On Constant Alert to Serve When Needed

This unusual view of the Barnes Hospital Complex was taken from atop the Wayco Parking Garage on Audubon and shows the entrance to Wohl Hospital and the Emergency Room, which stands ready throughout the night to offer help when it is needed. Similarly ready to give assistance if and when it is called for is the security guard whose duty it is to patrol this area throughout the long and often lonely night.

Barnes’ Gets $106,685 Hartford Grant
To Continue Studies of Liver Diseases

Barnes has received a grant of $106,685 from the John A. Hartford, Foundation, Inc., of New York City, to continue the study of liver disease for another three years, it was announced here today by the Foundation’s President Harry B. George, and by Raymond E. Rowland, Chairman of the Barnes Hospital Board of Trustees.

The research, which is directed by Dr. Joe Wheeler Grisham, a hospital pathologist, was started in 1967 with a grant of $137,807 from the Foundation. Since that time, a special laboratory has been equipped to study liver tissue. Dr. Grisham has succeeded in keeping human liver tissue alive and growing in culture. He uses this technique to study the effects of disease-producing agents on this tissue.

"In our laboratory, we are subjecting human liver tissue to agents which cause liver disease in man, such as hepatitis and cirrhosis," he explained. "Then, we can observe how the tissue reacts, and perhaps unravel some of the mysteries of liver diseases."

Dr. Grisham said that the liver is one of the few major human organs that has the capability of rejuvenating itself. "The liver is potentially capable of entirely replacing itself," he said. "But, we know that sometimes, disease will result in destruction of the liver cells, and no new cells will grow. But we do not know why sometimes the liver can replace itself, and sometimes cell growth will slow or stop, resulting in chronic disease and often, death."

Use of animal livers is not totally satisfactory, Dr. Grisham pointed out, because the human liver reacts differently. "We can't give rats cirrhosis of the liver from alcohol ingestion, for instance. But there is a close relationship between cirrhosis, the most common chronic disease-producing agents on this tissue.

During his inspection, Dr. Speed, among other things, discussed the overall hospital activity with the administration of Barnes, examined the clinical records and discussed departmental operations with various supervisors. After his survey, Dr. Speed submitted his survey to the Commission, which is composed of the American College of Physicians, American College of Surgeons, American Hospital Association and the American Medical Association.

The recommendation shows that Barnes has received approval in respect to providing quality patient care in a safe and sound building that has modern facilities and equipment, special hospital services available, qualified medical staff, well-trained nursing staff and adequate hospital personnel. The recommendation also means that Barnes has a responsible governing body, good medical records procedures and the physicians review their own medical cases.

The commission commended hospital authorities for: 1) the plans for construction and modernization presently underway and 2) the efficient manner in which previous accreditation comments and recommendations have been implemented and the manner in which the accreditation program is presently being carried out.

Parking Lot Now Has 18-Hour Surveillance By Security Watchmen

The Barnes parking lot on Duncan and Taylor now has someone from Safety and Security patrolling the lot for 18 hours a day. Starting June 29, Barnes guards have been on duty . . . at the lot from 6 a.m. to midnight. The decision to provide additional security protection is designed to discourage car thefts and vandalism. Persons entering or leaving the parking lot will be requested to show their Barnes identification cards.
Non-Disposables, Discarded in Linens Could Cause Injury, Machinery Damage

Barnes' laundry section handles thousands of pounds of soiled linens, surgical gowns and scrub outfits daily, but one of the biggest headaches for Arthur Gordon, acting manager of the laundry, and his personnel is not the amount of laundry the hospital uses, but what his section has to go through to keep ahead of it.

"Occasionally we get non-disposable items from the patient floors and operating rooms that are mixed with the laundry. These items are not only a nuisance, but, more important, they present a hazard to those who hand-sort the laundry. Sometimes, surgical instruments, such as scalpels and syringes, are carelessly placed in the pockets of the gowns which are sent to us for processing. These instruments could cause a painful injury if handled improperly," Gordon said.

Gordon mentioned other items that his personnel find in the laundry, such as latex surgical gloves, plastic hoses, ice-pack bags, hair brushes, clamps and pillows.

Arthur Gordon, acting laundry manager, left, and Frank Knox, assistant laundry manager, examine a rubber hose that was improperly discarded on patient floors into the laundry. The articles on the table were collected by the laundry during a recent two-week interval.

"These items could cause extensive damage if they were fed into the laundry machines. A metal instrument could rip the cover and padding of our irons, in addition to causing a work delay," Gordon said.

One item on Gordon's list, latex gloves and other non-disposables, is discarded in linens, in addition to causing a work delay, "We have seen them on the patient floors and operating rooms, but we also receive them from the floors where we process the laundry. They are sent to us for processing by the laundry. Sometimes, surgical instruments, such as scalpels and syringes, are carelessly placed in the pockets of the gowns which are sent to us for processing. These instruments could cause a painful injury if handled improperly," Gordon said.

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Mrs. Cecilia Ammons, a blood-drawer, said, "We watch for paleness, chills and perspiration. We take the prospective patient and have him place his head between his knees. About two or three patients faint a week."

Miss Ethel Thompson, a blood drawer, grinned and said that blood drawers are "snooty" in that they try to get the patient's attention focused on something pleasant and relaxing.

"When we have them in the proper frame of mind, we stick the needle in the most accessible vein." Mrs. Johnson added, "When we have them in the proper frame of mind, we stick the needle in the most accessible vein."

There may be more to blood-drawing than "what meets the eye," or literally, "what meets the vein of a person's arm." Practical psychology or even "special" intuitive powers may be involved, some blood-drawers suggest.

Aside from the 18 or so blood-drawers that cover the hospital medical complex daily, drawing specimens from patients, there is also a group of three full-time blood-drawers that perform their duties on the fifth-floor laboratory of Wohl Clinic. They handle out-patients.

These employes work full-time drawing blood samples at the request of the attending physician, drawing specimens on Barnes doctor's office patients, Barnes employees, student health and student nurses. Assisted by two part-time employes, this group of blood-drawers processes 134 out-patients daily and more than 5,000 patients per month.

One of the drawers, Miss Ethel Thompson, said that her work becomes tedious about 2 p.m.

Younger Patients Faint More Frequently

The drawers unanimously feel that the younger patients are the candidates most likely to faint, and young men faint more frequently than women.

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Mrs. Floydena Epting, who is in charge of the glove room in central service, tests a surgical glove during re-processing in order to use the gloves again. At one time, her section was re-processing 1,000 pairs of gloves daily. Now the figure has diminished to 400 pairs daily.

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BUIIETJUN
BARNES

Introducing the new pants suits to Barnes: Dr. Lacy's 15 years of movement. Mrs. Allen. Mrs. Harris and Miss Doretha Harris and Mrs. Brenda Allen.

The award was based on Dr. Lacy's 15 years of work with diabetes or in a closely-related field. The award was based on Dr. Lacy's 15 years of clinical research accomplishments. The award is named after two physicians who were at the University of Toronto, Dr. Frederick Banting, who with Dr. Charles Best, discovered insulin.

Dr. Robert E. Shank, chief of preventive medicine, recently was given the highest honor awarded to alummi by Westminster College. A nutrition expert, Dr. Shank received the Westminster College Alumni Achievement Award which is presented annually for outstanding success in one's field.

Dr. Galen B. Cook, a 1955 graduate of the Washington University School of Medicine and a former resident surgeon here, has established a private medical practice at Carmel, Calif. Prior to this, Dr. Cook had been chairman of the Cancer Research Center medical engineering division at Columbia, Mo., since 1967.

New Nurse Uniforms Introduced Here

Pants suits for nurses are the newest fashion trend at Barnes. Introduced on 3 Wohl, the suits may gradually catch the fancy of nurses in other parts of the hospital. A spokesman for the nursing department said other hospitals across the country already are wearing the pants suits, so the suits are not innovative.

While the bell-bottom pants suits are new at Barnes, culottes have been worn here since the mid 1960s. Operating room nurses in other hospitals already wear pants suits instead of the scrub uniforms that are familiar to many Barnes' employes.

The two nurse assistants who exhibited the suits, Miss Doretha Harris and Mrs. Brenda Allen, were ecstatic over the amount of freedom they had. Some of their nursing activities involve some real gymnastics, moving patients, bending down to lift leg supports of wheelchairs and reaching to get supplies.

"The pants suits are more flexible and comfortable. The slack-and-tunic ensemble should enable nurses to have greater freedom of movement," said Mrs. Allen. Mrs. Harris said, "Some nurses think that the miniskirted uniforms are the best. These pants suits are difficult to beat."

In the case of the pants suits, there will be no mandate pro or con. Instead, the choice of nursing garb is left up to the nurses themselves, as long as the uniforms conform with the basic standards as established by the nursing department.

Someone mentioned that colored uniforms "would make the uniforms even more attractive." However, this suggestion violates one of the cardinal rules of nursing, primarily that the nurse's uniform is traditionally white. While the initial reaction on the part of the two nurse assistants seems favorable, there could be some objections to the change. For example, pants suits may look attractiv on a nurse with a trim figure, but what about nurses whose waistlines are not slender?

Milestone for Barnes' Life Insurance

Group life insurance is something that many individuals take for granted. At Barnes, it is a part of an overall program of benefits for employes that is sometimes referred to as "silent salary." Silent salary is a composite of personal benefits, frequently called fringe benefits, which are those important "extras" the hospital provides for the employe, in addition to his regular wages or salary.

Barnes pays the difference between the net cost of the group plan and the fixed amount paid by employers.

Since the program's inception, about $600,000 has been paid in total benefits to the families and beneficiaries of Barnes employes who have died.

Other items included in the Barnes silent salary package are: paid holidays, vacations, excused work absences, sick leave with pay, the retirement plan, hospitalization, surgical and medical coverage. Thirty-five years ago, Barnes and Metropolitan Life Insurance Company contracted to provide group coverage for the hospital's employes. When the plan began, the U.S. was slowly emerging from the depression and group insurance was accorded little of the recognition and acceptance that it is today.

Displaying new pants suits are nurse assistants, Miss Doretha Harris, left, and Mrs. Brenda Allen, on 3 Wohl.

Amount of Free Life Insurance

None, but if person is still working at Barnes after age 65, Barnes will provide $1,000 Life Insurance until the day he retires.

Reduce to 10% but not below $1,000

Reduce to 15% but not below $2,000

Reduce to 25% but not below $2,500
Gardening and health have long been intertwined. Even though it is no longer a part of the medical worker’s job to cultivate herbs and plants from which to concoct medical potions, Barnes’ employees still find gardening a relaxing and healthful past-time.

When a doctor today plants a garden behind his house, it is taken for granted that he is filling his leisure time with a relaxing hobby to help take his mind off the rigors of his profession. As many years ago, however, the garden behind the living quarters of the local GP was vital to his practice of medicine. In the days before transportation facilities were available, the medical profession could not rely on far-off pharmaceutical houses for potions, tonics, or curatives necessary in their practice.

A hospital employee who plants a vegetable garden that includes onions and cucumbers, probably envisions a delightful salad to complement a summer cook-out. In Florence Nightingale’s time, however, the onions were more likely to be used to concoct onion syrup, a sure cure for croup. The recipe called for alternate layers of thinly sliced onion and sugar. This was let stand for a few hours, until it yielded a sweet syrup. A teaspoonful of this offered speedy relief from croup-like maladies.

Similarly, cucumbers were looked upon not so much as a salad ingredient, but as the raw material for a potent salve with which to cure vesicular eruptions of the face and hands. It was made by mixing the juice from grated cucumber with three parts of vaseline. The mixture was heated over boiling water to perfect liquefaction, then removed from the heat and whipped until cold.

The flower garden of the doctor of yesterday may have been a thing of beauty but often its beauty was not its primary reason for being. The rainbow of color offered by a garden of purple bittersweet, golden sunflower, pink geraniums, and lavender bitter-root was only incidental to their value as medicinal plants.

A decoction of geranium root, employed twice a day as an injection, was once considered a sure cure for bleeding piles. Bitter-root was another celebrated remedy adopted from the Indians, who considered it an infallible remedy for venereal diseases, as well as dyspepsia, gout, and liver disease.

Indians used sunflower to cure fevers and to treat bruises and ulcers. Their palefaced neighbors adopted the remedy, which also had the remarkable virtue of “making an old man young.” This could have been due in part to the fact that the “medicine” was in the form of a tea made from the fresh bark of the root in the ratio of four ounces extract to one-half pint of alcohol.

Bittersweet and woody night-shade were prepared in a variety of ways to treat a variety of ills, including jaundice, rheumatism, syphilitic affections, kidney troubles, scaly cutaneous disease, and obstructed menstruation. An ointment made from the yellow root and mixed with lard was a common remedy to “scatter painful tumors.”

The bark and roots of the graceful pussy willow were the source of yet another potent tea, which, drunk freely, was purported to cure almost any case of bloody-flux or dysentery. The bark, bruised or in powder, in combination with charcoal powder, was considered a superior remedy in cases of gangrene or mortification. It was applied in the form of a poultice. Tea made from the buds and twigs of the pussy willow was prescribed “when it becomes necessary to suppress sexual desire.”

Today’s enlightened society knows, of course, that the above remedies can be classified with “old wives’ tales.” Modern medicine has no place for the folk-cures of yesterday. Or has it? Some of our era’s most potent drugs have evolved from the folk remedies of an earlier era.

For example, the bark of the cinchona tree was chewed by South American Indians centuries ago as a cure for jungle fever. It wasn’t until years later that the researchers for an anti-malarial drug discovered that quinine, obtained from the bark of the cinchona tree, was the best treatment for malaria.

Foxglove was a folk-cure for diseases of the heart long before it gained respectability. Today, as “digitalis,” it is prescribed world-over by renowned heart specialists.

Similar discoveries have been made with regard to henbane, codeine, aloe, and reserpine, to name but a few. Research is continuing daily in laboratories throughout the world to develop new drugs to treat a variety of human conditions. It is not unlikely that a scientist somewhere will discover true medicinal properties in some plant, flower, herb, or tree that we now consider only a folk-cure.

Perhaps someday we will even discover what marvelous properties the ancient plant, sylphium, possessed. This umbelliferous plant was used so extensively as a medicine by the ancient Greeks and Romans that at the beginning of the Roman Empire it had died out. It was much valued and is pictured on ancient Cyrenaic coins. It was sold for its weight in gold in the markets of Athens and Rome and was used, according to Hippocrates, both as a sudorific and to reduce fevers. The last sample known of this drug was presented with great pomp and ceremony to Nero.
A. Clematis, a climbing perennial, clings to the wrought-iron porch supports in front of the home of Mrs. Cornelia Knowles, former associate director at the medical center. Now retired, Mrs. Knowles spends her time as a hospital volunteer worker and cultivat ing the plants and flowers around her house. In her backyard are redbud and dogwood, tulips, peonies, irises, poppies, 13 types of trees, and almost 100 rose bushes.

B. Leon Bialecki, a third-year medical student, admires a bouquet on the desk of Mrs. Martha Hole scher, a receptionist at Renard entrance. Mrs. Holes cher brings flowers almost every day. She said she receives many compliments on their beauty. "One physician was particularly grateful that he was able to see a genuine shamrock that I had," she said.

C. Mrs. Grace Coleman, assistant director of the school of nursing, inspects a Delphinium in her backyard. Mrs. Coleman also grows geraniums and azaleas in the front of her home.

D. Dr. Paul Max, assistant obstetrician-gynecologist at Barnes, clips a hydrangea bloom at his home. Dr. Max also grows marigolds, in addition to a vegetable garden that features peppers, garlic, onions, and tomatoes. Dr. Max's son, Brian, who is enrolled at the University of Missouri in animal husbandry, also spends time in the family garden. Brian said, "Students from the country have a definite advantage over those raised in the city. For example, they already know how corn tassels aid pollination."

E. Homer Cross of the barber shop at Barnes has a garden which is compact in dimensions, but yields enormous amounts of produce for immediate consumption or for canning purposes. Cross has beets, cucumbers, string beans, strawberries and almost every vegetable imaginable in his garden. He also has more than 100 tomato plants. Cross attributes his success as a gardener to factors not usually practiced by the weekend gardener: 1) putting seedling plants in his homemade hot-house in early April to give them a start on the growing season, 2) applying tons of natural fertilizer.

F. Mrs. Donna Potts of the beauty shop at Barnes shows newly-picked radishes to her son, Christopher, in the family's garden. This is the first year that Mrs. Potts and her husband, David, have planted a garden. It contains many types of vegetables, including 55 tomato plants. "We spend many hours together in the evenings in the garden. Gardens are also economical," Mrs. Potts said.

G. Miss Ann Campbell, a consultant for special nursing services, examines a limequat in her enclosed patio. As a horticulturist, Miss Campbell's forte is growing African violets. She takes considerable pride in growing 11 varieties of the delicate blooms which she has on table display in her office in 12 Queeny Tower. She plans to enter them in judging competition this fall.
Fire-Fighters Clocked Under 7 Minutes
For 'Dash' with Equipment to 4th Floor

"Fast action in the event of a fire could prevent a disaster. The purpose of fire drills at Barnes is to acquaint employees with the proper safety procedures and also to sharpen the skills of the members of our own fire-fighting unit — safety and security and maintenance," said Marvin Richardson, safety and security guard.

Richardson was one of three members of the Barnes' fire-fighting unit that responded to an alert for a mock fire drill held recently in the public relations office on 4 Rand-Johnson. The drill was initiated by a representative from safety and security who contacted public relations for them to call the telephone operator and inform her that a "mock fire drill was taking place." The operator then called the various fire-fighting units.

Within four minutes after the start of the "fire," James Reidelberger, safety and security, also arrived and entered the public relations office where the window curtains were supposedly on fire. Reidelberger evacuated the employees to safety. Less than three minutes later, John McWilliams, a maintenance man, arrived on the floor, hastily pushing a fire cart, equipped with different types of fire extinguishers: Water, dry chemical, carbon dioxide and foam. McWilliams was in the ground floor maintenance office when the alert was sounded. He grabbed the cart there and took a nearby elevator to the fourth floor.

Richardson said, "Speed is essential to stopping a fire while it's small. Considering the time elapsed for the elevator, seven minutes is pretty fast for equipment to arrive."

Grant (continued from page 1)

liver disease, and alcohol consumption in human beings."

In his studies, therefore, Dr. Grisham is focusing on cultivation and study of human liver tissue. "It is difficult to obtain enough donor liver tissue," he said. "Because this tissue grows most rapidly during the early years of a human life, we prefer tissue from infants. Therefore, we have problems, because we must obtain this from donors within a short time after death. As with any situation where an organ is required from a human who has recently died, often we do not get permission from parents in time to be able to obtain the child or fetus's liver."

Patio-Type Luncheon
Barnes' employees and visitors are now eating lunch, Monday through Friday, at the Queeny Tower dining facilities, consisting of a sandwich, dessert and drink, are prepared by the Tower's dining facilities and sell for $1. Dining hours are from 11 a.m. to 2 p.m.

According to Joe Bono, manager of the Queeny Tower dining facilities, employees can purchase one particular type of sandwich each day, ranging from ham to corned beef, in addition to a drink selection which consists of either coffee, milk, beverages or tea. Dessert is pre-packaged.

Tables are set up around the pool to accommodate 50 people at one time. Three employees from the Queeny Tower dining facilities cater the meals. In addition to the patio-type luncheon, Bono said a roll or a doughnut and coffee could be purchased at pool-side by an employee for 25 cents, Monday through Friday, at 9:30 to 10:30 a.m., the time that many employees take coffee-breaks.

Employees Honor Retiree; Recall Memories

Mrs. Fern Bridgeforth, central services coordinator, presents a gift, an electric iron, from Barnes employees, to Mrs. Erna Jaccard who was retiring after 21 years as a central-service employee. Standing behind the two women is Dillon Tru-
Barnes Hospital on ‘Super-Alert’ During Nixon’s Stopover

Barnes Hospital was on “super-alert” for a few hours June 25, while President Richard M. Nixon was in St. Louis to address the Jaycee’s convention.

Barnes is designated the primary receiving hospital for top U.S. and international dignitaries visiting in this area. Therefore, during the President’s brief stay in St. Louis, the hospital stood ready to meet any emergency that might arise involving Mr. Nixon and his party. Medical emergencies such as a heart attack, stroke, and acute appendicitis are taken into consideration as are the possibility of accidents or an assassination attempt.

Prior to the President’s arrival in St. Louis, Miss Nancy Craig, assistant administrator, checked that an adequate blood supply was available and notified Admitting to hold a suite of rooms in readiness. Dr. Walter Ballinger, surgeon-in-chief, and Dr. Clarence Weldon, cardiothoracic surgeon-in-chief, were similarly alerted. The Emergency Room and Security were prepared to act quickly should events have occurred that would bring the President’s helicopter to its pre-determined landing place in the area of the Renard bridge.

These same precautions are taken anytime the president, vice president, foreign head of state or a candidate for the Presidency visits St. Louis. The last such visitor was Vice-President Spiro Agnew, who was in St. Louis to give a talk on February 10, 1970. Prior to that, President Lyndon B. Johnson, Vice-President Hubert H. Humphrey, and the Shah of Iran were the subjects of super-alerts.

Nursing-School Graduation: A Study of Contrasting Moods

Dianne Marie Hilmer received the Copher Award for “outstanding total performance” as a member of the 1970 Nursing School graduating class, at commencement exercises June 6 at Graham Chapel on the Washington University campus. The award, a special scholarship for advanced study, was presented by Robert E. Frank, director of the hospital, on behalf of Dr. Glover H. Copher.

Mrs. Raymond Meisenheimer, president of the Barnes Hospital Women’s Auxiliary, presented awards from the Auxiliary to Christine Lee Palecek for outstanding achievement in the theoretical area, and to Kathleen Elizabeth Geiger for outstanding achievement in the clinical area.

Special honors for outstanding achievement were presented by Mrs. Isobel Roncari, co-ordinator for medical-surgical nursing, to Joyce Elaine Dement, Kathleen Ann Hakes, Susan Louise Pilcher, Patricia Ann Potter, Linda Lucile Reilly.

Twenty-seven of the 49 members of the 1970 Nursing School graduating class from Barnes will remain at the hospital, as was announced at the graduation ceremonies on June 6. Those who will remain are: Sue Carol Grosse, Dianne Marie Hilmer, Anna Marie Floyd, Bonnie Wilson Cuneo, Kathleen Delores Seithel, Barbara Ann Corrao.


Also, Maureen Laverne Lyndon, Kathleen Elizabeth Geiger, Peggy Elise Cooper, Christine Garwitz Puricelli, Sharon Dorothy Monzyk.

Computer Set to Update Pavilion Work Schedules

Computer calculations were to be used to update the “critical path” scheduling of construction work of the new East Pavilion.

The computer will take into consideration time lags due to recent strikes and other factors that could affect the overall completion date of the project, according to Joe Kiefer, construction assistant to the administrative engineer.

In a progress report, Kiefer said that about 80 feet of the southeast wall, 25 feet high, not including the foundation, has been poured. A sewer line, that runs from the East Pavilion under Kingshighway and down into Forest Park, has also been completed. While this project was under construction, the Queeny Tower drive-way entrance was blocked, but the project is complete.

A new electrical sub-station has been installed north of the Mallinckroit Institute as a major transmitting source of power to provide the medical center with “additional standby capabilities,” he said.
Eagerness, Enthusiasm Help Researchers

Overcome Verbal Communication Barriers

Speaking the English language is difficult for seven oriental resident physicians and Fellows who are doing research in the otolaryngology department at Barnes, but eagerness, enthusiasm and patience are helping them overcome the communication barriers.

The physicians are studying under Dr. Joseph H. Ogura, otolaryngologist-in-chief. Dr. Ogura's program of having physicians from foreign countries begin almost 8½ years ago. He constantly corresponds with department heads of medical institutions of foreign countries for their recommendations on personnel who would like to do research at Barnes. Occasionally, aspiring candidates will apply directly to Dr. Ogura for acceptance.

"We are pleased to be able to study at Barnes because it is one of the largest medical centers in the world and it has a fine reputation. Also, Dr. Ogura is a pioneer in the otolaryngology field," said Dr. Goro Mongi who has been at Barnes for two years and who acted as spokesman for a Japanese delegation of three who had gathered in the laryngeal lab on the 12th floor of McMillan. "We can read and write English fluently, but speaking your language is something else," said Dr. Mongi who, in collaboration with Dr. Ogura and other physicians, wrote a medical paper, "Anti-Lymphocyte Serum as an Immunosuppressive," that was presented to the American Academy of Ophthalmology and Otolaryngology last October in Chicago.

The highly-technical paper aptly described an anti-lymphatic serum derived from horses which has been developed to combat the rejection factor, a recurring problem common to all transplants. The research dissertation was the by-product of chemical observations and clinical involvement of Dr. Ogura's larynx transplant with experimental animals.

Durham, N.C., Physician Succeeds Dr. Cordonnier at Post

Dr. Saul Boyarsky, chief of urology at Veterans Administration Hospital, Durham, N.C., and a urologist at Duke Hospital, succeeded Dr. Justin J. Cordonnier as director of the division of genitourinary surgery at Barnes, effective July 1.

Dr. Cordonnier will remain on the Barnes' staff as an associate surgeon in genitourinary urology and he will continue to treat patients in his office at 216 Wohl Hospital.