Patient Care Fund benefit to aid patients in need

A retired minister and his wife from St. Francois County in Missouri recently received $1,000 from the Patient Care Fund at Barnes Hospital to help pay for the wife's hospitalizations. They are representative of patients who have received assistance from the Fund and those who will receive aid as a result of a benefit buffet and movie premiere scheduled for July 18.

"Barnes Goes to the Theatre" was originally scheduled for July 20 but a change by United Artists in release dates of "The Revenge of the Pink Panther" has resulted in the benefit being rescheduled to July 18. It will be at the Esquire Theatre 4 and proceeds will go to the Patient Care Fund.

The minister's wife had been hospitalized at Barnes two times. One time was for extensive testing and the second was for the implanting of a heart pacemaker. The operation was performed early this year and she is recovering satisfactorily, free of the dangers of the irregular heartbeat.

The couple's medical insurance did not cover a portion of the $4,300 bill for the two hospitalizations. "They are living on a fixed income so I suggested application to the Patient Care Fund," said Barnes social worker Gail Shawver. "I think it is really nice that the hospital has been able to recognize a need and find a way of meeting it. This couple even considered selling a house they had built themselves in order to pay their bill. Of course that was not necessary because of the Fund's assistance and because patient accounts was able to arrange a schedule of payments for the final portion.

The Patient Care Fund was established to provide assistance of up to $1,000 for patients who have exhausted insurance benefits or other resources. Also, those administering the fund are sometimes able to find additional assistance from other sources such as local or state agencies, or church and civic groups.

Robert Isaacs, president of Manufacturers Steel Supply Co. of St. Louis, is general chairman for "Barnes Goes to the Theatre." Tickets are tax-deductible and are $50, $100 or $250. They are available from the Barnes development office, 454-2261.

Mr. Isaacs said "Barnes Goes to the Theatre" is a result of interest in Barnes on the part of Scott Jablonow, a former patient, and his parents, Mr. and Mrs. Louis Jablonow, co-owners of Mid-America Theatres.

Mr. Jablonow was injured in Florida last year in an automobile accident and was transferred to Barnes Hospital for treatment. He was hospitalized for three months and needed renal dialysis for five months because of kidney damage suffered during the accident. Barnes doctors, however, were able to restore enough kidney function that he no longer needs dialysis.

His recovery has prompted him and his parents to donate the Esquire Theatre for the benefit according to Joseph Greco, associate director of Barnes and director of development. "This benefit is the first of its type for Barnes and is a result of some very fine people wanting to do something for Barnes and Barnes patients," he said. "We are planning an exciting and enjoyable evening and the proceeds will go to the Patient Care Fund so that more people can be helped."

Six doctors to be honored for 25 years on staff

On July 18 six Barnes doctors will be inducted into the fraternity of those who have served 25 years or more on the active staff of the hospital.

Mrs. Morris Abrams, urology; Harvey R. Butcher and Willard B. Walker, surgery; William D. Perry and John B. Shapleigh, medicine; and Frank B. Long, obstetrics/gynecology, will join those whose names are already inscribed on the 25-year plaque in the Barnes corridor.

The six doctors and their wives will be special guests of honor at ceremonies beginning at 4:30 in Queeny Tower. Barnes chairman Raymond Rowland and president Robert E. Frank will present the honorees with their 25-year gold pins. A reception with hors d'oeuvres and cocktails will follow.

The guest list will include those doctors who have already celebrated their silver anniversaries, Barnes administrative staff and board of directors, and Auxiliary and Barnes Hospital Society officers.

The idea for the plaque originated last year and similar ceremonies at that time honored 138 doctors, both emeritus and active, who had completed 25 years or more of active service at Barnes in 1977. The recognition plaque is updated each year in July to "honor those who have centered their professional lives around this institution," according to Mr. Rowland.
Cancer of colon
(Continued from page 1)
The patients in the study are seen in the surgical oncology clinic and the vaccine is given as an intradermal injection in both upper arms and both upper legs each week for 13 weeks, then bimonthly for a year.

Dr. Wallack's three-year study, which began in January, is designed to determine the statistical significance of the use of the vaccine. Patients with carcinoma of the colon and rectum are randomized and treated either by standard therapy or injected with the vaccine. Dr. Wallack said that the majority of the general surgeons at Barnes have been active in placing patients on the protocol. Earlier human trials that he participated in at the Hospital of the University of Pennsylvania before he came to Barnes proved the safety of the vaccine and indicated its potential efficacy. These results caused Dr. Wallack to start randomized, prospective trials with the vaccine at Barnes.

Further use of the immunotherapy technique here will include patients with recurrent malignant melanoma. Dr. Wallack reported that a clinical trial is already underway at the Leon Berard Cancer Center in Lyons, France, to treat patients with advanced melanoma. "So far, seven patients are on the protocol and we are encouraged by the results. A similar program will be begun soon at Barnes."

Dr. Wallack said he believes that specific immunotherapy with the vaccine may offer hope for the cancer patient, but cautioned, "Although we have had interesting results to date, data is anecdotal because the human trials up until now were not randomized, and it is only by placing patients on carefully designed random protocols that we can determine the true efficacy of the vaccine. This is what we are doing with our study."

Golden Goat inventor recent patient here
A recent patient at Barnes looked as if he had stepped out of the pages of People magazine. The patient, John "Tike" Miller, of Scottsdale, Ariz., was indeed fresh from the pages of the March 13 issue of that national magazine, where he was featured for creating an aluminum-eating machine.

The now-famous inventor chose a St. Louis hospital for his health care because he "has a knowledge of medicine and doctors" and decided Barnes was the best place to be treated. Mr. Miller and his wife are former residents of La Grange, Mo., in northeast Missouri.

The aluminum-eating machine, called the Golden Goat, is about the size of a parking space. Mr. Miller, a toymaker previously, said he plans to lease about 100 of the machines every month to shopping centers. People can take their empty soda or beer cans to the Golden Goat and dump them in the hopper. The Goat separates out all the magnetic materials, then extracts the aluminum cans. The cans are crushed to 17 percent of their original size and weighed on an electronic scale. The Goat's customer is then paid off, slot-machine style, at a rate of about one-half cent a can.

"Aluminum manufacturers have been spending millions to clean up the country and conserve energy through recycling," Mr. Miller told People. "This is the first vending machine where you throw in junk and get back money. Kids will be able to make spending money by cleaning up the environment."

Extra effort enables couple to be married
Nurses and doctors looked on as Pauline Owens and Leland Paine were married April 17. Mr. Paine's room in the coronary care unit was crowded with friends and relatives during the brief, five minute ceremony performed by hospital chaplain David Wyatt.

Weddings in hospitals, although rare, do occur. What made this wedding different is that it involved the combined effort of many Barnes employees and occurred only moments before Mr. Paine was taken to an operating room for open heart surgery.

Mr. Paine, of Centralia, Ill., had entered the hospital a few days earlier with serious heart disease. He had suffered a heart attack a year ago and had been referred to a doctor at Barnes. A cardiac catheterization was performed to determine the extent of the illness and surgery scheduled.

"The doctors told me it was very serious," Mr. Paine said two weeks following his release from Barnes. "They told me about the operation and what to expect, but they did not give me much room for hope."

Pauline Owens, Mr. Paine's fiancée, visited him each day. A member of the x-ray staff at St. Mary's Hospital in Centralia, she said that the seriousness of the approaching surgery made them realize that if they were to be married, it should be before surgery. They made the decision on Saturday night at 11 p.m. The surgery was scheduled for Monday morning.

The work of members of the Barnes hospital staff over the next 36 hours again proves that Barnes is concerned about the needs of each patient. Although more than 1,000 patients are cared for each day, individual needs can be, and are, accommodated.

Individuals and departments directly involved included the nursing staff in the coronary care unit; the evening administrator; the administrative officer of the day; the evening ambulatory service; diagnostic laboratories; a member of the hospital's board of directors; the chaplaincy service; a Circuit Court judge.

The charge nurse in the coronary care unit notified the hospital's evening administrator of the couple's request. On Sunday, the administrator of the day contacted Judge Ivan Lee Holt, a member of the hospital's board of directors who said that a waiver of the three-day waiting period could be made only by a Circuit Court judge.

Arrangements were made for Pauline Owens to have her blood test Sunday night in the evening ambulatory service at Barnes and for the results to be analyzed Monday morning in the diagnostic laboratories.

On Monday morning, with the surgery scheduled for 10 a.m., the blood test was analyzed and Miss Owens, with report in hand, drove downtown where she applied for and received a marriage license. She then went to a Circuit Court judge who waived the waiting period.

During this time the Barnes chaplaincy service had been informed of the events of the past hours and the Rev. David Wyatt, chaplain supervisor, was waiting to perform the ceremony.

With only an hour to go before Mr. Paine's surgery, the small group of friends and family gathered in Mr. Paine's room. The words were said, the license was signed and witnessed and Mr. and Mrs. Paine were married as doctors, nurses and administrators looked on.

Mr. Paine's surgery was a triple by-pass procedure including a valve replacement, one of almost 400 open heart procedures performed each year at Barnes by highly-skilled cardiothoracic surgeons.

"I just feel fine," Mr. Paine said during the subsequent interview. "I'm really anxious to get back to work. That's quite a bit different from just a few weeks ago when I was concerned about whether or not I was going to live." Mr. Paine is a National Services Officer for Disabled American Veterans.

"All the wonderful people at Barnes made everything possible," Mrs. Paine said. "They worked so hard to enable us to get married and the doctors and nurses were great all the time we were there. We don't know everyone's name but we want to say thank you to everyone who helped in any way. We will always be grateful to each of you."
Keeping employees healthy is Carol Gruber's job

Adaptable. That is one word that comes up regarding Carol Gruber, RN, personnel health nurse. Mrs. Gruber transferred to her present job after working in surgery eight years. "I had to adjust to different pressures as well as different tasks," she explained, adding "I knew, however, that I could handle just about anything after I gave a tuberculosis test on television." Mrs. Gruber was drafted to do the test on a television reporter to show how simple and painless it is.

Barnes Hospital has been part of Mrs. Gruber's life since 1960 when she began training at Barnes School of Nursing. Except for a year off to be a full-time mother, she has been working at Barnes since she graduated from nursing school in 1963.

Employees who seek Mrs. Gruber's nursing expertise are offered most of the services they would receive at a private doctor's office. A list of "standing orders" written by Mrs. Gruber and Dr. Sam Montazee, personnel health physician, authorizes Mrs. Gruber, within specified limits, to give certain medications, make Wohl Clinic referrals, and set up employee appointments with Dr. Montazee.

Although the personnel health office is prepared for a wide range of illnesses and injuries, Mrs. Gruber said the most common problems she sees are colds, flu and allergy-related symptoms such as sniffles, congestion, coughing, and sore throat. These year-round ailments peak in the fall and the spring, making these seasons especially busy times at personnel health.

Used needles projecting through trash bags or in soiled sheets cause the most common job-related injury Mrs. Gruber treats. The number of unsuspecting employees getting jabbed by the throwaways has decreased since the first of the year, however. Mrs. Gruber attributes this to an orientation safety film now being used that deals in depth with the problem and how to prevent it.

Sometimes employees come to see Mrs. Gruber because "they just plain do not feel good," she said. Three out of 35 are found to have high blood pressure. Mrs. Gruber said this is the undiagnosed disease she finds most often among Barnes employees. She explained "new employees found to have high blood pressure need to verify they are taking medication prescribed by a clinic or doctor before they may begin their job."

Every new employee also is tested for tuberculosis. Mrs. Gruber said some people feel TB is a disease of the past. "The recent outbreak of TB in a St. Louis nursery school should be enough to convince all of us that tuberculosis is still a disease to be contended with," she stressed.

Because night personnel had trouble making connections with Mrs. Gruber to get their yearly TB tests, she now is at work by seven o'clock two mornings a week to accommodate them. "The main reason for doing regular TB testing is to detect the disease in its earliest stages," Mrs. Gruber explained. This thorough checking keeps TB from spreading.

Mrs. Gruber said her job is satisfying and, "I get wonderful cooperation from infection control, from security, from safety, from Wohl Clinics and from Dr. Montazee. We all work to assure Barnes employees' health and safety."

Schafer, Enzenauer retire from Barnes

Two Barnes employees with a total of 36 years of service to the hospital recently retired. They are Pauline Schafer, food service worker, and Mildred Enzenauer, registered nurse in psychiatry. Both were presented with Certificates of Appreciation by hospital president Robert E. Frank.

Mrs. Schafer is leaving St. Louis to make a new home with one of her daughters in Wentzville, Mo. She said she especially looks forward to spending time with her 21 grandchildren, and taking short trips to part of Missouri and neighboring states.

Mrs. Schafer said she will return to Barnes for medical check-ups, adding that it will be nice to come back and renew acquaintances. "I enjoyed every part of my job," she said, "but what I will miss the most is the people I worked with and for."

Mrs. Enzenauer had worked at Barnes in the early 1950s and then returned to the hospital in 1961. A graduate of a school of nursing in Wichita, Kan., she first began work at Malcolm Bliss in St. Louis.

During her retirement she is awaiting the birth of a second grandchild, planning to visit relatives in Kansas and spend time in Florida during winter months.

Mrs. Enzenauer said she liked her job in psychiatry because of the person-to-person contact. "The staff works so well together in helping our patients that my work was very enjoyable," she said.

New type bed is aiding cardiac care patients

The widespread effect of modern technology is being demonstrated in the Barnes cardiac care unit by a modification in the design of hospital beds that will significantly help in the care of critically ill patients. The new bed, which has been installed in all six of the acute care rooms in the CCU, is radiolucent whereas the former beds—and all other beds in the hospital—are radiopaque.

"With the radiolucent bed, a picture of the heart chamber is readily obtained at the bedside with a portable fluoroscope," said Dr. Robert Roberts, director of the CCU. "Before, if the patient needed a pacemaker or direct monitoring of the heart by special catheters or if there was malfunctioning of these catheters, the patient had to be moved onto a stretcher, taken to the procedure room, and put on the table there, then back to the stretcher and to his own bed again. This may be quite bothersome to the critically ill patient who is often connected to various life supports such as respirators, intravenous tubes and intracardiac catheters."

Now these patients are not disturbed; the portable fluoroscope is merely rolled into the room, and the catheters, pacemakers, etc., are checked there. "We feel this can be beneficial in speeding recovery at a very critical time after a heart attack," said Dr. Roberts.

New blood donor program announced

The Barnes personnel department recently announced a new blood donor program for hospital employees which invites specific departments or nursing divisions to donate blood on scheduled bloodmobile days.

In the past, Barnes utilized a hospital-wide campaign to encourage employees to donate blood during the ten Red Cross bloodmobile visits to the hospital during the year. The new program spotlights a specific group of Barnes employees to donate blood once a year. One employee in each area is designated to announce the date and time of their bloodmobile schedule and register those co-workers who are interested in participating. More than 12 percent of the employees in the May 30 group participated in the donation.
Statistically the Telecommunications people can document their phone calls: 22 real code 5’s, 133 drill code 5’s, 266 code 7’s, 636 STAT pages, 235 outgoing telegrams, 479 incoming telegrams, 5,711 telephone repairs, and (whew!) 502,656 voice pages.

According to George Voyles, telecommunications director, the calls’ contents are not nearly so easy to categorize. Mr. Voyles says that “a telephone in itself is a neutral instrument. It is the people using it who make it silly, or a bother, or a genuine pleasure.”

Agnes Bardot, supervisor, adds this observation: “We get many calls with incomplete information, even from within the hospital. People call for repairs without telling us where they’re calling from or who they are.” Mrs. Bardot adds, “Some callers seem to think the Centrex operators are medical persons who are used to hearing graphic descriptions of physical illnesses. They are not, believe me, and do blush a deep red on these occasions.”

Talking with the Centrex operators sheds further light on the business of answering the phones for one of the country’s largest and busiest hospitals.

Pat Burch says “some phone mistakes wouldn’t happen if you could see the caller. One woman called, saying she hadn’t seen anything for four months. I asked if she wanted the eye clinic. She said she wanted the ob-gyn, that she was pregnant and meant she hadn’t seen anything beyond her protruding stomach for months.”

Sue Schweizer says many callers must think Barnes is a small, intimate place. She explains “They ask for the doctor with dirty tennis shoes, or the short bald one who just got married, or the tall one who wears glasses down on his nose.” She said some callers become irate when asked for a more specific description. Ms. Schweizer adds “My favorite is the caller who wanted the doctor with two l’s in his name.”

Charlene Durham tells of a similar request: the regular caller who asks to speak to the psychiatrist if he is not too busy. One person calls periodically, says Dorothy O’Connor, to ask if Barnes buys bodies. Beverly Donohue tells of a regular caller who asks for a specific person, then hangs up.

Operator Gloria Lopez says much of her time is spent finding out what a caller really wants. Imogene Leimbach says “It’s not unusual that if a caller is asked to repeat his request or tell it to a second party, it comes out straight with all the pertinent information.” Deborah Gardner says many calls are “long-distance, or the caller wants to know not an area code but a zip code. Lil Bradley tells of callers who say ‘Is this Barnes,’ and when assured that it is, hang up.
Karen Lammert, secretary, and George Voyles, telecommunications director, discuss station assignments.

Henrietta Bartlett gives this example of a problem call: a man who identified himself as a policeman insisted she cut in on a patient’s phone conversation so he could speak to her. Mrs. Bartlett had to explain that hospital policy would not allow her to do that. “He was not pleased with that response, but he understood our obligation is to our patients.” An easier request to fill was made of Barbara Echols. A caller wanted to know where her friend, who had been a Barnes patient, might have bought a girdle at the hospital. She was directed to the Wishing Well.

Lea Decker says, “It’s not unusual for us to serve as soundingboards for people who call, rattle at you, and then hang up. But perhaps this, too, serves a useful purpose sometimes.”

Ms. Lopez says callers wanting the Rand-Johnson building ask for Van Johnson, Randy Johnson, Howard Johnson, and sometimes for the Grand Pavilion. Another favorite story lights up Ms. Burch. “This woman called to talk to a doctor, saying it was an emergency. Pressed for details she finally admitted it was because she was so overweight and her husband had threatened to do something drastic if she gained any more weight. For her it was an emergency.”

Tact and a cool head are a must. Many calls are from persons close to panic. Althera Simpson gives the example of a young woman who called to ask if someone from Barnes could retrieve her son’s foot, lost from a stingray bite, from the Gulf of Mexico and sew it back on. Mary Sessler calmed one caller and quickly connected her with the emergency room when she reported that her mother had just swallowed a soda can tab.

Mrs. Bardot stresses that although strange and humorous calls are part of the operators’ day, they take their jobs very seriously and treat every Barnes caller with respectful courtesy. “It is very gratifying to be able to help a caller find needed information, emergency help, or to be there sometimes just to listen,” she explains.

If there is a relatively quiet time in telecommunications, Bertha Edwards, as night operator, should know. But emergencies, pages and codes don’t stop when the patient phones are turned off at 11 p.m.

"Disappearing" property raises hospital costs

A Barnes patient and his wife recently made a special trip back to the hospital to return a pair of pajamas he had accidentally packed with his personal belongings when he was discharged.

"This gentleman had no thought of controlling hospital costs by returning the pajamas," noted the volunteer at the information desk who accepted the package. "His natural honesty just dictated that he return something that did not belong to him." However, this scene repeated many times could substantially reduce patient costs.

The disappearance of all sorts of hospital property—gowns, pajamas, washcloths, bath towels, ashtrays, bed sheets, dishes, coffeepots, etc.—costs Barnes more than $50,000 a year. These things must be replaced, contributing to rising hospital costs, for the actions of a few people.

Sometimes patients just want to have some article to show they were at Barnes. There is a way they can do this without taking something that does not belong to them. Central service supplies each patient with a kit containing soap and a soap dish, plastic water pitcher, thermometer, mouthwash, handiwipes, lotion and a white pen with "Barnes" on it. These belong to the patient and may go home with him as useful souvenirs. Anything else should be left at the hospital to be used by the next patient.

Volunteers needed for kidney dialysis unit

An opportunity that has not been available before is now open to volunteers at Barnes Hospital. Adult volunteers including retired men and women as well as mature junior volunteers who qualify may now work in the Chromalloy chronic kidney dialysis unit.

The new 20-bed unit on the terrace level of the East Pavilion replaced the unit on the second floor of Barnes July 1, and volunteers are being recruited to assist the professional staff there. Volunteers may choose to work from 9 a.m. to 12 noon or from 1:30 to 4:30 p.m. any day, Monday through Friday.

The average dialysis patient must come in three times a week for from four to six hours each visit. During these hours they are connected to dialysis machines and are confined either to a bed or to a lounge chair. Volunteers may assist these patients in a number of ways, including making telephone calls, buying newspapers, candy and magazines, setting up lunch trays, bringing drinks, making beds, or providing the personal attention and friendly conversation a patient needs.

Dr. Herschel Harter, medical director of the unit, said, "We feel that volunteers can make a dual contribution both by helping to make the time spent on dialysis a more positive experience for our patients, and by helping staff members with other tasks so they may have more time for the patients."

Any volunteer who wishes to volunteer must sign an interview with a registered dietitian, and the item that disappears most often is food in the hospital lunch tray. The small stainless steel coffee pitcher. "Most hospital theft is situational morality," Mrs. McClusky said. "Most people who take hospital property would not consider, for example, shoplifting or picking up something at a neighbor's house and walking out with it."

Mr. Burkett added, "Our conviction rate in these cases is right at 100 percent."

He said, "We don't like to stop people and ask to look in their bag or package. But we will continue as long as people continue to take hospital property with them when they leave. It is not fair to penalize all patients, in the form of higher hospital costs, for the actions of a few people.

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Mr. Burkett said, "Anyone who accidentally takes something home should not be embar-
Tribute Fund

The following is a list of honorees (names in boldface) and contributors to the Barnes Hospital Tribute Fund Report from May 22 to June 16, 1978.

IN MEMORY OF:
Dr. David W. Helman
Mr. & Mrs. Rubin Schlafman
Mrs. Donald A. Hoeneman
Clarke M. Rainey
Forrest Young Family
Mr. & Mrs. Warren Bopp
Mr. & Mrs. Roy O. Price
Mrs. Yei Somma
Dr. & Mrs. Morris Davidson
Bemadine Morgan
Mr. & Mrs. Parker W. Fritschle
Mrs. William L. Behan, Sr.
M. R. Chambers
MacMillan Lewis
Dr. Harold Cutler
Dr. Maurice Lonsway, Sr.
Dr. & Mrs. James H. Bryan

Manufacturers Steel Supply Co., Inc. Endowment Fund

Albert L. Martin
D. M. Millard
Lienaco Container Corp.

IN MEMORY OF:
Mrs. Philip McNeill
Mr. & Mrs. John L. Warmbrot
Mr. & Mrs. Robert E. Frank
Betty Collins
Mr. & Mrs. Gordon L. Berson

Anton Susin
Dean & Fred Hayden

Esteban Cariga
Barnes Hospital Auxiliary

IN HONOR OF:
Recovery of Frank P. Wolff

Hope & Julian Edison

Care Given to David Spritz, Jr.

Mr. & Mrs. Charles Tobias, Jr.

Mr. & Mrs. George Stricker

Emergency Service Fund

Edith V. Ellis
Ernest Picchioldi

Jean Dunham dies,
Bradley's stepdaughter

Jean Dannahker Dunham, stepdaughter of Mrs. Frank R. Bradley and the late Dr. Bradley, died June 8 in Dayton, Ohio. Dr. Bradley was Barnes superintendent (administrator) from 1939 to 1962, when he became emeritus. He died in 1973. Dr. Dunham was a 1934 graduate of Washington University School of Nursing and was a nurse at Barnes Hospital prior to her marriage. In addition to Mrs. Bradley, she is survived by two daughters, Susan Filbin of Detroit and Pat Sheldon of St. Louis, and four grandchildren. Dr. Richard Bradley, Barnes surgeon, is her step-brother.

Mae Imboden Spier,
chaplain's wife, dies

Mae Imboden Spier, wife of the Rev. Charles W. Spier, Barnes Presbyterian chaplain for the past ten years, died at the hospital June 14 after a brief illness. She was 79.

The Spiers had been married 56 years and had lived in Oklahoma, Illinois and Kentucky before moving to St. Louis.

Besides her husband, Mrs. Spier is survived by two daughters, Lois Gray, dean of the New York State School of Industrial and Labor Relations at Cornell University, and Jeannette Beavers, a psychosocial worker in Dallas.

Hospital notes

Drs. Donald Sessions and James Toomey were elected to membership in the American Laryngological Association at that organization's centennial meeting recently in Palm Beach, Fla. The ALA is a select senior society of fewer than 100 rhinologists and laryngologists.

Dr. Ronald Evans, radiologist-in-chief, is president elect of the Society of Chairman of Academic Radiology Departments.

Dr. Saul Boyarsky, Barnes urologic surgeon, addressed the Mexican Urological Association on recent advances in neurogenic bladder and "Recommended procedures in urodynamic testing" and participated in a panel on urologic surgery. Dr. Rose Boyarsky gave a lecture on treatment of secondary impotence.

Dr. George Bohigian, Barnes ophthalmologist, gave a case report on "Endophthalmitis after intraocular lens implantation: current therapy" in conjunction with the fourth International Congress of Ophthalmology in Kyoto, Japan, May 10.

Dr. Jack Hartstein, Barnes ophthalmologist, presented a paper on "Prolonged wearing of contact lenses" at the International Medical Contact Lens Symposium in Kyoto, Japan, May 7.

Dr. Justin J. Cordonnier, urologic surgeon emeritus and former urologic surgeon-in-chief, was awarded the Guiteras Award at the annual meeting of the American Urological Association in Washington, D.C., May 21-25. The Guiteras Award is the highest honor bestowed by the AUA.

Dr. Robert Roberts, director of Barnes cardiac care unit, chaired one of the sessions and gave a talk on nitroglycerin at the International Symposium on Nitroglycerin sponsored by the German Heart Institute in Berlin, June 1-3.

Marie Rhodes is co-author of operating room textbook

The sixth edition of Alexander's Care of the Patient in Surgery will be available this month, according to co-author Marie J. Rhodes, associate director of Barnes nursing services. Co-authoring the operating room textbook with Mrs. Rhodes are Barbara J. Gruendemann, operating room nurse clinician, Centinela Hospital, Inglewood, Calif., and Dr. Walter F. Ballinger, former Barnes surgeon-in-chief. The publisher is The C. V. Mosby Company of St. Louis.

This edition drew on the expertise of doctors and nurses across the country to reflect nationwide operating room procedures and practices. The book's new and revised information came from Western Pennsylvania Hospital in Pittsburgh, Case Western Reserve in Cleveland, Good Samaritan Hospital in Portland and the University of California at San Francisco and Los Angeles. Eight Barnes operating room nurses, Elizabeth Collier, Eileen Corbett, Sallie Crowley, Rita Horwitz, Maxine Loucks, Eileen Moehrle, Judith Salo and Judith Taylor, assisted on the book.

"The sixth edition is thoroughly revised," said Mrs. Rhodes. "With more than 1,000 new illustrations. Many of its 24 chapters are completely rewritten or extensively revised. The book places new emphasis on nursing assessment, responsibilities and nurse/patient interaction.”
Beyond this wall rises the West Pavilion...

Junior volunteer Tom Richardson examines new display showing the West Pavilion, now under construction, along with photographs of various phases in its construction. The display is at the foot of the East Pavilion escalator. Completion date for the new building is scheduled for 1980.