Raymond E. Rowland was elected chairman of the Barnes Hospital Board of Trustees at the board's annual meeting Wednesday, April 23. Mr. Rowland succeeds Robert W. Otto, who was elected to fill the unexpired term of Edgar M. Queeny, who died July 7, 1968.

Mr. Rowland, who has been a member of the Barnes board for seven years, is former president and chairman of the board for Ralston Purina Co. For the past year he has served as general chairman of the Barnes Hospital Fund. Other new officers of the board of trustees include Edwin M. Clark, who was re-elected vice chairman, and Irving Edison, selected as vice chairman and treasurer. John Warmbrodt, chairman, and Irving Edison, selected as vice chairman, and treasurer. John Warmbrodt, chairman, and Irving Edison, selected as vice chairman of the board in 1963. On Jan. 1, 1968, he retired from the company.

The new Barnes chairman is also a director of Ralston Purina Co., Mercantile Trust Company National Association, Transit Casualty Company, Granite City Steel Company, Union Electric Company, and Norfolk and Western Railway Company.

In addition to Barnes Hospital, Mr. Rowland also is active in the Herbert Hoover Boys' Club of St. Louis, the United Fund of Metropolitan St. Louis, the Wisconsin Alumni Research Foundation, the National 4-H Club, and several other groups. Mr. and Mrs. Rowland have twin daughters, a son, and 12 grandchildren. When he is not busy with his St. Louis activities, Mr. Rowland visits his 500-acre farm in Belleview, Mo., where he breeds purebred polled Hereford cattle.

1968 Annual Report Emphasizes Barnes' Role in Community — Shows Hospital Spent $34,206,429 for Patient Care

"There is a destiny that makes us brothers. None goes his way alone."—Edgar Markham

"Barnes and the Community" is the theme of the Barnes Hospital 1968 Annual Report recently mailed to employees at their home addresses. The report shows that the hospital spent $34,206,429 dollars for patient care during 1968, and employed an equivalent full time staff of 2,886 persons.

Highlights of the publication include a report on plans for the East Pavilion on which construction will begin during the summer of 1969 with completion scheduled for 1971. Details of construction projects completed in 1968 are described, such as the elevator addition and admitting area in the Rand Johnson Building; the renovation of the fifth floor of Rand Johnson into semi-private and private accommodations for surgical patients, and two new intensive care areas for patients in the "crisis" phase of stroke and respiratory problems.

The problems of the "performance gap" between what is clinically possible and desirable and that which is actually delivered are expressed as the "crisis" phase of stroke and respiratory problems.

A tribute to Edgar M. Queeny, deceased chairman of the Barnes Board of Trustees is included in the annual report of the year's events. His contributions to the hospital are outlined, including his trip to Washington in the formative stages of Medicare to plead the cause of the university teaching hospital. (He sought allowances in the reimbursement formula for depreciation and teaching costs.)

"Again in 1968, Barnes broke all records for numbers of patients served," said Barnes Director Robert E. Franik in his message. (He referred to the 31,812 persons who were admitted in 1968, and the average daily Barnes census of 998 patients.)

Examples of concern for the community are shown, such as computerization of appointments for clinic visits, so that the clinic patient no longer faces lengthy waits before he sees a physician.

The report's emphasis, however, is on the hospital's role in the community in addition to its regional, national, and international services. During 1968 Barnes has emphasized an increased concern for the patient as an individual, while planning ahead to anticipate the demands of tomorrow.

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The problems of the "performance gap" between what is clinically possible and desirable and the actual delivery of this high standard of care to all is discussed. At Barnes, one solution is in intensive care areas, which are, basically, an assembling of the most sophisticated and efficient equipment, and most highly trained personnel to serve the sickest patients.

"In many segments of the economy today, demand creates supply. This is not so in medical care. As soon as a new treatment is found to be effective, everyone who is afflicted with the illness it alleviates wants to be treated. So, supply creates demand. . . . Shortages of hospital personnel continue to be a grave concern, though the number of hospital employees in the U. S. has more than doubled since 1947," the report points out.
$2 Million Received From Queeny Trust

Barnes Hospital and Washington University are each recipients of a $1 million gift from the private charitable Wingmead Trust set up by Edgar M. Queeny to be used for construction of the East Pavilion.

Through a unique arrangement reached before Mr. Queeny's death, portions of East Pavilion will be owned by the hospital while other areas will be owned by Washington University.

As chairman of Barnes' board of trustees from October, 1961 until his death in 1968, Mr. Queeny was instrumental in upgrading the facilities for patient care. He insisted also that the most sophisticated equipment be made available for dealing with disease and disability.

In 1964, he played a leading role in developing a new contract that binds together Barnes Hospital and Washington University in their mutual endeavors to advance research, teaching, and patient care.

Commenting on Mr. Queeny's service, Dr. William H. Danforth, Vice Chancellor for Medical Affairs of Washington University, said, "We in this medical center are grateful for Edgar M. Queeny's work, foresight, and generosity. He led a great hospital through an important period of modernization."

Raymond E. Rowland, chairman of the Barnes Board of Directors, said, "The recent gift of $2 million from the Wingmead Trust is a testimony to Edgar Queeny's faith in the strong ties between the University and the Hospital. I hope his generosity will inspire others to contribute to the new hospital."
Barnes Priest Jogs 26 Miles in American Marathon Race; Sings Beethoven's "Ode to Joy" to Pace 8-Minute Mile

“When the starting gun went off it looked like a huge train beginning to move, with the momentum and noise increasing as the first wave of runners took off followed by another and then another,” explained Barnes’ Catholic chaplain, Robert M. Krawinkel, a participant in the 73rd annual American Marathon Race held in Boston April 21.

Father Krawinkel entered the 26-mile 315-yard Marathon after a year of early morning jogging in Forest Park, initiated to take off some excess poundage and toughen up his legs for all the walking he does around the hospital. Beginning at half a mile a day three times a week, the 37-year-old priest increased his distance to two miles a day after two months, then to three until he was running ten miles at a stretch. After he’d clocked 14 miles at 8½ miles per hour, he decided to join the Amateur Athletic Union, take a physical examination and compete against 1,151 men who also had entered the 1969 Patriot’s Day classic.

The race started at noon in Hopkinton, Massachusetts, wound through Ashland, Framington, Natick, Wellesley, Newton and ended at the Prudential Center in Boston. Father Krawinkel had questioned other entrants as to how to stay on course as there were no markers along the route; but he soon realized it would have been impossible to get lost as the entire track was lined with spectators cheering the runners on.

“I had no idea it would be so much fun—it’s a real holiday with balloons and music,” he explained. “Families brought picnic lunches and children ran along the course offering us fresh oranges, ice water, and sugar cubes. Some even had garden hoses pulled down to the street to spray any runner who got overheated. But the temperature was 53 degrees that day so no one needed cooling off.

“I was running fairly easily at first and had completed 18.1 miles when I turned a corner and there were the hills of Newton going straight up to heaven,” the priest recounted. “My face must have really fallen as onlookers started yelling ‘You can make it!’ ‘Go on!’ I kept telling myself that I had to rest three times. It ended up taking me 40 minutes to do those 3½ miles!” he recalled.

“It was still five miles to the finish line, and I knew I really had to move, so I began singing “Ode to Joy” from Beethoven’s Ninth Symphony to help forget the blisters on my right foot and also to pace myself. I’d timed the Ode to an 8-minute mile in practice, and although it sounds flaky it really works in pacing your running. (‘Five-Foot-Two’ is good for pacing 8½ miles per hour too,” he added.)

“And that brings up a popular misconception,” the priest interjected. “People think you’re so winded when you run that you can’t even talk, much the less sing. But after you jog awhile you increase your vital capacity and getting your wind isn’t a problem. It’s your leg muscles giving way that causes the pain,” he explained.

“But, back to the race. Finally I could see the finish line. As soon as I’d crossed it I was so excited I kind of danced over to the timekeeper asking him if I’d made it, and he looked at me as if I were duncy, as half the field was already in. But when he realized I meant did I make it under four hours—the maximum time allowable to win a certificate for the Marathon—he gave me my time as three hours and 54 minutes which put me approximately 610 in the field. “I had no illusions about winning—I just hoped to finish,” laughed Father Krawinkel about his recent entry in the Boston Marathon. Caught in Forest Park during one of his bi-monthly workouts, the Catholic chaplain admitted he hasn’t set any speed or distance records, but he has lost 38 pounds in his year-old jogging program.

Two women completed the Marathon ahead of Father Krawinkel, a blow to his male ego, he admitted. “Women aren’t allowed in the race so the girls weren’t legal entrants, but it was still depressing seeing a petite airline stewardess run right past me.”

Washington University Medical School sophomores Joseph C. Peden and Alan R. Cohen also participated in the Marathon; however, Peden didn’t finish under four hours and Cohen quit part way through the race. “This wasn’t my first race,” he said, “I’ve finished before. It’s part of my annual rites of spring.”

When asked if he intended to continue his three time a week jogging schedule now that the Marathon is over, Father Krawinkel produced a Snoopy cartoon with the smiling canine announcing: “Jogging is my thing.”
Sixty-six employes went back to school last semester with $3,971 of the tab picked up by Barnes, as part of the tuition reimbursement program initiated to help employes do a better job and advance their position through additional education.

Any permanent fulltime employe may apply for the program if the courses he wishes to take are pertinent to his job and he earns a grade of "C" or better. Courses must be taken wherever they are available for the lowest tuition and the student is reimbursed 50% of the cost at the completion of the term. If a student completes a degree or certificate program under the tuition reimbursement plan, Barnes rebates the remaining 50% of the total when he graduates.

MARY NICHOLS

Pretty blond Mary Nichols is the only girl in her graduate finance class at St. Louis University. "That’s not why I’m taking the course," she laughed, "there just aren’t many girls interested in post graduate studies in business administration."

An alumnae of North Texas State University, Miss Nichols took a dietetic internship at Barnes in 1965 and has spent the last three years as a staff dietician, currently as assembly line supervisor in the main kitchen.

"I want to stay in the dietetics field but I’d like to get into the administrative end," she said. "With a master’s degree I can qualify for a position with more responsibility sooner than I could through on-the-job experience," the attractive dietitian explained.

"I’ve already learned a lot just from the other members of my class," Miss Nichols said. "Assembly line problems at my hospital are similar to those engineers face at large manufacturing plants, so we can all benefit from each other’s experiences." She is in the second semester of her master’s program and will get her degree after another two years of night school classes.

"The dietary department has been great in arranging my work schedule to avoid conflicts with my classes, but it’s hard finding enough hours to study, write papers and do a good job here," Miss Nichols admitted.

RICHARD SCHELLHASE

Coming back from lunch with a textbook under his arm, cost accountant Richard Schellhase admitted he is probably one of the most enthusiastic advocates of Barnes’ tuition reimbursement plan.

“When I joined the hospital in 1964 my department suggested I go to night school to earn my certificate in accounting. I started the following fall. Since that time I’ve taken two courses each semester, and after spring term I’ll have 42 credit hours toward my associate degree,” the tall student explained.

"Two courses at one time are all I can handle, because we have a lot of overtime here in the department and I’ve got to make allowances for that. Naturally, my job comes first," he emphasized.

As a permanent full-time employe, Mr. Schellhase has received $370 from Barnes for half his tuition costs over the past three years, and when he earns his certificate he will be reimbursed for the other half.

A graduate of the four-year program of Sanford Brown Business College, the 28-year-old employe did general accounting at another hospital in the city before joining Barnes.

“I definitely plan to go on for my bachelor’s degree,” he said, "as upon completion of my certificate program I will have finished all the required accounting courses and will have only 60 hours to go.”
RICHARD BEAUCHAMP

When Richard Beauchamp joined Barnes 10 years ago as a technician on the heart-lung machine in the Rand Johnson operating rooms, he was one of a team of two physicians and three technicians responsible for readying the five-foot instrument for surgery and cleaning it after each use. As cleaning alone took over six hours, Mr. Beauchamp often referred to his job as that of a "well-paid dishwasher," but his duties were much more inclusive than just maintenance of the machine.

Over the last decade the heart-lung machine has been streamlined and the 34-year-old technician now handles the sophisticated equipment alone. Disposable parts have eliminated the lengthy cleaning operation, and Mr. Beauchamp can set up the machine in 30 minutes. As a result, he spends more time studying the why and wherefore of heart-lung activity and has gone back to school to do just that.

Currently enrolled in sociology, history, quantitative analysis and logic, Mr. Beauchamp is supplementing knowledge gained as a Navy medical corpsman for eight years. He has completed 60 hours toward the 120-hour requirement for his bachelor of science degree. "The courses have really been helpful," he reported. "Chemistry helps me in doing acid base studies; calculus and physics apply to setting up fluid systems ... everything I've taken has proven applicable on a day-to-day basis," he said. "I wish I'd taken advantage of tuition reimbursement sooner."

ARNETTA DARREN

A letter announcing that Mrs. Arnetta Darden had completed the requirements for her master's degree in medical-surgical nursing and will graduate June 9 with honors from Washington University lay in the desk in her office.

Pleased but modest, the nursing care advisor for eye, ear, nose and throat said that "school work comes fairly easy for me and I love my classes."

Even so, a master's degree came only after years of hard work as Mrs. Darden balanced a full-time nursing job with her studies for six years. "I did it the hard way," she admitted. "Most women get their nursing education and bachelor's degree at the same time. I took my basic nursing training at Homer G. Phillips and then came to Barnes full time in 1964 and started working on the undergraduate program at Washington University in 1967. I got my B.S., then I started on my master's.

"There's a stimulating environment for learning here," Mrs. Darden noted. "You have to be working on a bachelor's degree to become a head nurse, and a master's is important for nursing care advisors. But the hospital is very cooperative in trying to arrange your days off to coincide with your class schedule.

"Going on for a Ph.D.? ... I don't know. I'd like to, but right now I'm looking forward to my first summer in ages without homework."
Britisher Describes American Hospital As Viewed From Abroad

Dr. Hayward Post, associate ophthalmologist at Washington University in St. Louis, is a member of the medical faculty of the University of Manchester, England, and has taught hospital administration in all western European countries except Denmark.

"There are significant differences on the nursing side also," he said. "Britain has adhered so far tenaciously to the doctrine of Florence Nightingale in nurse training. The person responsible for organizing the training is called the nurse tutor. The highest post in the nursing hierarchy is still the traditional 'matron' who is normally both physically and administratively a very powerful person. Dr. Chester calls the American emergency room a "poor man's clinic in disguise." "People use it for outpatient care," he said. "They have no need to do this in England, because the English can go to the outpatient clinic free."

"One of the key questions Americans and British must ask about their health care systems," the professor said, "is how much has to be centralized in our interest and how much should be left alone. Decentralization cannot survive in a time of increasing mobility. We are the ones who have created centralization, not the government that has thrust it on us.

"There are a few problems and facilities in other countries. All human beings who only live in and know one country develop blinkers which prevent them from seeing problems and solutions outside their normal experience."

"Sometimes, class discussions became rather heated, it is reported. The students wanted to make sure the Englishman fully appreciated the American way of handling problems and community needs. As one young man put it, "When he sang 'God Save the Queen,' we chorused back with 'God Bless America.'"

In England, Professor Chester is chairman of the department of social administration of the University of Manchester and has taught hospital administration in all western European countries except Denmark.

"In making comparisons between teaching hospitals such as Barnes and an equivalent teaching hospital in Britain," the Britisher cautioned, "one has to be careful in distinguishing titles and the reality of the job. For example, in one of the largest teaching hospitals in London, the most important executive with full administrative responsibility is called 'clerk to the governors.' (governors are equivalent to an American board of trustees). Dr. Chester labels this 'inverse snobbery.'"

British Hospital Describes American Hospital As Viewed From Abroad

Dr. Hayward Post Dies in Connecticut

Dr. M. Hayward Post, associate ophthalmologist at Washington University in St. Louis, died on April 26 at Winsted, Connecticut, at the age of 82. Dr. Post, who was also professor emeritus of clinical ophthalmology at Washington University, was born in Philadelphia and spent most of his career in St. Louis. He received his medical degree at Johns Hopkins University in 1912, and came to St. Louis as an intern at St. Louis City Hospital in 1912. In 1913 he went into private practice. For 31 years beginning in 1921 Dr. Post taught in the medical school. He retired in 1952 with the title of professor of clinical ophthalmology. At the time of his retirement he had offices in the Doctors Building, 100 North Euclid Avenue.

Dr. Post died in St. Louis, where he had been living since 1939. Surviving Dr. Post are his wife, Mrs. Dorothy Rice Post; a son, Martin H. Post III of Jonesboro, Ark., two brothers and three sisters.

Busy Barnes Technician Sings for Fun

Four years ago, when he was a freshman at O'Fallon Technical High School, Central Service Technician Ernest Allen began singing in his school choir. Since then he's become more interested in choral singing as a hobby and sings bass with the Cosmopolitan Singers, the Festival Chorus and in the choir of Wagner Church of Christ.

That's in his free time. Ernest is also a full-time student at the University of Missouri and works eight hours a day at Barnes in central supply.

In high school Ernest sang with the choir for four years and was the choir president for two. Near the end of his freshman year he joined the Festival Chorus, a choral group of high school students organized by Helen Louise Graves, supervisor of music for the St. Louis Board of Education. Two years later Ernest was invited to join the Cosmopolitan Singers, the adult group directed by Miss Graves.

"We sing all types of music," Ernest said, "musicals, light opera, symphonies, spirituals—my experience these past four years has made me appreciate every kind of music."

The choral groups often sing with the St. Louis Symphony Orchestra. "We sing the Messiah at Christmas and last Labor Day we joined the Municipal Opera chorus as a chorus for its 50th Anniversary program. This spring, on the evenings of June 17 and 18 we are doing Beechower's Ninth Symphony at Southern Illinois University at Edwardsville," the 18-year-old bass said. "Originally, the words were written in German, but we will sing it in English," he added.

Singing rehearsals take a lot of time—two and a half hours on Tuesday evenings for the Cosmopolitan Singers, a 100-voice group, and two and a half hours on Saturday morning for the Festival Chorus, and a couple of hours on Saturday evening for the church choir.

Besides singing and working the 3:30 to 11:00 p.m. shift in central service, Ernest is enrolled as a freshman at the University of Missouri at Rolla, where he is studying to become an accountant.

Balancing a lot of activities in a heavy schedule isn't new. In high school Ernest played first string football and was on the varsity track team. He was also a member of the rifle team and president of his senior class.

Ernest sings while he works—"When they let me," he said. "But I've got a lot of volume and if I get too loud, Mr. Bradford, my supervisor, tells me he enjoys it but to sing more softly—we don't want to wake up any sleeping patients."
Sleeping Beauties Dream Around the Clock in Sleep Study

Have you ever wanted to sleep around the clock, or just rest for an entire 24-hour period? Volunteers in the sleep experiments now being conducted at Barnes on the second floor of Renard Hospital are doing this, and finding out that not only does it sound desirable, it’s actually possible to do it.

A research team consisting of Dr. Ekkehard Othmer, M.D., Ph.D., in experimental psychiatry who directs the Renard sleep laboratory; Dr. Juan Corvalon, a psychiatric resident; Mary P. Hayden, R.N. and research assistant; Robert Segelbaum, computer programmer; and three research technicians, has for the past year been studying polygraphic brain and muscle tracings made on sleeping and resting subjects during 24 and 48-hour periods to gather facts about dream activity.

The Barnes group is the only one in the U. S. doing 24-hour studies, undertaken because Dr. Othmer felt there was a gap in information gained from shorter study periods which omitted the daytime portion of the 24 hours. “I was very pleased when the idea of this new approach in sleep research was supported by the interest of Dr. Robins, chairman of the department of psychiatry and his senior staff,” he said. The project is being conducted by the Washington University department of psychiatry under a NIMH grant.

Use of Substitute Hearts at Barnes is Discussed During Cooley Visit

Researchers working at Barnes sometimes interrupt her sleep in an effort to determine whether it is necessary for people to dream.

“Everybody dreams during this cycle,” Mrs. Hayden said. “We are particularly interested in why people dream every 90 minutes and whether it is necessary for people to dream. When a subject is allowed to go back to sleep again after being deprived of a dream he often dreams right away, and his dream sequences occur closer together. It is difficult to wake a

This complicated equipment makes a polygraphic recording of a subject’s brain waves during sleep which enables researchers to tell when sleep is light, deep, or a dream is occurring.

Studies show normal people dream approximately every 90 minutes during sleep with a dream lasting anywhere from 10 to 30 minutes. “From our studies, we think the REM periods, (the scientific term for a period of rapid eye movements that accompany a dream) occur in about 90-minute sequences when people are resting as well as when they’re sleeping,” Dr. Othmer said.

“To sleep, perchance to dream,” could be the hope of this young lady who is sleeping for science in a 24-hour experiment.

“The daytime rapid eye movements are harder to discriminate from other eye activity not classified yet; however, we have indications that the REM periods do occur during the day which would mean that the so-called sleep-dream cycle is not specific to sleep, but is a general activity cycle of the brain.”

Those sleeping for science have included medical students and, recently, student nurses. “When we started, we didn’t know whether it was feasible to have someone sleep for 24 hours,” Mary Hayden explained. “We didn’t know if people would sleep the clock around, whether they would get claustrophobia or would dream during the day. We quickly found out that they would sleep, rest and dream beautifully.

“We studied three female students under four kinds of conditions,” Dr. Othmer said. “We observed them in a normal horizontal sleeping position in a dark and in a lightened room, sitting up in a chair, and woke them every time they started to fall asleep for more than a few minutes to see if they would dream without previous sleep.”

“There are four stages of sleep,” said the research assistant. “Stage one is drowsiness or light sleep, the second stage is moderate sleep called spindle sleep because of the spindle-like EEG polygraphic tracings made during this stage, stage three is called mixed delta and spindle sleep or sleep sleep, and stage four, called delta and refers to very deep sleep. During each of the stages of sleep the EEG records a distinctive polygraphic pattern.

“Normally, when you go to bed you are in a waking stage. Then you go to stage one, two, three and four of sleep, then back down to three, then two and then you have a dream. After the

Heart transplant authority Denton A. Cooley, M.D., at the medical center on May 12 as the Second Everts A. Graham Visiting Professor of Surgery, said it is conceivable that heart transplant surgery will someday be as routine as open heart surgery and other procedures that were once thought revolutionary.

During the Cooley press conference, in answer to a question about heart transplants at Barnes, Dr. Walter F. Ballinger, Barnes surgeon-in-chief, indicated that the hospital is well prepared to begin at any time with heart transplant surgery although he made no prediction as to when such an operation might take place here. Dr. Ballinger also said that work that may lead to an artificial heart replacement of a hopelessly damaged human heart is beginning at Barnes. Dr. Cooley, professor of surgery at Baylor University College of Medicine, delivered two lectures to medical students and staff members during his visit. The first was on “Present Day Techniques in Vascular Surgery” and the second was on “Clinical Experience with Cardiac Transplantation.” In 1967, Dr. Cooley received from the International Surgical Society the Rene Leriche Prize for the most significant contribution to cardiovascular surgery. He has performed more heart transplants than any other surgeon in the world.
Barnes Obstetrician Shoots English Prince -- An Unlikely True Story

Prince Charles, the newsworthy future king of England, was the photography subject for Dr. Robert Sokol, third year resident in obstetrics, during the latter’s recent vacation trip to England. In a combination of lucky coincidences Dr. Sokol was asked to photograph the 20-year-old son of Queen Elizabeth as the Prince talked with craftsmen and viewed the exhibits on display at the Crafts Center of Great Britain in London. Above, Prince Charles discusses a ceramic exhibit with an unidentified artisan.

"Lunched with Prince Charles" reads the Robert Sokols’ travel diary of March 15, recounting a lucky chain of events that led to their introduction to the 20-year-old heir to the throne of England.

Dr. Sokol, third year resident in obstetrics, and his wife, Roberta, who works in the medical library, were on a two-week trip to London when they stopped at the Crafts Center of Great Britain to look at the handmade silver jewelry. Upon entering the shop they were approached by the board chairman who explained the center was closed that day as the next Prince of Wales was expected. Then, seeing the two cameras Dr. Sokol carried and learning he had done professional photography, the chairman asked the couple if they would stay and take pictures during the Prince’s visit as the center had neglected to hire a local photographer.

The Sokols agreed and spent the next two hours photographing the Prince as he talked to various craftsmen whose work was on display. A reception following the private showing included a buffet luncheon with wine, cheeses and pate de foie gras during which the Sokols were able to speak personally with Prince Charles. "We were very favorably impressed with his poise and self-assurance. He is an excellent conversationalist," Dr. Sokol said.

"Even though he might talk with someone for less than a minute, he asked questions that showed he was really interested in what he was doing," his wife added. "One had the feeling that he had really met the Prince, and not just that he had been introduced."

"Prince Charles is handsome, much more so than I’d seen him in pictures, including my own photographs," said Dr. Sokol. "He’s quite athletic looking with the largest hand I’ve ever shaken.

"He dresses conservatively," Roberta Sokol interjected. "Dark suit, subdued tie, but his hair is long—not hippy length, but it curls around his ears and brushes his shirt collar in back." In conversations off and on during the reception the Prince talked to the Sokols about a variety of subjects comparing England to America. He seemed particularly interested in whether paper clothes had caught on in the States and noticed the American obstetrician was wearing a British tweed jacket.

In a conversation on student unrest the Prince said he does not condone pickets but felt organized demonstrations might be the only way students could get administrators to listen, although he admitted they might also antagonize potential sympathizers.

"He seemed very bright, much more so than he is generally given credit for," Mrs. Sokol said, "although a good deal of his presence may be training. He seems to be a lot like the popular stereotype of his father, Prince Philip—shrewd and interested in a wide variety of subjects."

BARNES HOSPITAL
Barnes Hospital Plaza
St. Louis, Mo. 63110

Seminar on Economics Of Health Care Held

"Economics in Health Care" was the title of a public relations seminar held at Barnes Hospital’s Queeny Tower April 16-18. The seminar was sponsored by the Academy of Hospital Public Relations, with public relations directors from hospitals throughout the U.S. in attendance. Co-sponsor of the two-day program was Washington University School of Medicine’s Graduate Program in Hospital Administration.

Many top professionals in hospitals and public relations spoke during the sessions, including Mrs. Anne R. Somers, research associate in industrial relations at Princeton University.

Other highlights included a panel on the acute care hospital’s role in relation to comprehensive health planning, chaired by Dr. C. Howe Eller, director of the St. Louis County Health Department, and a talk on planning by Dan McDonald, executive director of the Health and Welfare Council of Metropolitan St. Louis and the Metropolitan Hospital Planning Commission.

Edward Friedlander, assistant director, Health Services and Mental Health Administration, Washington, spoke on the regional medical program, explaining its origins, the present thrust, and its aims for the future.

"Communicating with Inner City Residents on Health Care Problems" was the topic discussed by Howard Woods, editor of the St. Louis Sentinel, a leading Negro newspaper, who formerly was associate director of the U.S.I.A. in Washington, D.C. Mr. Woods challenged the group to find ways to give the resident of the inner city a "piece of the action," and urged them to consider the pride and dignity of the individual, not with funds given in the form of handouts, but with opportunities for these persons to rise to positions of responsibility themselves.

Dr. Malcolm Peterson, assistant physician at Barnes, explained his work with the Pruitt-Igoe Men’s Progressive Club Medical Action program, which operates a clinic nightly in the Pruitt-Igoe housing project.

Richard Slottow, vice president of Presbyterian St. Luke’s hospital in Chicago, spoke on employe problems; Harold Hinderer, controller for the Daughters of Charity, talked on financial reimbursement of hospitals; Charles Gold, Washington University, explained how to approach foundations for funds; Theodore E. Chester of the University of Manchester, England, gave the group "An English View of U.S. Economics in Health Care."

James O. Hepner, director of the graduate program in hospital administration, gave the introduction. Robert E. Frank, Barnes’ director, extended the hospital’s greeting.