New Health Plans Offer Employees Better Value

As of August 1 employees who subscribe to Blue Cross through the hospital began receiving more comprehensive in-hospital benefits than they had in the past at approximately half the price they were previously paying. Also, for the first time, a group program for Blue Shield and Blue Major coverage has been made available to fulltime employees. The total cost of coverage in all three programs is only slightly higher than the cost of Blue Cross alone under the old contract.

The increased coverage with reduced cost of Blue Cross was made possible by the introduction of a new plan designed specifically for Barnes employees. The contract was set up to supplement the in-patient benefits provided by the hospital to all full-time permanent employees and their dependents when hospitalized in Barnes.

Called 70-30-100%, the new Blue Cross membership plan includes full coverage for items billed by a hospital to subscribers hospitalized up to 70 days in medicine or surgery, or 30 days in psychiatry, and covers 100 percent of the cost of services. The latter category, which accounts for 50 percent of a patient’s daily charges, includes such items as X-rays, radiation and shock therapy, anesthetics, electrocardiograms and electroencephalograms, metabolic labs, and clinical and surgical and pathology tests if billed by the hospital. None of these areas were covered under the old Blue Cross program. Standard services covered in the past for which coverage will be continued under the new contract include: operating and delivery charges, dietary service, casts and dressings, medicines and drugs, nursing care, and routine lab work.

Coverage under the new membership plan may be applied to any hospital where the employee or a member of his family may be hospitalized. This is a distinct advantage over the former plan which restricted major coverage to Barnes, affording only minimal coverage for an employee’s dependents when they were patients at St. Louis Children’s Hospital or for emergency out-of-town hospitalization.

Cost of the Blue Cross 70-30-100% program to employees is $2.28 per month for a single person and $5.95 for a family. Under the old program the Blue Cross rates were $4.73 and $11.38 respectively.

You've Come A Long Way, Princess...

Many Americans have been brought up to believe that a princess is the kind of girl who can get her dainty foot into a glass slipper or lose a night’s sleep because there’s a pea under her 20 mattresses. But there are also modern-day princesses, not of the fairy tale variety, who are free to jet around the world, and keep up a schedule much too active for footwear so fragile as glass.

Fadwa Mohamad Alkadri, an 18-year-old Arabian princess from Qatar, an oil-wealthy sheikdom on the Persian Gulf, better fits the latter category. A recent patient in Queeny Tower, Princess Fadwa underwent plastic surgery to her left eye to repair damage from an accident.

During her stay here, the vivacious Princess was most gracious and patient about answering American-type questions about life in a royal family. Yes, the Princess lives in a palace, but she described it more as “a large villa with about 30 rooms . . . a very nice home, but not a picture book castle.” Through her family does have servants, they are more like live-in domestic help than bought and sold commodities bound into lifelong slavery.

When traveling in Qatar or other areas of the Middle East, Princess Fadwa is always accompanied by at least one servant, both for her protection and as an observance of age-old protocol. When she travels in the West or in other areas of the world distant from Arabia, the Princess may be seen unescorted and, if she chooses, can remain completely anonymous. However, her identity usually cannot long be kept secret, because when crossing political borders, she must show her special diplomatic passport recognizing her as a member of an Arabian royal family and giving her diplomatic immunity.

Prior to her stay at Barnes, Princess Fadwa travelled extensively throughout Europe, and after leaving St. Louis she flew to Southern California to take college exams she missed this spring. A third-year student at Santa Clara College, the Princess was majoring in political science. (She attended the public grade and high schools in Kuwait, the capital of Arabia. Fadwa insisted she be treated exactly like everyone else in the class to the extent that she would correct her teacher when the latter inadvertently called her “Princess” in front of the other students.)

Three years of college will complete the Princess’s formal American education as she is to be married late this summer to the son of Sheikh Ahmad ibn Tli al-Thani of Qatar. The wedding will be a civil service, followed by a large reception in the palace of the bride’s family. At the ceremony, the bride changes her engagement ring from the right hand to the left. The groom pays his father-in-law a predetermined sum of money for the privilege of marriage into the family.

After she is married the Princess will live in Qatar with her husband but she will have no official duties. Last year she opened a boutique in Beruit where she sells designer clothes from Paris and London to Middle Eastern shoppers. The company she represents is Shubette of London, for whom she also designs daytime dresses and evening clothes.

The fifth youngest of seven children (all princes and princesses), Fadwa speaks and writes her own native Arabic, and, in addition, is fluent in English, French, German, and Persian. In the last several years she has traveled extensively and loves to shop in new stores and cities, picking up Western clothing to wear in the privacy of her own palace. The Princess explained that Western attire is acceptable even in the Bedouin section of Qatar, but the fashions must be conservative.

Princess Fadwa is always called by her title in Arabia, but close friends may drop the title and call her by her first name or a nickname. Others solve the problem of address in different ways. When a visitor arrived in Fadwa’s Queeny Tower suite, the housekeeping maid who was cleaning her room, simply yelled, “Hey Princess, you’ve got company.”
Health Plans (Con't from page 1)

Because the Blue Cross policy is integrated with the hospital employee benefit program which provides free hospitalization on ward service for its employees while patients here, Blue Cross can offer complete coverage for a lower premium rate than it could if a part of the bill wasn’t paid for by Barnes. (When an employee or a member of his family is admitted to a hospital other than Barnes, Blue Cross picks up the entire portion of the bill covered by the membership. Therefore, it is in the employee’s best interest to come to Barnes for treatment as it will tend to keep the Blue Cross premium low.)

For employees wishing coverage over the basic Blue Cross program, Blue Shield is now offered to Barnes employees on a group basis at $2.75 per month for a single person or $5.50 for an employee and his dependents. Advantages of the Blue Shield program over the old membership offered to employees only on a transfer basis include increased payment of doctor’s fees on hospital visits for the initial days of the patient’s illness. Previously, Blue Shield paid $5 a day for each of the first seven days of the doctor’s visits, with $3 a day for the remaining 63 days. Under the new program doctor’s visits are covered at the rate of $12 for the first hospital day, $8 for the second, and $4 for the remaining 68 days.

For intensive care cases $15 is provided for the first day of doctor’s visits, $10 for the second, and $6 for the third through fifth days the patient’s condition requires intensive treatment. Increased compensation for radiation therapy is also an added benefit of the new program. In the past compensation was limited to $100 per year, now it has been upped to $400 in any one 12-month period. The new Blue Shield program also provides up to $200 per year for specified surgical procedures.

If 75% of the eligible hospital employees sign up for Blue Major, as well as Blue Cross and Blue Shield, the maximum coverage will be made available to Barnes employees; however, it cannot be contracted for on an individual basis. The purpose of Blue Major is to pick up where the basic programs end and protect the employees from financial disaster in a serious or prolonged illness. Covering such items as prescription drugs and doctor’s visits out of the hospital, private duty nursing, sickroom appliance rental, and fees for physicians over the Blue Shield maximum, the plan is set up as the optimum in health care benefits. The Blue Major program has a $100 calendar year deductible with a $20,000 lifetime maximum, the contract pays 80 percent of the total, the patient pays only the remaining 20 percent. Cost is $1.15 per month per individual and $3.45 per employee plus dependents.

An important reminder for employees if Blue Major goes through is to receive payment, receipts for drugs, equipment rental, etc., must be turned in with the claim. Therefore, it is important to keep these receipts from the beginning of an illness.

Employees who have not already signed up for the Blue Cross, Blue Shield and Blue Major policies may do so in the Personnel Office.

New OR Technicians Celebrate Graduation

Graduates of the first class in operating room technology were guests of honor at a tea held July 2 in the nursing residence. From left: Mrs. Joan Rueder, Everett Wright, Mrs. Alyse Chatman and Mrs. Evelyn Mandleby. The four trained for six months in the McMillan and Barnes operating rooms under the direction of staff development instructors, and supervised by registered nurses. OR technicians are a relatively new category of employee, introduced to perform many of the technical skill jobs involved in the preparation and execution of surgical procedures. This gives the operating room nurse more time for supervisory and teaching functions, as well as giving more personalized care to the patient.

Problems Anyone?
Write: Dear Pam

P. S. For Private Secretaries, a publication of the Bureau of Business Practice, Inc., quoted a Barnes Hospital secretary in their July edition. Miss Pamela Mellor, administrative secretary in the public relations office, replied to a problem sent in by a reader on how to handle a new boss who criticizes the employee, in front of other employees, for petty mistakes.

Although Miss Mellor didn’t get the cash for first prize, her answer was runner-up, and both answers were so applicable to any boss-employee relationship that they seemed worth quoting. The first prize, which went to a Dallas secretary, was for this comment: “I think the solution lies in an honest discussion with her boss concerning the way he likes to have the work handled. If the secretary will let her boss know that she is truly interested in working with him to solve problems, they can establish a workable relationship.

Miss Mellor’s advice was: “How many times does the secretary make these ‘petty’ mistakes? And are they really petty? Perhaps she is doing a little faultfinding herself and being too sensitive to ‘rather minor’ and possibly, constructive, criticism.”

She says the easiest way for the secretary to get the boss to criticize her in private is to ask him for a private session in his office where she can explain her feelings. “But,” she adds, “there is a way she can get him to stop criticizing entirely, and that’s not to give him any reason to criticize her.”

Party Climaxes Renard Craft Project

Hand-finished salad bowls, burlap flowers, throw pillows made from wash cloths and yarn, embrodered tea towels, and copper-tooled wall hangings are some of the items Renard patients made and displayed in the occupational therapy department June 27. After completing their craft projects, the approximately 40 patients planned an afternoon party, made invitations and handled the publicity. The result of a month long craft project, the various items were made in the therapy workshop on the first floor of Renard under the direction of two student occupational therapists, Miss Karen Pettit (shown here) and Miss Ginny Porter. Both are fourth year students at Washington University.
X-Rays Reveal Secrets Kept Under Wraps Over 3000 Years

It wasn’t an error in bookkeeping. The radiology record on the second floor of Mallinckrodt listed the age of the patient as 3320 years. And she is, certainly giving her the distinction of being the medical center’s oldest patient. But Hent Udju was hardly in a position to brag about it. Mummified around 1370 B.C. the Egyptian corpse was X-rayed here recently in preparation for display in the Museum of Science and Natural History.

From hieroglyphics on her sarcophagus it was known that the body was that of a woman named Hent Udju. Ornametnation indicated she was a high priestess or princess. The entire text of the hieroglyphics is currently being translated, but it will take several months to complete. Hent Udju had been entombed in a rocky cave near Thebes in Egypt and lived during the dynasty of Amenemhet III. She came to Washington University as a gift around the turn of the century, and is currently on loan to the Natural History Museum.

The X-rays were ordered in the hope of obtaining additional information about the mummy. Assistant radiologist Tom W. Staple, who is particularly interested in ancient pathology, studied the films and estimated the woman was between 21-35 years when she died. She had suffered a skull fracture and several teeth had been knocked out, but it was impossible to tell whether the head injury was the cause of death, or inflicted afterward.

Dr. Staple remarked that the bones are in excellent condition. It is surmised that fairly thick skin still remains in the region of the thighs and neck, and there may be skin around the skull also, but it is too thin to show up on the X-rays. Often entombed with royalty or religious officials, were amulets, bracelets and jewels. None of these items were visible in the X-rays of Hent Udju but a small opaque, horseshoe-shaped pin did show up wrapped among the linen folds.

The length of time the body has been mummified remains a mystery, though she is estimated to have been buried around 1370 B.C. This date is suggested because the brain of the mummy, although considerably shrunk, is completely intact. (It wasn’t until the 18th dynasty that mummmiers learned to remove the brains through the nostrils.) Later in history, individual organs, such as the liver and spleen, were removed from the body. They were then individually wrapped in linen, or placed in canopic jars, and put back in the body cavity. In the mummy recently X-rayed, the viscera had not been preserved and there was no evidence of the canopic jars.

A 3320-year-old mummy was brought to Mallinckrodt for X-rays recently to learn what lay under the folds of linen encasing her corpse. In the top photo, Armand Diaz, (right) technical director at Mallinckrodt, and Gary Brink, supervisor of the second floor, carefully arrange the mummy on the X-ray table. Below, assistant radiologist Tom Staple (right) discusses the X-rays with Jack Maxfield, exhibit specialist from the Museum of Science and Natural History, where the mummy will be displayed later this year.

It is hoped that a portion of the mummy can be unwrapped for the display, scheduled to open late in 1969. Positive prints of the X-ray taken at Mallinckrodt will be shown adjacent the sarcophagus, so visitors can see what lies inside.

Experimental Nurse Internship Program To Be Evaluated

To close the sometimes wide gap between the skilled and confident performance of the veteran floor nurse and that of the recent nursing school graduate, a pilot study program in nurse internships is in its second and final year at Barnes. The innovative program is one of only several in the country and reportedly the first of its kind in the Midwest.

Miss Joyce Brueggeman, chairman of the program, emphasized that the organization of the internship program does not imply any existing deficiencies in the education of student nurses, but attempts to provide further clinical experience for the recent graduate prior to assuming her full professional role. After the close of this year’s session on August 8, the entire program will be evaluated to determine the advisability of offering it on a permanent basis.

“We treat the interns as new staff members rather than as students,” Miss Brueggeman said. “Our emphasis is on developing skills and perfecting procedures to give the new nurse practice and confidence in the training she learned as a student.” Semi-weekly conferences and an initial day of orientation provide the bulk of classroom teaching for the interns as the emphasis of the course is on working directly with patients and members of the nursing staff.

Under the supervision of the various nursing care advisors and Miss Brueggeman the interns receive four weeks of training on general surgical divisions and four more on general medical floors. Work on the specialty floors is not included in the internship.

The 40-hour-a-week program is arranged so that there are two or three interns on each division. Interns are often appointed team leaders on the nursing divisions to give them experience in working with other nursing personnel and to help them learn how to handle responsibility for a number of patients.

The 1969 internship program began June 16 with 23 nurse registrants, 19 with baccalaureate degrees and 4 with associate degrees. Thirteen are from Southern Illinois University. They are: Misses Gerry Brown, Sherry Brown, Bonnie Cox, Barbara Dancy, Charlotte Eickhoff, Betty Hill, Cynthia Lapicola, Sandi Macknick and Glenda Mann, Mrs. Alice Delahandy, Mrs. Susan Heger, and Mrs. Jilaine Henderson.

Interns from Washington University are: Misses Virginia Crandall, Elizabeth Gordon, Meredith Pfanschmidt, Cynthia Schum, Vicki Keller and Mrs. Sandra Shirley.

Other nurses in the program are: Mrs. Clara Cavin from Forest Park Community College, Miss Joan Fennewald from St. Mary’s College of O’Fallon, Miss Diane Stackle and Miss Jane Veith from Mercy Junior College.
A Patient Visits the Clinics

"For 37 years I've been coming to Barnes when I've been sick and I feel at home here."

—Mrs. Mary E. William

During the early morning hours in the Wohl Clinic Building, work doesn't slowly gather momentum, achieving the day's pace only after the first coffee break. At 8 a.m., patients are in the waiting rooms on their appointed floors. New patients or those without appointments have already started signing in at the screening clinic on the first floor and take their places on the padded benches around the large room. At 9:30 a.m. Mrs. Mary E. William arrives, accompanying her sister, Mrs. Willie Boyken, brought here in an ambulance. The ambulance drivers take Mrs. Boyken to the second floor surgery clinic, while Mrs. William stops at the Medicare desk for her payment card.

Once upstairs, Mrs. William, who herself has been a clinic patient for 37 years, gives her sister's Medicare slip to the floor cashier, Mrs. Betty Clark. In 1968 there were 245,602 patient visits made to the 70 general and specialty clinics and labs situated on the first six floors of Wohl. The clinic with the largest number of patients is general medicine with 20,148 visits recorded last year, not including some 7439 trips to the clinics for medical specialties, such as allergy, hematology and renal. In 1968 the eye clinic drew 26,506 visits, including 4500 to the screening clinic on the first floor of McMillan.

After seeing the cashier, Mrs. William checks in at the reception desk where her computerized appointment is confirmed by Mrs. Margaret Taschler, clinic secretary. (Ward clerk Faye Loucks is at left.) Opened in May, 1961, the David P. Wohl Jr. Memorial—Washington University Clinics are housed in an 11-story building with five floors equipped for medical research, and the remainder of the floors for patient care. The clinic provides medical care on an out-patient basis, primarily for those unable to pay the fees of a private physician. Charges for clinic visits are flexible, based on a sliding scale ranging from $2 to $10. Each patient is billed according to his ability to pay as determined by admitting officer after a private interview.
Mrs. William is taken to the waiting area for patients who are about to be seen by the doctor. At the front of each floor a larger seating area is provided for all patients to be seen that day and relatives and friends who have accompanied them. In another area of the building a class for expectant mothers is in progress, educating pregnant women on ways to care for and handle their new babies. Weekly classes are also held for diabetics to help them better understand their illness and how to control it.

Aided by licensed practical nurse Mrs. Thelma Reed, surgical resident Dr. Kenneth Arnold carefully examines Mrs. William’s sister. After the examination Dr. Arnold sits down with Mrs. William and explains her sister’s condition. Between 650 and 700 times a day, 5½ days a week the clinic physicians sit down with their patients to talk over an illness and explain the diagnosis.

Conveniently located all in one building, the Wohl Clinic offers patient services of professional therapists, and technicians in the out-patient department’s clinical laboratory, social service, pharmacy, and a variety of rehabilitation and X-ray services, in addition to those of doctors and nurses. The patient can fill his prescriptions through the first floor pharmacy as he leaves the building. Here, Mrs. William receives the drugs her doctor ordered from cashier Miss Carol Walker. The clinic facilities are open from 8 a.m. to 5 p.m. Monday through Friday, and from 8 a.m. to 11 a.m. on Saturday.
Assistant physician David L. Rimoin gave a speech on dwarfism July 14 in the amphitheatre at Children’s Hospital, sponsored by the Greater St. Louis Chapter of Human Growth Inc. He also showed a film about the Little People of America Association.

Ernst R. Friedrich, assistant obstetrician-gynecologist, recently spoke to the Iowa Chapter of the American Academy of Practice at the Okoboji in Iowa. The topics of his lecture were: “Side Effects of Oral Contraceptives” and “Estrogen-Progestins in Female Reproductive Physiology.”

Michel Ter-Pogossian, physicist, has been appointed to the Radiology Training Committee of the National Institute of General Medicine Sciences in Washington, D. C.


Eli Robins, psychiatrist-in-chief, addressed the Sub-Committee of the International Neurochemical Society in New York June 22 on the “Formation of A Neurochemistry Curriculum.”

Jay Enoch, Ph.D., consultant in ophthalmology, addressed the Austrian Ophthalmological Society in Vienna in June. His title was “The Development of Quantative Perimetric Tests.” He also gave a series of lectures in Tuebingen, Germany; Berne, Switzerland; and London, sponsored by the National Institutes of Health.

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Forty-two physicians joined the staff of Barnes as of July 1. All are permanent appointments unless otherwise noted. New assistant obstetrician-gynecologists are: Ruben Marmet, Ivan T. Myers, Jonathan R. Reed and Nathaniel Murdock. Reed and Murdock have offices in Homer G. Phillips Hospital.

New assistant physicians on staff include: Edward J. Miller, Howard Nelson Ward, Shabbir H. Safdar, Vincent J. Proskay, and Edward M. Wolfe. Dr. Wolfe is a dermatologist.

Newly added to the surgical staff through June 30, 1970, are: assistant surgeons Granville Womack and James R. Wamsley (both at McDonnell Corporation); Harry B. Abramowitz, Roderick C. Haff, Albert H. Kraus and Leslie Wise, all assistants in general surgery; Richard L. Mackey and Robert G. Noble, assistant urologists; Walter N. Rabhan, Lawrence M. Haas, Stanley F. Katz, Fred M. Wood, William H. Gondring, all assistants in orthopedic surgery; Gerald N. Davis and Manus Stihiencoak, assistants in plastic surgery.

Assistant pediatricians appointed include: Mary Ann Guggenheim, Leo R. Sullivan and James P. Keating, all with offices at Children’s Hospital through June 30, 1970, and Gerald Wool who has returned from a leave of absence. Assistant oto-laryngologists are: Mark May and William H. Diehl, Jr.

Assistant ophthalmologists recently added to the staff include: James E. Miller, Steven Podos (returned from leave of absence), Stephen Waltman, and Ronald Burde.

One assistant pathologist has been added, Charles Kuhn III, and one assistant neurologist, Alan L. Pearlman. Six assistant radiologists are new. They are: Frank W. Farrell, Jr., Tom Lipscomb, Frederick S. Vines, John W. Fenlon, James W. Debnam, Jr. and Hugh Murrell.

A computerized blood machine that performs a complete blood count in 20 seconds has been installed in the clinical microscopy laboratory on the second floor of the service building. The Model B Coulter Counter performs seven different vital blood tests in less than half a minute from one sample of blood. The machine measures the white blood count, red blood count, hemoglobin and the mean corpuscular volume. Then, based on these measurements, the computer calculates the mean corpuscular hemoglobin, the hematocrit and the mean corpuscular hemoglobin concentration. Feeding a blood sample into the machine is laboratory technician Miss Lorette Martz. The results are printed on rectangular cards with attached file copies.

Blue Is New Central Service Uniform Fashion

Mrs. Patricia Oliver, 19-years-old, has been named the escort Messenger of the Month for August. Employed by the dispatch department since February, Mrs. Oliver is a 1967 graduate of East St. Louis Senior High School.

Barnes director, Robert Frank, was one of three persons recently named to the executive committee of the alumni association of the St. Louis University graduate program in hospital administration.

Occupational therapist Mrs. Ruth Barr has developed a new stylus and slate that is currently being manufactured for use by Braille students. Making the stylus hollow instead of pointed and fitting it with bumps instead of hollows, the blind can write from left to right. Previously they had to work from right to left, which made both reading and writing backward. A gift from the Barnes Hospital Women’s Auxiliary enabled Mrs. Barr to put the system into production.
Code 1000’ Swings Barnes Disaster Teams into Action

The police cooperated by bringing many of the 35 “victims” in police ambulances to the Barnes Emergency room. The “victims,” all wearing either a plastic “wound” or description on a tag, were volunteers—Candystripers, Girl Scouts, and members of the administrative staff.

Dr. C. O. Vermillion, associate director, wears a moulage, a simulated leg stump, which has been torn off. He is being met by members of the surgical staff at triage in the Wohl Clinics lobby. (Triage is a French word for “sorting.”)

After triage doctors have determined the type of injury, patients are sent to secondary treatment areas. At left, a Candystriper “victim” has reached the emergency room, the secondary treatment area for persons who need immediate attention. Information from her triage tag is recorded by (left) Miss Lenora Campbell, licensed practical nurse, and Miss Gina Canty, senior nurse assistant.

Meanwhile, back in Queeny Tower, relatives are waiting to have news of their family members who have been “victims.” Above, social worker Miss Patricia McKevitt gives news to a family who have joined in the drill pretending to be relatives of a victim.

Full-time Director of Blood Bank Named

Dr. Harold Kaplan, 33, has been appointed full-time Blood Bank Director and Assistant Professor of Pathology and Medicine in Laboratory Medicine, according to Dr. Leonard Jarett, Director of all diagnostic laboratories at Barnes and Head of the Division of Laboratory Medicine.

From August, 1967, to his July 1 appointment at Barnes, Dr. Kaplan was a research pathologist at the Blood Transfusion Division of the U. S. Army Medical Research Laboratory at Fort Knox, Ky. He received his medical education at the Albert Einstein College of Medicine and took his internship and residency in pathology at Columbia-Presbyterian Medical Center in New York. During 1966-67 he was a clinical associate in the Blood Bank Department of the Clinical Center at the National Institutes of Health, Bethesda, Md.

Dr. Kaplan’s appointment is the first in a series of divisional lab directors to be announced within the next year for the departments of clinical chemistry, virology, bacteriology, and clinical immunology. In each area the purposes of the director are to increase the technical sophistication of the department by applying and developing new technology, to act as consultant to patient care physicians, and to train other physicians in the specialty of laboratory medicine.

The new consultants will be involved in applying computerization to lab functions, and reorganizing their individual areas as increased space becomes available for laboratory use.

Dr. Jarett feels these appointments will result in more precise and economical laboratory tests as well as efficient use of these tests, thereby combating the increasing cost of hospital care.
La Mademoiselle de Trois Wohl Est "Beau"

"How do you say 'tossed salad' in French?", therapeutic dietitian Mrs. Lea Virtel (left) asks Beau Thurman, nurse assistant on 3 Wohl, while the former fills out a menu card for patient Andre Bistouri. A resident and Supreme Court Judge in Haiti, Mr. Bistouri speaks only a limited amount of English and Miss Thurman, who has studied French for nine years, helped him communicate with hospital personnel during his four-week stay here.

"She is like—how do you say—an angel, a guardian angel to me," declared Andre Bistouri, journalist and Supreme Court judge of Haiti, speaking of Beau Thurman, nurse assistant on 3 Wohl.

Three weeks ago Miss Thurman was walking down the Wohl hall when a baffled nurse stuck her head out of the intensive care unit and yelled, "Does anyone speak French?" The 18-year-old summer employee responded affirmatively, and quickly translated the nurse's instructions to Mr. Bistouri, the grateful patient.

Beau Thurman, daughter of Security Coordinator Ed Thurman, is just one of a number of translators on call in the medical center for any patient needing language assistance. Each administrator has a file of employees who act as interpreters of Spanish, German, Japanese, Russian, Italian and Greek. Some bi-lingual employees speak the language of their native countries; others have acquired fluency in a foreign language through extensive study in school or through years of living abroad.

During Mr. Bistouri's stay at Barnes, Miss Thurman often was called upon to translate, both for the 59-year-old Haitian and the doctors, nurses, dietitians, technicians, etc., who administered to him.

Utilizing her nine years spent mastering irregular verbs and learning French vocabulary, the 18-year-old college sophomore accompanied Mr. Bistouri to the X-ray room on 3 Wohl. She explained the procedure he would undergo, so he would not be alarmed, and translated the technician's requests of "Don't breathe" (Ne respirez pas) and "Relax" (Soyez tranquille), while the films were taken.

The youthful nursing student was there when blood was drawn, quickly translating "Make a fist" to "Faites un poing" for the technician who had resorted to pantomime to get her message across. Dietary menus were explained in French and conversations between the physician and Mr. Bistouri were translated ping-pong fashion by the competent linguist.

"Beau" (Jacqueline Beaumont) Thurman became seriously interested in French in the fifth grade, as her European grandmother had already taught her some short sentence phrases. She started classes in school and has continued them along with the nursing studies at the University of Missouri at Columbia. Beau spent one summer visiting relatives in France with her grandmother and picked up some dialect and colloquial phraseology. Although fluent, the long-haired teenager admits she keeps a dictionary at hand—particularly when she needs to explain a medical term.

"I debated studying to be a French teacher or nurse," said the veteran employee of four summers. "But this is the first time I've been able to combine both. 'C'est une bonne situation.'"

Registered Nurse On Duty In Personnel Health

A full-time registered nurse has been added to the staff of Personnel Health for the convenience of employees. Miss Claire Schneider, a 1959 graduate of St. Joseph's Hospital School of Nursing in Alton, Illinois, is on duty five days a week from 8:00 a.m. to 4:30 p.m.

Miss Schneider's duties include first aid for minor accidents brought to Personnel Health, and assisting Dr. Hermann Glasser and the various specialists who see employees patients on the fourth floor of Wohl clinic building. Before coming to Barnes Miss Schneider had seven years experience in the St. Charles Clinic. Her home is in St. Peter's, Missouri, 35 miles west of St. Louis.