Barnes' Volunteer Named Recipient of 'Woman of Achievement Award' From Globe-Democrat for 'Hereditary' Trait, Service

Mrs. Spencer Allen, chairman of the Barnes' Wishing Well, was recently named as one of 10 recipients of the Woman of Achievement Award for 1969 by the St. Louis Globe-Democrat newspaper.

Mrs. Allen's husband, Spencer, is the editorial director of KMOX-TV. "He is more thrilled than I am about my receiving the award. He is my encouragement. He prods me to greater heights," she said.

According to Robert E. Frank, director of the hospital, Mrs. Allen was honored because, as a hospital volunteer, "she has been of maximum value to the community and the medical complex. Many areas within the hospital have benefited because of Mrs. Allen's energy and vitality. During her leadership, many innovative services were instituted."

Service to others comes natural to Mrs. Allen. For example, her father, Emil Steger, was a nationally-known social worker who came to St. Louis in 1923 after serving with the Red Cross in St. Paul.

Mrs. Allen's father served as the first director of the Provident Assn., a welfare organization on Locust Street. At the time of his death in 1944, Mr. Steger was the director of the Community Fund and Counsel, a forerunner to the United Fund.

"There were only about 20 women who were volunteers at that time," I worked on the dietary service committee, helping with patient menus and serving trays to the patients."

In 1963, Mrs. Allen was named to the post of second volunteer chairman. It was during that time, the volunteer program was expanded and a hospitality room for neurosurgical patients was established.

Mrs. Allen served as president of the Auxiliary during 1965-67. She has been chairman of (continued on page 6)

Dedication Ceremonies Held for Chromalloy Kidney Unit; Kidney Foundation’s Director Hails New Center, Efforts

Kidney treatment by renal dialysis, a blood purification technique to sustain lives of patients with kidney disease, was first initiated 10 years ago, but only one-tenth of the world's population who need the treatment are receiving it, according to Dr. George E. Schreiner, professor of medicine at Georgetown University and president of the National Kidney Foundation.

Speaking in Schwarz Auditorium, at the dedication of the Chromalloy American Kidney Center on Jan. 18 on the second floor of Barnes, Dr. Schreiner said, "We have the necessary knowledge to treat these people, but someone has to bridge the gap that exists between the areas of basic medical research and delivery of health care in its final form."

"Some group needs to be charged with developmental research to ensure that new technological developments in medicine ultimately reach those in need of the resources."

Universities, private health foundations and endowments from individuals are attempting to fill this void, he said.

"The Chromalloy Kidney Center is an excellent example of individuals from the private sector accepting this challenge. The Chromalloy Center is one of the most modern units of its kind in the U.S. and it will draw patients from a large surrounding area."

Joseph Friedman, Chromalloy American Corporation board chairman, also spoke. His organization presented to Washington University School of Medicine the $250,000 used to create this center to care for persons suffering from kidney disease. (continued on page 3)
Contributions to Barnes Tribute Fund August 15—January 15

IN MEMORY OF: Dr. Louis Byars, Benelia Horner Jelie, Dr. and Mrs. Fleming B. Harper, Dr. and Mrs. W. Edwin B. Meissner Jr., Dr. and Mrs. Justin Cordonnier, Mr. and Mrs. Charles W. Middleton, Mr. and Mrs. Reid Derrick, Dr. and Mrs. Henry Schwartz, Dr. and Mrs. Robert W. Bartlett, Dr. and Mrs. John E. Hobbs, Dr. and Mrs. Helen E. Haffner, Mr. Herbert Ludwighaus, Mrs. Rollin L. Curtis, Mr. Harry Cohn, Mrs. and Mr. Francis Wetta Miss Lisa Bry, Mr. and Mrs. Richard T. Fisher Mrs. William P. Gruner, Dr. and Mrs. Justin Cordonnier Sally Cole, Mr. and Mrs. E. P. Currier Jr. Richard Levis Jr., Mr. and Mrs. Robert E. Frank Mrs. Leah Goessling, Mr. and Mrs. Frank Fisse, Mrs. John H. Overall Mr. W. Edwin Moser, Dr. and Mrs. Henry G. Schwartz Mr. Thomas Pettus, Mr. Wallace R. Parsons Jr., Mr. and Mrs. Charles H. Sommer, Loren G. Buxton, Glascio Division-Universal Metal Products Miss Olivia Pautler, Dr. and Mrs. Henry G. Schwartz Mrs. Sadie Karfeld, Maintenance Department,

IN HONOR OF:

Barnes Hospital Mrs. Missouri Emmons, Maintenance Department; Barnes Hospital Mr. Norris Yawitz, Mildred Lachow Mr. William Henry Harris, Mr. Lee Roy Harris, Dr. and Mrs. Robert Bowles Mr. Harry B. Mathews Jr., Mr. Frank A. Scudder, Mr. and Mrs. Charles H. Sommer, Mr. and Mrs. James H. Howe Mr. Emil Warmbrodt, Dr. and Mrs. C. O. Vermillion, Mr. and Mrs. Barney Marshall, Mr. and Mrs. Fred Tilley, Mr. and Mrs. Robert Rutherford, Barnes Hospital Auxiliary Harriet H. Siegler, Mrs. Paul D. Hartog Mr. William W. Schneider, and Mr. and Mrs. Charles H. Sommer, Mr. William M. Rand, Mr. Henry V. Putzel, Mr. and Mrs. W. H. Margerin Mrs. Vai Goessling, and Mr. and Mrs. William Moore Jr. Nina Silberman Graves, Mr. and Mrs. Robert Winnecke Sheila Kelly, Elhori Morie Mrs. Sarah Keeling, Victory Sunday School Class—Fourth Baptist Church Esther Rosen, Mr. and Mrs. Richard Fisher Mr. John Fischer, Mr. and Mrs. Charles Rose Christy Busch Hermann, Barnes Hospital Auxiliary, Board of Trustees, Barnes Hospital; Mr. and Mrs. Gary Leatherwood, Dr. and Mrs. William Perry, Miss Susan Perry, Mr. and Mrs. John Shepley, Mr. and Mrs. Glenn M. McNeill, Mr. and Mrs. Richard S. Hawes III, Mr. and Mrs. J. D. MacCurthy, Mr. and Mrs. James H. Howe III, St. Louis Stars Soccer Club, Mr. William W. Stewart, Employes-Standard Container Co., Miss Linda Grubbs, St. Louis Branch—Owens-Illinois, Inc., Mr. and Mrs. Jerroy A. Frank, Miss Adelaide Cherbonnier, Ebon C. Jones, Kevin K. Hepp, Mr. and Mrs. Jefferies M. Arrick, Standard Container Co., St. Louis Sports Hall of Fame, Mr. John L. Wilson, Mr. William G. Moore Jr., Mr. Gordon B. Bonfield Jr., Mr. and Mrs. Alan O. Hickok, Mr. Clyde Caldwell, Miss Nancy Craig, Mr. Neil M. Tuckett, Mrs. Glady's Clark, Joe and June Ledbetter, Mrs. Frank H. Begew Dr. Joseph J. Gitt, Dr. John E. Hobbs Julian Harman, Mrs. Alex R. Mendelson Dr. Robert Elman, Mrs. Alex R. Mendelson Mr. Thomas Lewis, Mr. and Mrs. Barney Marshall, Mr. and Mrs. Robert Rutherford, Jane and Betty Collins Mr. and Mrs. J. Mellon and son, Irene Dornier, Bernice Koster Virginia B. English, Mr. and Mrs. George L. Minor Mr. Clarence Kaimann, Mrs. K. A. Morie Mrs. Alma Lund, Mr. B. Houston Caskie, Mr. and Mrs. Karl A. Gainstie, Dr. and Mrs. James Walsh, Central Surgical, Inc, Clinic of Internal Medicine, Dr. Ernest T. Reese Mr. William H. Whitton, Jr., Mr. and Mrs. David R. Smith Mrs. J. LeBeau Christy, Mr. E. R. Culver III, Mrs. E. R. Culver Jr. Mr. James A. Yates Jr., Mr. John H. Hayward Mr. Jasper Boyer, Universal Metal Products Mr. James M. Johnson Universal Metals Products.

Barnes Presents Huge Layette to 'First Baby of New Decade'

The first baby born in the new decade in the St. Louis area, a 5-pound, 6-ounce girl, arrived at 12:05 a.m., Jan. 1, at Maternity Hospital in the Barnes’ medical complex. The new girl, Venus Antoinette Morgan, is the second daughter of Mr. and Mrs. Charles E. Morgan, 1001 North Compton Ave.

Mr. Morgan, 22, who is an insurance agent and a minister of the Kennenry Temple of God in Christ, said they wanted a boy, but said he was “grateful to God for opening my family’s decade with a beautiful child.”

“We are satisfied as long as the baby is healthy,” Mrs. Morgan said. Venus is synonomous with love and beauty.

Although Mrs. Morgan missed some festive New Year’s parties, she received considerable attention the next few days from well-wishers and friends.

For example, Barnes presented Mrs. Morgan and her new daughter with a layette consisting of socks, undershirt, receiving blanket, knit sweater, three stretch suits, bath set, jump suit and other items.

A total of 2,457 babies were born at Maternity Hospital in 1969, as compared to 2,039 for the previous year.

Mrs. Dorinda Harmon, head nurse on 4 Maternity, right, presents a layette from Barnes to Mrs. Morgan and her new daughter, Venus Antoinette.

Contributions to Barnes Hospital Tribute Fund August 15 to January 15, 1970. Con-

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Mrs. Dorinda Harmon, head nurse on 4 Maternity, right, presents a layette from Barnes to Mrs. Morgan and her new daughter, Venus Antoinette.
**Dog Saves Master's Life by Warding Off Attack by Enraged Sows**

Mrs. Hugh Moore Sr., who was a patient at Barnes for 115 days after she was viciously attacked by brood sows at her farm home Aug. 21, left the hospital recently and she is recuperating at the family home three miles west of Fidelity, Ill., near Jerseyville.

"It's great to be back home. I've gained seven pounds," Mrs. Moore said as she stroked the coat of Spot, the family's 20-inch terrier who is given credit by the family for saving the life of Mrs. Moore when she was attacked by six sows on the Moore farm.

According to reports, the incident occurred while Mrs. Moore, accompanied by Spot, went to the barn to feed some kittens. The dog apparently barked at the kittens. A few seconds later, two sows attacked Mrs. Moore and knocked her down. Four other sows joined the attack. However, Spot began barking and barking at the sows to ward them off.

Mrs. Moore, badly injured, rolled away and the dog stayed with her. Mrs. Moore's 69-year-old mother, Mrs. Cora Camp, who had been staying at the Moore home, became concerned with the commotion of the hogs and the barking of Spot. Mrs. Camp telephoned for help.

Mrs. Moore had suffered fractures of both fore-arms, and multiple severe cuts and bruises.

She was taken to a hospital in Jerseyville where she received five transfusions. Then she was transferred to Barnes. Seven times at Barnes, Mrs. Moore received anesthetics for treatment and surgery of various types. Her hand and forearm were amputated.

Mr. and Mrs. Hugh Moore Sr. are proud of their terrier, Spot, whose heroic action may have saved her life during an attack by sows last August. Mrs. Moore returned home recently after being a patient at Barnes for 115 days.

2 Barnes' Surgeons Write Article Recommending Usage of Surgical Intensive Care Units for More Efficiency

Dr. Walter F. Ballinger, surgeon-in-chief at Barnes, and Dr. John A. Collins, assistant surgeon, wrote an article, "The Surgical Intensive Care Unit," that was published recently in a monthly publication, Surgery. In the article, the co-authors recommended the use of surgical intensive care units—a recent development in emergency hospital care—as a means by which hospitals might make better use of available personnel and equipment and save money for the patients.

"It is impossible to conceive that bringing the sickest patient, the best medical personnel and the proper equipment together in the same place at the same time will not give patients the best chance for survival," the doctors said.

The authors of the article were suggesting a centralized facility for surgical patients requiring constant attention.

According to the two men, surgical intensive care units would be advantageous in treating surgical cases with multiple injuries or complications.

Dr. Ballinger and Dr. Collins stressed that by having an experienced staff in a modern center, the sickest patient, the best medical personnel and the proper equipment together in the same place at the same time will not give patients the best chance for survival.

**Kidney**

(continued from page 1)

Under the direction of Dr. Neal S. Bricker, head of the renal division, 20 patients weekly will come to the kidney center for treatment with the most modern equipment.

Dr. Eduardo Slatopolsky will direct operations of the unit. On his staff will be six physicians, four registered nurses, one technician and one secretary.

Under the direction of Washington University, the new unit consists of two central rooms—one room with two kidney machines and the other room equipped with three machines, conference room, laboratory, nurses' station and nurses' lounge.

Alongside the five beds in the center are artificial kidney machines. Treatment by the machine, dialysis, is a procedure that can take over the function of human kidneys when they cease to remove body wastes. The patient comes in twice weekly and for about eight hours rests while his blood is pumped into the machine where it is cleansed before being returned.

Dr. Bricker said that persons being treated here will be learning how to operate similar equipment in their homes, and thereby reduce the cost of treatment from about $15,000 a year in the hospital to $5,000 a year at home.

He noted that due to the current lack of funds, only about 1,700 Americans receive such treatment, while an estimated 10,000 or more will die this year for lack of it.

The Chromalloy American Kidney Center is the first of its kind to be funded entirely by a corporation. Half of the $250,000 contribution was made through the Chromalloy American and Valley Lines Company foundations; the other half was personally subscribed by officers of the companies.

**News Clips Discontinued**

"Clips Capsule," a reprint of all articles about Barnes Medical Center staff printed in magazines and newspapers throughout the country, will be discontinued, Dan Gashler, Director of the Washington University School of Medicine News Bureau, announced.

The Capsule was circulated weekly for the past two months to Washington University School of Medicine department heads, and administrative staff at Barnes Hospital and other hospitals affiliated with Washington University. It was sent out by the News Bureau in cooperation with the Barnes Hospital public relations department.

A survey was conducted of offices receiving the capsule, Mr. Gashler reported. They were asked to check one of three comments—"Clips Capsule is of no value to me or of interest to this department," 2) "I find Clips Capsule interesting but not really of value to the department." 3) "I consider Clips Capsule interesting and valuable to this department."

"We have had many of these questionnaires returned, and the great majority checked the second category, indicating they found the Capsule interesting but not of value. So, unless we hear from others who feel that this is a service to them, we will be discontinuing the mailings," said Mr. Gashler.

Included in the Capsule were news items about medical staff and other personnel from the hospital and medical school, and reprints of writings from medical journals and professional magazines.
Hair Arrives at Barnes

Hair is here and not just among the hippies. The advent of hair, and lots of it, in the form of long sideburns, mustaches and beards has hit Barnes' medical complex. Taken at face value, hair, according to persons interviewed at Barnes, is not an outward sign of revolt against The Establishment, but rather adherence to modern styles of dress and appearance that represents youth and vitality.

Years ago, persons in the medical profession were unshaven. Could it be that the gauntlet has been run and the professionals will soon all wear hair of sorts? Hockey and baseball stars today wear "lamb-chop" sideburns or have their hair meticulously styled by a barber who employs a razor-cut technique that may run as high as $12.

A number of famous figures are noted for having stubble on their lips and chins, such as Abraham Lincoln, Gen. Ulysses S. Grant, Luther Burbank and the Smith Brothers. One physician at Barnes wryly commented recently that someday "beards will be the token of the professional man. He will wear pin stripes and carry a cane."

Most doctors at Barnes are still in the long sideburn stage. Facial hair may be seen on a spot over the lip, protruding from the chin, or extending downward beside the ear.

An observer can detect the tell-tale signs, such as "the creeping sideburns," which may lead to the upheaval of appearance and personality.

Many women find a man with a beard more attractive. Psychological studies show that some women believe that men with beards are more masculine, sophisticated and mature. Many psychologists accept the theory that many men turn toward fuzzy facial growths because they want to assert their masculinity, overt individuality and conformity to styles, and the desire to acquire distinction. However, it is difficult to actually pinpoint why men are motivated to alter their appearance. Some Barnes’ employees and physicians commented on this fashionable trend.

DR. NORMAN MUSCHANY

"I see about 120 patients weekly and I constantly have to explain how I grew the beard," said Dr. Muschany, an assistant obstetrician and gynecologist.

"I grew it on a camping trip in Wyoming. No one seems to be neutral about beards. The older generation apparently does not like it. Naturally, my colleagues joke about it quite a bit. Recently I went to a civic event and I was asked by some mod youth during the course of a hurried conversation: 'Does this (beard) mean you're one of us?'

"My 13-year-old daughter and my wife think it looks great on me. In fact, before I grew it,
my wife bought me a $35 beard wig that I wore once rather hesitantly to a meeting. I looked pretty bad and I remarked to my wife: "I know I can grow a better one."

**DR. EDWARD PESANTI**

Dr. Edward Pesanti, an intern in ward medicine on 1418, started growing his mustache about 10 weeks ago and "not much planning went into it."

"I've had sideburns for about four years. Almost all the interns have sideburns, but not many have a mustache. I trim it every couple of days. My wife is definitely in favor of my wearing one.

"Some people believe that beards and mustaches on doctors will cause the public to lose confidence in their professional ability. I do not agree with this and I think the fashion is here to stay," the young doctor noted.

**WALTER BRADFORD**

"It's the style today. Many men in this department have mustaches and the men are quite proud of them," said Mr. Bradford who supervises central service. "It's a fad. My father shaved his head bald and he looked like Mr. Clean."

Two employees in the department, Bobby Lee and Percy Smith, echoed similar sentiments.

"Women seem to like my mustache," said Mr. Lee, who is single. "I feel it makes me look better—I'm in the process of growing a full goatee."

Mr. Smith said that he has had a mustache for about 40 years. "It gives me a neater appearance. Of course, it must be well trimmed."

All three said they had no plans to remove their mustaches, especially now that hair is in vogue.

**ED SUMMERS**

Even though the chief inhalation therapist wears lengthy sideburns, he still considers himself basically a conservative. "I try to keep them neatly trimmed above the earlobes," he said.

A bachelor, Mr. Summers said he started letting his hair grow in March, 1969, which was about the time he was named director of the inhalation unit. 'My predecessor, Savario Giordano, wore them and I thought his sideburns were stylish," he said.

To some people hair is a status symbol. It is also a good mechanism to compensate for baldness or a thin upper lip. "Remember the old adage: 'Beauty is skin deep?' Well, I think a man can really change his appearance for the better. For instance, sideburns can make a person's face look thinner if he is gaining weight.

Barnes' security watchman, George Smith, started wearing a "close-cropped" mustache 20 years ago. "I get compliments on it frequently," he said.

Walter Bradford supervises central service where there are a number of employees who sprout fuzzy facial growths.
Cancer Research of Tribesmen Proves ‘Stimulating’ for Barnes’ Physician

“‘The knowledge gained from my trip was stimulating,’” said Dr. Lauren V. Ackerman, surgical pathologist-in-chief, who returned to Barnes in December after taking a year’s sabbatical to do cancer research on the Bantu tribesmen in South Africa.

“For example, on the humorous side, I was fortunate to have an audience with the king of Swaziland. It was said that no one was permitted to stay longer than 20 minutes in his presence.

“Knowing this, I hesitantly approached him. Dr. Ackerman

He promptly asked me to explain why and how cancer affects certain races of people.

“Realizing that it would take considerable time to properly answer the chieftain, I responded: ‘If your majesty has all day to listen, I might be able to give you the information.’

“The king chuckled. He apparently liked what I said because he listened attentively to me for an hour. Tuberculosis is one of his country’s health problems and he was genuinely concerned over the welfare of his subjects.”

Sponsored by grants from the American Cancer Society and the National Cancer Assn. of South Africa, Dr. Ackerman was a visiting professor of surgical pathology at Witwatersrand University at Johannesburg.

He also worked at Baragwanath Hospital which is the largest South African Hospital for the Bantu tribe. The hospital takes care of the medical problems for more than one million Bantu.

Dr. Ackerman studied the low incidence of cancer in the alimentary tract of the Bantu. “It is not because a person is a Bantu, but rather because of his habits and diet.”

“There are a number of reasons that contribute to the low rate of incidence of polyps and cancer in the large intestine among the Bantu. For example, bulk maize is the main diet of the Bantu.

The maize causes digestive enzymes to flow more, which, seemingly plays an important role in reducing the rate of cancer,” he said.

“I’m glad to be back at Barnes after being at Baragwanath,” Dr. Ackerman said. The South African Hospital, which has a 2200-bed capacity, admitted about 80,000 patients last year and 12,000 babies were delivered.

The statistics concerning the hospital are staggering. Out of the 80,000 patients admitted there were 23,224 operations and there were about 100,000 out-patient visits with the pediatric service alone.

The hospital must change its population every ten days to two weeks. At times, particularly over the weekend, to increase the bed capacity, the overflow patients may have to be on a mattress under another patient’s bed.

“I plan to continue studying the cancer problem in the Bantu. A pathologist from Baragwanath Hospital will come to Barnes in July for post-graduate study for probably a two-year stay. He will bring with him material to study liver disease in Bantu children.

“Baragwanath Hospital has no computers for payrolls or record-keeping. Only one man and two part-time helpers take care of their medical record section.”

Award (continued from page 1)

the Wishing Well gift shop since May, 1968.

The gift shop now grosses $250,000 a year and it is staffed by 70 volunteer workers, including two full-time paid workers and four part-time day workers.

“You need to feel useful and you do feel you are needed, if you are a volunteer,” said Mrs. Allen, who averages 16 to 20 hours a week in the shop.

New Nurses' Elevator Installed; First Since 1914

Dr. Lauren V. Ackerman

Alcoholic Drivers Tied To Traffic Fatalities

Putting the alcoholic driver on a treatment program would reduce the number of fatal crashes by “a minimum of one-third,” according to a research expert on highway safety who spoke at Barnes recently at a seminar sponsored by the Washington University School of Medicine psychiatry department.

Dr. Melvin L. Seizer, associate professor of psychiatry at the University of Michigan Medical School and a research associate of the university’s Safety Research Institute, said that in a recent study of 96 fatal highway crashes, 36 of the drivers in those crashes were found to be alcoholics, compared to three alcoholics found in a random sampling of 96 other drivers.

The same study showed that at least 30 percent of the alcoholic drivers in the fatal crashes “had been in a violent argument within six hours of the accident,” Dr. Seizer said.

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'Hot-Seat' Position Places Great Responsibility on a Resident
To Determine Immediately Whether Tissue is Actually Malignant

He’s called “the man on the hot seat.” and, in this case, the “hot seat” is the responsibility of making a decision on tissue—whether it’s malignant or not. The surgical patient’s fate hangs in the balance.

The hands of the surgeon rapidly removed a lump from the breast of a middle-aged woman who lay motionless in a Barnes operating room. The surgeon quickly examined the growth and became suspicious of its nature.

A few seconds slipped by as the doctor weighed all the factors before making a decision. The position is called the “hot seat” because the man who occupies it is responsible for diagnosing cancerous growths.

Dr. Philip Feldman, who is a pathologist in surgical pathology, was in the hot seat recently. He commented: “It places a burden of considerable responsibility on the resident. In the hot seat, your decision has permanent effects. You cannot put a breast back on once it has been removed.”

The main purpose of the “hot seat” is to diagnose cancerous tissue while a patient is under sedation and proceed with the operation so it will not be necessary to anesthetize the patient a second time, he said.

Located in surgical pathology on the third floor of Barnes, the hot seat is staffed by a fourth-year pathology resident as part of his training in surgical pathology. He is assisted by a fellow pathology resident who will rotate to the hot seat position after 2½ months.

The man who is actually on the hot seat and his assistant are on call to surgeons throughout the day. Upon receiving a call from a surgeon, the resident immediately goes to the operating room and confers with the surgeon while the patient is under sedation.

In most cases, the resident takes the specimen, freezes a portion, and then cuts a thin slice in a Cryostat machine in order to make a slide.

After looking at the slide under a microscope, the resident must consider all the diagnostic possibilities and then come up with the right answer. The whole procedure usually takes about 10 minutes. Sometimes there is difficulty in arriving at a diagnosis. Then a senior staff pathologist must be summoned.

Surgeons call the man on the hot seat six to 10 times daily. “Sometimes we must delay making a diagnosis until later when we are certain of the diagnosis after checking the permanent slides. We are there to help the surgeon as much as possible. Occasionally we recommend what surgical procedures might best fit the situation, but the surgeon has the final decision,” Dr. Feldman said.

Tennessee Vols Shade Barnes’ Nursing School
In Basketball Contest

The Vols came to Barnes recently. Volunteers, yes, but not the familiar volunteers who work at the hospital. These “volunteers” came all the way from the University of Tennessee’s School of Nursing at Memphis to play a basketball game against the Barnes’ School of Nursing.

Thirteen girls and three chaperones made the trip, arriving at 9:30 p.m., Friday, Jan. 9. The Barnes’ School of Nursing extended its hospitality in a style that the southerners are accustomed to: providing sleeping quarters at the School of Nursing, pizza parties, and tours of St. Louis.

The girls from Tennessee enjoyed watching the skaters on ponds in Forest Park and the frolics of sledgers on Art Hill.

The actual game was a hard-fought contest between two evenly-matched teams. The Barnes’ Nursing School went into the contest with an overall 5-2 record, compiled in league play against nursing schools in the area.

The U. of T., led by some great two-hand set-shooting from atop the free-throw circle and deadly free-throwing by one individual who sank six of seven charity tosses, won the game, 36-31.

The Barnes’ club may have a chance for revenge against the same Vols as both teams are scheduled to play in the 1970 Cotton States Nurses Invitational Tournament on Feb. 26-28 at Memphis. Two other nursing schools are also entered in the tourney.
Barnes' nurses and medical service technicians who want to join the Air Force reserve and meet during off-duty hospital hours should contact Miss Betty Nelson, ward 1200, extension 3212.

According to Miss Nelson, new members will be trained to fly missions with members of the 375th Aeromedical Airlift Wing in the new C-9 Nightingale jet hospital plane. The reserve group is located at Scott Air Force Base.

Mrs. Dorothy Strocker, chief telephone operator for Queeny Tower, recently won $1,000 in a drawing which she entered.

Mrs. Mary J. Mester, former ward clerk in the recovery room, received a certificate of service from Miss Ann Vose, director of nursing. The event took place at a party for Mrs. Mester, who retired after almost 20 years of service. Also assisting with the presentation was Miss Mildred Brocksmith, head nurse in the recovery room.

An ice storm on Dec. 27 hindered traffic and caused many night-shift employees at Barnes to be late for work. The day-shift employees readily volunteered to stay on until their relief arrived.

As the storm continued, the night-shift employees stayed at their posts until day-shift employees could get to work.

"It is this type of cooperation that keeps the hospital's vital services operating smoothly without interruption. It is a credit to our employees," said Robert E. Frank, the director of the hospital.

Nine Sunday night bus lines for hospital and hotel employees in this area became permanent on Jan. 4 after a trial period. The lines are: Kingshighway, Grand, Taylor, Olive, Tower Grove, Forest Park, Wellston, Page and Cass. Three trial routes, Lafayette, Sarah and Lee, were discontinued because of insufficient fare income, a company spokesman said.

Art Gordon has been named acting laundry manager. Frank Knox has been named acting assistant laundry manager.

St. Louis area hospitals, paced by Barnes, contributed $22,950,000 to the 1969 United Fund campaign. Donations by the hospitals exceeded the quota by 6 per cent. Barnes contributed $55,356 which was 14 per cent more than its quota established by the United Fund.

The Rev. Joseph B. Wolf, one of the two Catholic chaplains at Barnes, recently returned from a trip to the Virgin Islands. During the trip, the Rev. Wolf took a long cruise on a ship that was used in the filming of "Hawaii."

Dr. Frank R. Bradley was awarded an honorary membership in the St. Louis Medical Society at their January meeting because of his "distinguished administration of Barnes for 27 years."

Barnes' Maladies,' Suggested Remedies Discussed at Secretarial Meeting

Editor's note: A Barnes hospital employee, who wishes to remain anonymous, contributed this resume of information she gleaned lately at a meeting of St. Louis secretaries, stenographers, and receptionists. She thought this might be of interest to Bulletin readers, though she claims she doesn't know a single Barnes boss in any of these categories.

At a meeting in late November, St. Louis secretaries and receptionists discussed "boss" maladies and how to handle them. The diagnoses were comparable for what was discovered to be the four common types in the business world.

There is nothing really wrong with the PHANTOM but that's only because he's never around long enough for anyone to find anything wrong. Secretaries and receptionists say the PHANTOM is their Achilles heel, though he's actually easy to cure. The best suggestion: Ask the boss where he's going and when to expect him back. If he doesn't want to say, ask if he'll call in, in case anything important comes up.

The alternative presented was: Stand in front of the door when the boss leaves. Being subtle is impossible in this case. In any case, the secretary or receptionist should be careful to tell her boss everytime she leaves the office or department. This will remind him that it's really a good idea.

THE BIGAMIST is the reason the girls in the office don't wear their pajama pants suits and shortest skirts in the office. This wolf can be vanished with him or mothering him; he needs someone with initiative who realtime him of routine and keeps his office running smoothly. Many secretaries agreed to tactfully suggest ways to solve problems when he's about to fade, so maybe he won't, and to organize his work and learn the secret of subtly nagging him to finish projects.

THE PERFECTIONIST is the reason the girls in the office don't wear their pajama pants suits and shortest skirts in the office. This wolf can be controlled if dealt with firmly. Most of the secretaries had been a wolf's prey at one time or another and their advice was to humor him, build up his ego and admire his business acumen . . . but encourage him to show appreciation in other ways.

Dr. Eli Robins Receives $26,944 Grant for MS

"Obscure changes in body chemistry may eventually prove to be the key factor in the development of multiple sclerosis," Dr. Eli Robins, professor psychiatrist-in-chief at Barnes, said recently.

Dr. Robins will continue his study of these changes during the next year with the help of a research grant of $26,944 from the National Multiple Sclerosis Society. The award was presented to Dr. Robins by the Society's St. Louis chapter, With this grant, Society support for Dr. Robins enters its 14th year and totals $288,236.

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