chief of the medical section of the Manhattan District, and Dr. Stafford Warren, medical consultant to the Manhattan Project.

Members of the staff of the School of Medicine at Los Alamos during the war included Dr. Louis H. Hempelmann, Jr., instructor in radiology, Dr. Paul O. Hageman, assistant professor of medicine, Dr. Alfred Large, instructor in surgery, Dr. Jerry H. Allen, intern in surgery, Dr. Jack E. Brookes, former postgraduate student in eye, ear, nose and throat, Dr. Henry Barnett, instructor in pediatrics, Dr. James F. Nolan, assistant professor of obstetrics and gynecology, and Miss Ann Perley, instructor in biological chemistry in pediatrics. Miss Annamae Dickie and Miss Ann Earp, technicians, had formerly worked with Dr. Carl V. Moore in the Department of Medicine.

Of these, Drs. Hageman, Allen, Barnett, Hempelmann and Nolan are alumni of the School of Medicine.

Washington University School of Medicine staff members who are now at Los Alamos include Miss Ann Perley, Dr. G. B. Forbes, pediatrician, Dr. Loren Blaney, internist, Dr. Louis Hempelmann, chief of the medical health and research group, and Dr. Seymour Monat, obstetrician. Dr. Jack E. Brookes, otolaryngologist, Dr. Jerry H. Allen, assistant surgeon, and Dr. Parker C. Hardin, surgeon, were formerly associated with the University.

The School of Nursing was represented during the war at Los Alamos by nine graduates.

They are Miss Harriet Peterson, Mrs. Sara Dawson Prestwood, Miss
Amelia Komadina, Miss Helen Schneider, Mrs. Rosalyn Thomas Lindsay, Mrs. Jeanne Smoot Crumb, Mrs. Francis Foster Allen, Miss Loretta Ashby, and Miss Doris Allen.

Dr. Cowdry to Head Cancer Congress

Dr. Edmund V. Cowdry, head of the Department of Anatomy at Washington University School of Medicine and Director of Research at Barnard Free Skin and Cancer Hospital, has been appointed president of the Fourth International Cancer Research Congress, which will be held at the Jefferson Hotel in St. Louis, September 3 through September 6, 1947.

Delegates from all over the world will convene here to organize the world attack on cancer. The international Cancer Congress, which was organized in 1933, is sponsored by the American Association for Cancer Research and the Union Internationale Contre Le Cancer (International Union Against Cancer).

Dr. W. U. Gardner, president of the American Association for Cancer Research, and Dr. Justin Godart of Paris, president of the Union Internationale Contre Le Cancer, are ex-officio members of the executive committee. Other members of the executive committee are the chairmen of the Congress committees.

Dr. A. Norman Arneson, associate professor of clinical radiology and associate professor of obstetrics and gynecology at Washington University School of Medicine, is chairman of local arrangements; Dr. Stanhope Bayne-Jones, professor of bacteriology at Yale University and Director of Jane Coffin Childs Memorial fund for Medical Research, is chairman of finances.

Dr. C. W. Larimore, American Cancer Society, N. Y., is chairman of exhibits; Dr. L. A. Scheele, assistant chief of the National Cancer Institute, Washington, D. C., is chairman of governmental liaison; Dr. M. G. Seelig, director of pathology at Barnard Free Skin and Cancer Hospital and professor of clinical surgery at Washington University School of Medicine, is chairman of publicity; and Dr. Shields Warren, pathologist at the New England Deaconess Hospital, Boston, Mass., is program chairman.

Mr. E. S. Jones of the First National Bank in St. Louis, has been appointed treasurer.

The State Department has approved the meeting of the Fourth International Cancer Congress in St. Louis. This is the second time that the Congress has met in the United States.
Official invitations will be extended to all foreign countries, and govern-
ments will be asked to send as many delegates as they wish.

In 1933, the Congress held its first meeting in Madrid. There were 24
delegates from the United States, 40 from Germany, 74 from France, 26
from Switzerland, 18 from England, 12 from Austria, 20 from Belgium,
20 from Argentina, 26 from Italy, and six from Russia.

In 1936, the Congress met in Brussels, with 47 countries represented,
and a total of over 400 delegates. The Third Congress met in Atlantic
City N. J., in 1939, but due to the onset of the war, many European dele-
gates could not attend. Representatives from Japan, South America,
Mexico, England, France, and the United States gave reports at the
meeting.

The Fourth International Congress was scheduled to meet in Budapest
in 1942, but was cancelled due to the war.

Faculty Members Participate in Annual Mississippi Valley
Medical Society Meeting

Twelve members of the faculty took part in the eleventh annual meeting
of the Mississippi Valley Medical Society September 25-27.

Dr. Willard Allen, head of the Department of Obstetrics and Gynecology,
spoke on “Functional and Uterine Bleeding,” Dr. Robert W. Bartlett,
assistant professor of clinical surgery, spoke on “The Dangers Associated
with Nodular Goiter,” and Dr. Frederick Jostes, assistant professor of
clinical orthopedic surgery, spoke on “Fractures about the Wrist Joint.”

Dr. W. Barry Wood, head of the Department of Medicine, spoke on “The
Use of Penicillin in the Treatment of Bacterial Infection,” Dr. Robert A.
Moore, head of the Department of Pathology, was the moderator at the
round table on “Diseases of Liver and Biliary Tract,” participated in by
Dr. Leo Wade, assistant professor of preventive medicine and Dr. Nathan
Womack, assistant professor of clinical surgery. Dr. James Barrett Brown,
associate professor of clinical surgery, presided at the noon luncheon round
table discussion on September 27.

Dr. Bartlett held a demonstration on “Surgical Experiences in the Armed
Forces,” Dr. Brown, Dr. Louis T. Byars, assistant professor of clinical
surgery, and Dr. Frank McDowell, instructor in clinical surgery, held a
demonstration on “Plastic Surgery.”

Dr. Louis H. Jorstad, instructor in clinical surgery, held a demonstration
on “Treatment of Carcinoma of Lip, Buccal Mucosa, Pharynx and Tongue.”
Dr. Cori Invited to Paris for Pasteur Celebration

Dr. Carl F. Cori, professor of biological chemistry and pharmacology at the Medical School, left November 16 by plane to participate in a program commemorating the fiftieth anniversary of the death of Louis Pasteur.

The program, sponsored by the French government, was held in connection with the meeting there of the United Nations Educational, Scientific and Cultural Organization, and included scientists from all over the world.

Dr. Cori was invited by the University of London to deliver two lectures on November 25 and November 29 on “Isolation and Properties of Some Crystalline Enzymes of Muscle” and “Mechanism of the Enzymatic Synthesis of Polysaccharides.” He spoke at the University of Cambridge on November 30.

Dr. Cori Receives Award for Insulin Research

Dr. Carl F. Cori, head of the Departments of biological chemistry and pharmacology, was one of the recipients of the $1,000 Lasker awards, established by Albert and Mary Lasker and awarded by the American Public Health Association in Cleveland November 12.

Dr. Cori’s research work concerning the mechanism of the action of insulin in the human body, will enable physicians to control diabetes more effectively. Working with hexokinase, an enzyme, he demonstrated that a balance normally exists between anterior pituitary gland hormones and insulin.

He was one of five groups and individuals selected for the honor, and received a gold statuette of the Winged Victory of Samothrace, symbolizing the fight against disease, besides the cash award.

The award was established in 1943, and will be made annually hereafter.

University Receives Grant for Edema Research

An award of $17,110 by the Medical Sciences Branch of the Office of Naval Research was given to Washington University for research in edema.

The research work will be under the direction of Dr. Palmer H. Futcher, assistant professor of medicine, in charge of the metabolism division of the Department.
National Advisory Cancer Council Announces Grant to Washington University

Washington University was one of 21 universities to receive grants for cancer research, it was announced by the National Advisory Cancer Council. The work will be supervised by Dr. Sherwood Moore, head of the Department of Radiology and a member of the advisory council, Dr. A. L. Hughes, consulting physicist to Mallinckrodt Institute of Radiology, Dr. E. H. Reinhard, assistant professor of medicine and radiology, and Dr. Carl V. Moore, associate professor of medicine.

Chinese Medical Officers Visit, Study at Medical School

Three Chinese medical officers began studies at the School of Medicine in September. They are officers in the Chinese Medical Corps, and are here on fellowships from the American Bureau for Medical Aid to China.

Colonel Kung Si-kun, professor of pathology in the Chinese Army Medical School, is interested in cancer research at Barnard Free Skin and Cancer Hospital. Captain Liang Hsu-mu registered in the graduate school for advanced work in anatomy. He plans to take his masters degree and then his Ph.D. Captain Hsu Chih-yun (Mrs. Liang) registered for her Ph.D. in anatomy. She is chiefly interested in embryology.

In October, six more Chinese Medical Corps officers visited the Medical School as guests of the U. S. government. They were on a tour of medical schools throughout the nation.

Eight men from the Chinese Army Hospital Group A visited the Medical School in November on their way to New Jersey to the Tilton General Hospital. They have been assigned there for eight months.

FACULTY APPOINTMENTS

Anatomy

Dr. Sherwood Moore, appointed consultant in radiology in the Department of Anatomy; Dr. Eric Horning, appointed research associate in anatomy; Dr. Robert Ryan and Dr. Dorothy R. Ritzman, assistants in anatomy.

Internal Medicine

Dr. Henry A. Schroeder, appointed associate professor of medicine; Dr. Robert M. Smith, appointed assistant in clinical medicine; Dr. Margaret Henry, appointed research assistant in medicine; Dr. Sigwin B. Raska,
appointed research fellow in medicine; Dr. Albert Stewart, fellow in medicine; Dr. Joseph P. Kriss, fellow in metabolism; Dr. Melvin Goldman, research assistant in medicine; Dr. J. P. Cole, assistant in medicine.

**Biological Chemistry**

Dr. Mildred Cohn, research associate in biological chemistry; Dr. Edwin G. Krebs, assistant in biological chemistry.

**Neuropsychiatry**

Dr. Eugene H. Parsons, appointed assistant professor of psychiatry; Dr. Alex H. Kaplan, appointed instructor in clinical psychiatry, Dr. Stanley Turkel, assistant in psychiatry, Dr. Frederick Knoke, Jr., Assistant in psychiatry, Dr. Paul R. James, assistant in neuropsychiatry.

**Occupational Therapy**

Miss Sue Hurt, appointed director, and granted a leave of absence until June 30, 1947; Miss Dorothy Flint, appointed acting director until June 30, 1947.

**Pathology**

Dr. Frank Townsend, appointed instructor; Dr. Richard Johnson, appointed assistant; Dr. Sidney Kaye, appointed instructor; Dr. Parker Beamer, appointed assistant professor.

**Pediatrics**

Dr. Sidney Jaynes, appointed dentist in pediatrics; Dr. Don Thurston, appointed assistant in pediatrics; Mrs. Helen McGinnis, appointed research assistant in chemistry in pediatrics.

**Surgery**

Dr. Alphonse Meyer, Jr., appointed assistant in surgery; Dr. George L. Hawkins, appointed assistant in neurological surgery; Dr. Alex Harell, appointed fellow in orthopedic surgery; Dr. Ben Eiseman, assistant in surgery; Dr. Edward C. Holscher, instructor in clinical orthopedic surgery; Dr. Robert R. Robinson, assistant in clinical surgery; Dr. Leo A. Sacher, assistant in clinical surgery; Mr. Donald H. Simonsen, research assistant in surgery; Lt. Commander Blake Talbot, fellow in urology.

**Miscellaneous**

Dr. A. Norman Arneson, promoted to associate professor of clinical radiology and of clinical obstetrics and gynecology.
Dr. Loren F. Blaney, assistant in clinical medicine, now at Los Alamos, N. Mex.; Dr. Raymond Holden, instructor in clinical medicine; Dr. Arthur T. Esslinger, instructor in clinical obstetrics and gynecology; Dr. Benjamin Milder, instructor in clinical ophthalmology; Dr. I. D. Kelley, assistant professor of clinical otolaryngology; Dr. Sam Gray, associate professor of pathology; Dr. James Barrett Brown, associate professor of clinical surgery; Dr. James L. Petry, assistant in surgery.

Dr. Paul O. Hageman, assistant professor of clinical medicine; Dr. Gordon Letterman, assistant in surgery; Dr. Wilson Brown, instructor in pathology; Dr. Alfred Large, instructor in surgery; Dr. John H. Mayer, Jr., fellow in chest surgery; Dr. James F. Nolan, assistant professor of obstetrics and gynecology; Dr. Philip S. Mountjoy, assistant in clinical otolaryngology.

Dr. Charles E. Lockhart and Dr. Sanford R. Dietrich, assistants in surgery; Dr. Minot P. Fryer, fellow in plastic surgery.

Dr. Seymour Monat, instructor in clinical obstetrics and gynecology, granted a leave of absence to serve as obstetrician in the Los Alamos Hospital; Dr. Gilbert Forbes, instructor in pediatrics, granted a leave of absence to serve as pediatrician in the Los Alamos Hospital.

Dr. Hallowell Davis, associate professor of physiology and research professor of otolaryngology, and Dr. Richard Silverman, lecturer in audiology, were appointed consultants in otolaryngology. Both men are associated with the Central Institute for the Deaf.
Dr. Gustave Dammin, assistant professor of internal medicine and assistant professor of pathology, was appointed consultant on laboratories. Dr. Dammin is director of the central diagnostic laboratories in Barnes Hospital.

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Departmental Notes

Physiology

Dr. Johannes Moustgaard of the Department of Physiology at the Copenhagen University, Denmark, visited the Department of Physiology at the School of Medicine in November.

Dr. John Matthews, recently released from the service, will spend a year in the Department.

Biological Chemistry

Dr. Martin Kamen, associate professor of biological chemistry, and chemist to the Mallinckrodt Radiological Institute, has written a bulletin of the American Museum of Natural History entitled, "Survey of Contemporary Knowledge of Biogeochemistry." The bulletin was issued August 12, 1946.

Ophthalmology

Dr. Merrill J. Beeh, instructor in ophthalmology, received the Legion of Merit for his outstanding work as director of hospitalization in the A. A. F. School of Aviation Medicine from January 1944 to March 1946. Dr. Beeh was a colonel while in the service.

Dr. Lawrence T. Post, head of the Department, went east in October to attend the council meetings of the American Ophthalmological Society. From October 13-17, he attended the American Academy of Ophthalmology in Chicago. He presented a paper, written by Drs. H. R. Hildreth, William H. Meinberg, Benjamin Milder and T. E. Sanders entitled, "Effect of Visual Training on Existing Myopia." Dr. Richard Scobee presented a paper entitled "Tests for Heterophoria," and conducted a lecture course concerned with heterophoria. Dr. Merrill Reeh conducted a portion of a course on pathology—"Trauma of the Eye."

A Clinic for ophthalmic allergies began this fall under the direction of Dr. S. A. Hanser, who has rejoined the staff after five years in the service.
Neuropsychiatry

The Kerckhoff Foundation has appropriated a sum of money, not to exceed $2400, for the purchase of an electroencephalograph for use in the Departments of Neuropsychiatry and Neurosurgery.

Dr. E. F. Gildea, head of the Department, Dr. George Saslow, assistant professor of psychiatry, and Dr. Irwin Levy, Assistant professor of clinical neurology, attended the American Neurological Association meeting in San Francisco June 26-28.

Dr. Conrad Sommer, assistant professor of clinical psychiatry, has been appointed consultant in psychiatry to the Advisory Committee on Community Services of the Advisory Council to the Surgeon General of the United States Public Health Service for the National Mental Health Act, which was passed last July.

A clinic for psychosomatic disorders opened October 1 on the first floor of the Clinics Building, under the direction of Dr. George Saslow, assistant professor of psychiatry.

Pathology

Dr. Robert A. Moore, head of the Department, attended a meeting of the National Research Council on the American Registry of Pathology, September 10, in Washington, D. C. The Committee on National Research Council on the American Registry of Pathology is part of the activities of the Army Institute of Pathology.

Medicine

Dr. W. Barry Wood, Jr., head of the Department, is a member of the antibiotic study section which was formed under the direction of the National Institute of Health, U. S. Public Health Service.
Dr. Joseph Edward, instructor in clinical medicine, who has rejoined the staff after being in the service, received the Legion of Merit citation recently. Dr. Edwards was a Lieut. Colonel in the Medical Corps.

As chief of the cardiological section, medical consultant to the surgical service and assistant chief of medical service for the 21st General Hospital, Dr. Edwards was commended for his skilled and conscientious service. The citation was made by Major General H. S. Aurand.

**Anatomy**

Dr. E. V. Cowdry, head of the Department, attended a series of lectures concerning cancer October 9 through October 13. He met with the directors of the American Cancer Society on October 9, and on October 10, he attended the regular monthly meeting of the Board of Directors of the Society in New York. Dr. Cowdry met with the United States Public Health Service in Washington, D.C., on October 12, and on October 13, he met with the directors of the American Association of Cancer Research in New Haven, Connecticut.

**Radiology**

Dr. Sherwood Moore, head of the Department, and Dr. Wendell G. Scott, assistant professor of clinical radiology, attended the meeting of the American Roentgen Ray Society in Cincinnati, September 14-20. Dr. Moore is a member of the executive council and Dr. Scott was elected treasurer at the meeting.

The Department of Radiology has just completed the installation of a new diagnostic unit on the fourth floor, which is equipped with the latest spot-film device for making instantaneous films of fluoroscopic image during examination of the gastro-intestinal tract. This will greatly increase the volume of work which can be done in the Department.

Dr. Wendell G. Scott was one of the guest speakers at the Kansas City Clinical Society meeting October 9. He spoke at a symposium of gastro-intestinal disorders on “Prolapse of the Gastric Mucosa into Duodenum as a Cause of Gastro-Intestinal Symptoms.”

Dr. Wendell G. Scott was appointed a member of the Board of Reserve Consultants to the Surgeon General of the U. S. Navy, Adm. Ross T. McIntyre.
Preventive Medicine

Dr. E. Gurney Clark, head of the Department, and Dr. Virgil Scott, assistant professor in the Department, attended a conference of penicillin investigators in neurosyphilis in Washington, D. C. September 12.

The Department has been a part of a national research project for investigation of the use of penicillin in neurosyphilis for two years, first under the sponsorship of the Office of Scientific Research and Development, and recently under the sponsorship of the United States Public Health Service.

Dr. Virgil Scott and Dr. George Saunders attended a meeting of the Southern Medical Association in Miami, Fla., November 4-7. Dr. Scott presented a paper written by Dr. Clark and Dr. Scott entitled "Quantitative Serologic Tests for Syphilis: Use and Availability for Venereal Disease Control."

Dr. John Grant of the International Health Division of the Rockefeller Foundation, Dr. Thomas Gan of the Institute of Hygiene in Manila, and Dr. Joseph Tomcsik, professor of hygiene and bacteriology at the University of Basle, Switzerland, visited the Department in November.

Dr. Gurney Clark has been appointed a member of the new Subcommittee on Venereal Diseases of the Division of Medical Sciences of the National Research Council, and attended the first meeting in Washington, D. C. November 7.

Dr. Clark attended the 74th Annual Meeting of the American Public Health Association in Cleveland, November 12-14.

Miscellaneous

Dr. Robert A. Moore, acting dean, Dr. Franklin Walton, assistant dean, and Mr. William Parker, registrar, represented the School of Medicine at the annual meeting of the Association of American Medical Colleges in Edgewater Park, Miss., October 28-30.

Three special lecturers have given addresses to faculty and students at the medical school this fall.
Dr. Herbert Evans spoke Wednesday, Oct. 9 on “The Growth Hormone of the Anterior Hypophysis.” He is head of the Department of Anatomy at the University of California, Berkeley, Calif.

Dr. J. Engelbreth-Holm, professor at the University Institute of Pathological Anatomy in Copenhagen, spoke on “Leukemia,” Wednesday, Nov. 6, and Dr. Vassili V. Parin, secretary-general of the Soviet Academy of Medical Sciences, spoke Wednesday, Nov. 27 on “Medical Research in Russia.”

Dr. Bradley Installed as President of ACHA in Philadelphia, September 24

Dr. Frank R. Bradley, director of Barnes Hospital and member of the executive faculty at the Medical School, was installed as president of the American College of Hospital Administrators at a meeting of the college in Philadelphia, September 24.

The American College of Hospital Administrators was organized in 1934 to improve the efficiency of hospital administration. Dr. Bradley, who began his hospital career back in 1929 when he was surgical intern at the U. S. Veterans Hospital, Jefferson Barracks, Mo., has a long career in hospital administration.

He was appointed assistant superintendent of Barnes Hospital in 1929, and in 1939, he succeeded Dr. Louis H. Burlingham as Director.

He serves as chairman of the joint hospitals committee, whose membership includes four of the local hospitals, the Clinics and School of Nursing, and is director of the course in hospital administration.

Included among his many hospital activities is membership on the executive committee of the Board of Regents in the American College of Hospital Administrators, and from 1942 to 1946, he was chairman of the Council of Hospital Planning and Plant Operation of the American Hospital Association.

Dr. Cori, Dr. Elman Attend Celebration

Dr. Carl F. Cori, professor of biological chemistry and pharmacology, and Dr. Robert Elman, associate professor of clinical surgery at Washington University School of Medicine, attended the centennial celebration at the University of Buffalo, Buffalo, N. Y., September 25 to October 2, 1946.

The celebration was divided into three parts, a symposium on body proteins, a symposium on cancer, and a symposium on cardiac disease.
Both Dr. Cori and Dr. Elman participated in the symposium on body proteins. Dr. Cori's paper was entitled, "The Isolation and Properties of Some Crystalline Enzymes of Muscle," and Dr. Elman gave a paper on, "Surgical Aspects of Protein Deficiency."

Dr. Cori and Dr. Elman were the only Missouri men among 58 to participate in the celebration.

Research on Animals Endorsed by U. S. Chamber of Commerce

Research on animals for the development of life-saving medical knowledge has been endorsed by the Chamber of Commerce of the United States in a statement of policy released recently by Howard Strong, Secretary of the Health Advisory Council of the Chamber of Commerce.

Mr. Strong announced the policy as the result of a referendum vote of member organizations. The statement submitted for the vote is as follows:

"In view of the great progress that has been made in preventive and curative medicine and surgery through animal research and the prospect of even greater progress in the future, the National Chamber is unalterably opposed to the prohibition of this scientific procedure. Such a prohibition would seriously hamper all medical progress."

Result of the vote was: 2424 organizations in favor of the statement, 18 against. Represented in the poll were slightly over a million business men.

Mr. Strong, in a letter to Dr. A. J. Carlson, president of the National Society for Medical Research, announced the outcome of the Chamber of Commerce referendum and said, "We are therefore now in a position to present the Chamber's opposition to any anti-vivisection legislation wherever such legislation rears its head and when advisable and possible, a representative of the Chamber can appear in opposition."

(EDITOR'S NOTE: Washington University School of Medicine is an institutional member of the National Society for Medical Research.)
Total Enrollment Figures

Total enrollment in the School of Medicine for this year is 366—329 men and 27 women.

In the freshman class there are 70 men and 16 women, in the sophomore class there are 72 men and 9 women, in the junior class there are 96 men and 6 women, and in the senior class there are 91 men and 6 women.

The Department of Occupation Therapy has an enrollment of 27. In the first year class, there are nine women and one man, and in the second year class there are 17 women.

There are 12 laboratory technicians enrolled, 12 physical therapists, and the School of Nursing has a total enrollment of 265, including the 33 women who enrolled in August.

Residents, Attending and Consultant Physicians Appointed by Deans' Committee

Sixty-nine residents and attending and consultant surgeons for Jefferson Barracks Veterans Hospital in St. Louis were appointed recently, Dr. Franklin E. Walton, secretary of the Deans’ Committee of the schools of medicine of Washington and St. Louis Universities, announced.

The Deans’ Committee composed of the deans of the two medical schools and three other staff members from each school, is in charge of administering professional services at the hospital.

Members of the committee making the appointments include Dr. Robert A. Moore, acting dean of Washington University School of Medicine; the Rev. Alphonse Schwitalla, dean of St. Louis University School of Medicine; Dr. Ralph A. Kinsella, professor of internal medicine at St. Louis University and chairman of the Deans’ Committee; Dr. Harvey Lester White, associate professor of physiology at Washington University; Dr. Leon Bromberg, instructor in clinical medicine at Washington University; Dr. Joseph C. Peden, assistant professor of radiology at St. Louis University; Dr. John W. Stewart, associate professor of clinical surgery at St. Louis University, and Dr. Franklin E. Walton, associate professor of surgery at Washington University.

Attending and consultant physicians must be members of one of the two medical school staffs, members of their respective specialty boards, and veterans who have seen active service. Residents are appointed for three years.
There are 27 alumni among the appointees of attending and consultant physicians. Those who have accepted appointments in the specialties are:

Dr. Henry C. Allen, '33, laboratory; Dr. John P. Altheide, urology; Dr. Edmund B. Alvis, '34, ophthalmology; Dr. A. Norman Arneson, ’28, radiation therapy; Dr. Ralph Barrett, anesthesiology; Dr. V. P. Blair, ’93, plastic surgery; Dr. Leslie D. Cassidy, gastro-enterology; Dr. Leonard T. Furlow, neurological surgery; Dr. Joseph J. Gitt, ’30, neurology; Dr. Leo J. Hartnett, obstetrics and gynecology; Dr. J. E. Jensen, ’38, general surgery.

Dr. Fred A. Jostes, ’20, orthopedic surgery; Dr. Ralph Kinsella, internal medicine; Dr. Paul Preisler, biological chemistry; Dr. Val B. Satterfield, ’24, psychiatry; Dr. Robert Votaw, otolaryngology; Dr. Don C. Weir, radiology; Dr. Harvey Lester White, ’20, physiology; Dr. Robert D. Woolsey, neurological surgery; Dr. George Wulff, ’33, obstetrics and gynecology; Dr. Adolph Conrad, ’38, dermatology; Dr. Bruce C. Martin, ’35, plastic surgery.

Dr. Wilson G. Brown, ’39, pathology; Dr. Justin J. Cordonnier, ’28, urology; Dr. Charles R. Doyle, general surgery; Dr. Leo Gottlieb, ’32, internal medicine; Dr. Oscar P. Hampton, Jr., orthopedic surgery; Dr. Maurice Greene, ophthalmology; Dr. Raymond Mezera, pathology; Dr. Maurice B. Roche, orthopedic surgery; Dr. Harry Rosenbaum, ’34, ophthalmology; Dr. Samuel Warson, neuropathology; Dr. Louis Kohler, neuropathology; Dr. Alfred Large, general surgery, and Dr. Edward H. Lyman, ’37, otolaryngology.

Those who have been appointed as resident physicians are:

General surgery—Dr. Daniel J. Abramson, Dr. Thomas E. Ashley, Dr. George Auferheide, ’43; Dr. Leo Francis Donley, ’43, Dr. Heinz Cron, ’39, Dr. Frank C. Henry, Dr. Richard Leroy Lawton, Dr. Ben G. Mannis, Dr. Frank V. Murphy, Jr., Dr. Vincent A. Sherrod, Dr. James C. Vest, ’43, and Dr. Clarence H. Walton; genito-urinary surgery—Dr. James A. Miller, and Dr. John S. Roane; orthopedic surgery—Dr. George E. Scheer, ’43, and Dr. Julius J. Weinberg.

Ophthalmology—Dr. Wilbur H. Lewin and Dr. Richard Preston, ’42; otolaryngology—Dr. Royal E. Stuart; internal medicine—Dr. James A. Devereus, Dr. Edward H. Dunn, ’43, Dr. William D. Haufe, Dr. Hiraku Ishida, ’42, Dr. David Kaminsky, Dr. Edward Kendall, Dr. Nathan Kimelman, ’38, Dr. Leonard Knezeckoff, ’43, Dr. Frank J. Manganaro, Dr. Edison W. McCullough, Dr. John C. McEwen, Dr. Robert J. McLaughling, Dr. Paul Charles Morton, and Dr. Wilfred Wise; radiology—Dr. Fred Barald.
Dr. Gildea Speaks at Opening Exercises

Dr. Edwin Gildea, head of the Department of Neuropsychiatry, spoke to an assembly of students and faculty members on “Energies of Men” at the opening exercises of the Medical School, Monday, Sept. 16 in the Medical School Auditorium.

Dr. Robert A. Moore, acting dean, introduced Chancellor Arthur H. Compton and Dr. Gildea. Chancellor Compton presented four awards to two medical students for outstanding scholarship.

Milo Lawrence Heideman received the Gill prize in Anatomy and the Nu Sigma Nu award for the outstanding member of last year’s freshman class, and Virgil R. Bleish received the Howard A. McCordock Book Prize for excellence in pathology and the Nu Sigma Nu award for the outstanding student in last year’s sophomore class.

John Gentry, sophomore student, gave a brief explanation of the student representative council, and both faculty and students adjourned to the Lounge for refreshments.

Graduate Course in Ophthalmology

An eight-month graduate course in ophthalmology began October 1, under the direction of Dr. Richard Scobee, instructor in ophthalmology.

Fifteen men, all veterans are taking the course. One of these, Dr. David Freeman, was graduated from the School of Medicine in 1943.

Prior to the war, only eight were allowed to enroll in the course. In 1945, ten were enrolled, and this year, because of the large number of applicants, 15 were registered. The house staff has been increased from five to six men because of the increase in enrollment.

Dr. M. J. Reeh, instructor in ophthalmology, joined the Department on a full time basis in March, after nine years in the Army. He is Director of Ophthalmology Clinics.
Second Generation in Medical School

There are 15 students now enrolled in the Medical School whose father or both parents were graduated from this medical school.

First-year class—Robert D. Burchfiel, son of Dr. Cecil M. Burchfiel, class of 1916; Meredith Jorstad, daughter of Dr. Louis H. Jorstad, class of 1924, and Joseph D. O'Keefe, son of Dr. Charles D. O'Keefe, class of 1918.

Second-year class—Milo Heideman, Jr., son of Dr. Milo Heideman, class of 1923; Robert H. Lund, son of Dr. Herluf Lund, class of 1907; Gordon Munro, son of Dr. E. E. H. Munro, class of 1919, and James Wood, son of Dr. V. V. Wood, class of 1912.

Third-year class—Arthur Greditzer, son of the late Dr. Harry Greditzer, class of 1912; David S. Johnson, stepson of Dr. B. M. Brewster, class of 1903, and Walter Strode, son of Dr. Joseph E. Strode, class of 1915.

Fourth-year class—John E. Bechtold, son of Dr. Edmond Bechtold, class of 1915; Paul J. Busiek, son of Dr. Urban Busiek, class of 1919; Theodore H. Greiner, son of Dr. Theodore Greiner, class of 1897; Richard Weaver, son of Dr. T. Walker Weaver, class of 1912, and Helen Hofsommer, daughter of Dr. Aphrodite J. Hofsommer, class of 1923 and Dr. A. C. Hofsommer, class of 1922.

Public Health Service Grants

The United States Public Health Service grants are "to stimulate research relating to the causes, diagnosis, treatment, control and prevention of physical and mental diseases and impairments of man," according to the report of the Association of American Colleges meeting October 28-30.

Although individuals may apply, the Research Grants Division encourages applicants to affiliate with a university, institution, laboratory or other organization since such affiliation greatly facilitates administration of grants, relieves the research worker of responsibility for bookkeeping and auditing, and provides him with better facilities than ordinarily would be available to an individual, the report said.

National Institute of Health Research Scholarships are awarded to individuals who have had postgraduate work in approved institutions. Application for these fellowships may be made at any time during the year, and are effective for one year from the time of the award with the possibility of a renewal for a second year.
Junior research fellowships are available to those holding masters' degrees or those who have completed the equivalent hours in postgraduate study. Senior research fellowships are available to individuals holding doctorate degrees.

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**Medical Aptitude Test Revised**

The Medical Aptitude Test which has been used for the past few years in helping to select applicants for medical school, has been abandoned. The Association of American Medical Colleges has appointed a standing committee on student personnel practices which will design a special aptitude test for admission into the 1947-48 class, and will continue to study this problem and improve the examination.

The committee, headed by Dr. Carlyle Jacobsen, former assistant dean of the Medical School, and now dean of the graduate school at the University of Iowa, held its first conference in Chicago on Saturday, Nov. 30. Dr. Robert A. Moore represented the School of Medicine.

The Graduate Records Board will administer the aptitude test, which will be given in many medical centers throughout the country. The first revised test will be given approximately January 11, 1947.

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**New Director of Social Service**

Miss Elizabeth McKinley, who has served for two years as Director of the Social Service Department of Washington University Clinics and Allied Hospitals, left December 14 to take a position as Director of Social Service at the University of Chicago Clinics. She was succeeded by Miss Helen Armstrong.

Miss Armstrong has been with the Red Cross during the war years, and was director of Hospital Service for the Midwest Area of Red Cross, previous to her appointment as Director of Social Service here.

She received her master's degree in social work from the University of Oklahoma.
New Internship Agreement

At the meeting of the Association of American Medical Colleges in Edgewater Park, Miss., October 28-30, the following agreement was made concerning appointment of interns for July 1, 1948.

1. That the hospitals be requested to eliminate from intern application blanks that the student will agree to accept if appointed.

2. Date for filing applications and release of credentials by the medical schools set at October 15, 1947.

3. Appointment date by hospitals set at November 15, 1947.

4. No specific waiting period following announcement of appointments. Hospitals will be requested to notify all applicants of acceptance, alternate position, or rejection (with the understanding that notification of rejection may be made by the hospital at any time).

5. Notification is to be sent to hospitals that it is anticipated that dates for filing release of information and appointment will be moved farther into the senior year in 1949 (probably December).

Standing Faculty Committees

The standing Medical School faculty committees for 1946-47, as appointed by Chancellor Arthur H. Compton, are:

Committee on Medical Education—Dr. W. Barry Wood, chairman; Dr. Willard Allen, Dr. Carl F. Cori and Dr. Nathan A. Womack.

Library Committee—Dr. Carl F. Cori, chairman; Dr. Gustave J. Dammin, Dr. Robert Elman, Dr. Helen T. Graham, Dr. Carl Harford, and Dr. James O'Leary.

Committee on Promotions—Dr. Alexis F. Hartmann, chairman; Dr. Edmund V. Cowdry, Dr. Evarts A. Graham, Dr. Carl V. Moore, and Mr. W. B. Parker, secretary.

Committee on Admissions and Scholarships—Dr. Robert A. Moore, chairman; Dr. Russell Blattner, Dr. Eugene Bricker, Dr. Cecil Charles, Dr. Arthur Gilson, Dr. Francis Hunter, Dr. James Nolan, Dr. George Saslow, Dr. Virgil Scott, Dr. Wendell G. Scott, Dr. Robert E. Stowell, Dr. Barrett Taussig, Dr. John Taylor, Dr. Philip L. Varney, and Mr. W. B. Parker, secretary.

Committee on Oscar Johnson Institute—Dr. Lawrence T. Post, chairman; Dr. Theodore E. Walsh, Dr. W. Barry Wood, Dr. Edwin F. Gildea, and Dr. Frank R. Bradley.
Publications by the Staff of the School of Medicine

June - September, 1946


Alexander, H. L., Harford, C. G. & Wood, W. B. Jr. Multiform vesicular, pustular, and ulcerative dermatitis and scars over trunk and lower extremities (culture during life of Hem. Staph. albus and C. diphtherial, gram positive cocci only in the tissue); acute glomerulonephritis; hypertrophy and dilation of the heart; necrotizing fibrinous tonsillitis (history of isolation of C. diphtheriae; C. diphtheriae in the tissue). Barnes case 90. J. Missouri M. A. 43: 541-554, Aug. 1946.


Alumni News

1881
James A. Dickson reports that he "is still in good health at the age of 86." He is retired and is living in St. Louis. "Willie Hall and I are the last surviving members of our class," he says.

1891
Walter E. Gibson, Jr., DeSoto, Mo., died June 20.

1895
J. M. Brooks retired from active practice in Golden City, Mo., where he had practiced for 51 years, and moved to Bolivar, Mo. A Sunday in Golden City was devoted to farewell to Dr. Brooks, a dearly loved member of the community.

"After spending over 51 years in the same office, I reached a place where I felt it best to step down and out," he writes. "The farewell demonstration was planned without asking me, and although I personally am not enthusiastic about public demonstrations, I really appreciated the sentiment behind it."

"I had a letter from N. J. Hawley of Webster Groves last winter. He is in retirement. Best wishes for WU!"

1896
Herman H. Born died in San Bernardino, Calif., July 14, 1946.

C. L. Fahnestock says, "I have always been proud of Washington University and its work in scientific advancement. If the same progress could be made in international good neighbor policy, wars might be over."

1897
William L. Johnson of Thompsonville, Ill., died Sept. 16, 1946.

1898
William L. Peters of Hendersonville, N. C. writes, "Having done two men's work for the last five years, I broke down a year ago and had to retire. I am not now in practice and general health is poor. Best regards and best wishes to everybody."

1900
B. G. Pinkerton writes, "Have been in active practice here (Los Angeles) since 1903. Lately have limited my practice to internal medicine. Wife and I are alone as our four daughters are all married. I enjoy reading the Quarterly, as it keeps me posted on all the activities."

Homer W. Davis, who has practiced in Alton, Ill., for 46 years, died at the age of 72 at his home Sept. 8, 1946. He had undergone major surgical treatment last February in Barnes Hospital, following recurrence of an illness for which he had been treated two years earlier. He resumed his practice last spring, but finally had to make the first complete break with professional activity since he opened his office. He was ill for a few weeks.

He was first president of the Alton Memorial Hospital staff and membership in medical societies included fellowship of American College of Surgeons. He interned at St. Louis City Hospital and was winner of the Gill prize in anatomy when a medical student.

1901
R. E. Holben has resigned his position as chief medical officer at the Soldier and Sailor Home, Quincy, Ill., and is now back in his home town of Springfield, Ill.

1902
Louis J. Downey has been the physician at the Indiana Boys' School in Plainfield, Ind. for the past three years. The school has an enrollment of almost 500 boys.
John A. Collins left his location in Warren, Ohio because of poor health in 1946, and is now partially retired in Washington, D. C.

1903

Harry L. Cobean has been in Wellington, Kansas since 1903. "I have been blessed with good health and am still able to carry on, but have no hopes of excelling the record of my old professor, Dr. Joseph Grindon," he writes.

1904

Frank Leo Long is chief medical officer for the Veterans Administration Regional Office at Los Angeles, Calif.

1907

Thomas Dupuy Wilson who is a retired medical officer, has a son, Thomas Dupuy Wilson, Jr., 18 years old, who is a pre-medical student at Trinity University, San Antonio, Texas.

1908

Harold McClure Young of Columbia, Mo. died August 12, 1946.

1912

Harry G. Greditzer of Webster Groves, Mo., died Sept. 28, 1946.

1913

Leo Julius Kilan passed away suddenly last April at the age of 57, as a result of coronary occlusion. He practiced medicine in northeastern Nebraska since 1919.

1919

Fred J. Hodges writes, "My oldest son of three, Fred J. Hodges III, is now serving an internship at Strong Memorial in Rochester, N. Y., after graduation from the University of Wisconsin Medical School. I greatly enjoyed a visit with Arthur Compton when he lectured at the close of the Summer School panel on 'Modern Science and World Affairs.'" Dr. Hodges is in the X-Ray Department at the University of Michigan School of Medicine.

1920

Walter Scott Priest of Chicago, was in St. Louis last month to attend the Mississippi Valley Medical Association meeting. He was apprehended while visiting his old stamping grounds (pathology).

1918

Hugo Muench is professor and head of the department of biostatistics at the Harvard School of Public Health.

A. M. Lohrentz spent a year (1945) in the Gran Chaco, Paraguay, South America, doing work in EEN and T under the auspices of the Mennonite Central Committee, Akron, Pa. He is now in McPherson, Kansas.

L. G. Owen is practicing dermatology in Lincoln, Nebr. He writes that his older daughter received the Boucher medal at the University of Nebraska last spring, and his older son is an ensign on a plane carrier. Another son is attending the University of Nebraska.
"I have a summer home west of Pike's Peak, collect coins, do some wood work, play golf some, and like to hunt," he reports.

"The Quarterly is excellent; I enjoy it very much. Its accounts of the activities and accomplishments of the alumni and faculty reveal Washington as a truly great school. With each issue I am made a little prouder of being an alumnus of Washington," Paul S. Barker of Ann Arbor, Mich., writes.

1921

Harry E. Blasdel has practiced in the same office in Hutchinson, Kansas since July, 1921.

"I am still practicing pediatrics at the old stand (Burlington, Iowa) after five and a half years with the Navy," John C. McKitterick writes. "Am growing no younger, having attained the distinction of being a grandfather several times. Am kept feeling young by reason of a son whom I hope to enter in the class of '64."

1922

James B. Costen spoke on "Traumatic Deafness" at the Dallas Society of Otolaryngology on November 5. He addressed the Southern Illinois Medical Association on November 14 on "Diagnosis of Tumors of the Pharynx and Larynx."

Ching-Sheng Wu, University of Amoy, China, would like to hear from alumni.

1924

Albert E. Meinert is a member of the Winona (Minn.) clinic, and has a general practice there. His son is in medical school at the University of Minnesota.

1926

James L. Benepe was recently elected president-elect of the St. Paul Regional Chapter of the American College of Physicians and Surgeons. William L. Smith, who is practicing radiology in Monroe, La., lost his wife in an automobile accident in August. His daughter, Millicent Covington, age 10, suffered a fracture in her right thigh in the accident and Dr. Smith received seven vertebral fractures and numerous rib fractures. A son, Gibson Sherwood, age 11, escaped uninjured. The late Mrs. Smith was the former Millicent Gibson, a graduate of Washington University School of Nursing.

1927

Irene A. Koeneke of Halstead, Kansas, suffered the loss of her husband, Dr. A. E. Hertzler, renowned surgeon and founder of the Halstead Hospital. Dr. Koeneke is chief gynecologist in the clinic.

Hubert B. Bradburn, who practiced in Lincoln, Nebr., from 1930 to 1942 before entering the service, died September 4, 1946 in Walter Reed General Hospital in Washington, D. C. He contracted malaria while on duty in the Army Medical Corps in Africa. Complications developed and he has been off and on active duty ever since.

He was at Ft. Riley, Kan., in Africa for a year and a half, served at Ft. Benning, Ga., May General Hospital, Galesburg, Ill., and other assignments.

1928

L. A. Malone writes, "working like the devil for the tax man—top of my head is bare. Have a wife and two boys in Terre Haute, Ind., and a ranch in Colorado."

"I hope all my friends will come out and see this beautiful country," Robert R. Means writes from Red Lodge, Mont. "The Red Lodge-Cook City Highway to Yellowstone Park can't be beat for beauty. Hope to see you all."

W. F. Ossenfort has been reassigned to the United States Public Health Service Hospital, Fort Worth, Tex., as
medical officer in charge. This hospital is the principal treatment facility for neuropsychiatric patients of the Navy. David Le Grand '44, E. V. Cowdry, Jr. '45 and Paul Roger Gottschalk '40 are also assigned there.

1929

Frank B. Queen is professor of pathology at the University of Oregon School of Medicine, and in charge of the cancer program in the state of Oregon.

A. Ford Wolf is physician for the Scott and White Clinic in Temple, Texas. He is doing internal medicine and allergy and "has two children and three horses."

Noka B. Hon is now with the State Relations Division of the United States Public Health Service, Washington, D. C.

1930

Helen Cotton Buckthorpe is now health officer of Pulaski County in Missouri.

1932

Alexander Graham Wooldridge is chief of the Surgical Service at the Station Hospital, Camp Polk, La. He is a captain in the medical corps.

"I met Paul Maddux, Gordon Stauffer, Virgil Jeans and Jim Jarvis (all '32) at Kansas City Southeast Clinical Conference," writes Al Jenks, Jr. of Des Moines, Iowa.

The Paul H. Lefkowitz's are the parents of a son born in March, 1946. Two other sons, Louis and Herbert, were born in 1937 and 1939. Dr. Lefkowitz is practicing in Spring Valley, N. Y.

John Cornell Wilson is in practice in surgery in San Jose, Calif. after his recent discharge from the service. He is chief of the surgical staff at Santa Clara County Hospital and a member of the staffs of the San Jose Hospital and O'Connor Sanitarium.

Walter E. Chase has done general practice in the same office in St. Louis for 14 years.

George E. Zukovich started again in practice in San Diego after five years in the service, four and one-half of which was spent overseas. He was chief of the E.E.N.T. at Tripler General Hospital, Honolulu.

"Enjoyed my assignment, and the fine staff of that hospital," he says. "Had a lot of work and much experience. San Diego has changed, but so have I. Best wishes to all."

Oreon K. Timm is now employed by the Veterans Administration as a full-time psychiatrist at the VA Hospital, Fort Custer, Battle Creek, Michigan. He is chief of the out-patient and reception service.

William Frank Wenner is assistant director of the Medical Division of the Upjohn Company in Kalamazoo, Mich., is the representative of the Medical Division in all contacts with the Federal Food and Drug Administration and is the Upjohn Company's official correspondent with the Council of Pharmacy and Chemistry of the American Medical Association. He also serves on the Medical Advisory Committee of the Legislative Section of the American Drug Manufacturing Association.

Harry Goldman is doing general practice work in Brooklyn, N. Y.

C. Allen Good is assistant professor of radiology, Mayo Foundation, University of Minnesota, and consultant in roentgenology, Mayo Clinic. The Goods have four boys. "Be glad to see anyone who gets to Rochester, Minn.,” Dr. Good says.
Col. Sheldon Brownton has been awarded the Legion of Merit by the commanding general of the Alaskan Department, where he is now stationed. He received the award for efficient organization of medical sections throughout the Army Air Forces Flying and Technical Training Commands from March 1941 to January 1946.

1934

John M. Nelson returned from military service last November after 30 months in Australia and New Guinea. He is again practicing pediatrics in Denver, Colorado.

R. M. Anderson, is chief of the surgical staff of the Good Samaritan Hospital at Vincennes, Ind. He also lectures in surgery and gynecology at the School of Nursing.

Gordon Stone returned to practice in March, after four years in the service. “Things are looking up,” he says. He is practicing in Hutchinson, Kansas.

Edna W. Schrick is practicing pediatrics in Holland, Mich.

Herman J. Bailey is practicing obstetrics and gynecology in Asheville, N. C.

Since his discharge from the Army, Leonard F. Bush has spent a year at the New York Orthopedic Hospital, and in December will head the Department of Orthopedics at Geisinger Memorial Hospital, Danville, Penn.

1935

Arthur P. Echternacht is now practicing radiology in Crawfordsville, Ind., and is associated with Dr. W. Dodds, pathologist. “I have three children, a boy 7, a girl 5, and a boy one and one-half. Would appreciate hearing from former classmates, particularly Williams, Robinson and Allison,” he wrote.

Richard A. Sutter was elected president of the St. Louis County Medical Society recently. He is the youngest man ever to be elected to the society’s presidency. He is particularly known for his use of the Kuntscher nail method, a German-developed method of treating fractures. For several months after the war, he was in charge of all German hospitals in the American zone in Austria.

1936

James Donald Morrison returned from serving as ophthalmologist with the 29th General Hospital and was discharged as a major. He is now practicing ophthalmology in Billings, Montana.

John F. Flynn is practicing gynecology in Pittsfield, Mass.

Edgar L. Engel is back from four years service and is now practicing obstetrics and gynecology in Evansville, Ind.

Ellsworth Trowbridge, Jr. is practicing neurology and psychiatry in Kansas City, Mo.

1937

Joseph A. Fiorito is in New Haven, Conn. practicing obstetrics and gynecology. The Fioritos have two children—Thomas Frederick born December, 1944 and Patricia Anne, born May, 1946.

Lloyd Rosenbaum returned last year (October) from 31 months overseas in the European theatre, and is now practicing internal medicine in Anderson, Illinois. The Rosenbaums have a two-months-old son, Robert Allen.

Theodore E. Kircher, Jr. was discharged in March as a Lieut. Col. in the medical corps, and is now practicing medicine in Albuquerque, N. M. He served in the Philippines and the
British Dutch East Indies with Herman Erlanger '37.

Arthur A. Brewer plans to move from Alton, Ill., where he has been a radiologist for three and one half years, to Pasadena, Calif., where he will engage in private practice of radiology with two other men. He was recently elected to membership in the American Roentgen Ray Society. He has written a paper entitled “Esophagopleural Fistula Complicating Empyema,” which appeared in the October issue of Radiology. The Brewers’ second child, a son, was born in April.

1938

Dorothy Gill opened an office in Seattle recently, for the practice of internal medicine and arthritis.

Robert D. Brookes is back at the Neurological Institute of New York after five years in the Navy. “I expect to call a halt to this foolishness soon and get to work,” he writes. “Still training.”

Henry L. Barnett was discharged from the Army in June and is now a full-time staff member of Cornell University Medical School as assistant professor of pediatrics.

1939

Heinz E. Cron has been separated from the service and is at the Missouri Pacific Hospital, St. Louis.

R. M. Hardaway III is now at Madigan General Hospital in Tacoma, Wash. R. M. Hardaway IV was born in June, 1946 at Fort Lewis, Wash.

John R. McMahon recently received an appointment as associate surgeon for the Union Pacific Railroad and was elected president of the Pocatello (Idaho) Medical Society for 1946-47.

Sidney Steven Boyers is specializing in eye, ear, nose and throat in West New York, N. J. following a residency at the Polyclinic Medical School and Hospital.

1940

John H. Savoy is practicing clinical pathology in Bay City, Michigan.

James Mann writes, “I am at the Boston State Hospital and thoroughly enjoying my training in psychiatry as well as the psychiatric atmosphere of Boston.”

1941

Sylvan Hertz died March 8, 1946.

Charles H. Ransom, who is a major in the Medical Corps, has been in the army since March, 1946, and is now with the Peiping Headquarters Group, Peiping, China.

Allan M. Rossen is practicing surgery in Los Angeles, Calif. He is on the surgical staff of Cedars of Lebanon Hospital. The Rossens now have two children, Richard and Marcene.

1942

George S. Loquvam is a resident in the Cottage Hospital, Santa Barbara, Calif.

Samuel A. Levy is “rounding out the first year of hospitalization for a service-incurred disability—no new positions—still flat on my back” He is in Birmingham, Alabama.

Ernest J. Eytinge is assistant resident physician in Medicine at the Roosevelt Hospital in New York City and has been appointed to the Columbia University Service at Bellevue Hospital next year.

Edward Ascher is the resident in psychiatry at the Johns Hopkins Hospital and an instructor in psychiatry at the Johns Hopkins Medical School.

Robert B. Stortz set up his own office in general practice August 1, 1946 in Galena, Kansas.
Frederick Klinge is assisting Dr. Carl A. Moyer in water balance research at Southwestern Medical College, Dallas, Texas.

1943

J. R. Mallory is a resident in medicine at St. Luke’s Hospital in St. Louis. He served with the Third Marines in the southwest Pacific, Saipan, Guam, and Iwo Jima. He underwent an operation for a knee injury which he received in the service, and was recently discharged from the service.

Martin P. Meisenheimer III left Tokyo August 30, enroute to the United States for separation from the Army. He left the States in April, 1945, and served in the Philippine Islands until cessation of hostilities. In September, 1945 he went to the 76th Station Hospital in Tokyo where he was chief of the Medical Service.

Ben Greenwood is stationed in Germany as a flight surgeon. The Greenwoods are the parents of a baby boy, John Michael, born September 11, 1946.

Norman Todd is now student health physician at Washington State College, Pullman, Wash. He was discharged from the Army last June and is at Finch Memorial Hospital, Pullman.

J. Richard Compton writes from Walter Reed General Hospital in Washington, D. C., "On rounds one morning, a civilian consultant, Dr. John Minor, said he had seen poor physicians from every medical school he could think of, but had never seen a poor one from Washington University! (The term poor refers to professional qualifications)."

Albert N. Lemoine, Jr. finished a teaching-research fellowship at Harvard and the Massachusetts Eye and Ear Infirmary in Boston, and is now practicing ophthalmology with his father at Kansas City, Mo.

Melvin D. Deck of Provo, Utah, died in August.

Charles G. Fullenwider is still in the service, and is now stationed in Greenland.

Carvel T. Shaw is now in private surgical practice in a 25-bed private hospital in Monroe, La. He completed his residency at Henry Ford Hospital.

Herman L. Finsten is at Fowler Clinic in Astoria, Oregon.

Leo F. Dowley expects to be discharged from the service this month. He is the father of a baby boy, born August 12.

“I completed army service in the U. S. and ETO, doing mostly psychiatry in hospitals, and I am now in the midst of a VA-sponsored residency in NP at various hospitals around Boston," Stanley S. Kanter writes. “I met numerous Washington University doctors overseas and enjoyed working with them. I saw Jim Mann '40, who is resident at Boston State Hospital and enjoying his work. I am still single—and still get sleepy at formal meetings.”

Henry A. Uhlemeyer Jr. is in an office in the University Club Building, St. Louis, Mo.

Robert B. Best was discharged from the army in March. He will join the Higginsville Clinic, Higginsville, Mo. in December. “Expecting second child soon,” he writes.

John L. Cockrell served with the 82nd Airborne Division in ETO before his discharge in April. He is now doing general practice in Richmond, Mo.

Donald E. Smith is a First Lieut. in the medical corps, stationed at Station Hospital, Camp Polk, La.
Wallace Leibner is completing a nine-month appointment in pathology and beginning a two-year pediatric appointment in Brooklyn, N. Y.

Elaine K. Lince completed a nine-month residency in psychiatry at Langley-Porter Clinic in San Francisco and expects to open her office soon. She has two daughters, one two years old, and one two months old.

Stuart T. Ramsdell has been in the army since April, 1946, stationed at the Regional Hospital, Ft. Knox, Ky.

James H. Holt is chief of the surgical service and C. O. of the 89th Station Hospital in Korea. He is a Captain in the medical corps.

George E. Scheer is now doing post-graduate training in orthopedic surgery at the Veterans Hospital, Jefferson Barracks, Mo. “It was always a pleasure to receive the Quarterly while I was overseas with the navy and I want to thank the editors for a job well done,” he writes.

The Fresno County Board of Supervisors appointed Walter A. Rohlfing Jr., 29-year-old resident surgeon of the Fresno General Hospital, an assistant director of that institution, with the understanding that he will be named director on January 1, 1947. He is married and has two children. He interned in the Fresno Hospital, and after completing his internship he was made a member of the hospital staff and last July was named resident surgeon.

Stuart P. Lippert is in charge of the x-ray department of the medical section of the Reparation Center at Ft. Dix, N. J.

Gordon M. Todd was released from the Army in June. He is now doing student health work at the State College of Washington, Pullman. He writes, “We have two physicians caring for 6,000 students, and each sees about 50 clinical patients a day, as well as treating 15 to 20 patients in the College Hospital at all times.” He is married, and has a three and a half year old daughter, Karen.

Leslie Rose Jr. is resident physician at McGrieve Hospital Richmond, Va. and is also studying internal medicine. He was discharged from the army in May and will be in Richmond for three years.

Del Roy R. Davis is still a patient at Walter Reed General Hospital. Raymond Rose recently opened an office in Columbia, Mo., following his release from the army.

C. M. Witt was recently discharged from the army after thirty months in the service. His application has been accepted for a radiology residency in St. Louis.

Raymond Wheeler was discharged from the service in January and is now an assistant resident in medicine at Bowman-Gray School of Medicine, Winston-Salem, N. C. A daughter, Linda, was born to the Wheelers on July 2, 1946.

James Louis Petry is chief of the orthopedic section at the Station Hospital, Camp Polk, La. He is a lieutenant in the medical corps.

Marvin T. Pursell, 1st Lieut. MC, is in charge of the dispensary with the 628th Quartermaster Battalion at Heilbronn, Germany.

R. B. Hunt has recently reverted to inactive duty, USNR, and is now doing general practice at Madison, W. Va.

I. M. Greenberg is stationed at the Maxwell Field Regional Hospital, Montgomery, Ala. First Lieut. Green-
berg is in charge of the laboratory service.  

Patrick A. Lynch is a First Lieut. stationed at Tilton General Hospital, Fort Dix, N. J. in the radiology department.  

John W. Murphy, Captain MC, has been accepted for a rotating internship at St. Louis City Hospital in July 1947. "It may seem something like a disappointment to be starting on a junior rotating internship after being out of school two years, but I am really glad for the opportunity to get back into a teaching institution and am sure it can lead to bigger things," he wrote.  

Sharon Virginia Murphy arrived September 2, 1946 and promotion to captaincy came on September 10.  

"Should any of you decide to celebrate any of these events with me, please visit Miss Kelley's book store, order any drink you wish, and have her send the bill to me," he offered. (Editor's note: Miss Kelley gave us a coke on the house.)  

1945  

James C. Marr is senior medical officer at NOB, Dutch Harbor, Alaska. The Marrs expect a baby in January.  

George W. Protho has been on duty at the U. S. Naval Dispensary, Port Hueneme, Calif., for the past six months. He expects to go to the Veterans Hospital, Augusta, Ga. soon.  

Robert M. Bond completed his internship at Virginia Mason Hospital in Seattle, Wash. in June and was married July 10 to Miss Freda Bilert of Cleveland. He is now stationed in Tientsin, China.  

Thomas K. Hood is now medical officer for a division of four destroyer minesweepers in San Francisco. He is living in Hayward, California.  

Clarence E. Rupe is attending the Aviation School of Medicine at Randolph Field, Texas.  

C. H. Dabbs is at the United States Coast Guard Academy Hospital in New London, Conn. He writes, "This is my first tour of duty as an assistant surgeon in the U. S. Public Health Service and it promises to be a very pleasant and profitable assignment."  

O. M. Mackey, Jr. has been assigned to the Veterans Administration for his tour of duty with the army and at present is in Cheyenne, Wyo. at a 200-bed general hospital on surgical service.  

Helmuth E. Hoff is on temporary duty at Bruns General Hospital, Santa Fe, N. M. and expects to be transferred to Brooke's General Hospital, San Antonio, Texas.  

1946  

R. M. Farrier reports that the "P. H. S. is far better than the A. U. S." He is at the U. S. Marine Hospital Stapleton, Staten Island, N. Y.  

Ann W. DeHuff was married in October to Richard M. Peters in New Haven, Conn. He is a lieutenant in the medical corps, AUS. She is still interning at Johns Hopkins.  

L. J. Kirkham who is interning at Harper Hospital, Detroit, "likes it very much and recommends it highly for those interested in medicine or surgery. They have an extensive teaching program by excellent men, and good facilities for research for those who are interested."
WASHINGTON UNIVERSITY

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The School of Business and Public Administration
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The George Warren Brown School of Social Work
Benjamin E. Youngdahl, A.M., Dean

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The School of Fine Arts
Kenneth E. Hudson, B.F.A., Dean

University College
Willis H. Reals, Ph.D., Dean

The Summer School
Frank L. Wright, A.M., Ed.D., Director

Mary Institute, a preparatory school for girls, located at Ladue and Warson Roads, is also conducted under the charter of the University.

Note: Complete information about any of the schools listed above may be obtained by writing to the Dean or Director concerned.