Barnes Designated As A Regional Trauma Center

Governor Christopher Bond of Missouri participated in ceremonies in the East Pavilion lobby October 11 designating Barnes Hospital as part of the Illinois trauma system and at the same time announced plans for a major preventive health program for Missouri.

Governor Daniel Walker of Illinois, who was also to have taken part in the ceremonies was prevented from doing so at the last minute by an emergency session of the Illinois legislature. In his stead, Dr. Stephen King, associate director of health services for Illinois, presented a plaque to Governor Bond and Raymond Rowland, chairman of the Board of Directors of Barnes Hospital.

Dr. David Boyd, chief of emergency medical services for Illinois, explained the trauma center concept, pointing out that only the night before, an accident victim had been rushed to Barnes by helicopter from Carbondale, Illinois. He said, “I understand he is now doing very well. This is an example of the basis for the trauma center program in that the critically injured patient is often best served when the nearest emergency room is bypassed in favor of a more adequately staffed and equipped facility that is prepared to offer comprehensive treatment for the specific injuries involved.”

Others taking part in the program were Dr. Samuel Guze, vice-chancellor for medical affairs of Washington University School of Medicine, Robert E. Frank, President of Barnes, and the Reverend Robert Davis, chaplain.

In his speech, Governor Bond characterized the designation of Barnes as a regional trauma center by Illinois as “a fine example of two states cooperating on a regional basis to provide the best possible services to their respective citizens.” He added, “Residents of southern Illinois and eastern Missouri will now be able to receive the most effective and efficient emergency medical service within the shortest time possible under the Emergency Medical Services transportation systems operating in both states.”

Saying he recognized the need for the state to provide financial assistance to meet local medical needs, including hospital and health care costs, Governor Bond announced, “At this moment, St. Louis City and County and Kansas City government leaders and public health officials are meeting in Columbia with the director of the state division of health to work out details on a major preventive health program for Missouri. (Continued on page 2)

Barnes Hospital
St. Louis, Missouri

November, 1973

Barnes Personnel Respond To United Fund Appeal

With the United Fund campaign drawing to a close, six of Barnes’ seven divisions had exceeded or were nearing their fair share goal at Bulletin press-time, with only Nursing still a long way from quota.

Richard Grisham, assistant director and chapter chairman of this year’s campaign, reported he hoped more cards would be forthcoming from the Nursing division, adding, “We are counting on them now, or we can’t anticipate being a fair share hospital this year.” Barnes has succeeded in reaching that milestone for the past six years. This year’s goal is $60,404 for the entire hospital. Each division’s goal is based on the number of people in that division as well as their salaries.

Again this year, the division headed by Robert McAuliffe, controller, was the “firstest with the mostest.” They quickly became fair-share givers the first day of the campaign and contributed a total of 187% of their goal. This group includes employees from budget control, accounts payable, patient accounts, general accounting, cost accounting and the controller’s office.

The second highest contributor—again a repeat performance—was the division headed by Barnes vice-president John Warmbrodt, which includes employees from data processing, methods, stores, forms control, receiving, personnel, print shop, cashier’s office and sign shop. Their total at press-time was 127%.

Other divisions reaching 100% were President Robert E. Frank’s with 111% and that headed by Tom Winston and Dillon Trulove with 100%.

Joseph Greco’s division had reached 90% and the division headed by Jay Purvis and Rich Grisham reported 92% with more cards coming in.

Sue Kingston’s division had achieved 55% of Nursing’s goal, bringing the overall total for the hospital at press-time to 82%, or $49,571.04.

Six Barnes Doctors Get F.A.C.S. Degree

Six Barnes physicians were inducted as Fellows of the American College of Surgeons during its annual Clinical Congress held in Chicago October 15-19.

They include Drs. James Bucy, James Ellsasser and Joseph Kopa, assistant surgeons; Drs. Ronald Burde and Samuel Canaan, Jr., assistant ophthalmologists; and Dr. Gershon J. Spector, assistant otolaryngologist.
Bloodmobile Visit Dec. 5

The Red Cross bloodmobile will visit Barnes Hospital for the last time this year on Wednesday, December 5. Information about making a donor appointment will be available from supervisors prior to the bloodmobile visit.

Although the September blood drive was a success, with 73 productive donors, including 36 first-time donors, Barnes is still short of this year’s goal.

Anyone participating in the donor program is covered for all blood used by himself and his household as well as parents and parents-in-law and grandparents and grandparents-in-law anywhere in the United States for a period of one year.

Dr. Paul Marks Delivers Moore Memorial Lecture

The first annual Carl V. Moore memorial lecture was given September 21 in Clopton amphitheatre by Dr. Paul A. Marks, professor of medicine and vice-president for health services at Columbia University College of Physicians and Surgeons.

Dr. Marks’ subject, “The Thalassemia Syndromes—Genetic and Biochemical Aspects,” reflected Dr. Moore’s long interest in blood diseases. He was a pioneer in the investigation of iron deficiency anemia.

Prior to his untimely death from heart disease in August, 1972, Dr. Moore had been associated with Barnes Hospital since the 1930’s and had been physician-in-chief since 1964. He was head of the Department of Medicine from 1955 until the time of his death.

In conjunction with the lecture, a portrait of Dr. Moore by New York artist William Draper was presented to the medical school by Dr. James A. Wood, president of the Alumni Association.

WUMC Re-Elects Rowland

Raymond E. Rowland, chairman of Barnes Hospital’s Board of Directors, was re-elected chairman of the Washington University Medical Center board of directors at its annual meeting September 11.

Dr. Samuel B. Guze, Barnes associate psychiatrist and president of the Medical Center board, also announced that WUMC had provided more than $6.3 million in free patient care during the past year. He added that 54 per cent of all new outpatient visits in the greater St. Louis area were in the Medical Center, with City Hospitals receiving 17 per cent; St. Louis University hospitals, 12 per cent; St. Louis County Hospital, 7 per cent; and all others 10 per cent.

In reviewing the past year, Dr. Guze commented on the impressive growth of WUMC. “The most recent addition was the heliport, dedicated in June, which now qualifies this as a Class I emergency facility.”

“This year we also opened a new 427 car garage and Barnes is planning a 1,200 car sub-surface garage opposite its new East Pavilion,” he said.

He also commented on the program where Barnes Hospital, Children’s Hospital and the Medical School have joined forces to develop a combined autopsy service and transplantation unit known as CURE, the Clinical Unit for Recent Expirations.

Dr. Guze also expressed concern about recent governmental decisions which threaten to curtail research grants, but ended on an optimistic note. “So long as we all work together and continue to warrant and benefit from the generosity of the St. Louis community, the Medical Center will solve our problems, because we have the first rate people to do the job.”

Dr. Marvin Fishman, assistant pediatrician, the new director of the Irene Walter Johnson Institute of Rehabilitation, consults with an elderly patient who has a speech problem. Dr. Fishman’s appointment was effective October 1.
Construction Update

A shortage of fabricated hollow steel has delayed several of the construction and renovation projects now underway here, according to Chief Engineer Kurt Bemberg.

For instance, the shortage stalled work for about a month on the emergency rooms. However, demolition has been completed there and the fabricated steel is now on hand. Work is again underway with completion date still expected to be January 31, 1974.

When finished, the facility will house new x-ray equipment, new electrically isolated circuitry, a crash room for coronary patients, new waiting rooms and a new observation room.

Work on the third, fourth and fifth floors of Wohl Hospital has also been affected by the shortage, according to Bemberg. Demolition has been completed on the fourth and fifth floors but the lack of fabricated metal is causing delays in rebuilding. However, air-conditioning and plumbing work are running ahead of schedule there. Bemberg said he believed the December 31 completion date will be met.

Work on the new Clinical Unit for the Recently Expired (CURE) and the fifth and sixth floors of Rand Johnson is proceeding on schedule. The CURE unit will provide upgraded autopsy facilities.

All demolition has been completed in Rand Johnson but rebuilding has been complicated by the fact that everything done there affects the operating rooms. Consequently, crews have worked on several Sundays, the only time the operating rooms can be shut down completely. Meanwhile, according to Bemberg, the nursing staff in Rand Johnson has been extremely cooperative, even when plumbing service has been interrupted.

Staff Changes

The President's office reports the following persons on staff: Dr. William D. Owens, assistant anesthesiologist (effective September 1); Dr. Bruce Hoekerman, assistant dermatologist (effective July 1); and Dr. Virginia D. Bemberg, assistant surgeon (effective August 21).

The following were reported off staff: Dr. H. R. McCarroll, Jr., assistant surgeon (on leave of absence from September 1, 1973 through August 31, 1974); Dr. Oscar Bolch, assistant obstetrician-gynecologist (resigned July 31); Dr. G. E. Torstenson, assistant radiologist (resigned August 31), and Dr. E. J. Potchen, associate radiologist (resigned September 15).

Barnes Secretary Wins

Donna Peck, secretary in Laboratories, recently had published her solution to the "Problem" feature in Office Guide for Working Women, a magazine for women in business.

Her answer concerning what an employee should do about having to work an excessive amount of overtime at night was as follows:

"If the recent increase in overtime is only temporary, consider your supervisor's situation. She has a heavy workload that must be completed by a certain deadline so she has no alternative but to ask you to work overtime. In my opinion, two to three nights of overtime a week isn't excessive if it's temporary. If this is the case, I suggest you say nothing to your boss about the overtime interfering with your personal life and console yourself with the fact that it will be temporary.

"On the other hand, if the overtime is permanent and several employees are asked to work late, suggest to your supervisor that perhaps your office needs an additional worker to help with the increased workload. Hiring another person would also be to your company's advantage since several employees working overtime at time-and-a-half costs more than one additional employee paid at a regular rate."

Retiree

Mary Conyers, who retired September 28 after 22 years at Barnes shows her service certificate to Doris Canada, director, dietary, and Joseph Greco, associate director. Mrs. Conyers began work here in 1950 and had become noted for her tempting salads. She plans to spend a great part of her free time now on her property near Milliboro.
"They won't even lie down for sutures," reports Dr. J. G. Probstein of professional hockey players.

It's not what you feel but how you feel about what you feel that determines the degree of pain you experience—that's the consensus of Barnes' doctors and nurses questioned about what pain really is.

Although everyone has experienced pain—and it is necessary for preservation of species—no one knows very much about it. An individual's threshold for pain, that point at which he begins to feel an uncomfortable sensation, is subjective and cannot be measured adequately. In laboratory tests, for example, it is common to get 15 different reactions ranging from "excruciating" to "mild" from 20 people subjected to identical controlled electrical shocks.

The patient's attitude has a lot to do with how he tolerates even the severe pain resulting from diseases such as cancer, herpes zoster, migraine or tic douloureux, perhaps the most intense of all physiologic pain because it is ingrained into the nervous system itself, according to Dr. George Klinkerfuss, associate neurologist.

"It is easier to tolerate an acute pain that one knows will soon be over than it is to tolerate a lesser pain that is not apt to go away soon," Dr. Klinkerfuss said.

He cited the Christian martyrs of earlier times as an example of how one can psychologically prepare himself to face inhuman torture apparently oblivious to pain. This is a form of self-hypnosis that has been evident through the ages—in the wild charges of the barbarian hordes, the stoic oriental acceptance of pain, or the Indian fakir on his bed of spikes. Pain, it seems, has always been what you make it.

Today there are several approaches to dulling pain or helping an individual to ignore it. Aspirin relieves pain where it is being produced and narcotics dull or alter the interpretation of pain in the brain. A counter-irritation or a disruption of the transmission system in the nerves to prevent the unpleasant sensation from reaching the cortex is another method. In extreme cases, nerves are sometimes severed, and a recent procedure is the implantation of an electrical stimulator that can be activated by the patient when pain becomes too intense. This sets off impulses that block incoming pain.

Psychological support and one's own attitude remain most important however. This is particularly true, according to Dr. Klinkerfuss, of headaches, whether migraine or the common tension type caused by muscle contraction constricting blood vessels.

If, as Dr. Klinkerfuss suggests, one concentrates solely on how much a headache hurts, it is going to hurt even more. On the other hand, someone who can force himself to concentrate instead on some external factor will find he has forgotten he has a headache. "There are those people who live with what others of us would term excruciating pain; yet they are able to function well. And then there are those with perhaps less cause for pain who experience disabling symptoms," he said. "We don't understand pain, but there isn't anyone who can't train himself to face it and overcome it, at least to some degree."

Although Dr. Klinkerfuss admitted statistics show that headache is more common in women than in men, he denied that this proved women had a lower pain threshold than men in general. "Women are conditioned to seeing a doctor by virtue of their having borne children, while men are frequently trained to feel that needing to go to a doctor is somehow a sign of weakness and they are trained from childhood to be big and strong," he said.

Some of the biggest and the strongest are professional athletes, particularly those who play ice hockey or football. They have a reputation for being tough guys who are impervious to the pain felt by common mortals, and Dr. J. G. Probstein, assistant surgeon emeritus and team physician for the St. Louis Blues, is the first to agree with this assessment.

He believes hockey players, Canadian hockey players at least, have a peculiar threshold for pain that is the result of their early home life in the icy reaches of Canada where temperatures are often 30 degrees and more below zero. "It's an environment that doesn't make you soft," he said. "These guys come off farms or from mining areas where the weather is rough and the living is rough. They start playing hockey as soon as they can walk and their family doesn't expect them to moan if they get hurt."
players will ever submit to an anesthetic for sutures, no matter how severe the lacerations. "They won't even lie down; they insist on sitting up and that sometimes makes suturing pretty awkward," he added.

"Their skin is no tougher," Dr. Probstein said, "it's their attitude that's different." Dr. Probstein, who is Jewish himself, offered this analogy, only partly in jest: "In Canada, when a 4 or 5 year old kid gets his first laceration playing ice hockey, it calls for a family celebration. It's almost like the Jewish circumcision rites."

Dr. Fred Reynolds, associate surgeon, and a team physician for the football Cardinals, agrees with his colleague that athletes probably have higher thresholds for pain and he too believes that it is possible to train oneself to not respond to a painful stimulus.

Dr. Reynolds points out, however, that those athletes with a low pain tolerance don't make it all the way to the professional leagues. "First-class athletes have learned long ago to function in spite of pain," he said. "They have had to acquire a tolerance because they receive so many injuries and that is part of the reason they have gotten to be where they are." He also emphasized that the response to pain is individual and that there is no method of evaluating pain, although he admits there seems to be a different response to pain in men than in women. "But that is because a stoic attitude is expected of men and it is not socially acceptable to make a fuss," he said.

Mrs. Zenobia Thompson, head nurse in delivery, has a slightly different thought on the subject. "I've wondered every now and then how a man would react to labor and delivery if he had to experience it," she said. But she agreed also that fear heightens pain and overcoming fear and knowing what to expect enables one to cope with pain. "That is the basis for natural childbirth classes," she said. "Once a person understands what is happening, the pain can be coped with. The enormous problem is overcoming the fear of pain."

In her experience, Mrs. Thompson has found that the younger woman reacts more than her mature counterpart because "the young don't seek to understand and are more apt to be scared." She added that some men seem to almost feel the labor pains themselves as they react psychologically to their wife's delivery.

An athlete who plays in spite of a painful injury or one who rejects a local anesthetic for sutures has much in common with the woman in labor who opts for natural childbirth — each has been sufficiently motivated to concentrate on something that is more important to them than pain, whether it be pride, a professional career, or the joy of seeing one's baby born.
Employe Awards Dinner

Buzz from the boss
Bernice Scott, clinic cashier and Barnes' longest term employe with 45 years of service, receives a congratulatory kiss from Robert E. Frank, President.

115 years' service
Three Barnes employees with a total of 115 years at the hospital. They are (from left): Alice Marshall, administrative secretary (35 years), Florence Mueller, chief pharmacist (35 years), and Bernice Scott, clinic cashier (45 years). Howard Helmer and Augusta Jordan, each with 40 years' service, did not attend the dinner.

Happy times
Rose Valle (15 years) puts an arm around Gladys Poizell (20 years) and Jay Purvis, associate director.

“It is nice to be important but it is important to be nice”
(Note: The editors felt the following verse, penned by Georgia Greer of the eye clinic, describes the Employes' Dinner more sincerely and completely than any story could.)

To Mr. Frank and Mr. Hanses, and the rest of the staff that thought of the Award Dinner September 28, 1973 in our behalf:

The party at the Chase Park Plaza on the Starlight Roof, will long be remembered in my Barnes Hospital book.

It was a wonderful evening you sponsored for us pinning beautiful corsages which would have been enough.

But everyone there knew each name it was spelled out clearly in the hall of fame.

The hello's and smiles were all over the place because everywhere you turned there was a familiar face.

The tables were beautiful and the food was good. Everybody enjoyed it as I thought they would.

The prayer that was prayed before and after the meal was timely and in order and I know it was real.

When your name was called great big smiles and grins walking up to Mr. Frank to receive a beautiful pin.

The administrative staff was in a long line congratulating you for your service and time.

The warm hand shakes, hugs and kisses too, made me feel as if I was somebody new.

The invitation, I know, was really a test to see the old employees at their very best.

We have left the bottom and fast approaching the top, we will do our best until the signals say stop.

Thank you very much for all the fun.
Thank you very much it was truly well done.
Sgt. Mobley Completes Police Training Course

Sgt. Clint Mobley of Barnes' Safety and Security department recently completed the Missouri Highway Patrol's three-week course in police methods at the Patrol's Jefferson City headquarters.

Sgt. Mobley was one of the first persons who was not a member of a governmental police force allowed to take the course, which is mandatory for most of the state's police and sheriffs officers.

The course consisted primarily of classroom work, plus firearms and physical training. The nearly 40 students attended classes eight hours a day, four days a week, and ten hours a day on the fifth day. When not in class, they were housed in the Patrol's dormitory.

The subjects covered in lectures, films and demonstrations included criminal law, criminal evidence, crime scene investigation, search and seizure, traffic control and accident investigation. All the subjects were taught by regular Highway Patrol instructors, who were experts in each area, Sgt. Mobley says.

"Security today is considerably more complicated than having some old guy walk around with a clock," says Sgt. Mobley. Officers at Barnes write more reports per man—and on a greater variety of subjects—than does an average St. Louis patrolman, which is why a good understanding of all police procedures is essential here.

While Sgt. Mobley feels he benefited a great deal from the course, he says it also made him aware of just how much there is to learn. "For example, one of the most important things you can learn is how to make a case so it will stand up in court. This requires more than good police work, it requires a thorough understanding of the law," he says.

Sgt. Clint Mobley

"Sgt. Mobley is the first of many Barnes officers we intend to send through the course," says William Burkett, security chief, who convinced the Highway Patrol to accept Sgt. Mobley as a student. In addition to the Patrol's course, other officers are enrolled in police science classes at nearby junior colleges. Special training is also provided within the department. "We are looking toward the day when we will have an entire force of completely trained officers," chief Burkett says.

September Tribute Fund Gifts

The following is a list of honorees (names in boldface) and contributors to the Barnes Hospital Tribute Fund during September, 1973.

In Memory of:
Torrey Foster
Mr. & Mrs. James Alfring
Dessa Anne Gray
Dr. & Mrs. Harold Scheff
Mrs. Charles Brice
National Vendors
M. E. Lyndon Crews
Dr. & Mrs. Frank Shobe
Dr. & Mrs. Harold Joseph
Joseph Berger
Harry & Aline Holmes
Mrs. Terrye Balin
Catherine Beyer
Robert Rosenbaum
Dr. & Mrs. Harold Joseph
Mrs. Marion Weil
Dr. & Mrs. Harold Joseph
Mrs. Evelyn D. Mitchell
O. A. Mitchell
Dr. Frank R. Bradley
Dr. & Mrs. Harold Joseph
Dr. & Mrs. Heinz Haffner
Vera L. Mayo
Dr. & Mrs. Fleming Harper
Mr. Norfleet H. Rand
Mrs. Paul (Jean) Kolker
Mr. & Mrs. R. T. Fisher
Catherine Beyer
Mr. & Mrs. Harvey B. Wittcoff
Mr. & Mrs. Harry J. Holmes

In Honor of:
Wishing Well Gift Shop
Anonymous
Obstetrical Research
Robert Srenco
Miss Rebecca G. Fisher
Burn Unit
Anonymous
Mary Zinser Receives Beckwith Award

Mary Zinser, a member of the August graduating class of the Barnes School of Nursing, was named recipient of the Beckwith award. She is the daughter of Tom Zinser, manager—in-patients, patients accounts.

The cash award, to be given this year only, was sponsored by the nursing students themselves to honor Bertha Beckwith, a nurse here for about 40 years and assistant director of the nurses’ residence at the time of her death last year.

The award honors the student who had contributed the most to the school by her school spirit, loyalty, and dedication. The selection committee, composed of three faculty members and three members of the personnel of the nurses’ residence, was appointed by the student council.

Nancy Langhorst received the Beckwith award at the June graduation.

Hospital Happenings

Sunshine yellow and orange bring a touch of cheer to the new “Information for Patients” brochure. Updated information, including the new centrex telephone numbers, are included.

Tom Calhoun, second year assistant resident, general surgery, has been named chairman of the house staff liaison committee.

Barnes Hospital will say “Thank You” to Volunteers at a reception Friday, November 16, from 5 to 8 p.m. in the Olin Penthouse. All Volunteers and their spouses are invited. Arrangements are being handled by Mrs. Gerald Canatsey, vice-president, program and hospitality, for the Auxiliary.

Eight members of the Barnes nursing faculty and one resident physician served as volunteers to take care of any nursing needs at the Bike-a-thon held in Forest Park, Sunday, October 14, to benefit the American Cancer Society.

The Reverend Robert Davis, Barnes chaplain, had the role of the “hero” in the 30-minute melodrama “Out of the Storm” on board the Delta Queen the weekend of October 14-15. The Queen’s journey to Hannibal and back was sponsored by the St. Louis Symphony Society.

James Cole, assistant night supervisor in the dishroom in Dietary died September 30. He was 21 years old.

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What’s Inside?

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St. Louis, Missouri 63110