Howard Green promoted; Michael McCoy to head telecommunications

In two recent departmental changes, Howard R. Green has been promoted from assistant director to director of patient accounts, while Michael S. McCoy has been named head of the telecommunications department.

Mr. Green is succeeding John Keppel, who will retire in March. He has been employed at Barnes since 1972 and has been serving as the assistant director for patient accounts since 1973. He received his education in accounting from Washington University.

Since joining Barnes, Mr. Green has implemented numerous changes in the hospital’s billing systems for Medicare, Blue Cross and Blue Shield and other forms of insurance. He is currently serving on the advisory board of the Mid-west Hospital Credit Managers Association and is a member of the Consumer Credit Association.

Michael S. McCoy comes to Barnes from American Bell Inc., where he served as a communications consultant on the major hospitals account team for the St. Louis area. Prior to that, he worked as a communications consultant for Southwestern Bell Telephone Company. Mr. McCoy holds a bachelor of science degree in business administration with a concentration in finance from Indiana University in Bloomington, Indiana.

Lasting values answer medical/ethical questions

The lasting values of judgment and wisdom, gleaned from years of study, experience and personal commitment to the individual, must be the basis for deciding the complex medical and ethical questions now facing today’s doctors and lawyers, said John C. Shepherd as he delivered the twelfth annual Wendell Scott Lecture September 12 at the Mallinckrodt Institute of Radiology’s Scarfellauditorium.

Mr. Shepherd is a member of Barnes board of directors and president-elect of the American Bar Association. His speech was titled “Modern Medicine, Modern Law, Lasting Values.”

Citing recent court cases in which landmark decisions concerning when to withhold or terminate treatment for terminally ill patients or defective newborns were handed down, Mr. Shepherd discussed the recent trends in medical ethics and law and outlined the criteria on which such decisions should be based.

“These and other judicial decisions show the modern trend in medicine, ethics and law: that life is not the ultimate value and need not be prolonged at all extraordinary costs,” said Mr. Shepherd. “Rather a person is a human being and should be recognized as such. The patient should be permitted to refuse extraordinary forms of treatment that would only secure a precarious and burdensome prolongation of life.”

Mr. Shepherd went on to point out that any such decisions should be made “openly, with full discussion and information,” resisting the tendency to hide the decisions because of the uncertainty involved. “Scrutiny of our decisions will lead us to a higher degree of care,” Mr. Shepherd said.

Consultations among doctors, nurses, family members and the patient (when competent) should preclude any decisions to terminate or withhold treatment, said Mr. Shepherd. Ethics committees that can “educate hospital employees and medical staff and supply supportive assistance to physicians in dealing with the families” should also be established, according to Mr. Shepherd.

“In resolving the daily issues confronting us, we must rely on the lasting values that do not change,” concluded Mr. Shepherd. “Those lasting values are not security blanket rules laid in concrete, but rather individual and collective informed judgment, intellectual integrity, wisdom, logic, responsibility, courage.”

Halloween theme set for Oct. 31 screening

“Don’t let high blood pressure scare you” is the theme of an October 31 hypertension screening which will be held from 8 a.m. to 4 p.m. in Barnes’ East/West Pavilion lobby (off the main entrance). The screening, which is free and open to the public, is being sponsored by the hospital’s Auxiliary and volunteers.

Dressed in Halloween costumes, volunteers and members of the department of education and training will test participants for hypertension, which occurs when the blood pressure of blood vessel walls becomes abnormally high. Untreated, it can result in stroke, heart attack and kidney disease.

The Auxiliary, which operates the hospital’s volunteer program, conducts free hypertension screenings twice each year. During the group’s May event, nearly 600 people were tested. For more information about the free testing, contact the volunteer office at (314) 362-5326.

Graham symposium marks surgery milestone

A Centennial Symposium for Evarts A. Graham held September 14, 15 and 16 at the Washington University School of Medicine marked the fiftieth anniversary of Dr. Graham’s landmark one-stage pneumonectomy for lung cancer, and the one hundredth anniversary of his birth.

Over 300 distinguished doctors, most of whom had either trained as residents or fellows under Dr. Graham, or who had completed the surgical training program at Barnes that he established, and their wives, attended the symposium. Guest speakers included many of the country’s leading physicians and surgeons.

Dr. Thomas B. Ferguson, Barnes/WU cardiothoracic surgeon, and Dr. Eugene M. Bricker, Barnes/WU general surgeon emeritus, served as the symposium’s coordinators. Their addresses (continued on page 2)
Symposium
(continued from page 1)
highlighted Dr. Graham's career and contributions to medicine and his long-standing association with the American College of Surgeons.

Dr. Graham served as Barnes surgeon-in-chief and head of the WUMS department of surgery from 1919 to 1951. He is internationally recognized as the father of modern chest surgery for his pioneering work in the surgical treatment of patients suffering from chronic tuberculosis and lung cancer. Dr. Graham performed the landmark pneumonectomy (surgical removal of the lung) for cancer, the first in the world, in 1933.

Dr. Graham, along with Dr. Warren H. Cole, whom he had performed the first successful surgical lung removal as a cure for the same disease, outlived him by many years.

The pioneering work in chest surgery which he began during World War I has continued, however, as Barnes is now the scene of more than 2,000 cardiothoracic operations annually, including over 800 open-heart procedures. Barnes/WU cardiologists and cardiothoracic surgeons continue to be frequent innovators in research and treatment.

The tragic irony of Dr. Graham's life was his death in 1957 of bronchogenic cancer, which he had fought successfully in others. The patient on whom he had performed the first successful surgical lung removal as a cure for the same disease outlived him by many years.

Dr. Graham's work in developing monoclonal antibodies to treat diseased marrow. After the marrow is withdrawn, some of the remaining cancer cells (a small percentage is always present, even in remission) are extracted and grown in a tissue culture. These are then injected into an animal whose immune system develops antibodies. These antibodies, which are tissue-specific toward the cancer, are then used to cleanse the marrow of surviving cancer cells.

Hospital notes

Dr. Richard V. Bradley, Barnes/WU general surgeon, recently earned top honors in the Third Annual Diabetes Invitational golf tournament and was awarded a Dominican Republic vacation for two for his efforts. The tournament, which was headed by Dr. Marvin E. Levin, Barnes/WU endocrinologist, raised $50,000 for diabetes research and a camp for diabetic children. Dr. Levin also was recently elected to the board of directors for the National American Diabetes Association.

Genevieve Mason, registered nurse, is giving a slide presentation on the role of the RN in the use of lasers in eye surgery during an October 31-November 2 meeting in Chicago, Illinois, of the American Academy of Ophthalmologists. Mrs. Mason, who works in Barnes East Pavilion operating rooms, is the editor of Insight, the monthly publication of the American Society of Ophthalmic Registered Nurses, Inc.

William E. Burkett, security director, has received accreditation by the International Healthcare Security and Safety Foundation. The foundation's major effort is to upgrade and expand the professional nature of health care security and safety management.

Nurse educator Yaeko Yamada compares notes on American life with Yukiko Nagahara, a Japanese translator and St. Louis area nursing student.

School of Nursing hosts Japanese visitor

Although the basic nursing skills are the same, the vast differences between the responsibility and independence of American nurses versus their Japanese counterparts left a deep impression on Yaeko Yamada, a Japanese nurse educator who recently spent two weeks at Barnes School of Nursing, observing classes and touring the hospital complex.

"We are fighting in our country to have nursing established as a profession in its own right, as it is in the United States," said Mrs. Yamada through an interpreter. "In Japan, little nursing theory is taught and the nurses cannot act as independently as they do here."

Much of the difference is cultural, according to Mrs. Yamada, who is the chief instructor for the Shizuka Prefectural Nursing School in Shizuka Prefecture, Japan. "The woman's role in Japan is still largely one of subservience to the male," said Mrs. Yamada, who broke with tradition in coming to the United States unescorted.

Mrs. Yamada came to Barnes to observe how nurses are trained here and how the nursing system as a whole operates. She chose Barnes because of her school's strong ties to Dr. William H. Danforth, a Barnes physician and chancellor of Washington University.

In 1950, shortly after the close of World War II, Dr. Danforth's grandfather, William H. Danforth, became the sole benefactor of the Sei-Rei Hospital, which is affiliated with Mrs. Yamada's nursing school. Following the war, the Japanese people were suffering from a shortage of everything, wrote Dr. Kimiyo Toyoura, director of the Sei-Rei Hospital, in an introductory letter for Mrs. Yamada to Mary Jane Meyer, Barnes School of Nursing director.

"During that critical period, Mr. Danforth saw especially the urgent need of medical care for the Japanese people," wrote Dr. Toyoura. "For the pure love of humanity, he made the contribution of establishing the badly needed hospital for his former enemy of war!"

The purpose of Mrs. Yamada's visit was to gain insight into the nursing student's curriculum and training here and to see first-hand what role the nurse plays in the health care team. "The devotion and eagerness of the nursing students here is really impressive," commented Mrs. Yamada. "The training methods used here are obviously very effective. I hope to be able to bring much of what I've learned back to my students in Japan."
Barbara Ann Crawford and Steven Kent Whitson have joined the Barnes evening/night administration team, bringing the group to its full complement of five. The pair joins evening administrators John Marc Davises and Dana S. Hensley, and night administrator Scott E. Foster, III. All five are students in the Washington University School of Medicine’s Health Administration and Planning master’s degree program.

Ms. Crawford comes to Barnes from Crawford & Witte, Inc. Consulting Mechanical Engineers where she attended hospital design and construction meetings with architects, engineers, department heads and administrators and performed a variety of other duties. She holds a bachelor of science degree in medical technology from the University of Missouri—Columbia. Ms. Crawford worked in Barnes microbiology laboratory during her summer breaks in college, first as a medical technician and then as a medical technologist in bacteriology, susceptibility and quality control.

Mr. Whitson is joining Barnes after serving as an administrative intern for Park West Hospital in Knoxville, Tennessee, where he gained experience in general administration, personnel, planning and budgeting. Mr. Whitson received his bachelor’s degree in Health Care Administration from Eastern Kentucky University in Richmond, Kentucky. While at Eastern Kentucky, Mr. Whitson was named to the Who’s Who Among Students in American Universities and Colleges.

With hospital costs rising at a record pace and with insurance companies refusing to pay benefits for certain procedures unless they are done on an outpatient basis, more and more people are considering using free-standing surgicenters when the need for minor, elective surgery arises.

But are they really as safe as hospital-based outpatient surgery programs? How can the consumer judge the quality of care offered by a surgicenter? Do the same procedures really cost less at a center than at a hospital?

The advantages of having outpatient surgery performed within the hospital setting are primarily two-fold. First, if an emergency situation does arise such as an allergic reaction to anesthesia, excessive bleeding or the discovery of an unexpected disease, the hospital’s life-saving support services such as intensive care, diagnostic labs for fast analysis of tissue specimens and complete pharmacy and radiologic facilities are readily available.

Second, patients gain from the medical and surgical care of the personnel, who provide care for thousands of patients with similar health problems each year. In a teaching hospital like Barnes, the patient also reaps the benefits of ongoing clinical research in the form of new procedures and therapies.

Outpatient laser treatments for vision-threatening eye disease, port-wine stain birthmarks, and gynecological problems, for example, are generally not offered at surgicenters because of the large capital expenditure required to purchase equipment.

In 1982, Barnes surgeons performed 28,877 operating room procedures. Of that number, 4,142 were completed on an outpatient basis, representing an increase of over 23 percent from 1981. Most of the procedures were either eye or plastic surgery, and required on the average less than one hour to complete.

All of the 300 plus outpatient procedures okayed by the American Medical Association could be performed at Barnes; the ultimate decision between outpatient and inpatient treatment rests with the doctor and the patient.

Three surgicenters contacted recently by the Barnes Bulletin performed 50 to 240 procedures, and on average treated slightly over 100 patients per month, regardless of the size of the staff. One surgicenter had a staff of three doctors, while the largest had 114.

Another advantage of having outpatient surgery performed at a hospital like Barnes is the institution’s long-established methods of quality control in terms of surgical procedures, patient care, equipment and management.

“At Barnes, elaborate rules, regulations, medical staff by-laws, peer review committees, nursing assessment, national accreditation review boards and other quality controls are implemented to ensure that the best possible care is provided for our patients,” said Robert E. Frank, president of Barnes. “Every piece of tissue that is removed in the operating rooms, for example, is routinely sent to surgical pathology for analysis to ascertain that its removal was appropriate. Although surgicenters probably have a place in health care, I have concerns about how the quality of care is controlled.”

Of the three St. Louis area surgicenters surveyed by the Bulletin, two required their surgeons to be board-certified specialists and the American Medical Association could be involved with the care of the surgical patient. Qualifications of operating room personnel, including anesthesiologists (MDs), nurse anesthetists, scrub nurses and technicians, and post-anesthesia recovery nurses, should also be considered before deciding where to have outpatient surgery. At Barnes, each position is a specialty within itself: anesthesiologists and nurse anesthetists perform different functions; nurses and technicians receive intense training in critical care before they enter the operating or recovery rooms.

Peer review, in which doctors and nurses analyze the performance of their colleagues, is a major part of the ongoing quality control process. When it comes to personal health and safety, no surgery is really “minor” and no health care decision should be treated lightly.

In addition to Barnes’ JCAH (Joint Commission on Accreditation of Hospitals) accreditation, which rates the hospital’s performance against national standards developed in the health care field, peer review and other quality control methods proceed on an ongoing basis.

Surgicenters’ charges are comparable to outpatient fees at Barnes, ranging from under $100 to over $800 depending upon the procedure (again, some procedures available at Barnes, especially eye surgery, are not offered at the surgicenters).

In deciding whether or not to utilize a surgicenter, the consumer would be wise to do some in-depth research. Too often the decision is based solely on convenient location or the assumption that a surgicenter will be cheaper than a hospital outpatient surgery program, which is not always true.

Important criteria, such as support services available in case of emergency, staff training, affiliation with a hospital (should that need arise) and the implementation of quality controls should all be a part of the decision-making process. When it comes to personal health and safety, no surgery is really “minor” and no health care decision should be treated lightly.

**Dr. Robins displays his award.**

**Surgicenters can’t replace hospital-based programs**

**Dr. Robins honored with national service award**

Dr. Eli Robins, Barnes/WU psychiatrist, was honored by the National Alliance for the Mentally Ill with its prestigious Distinguished Service Award during the association’s annual convention held August 4-7 at Washington University.

Dr. Robins, who served as Barnes psychiatrist-in-charge and head of the department of psychiatry for the Washington University School of Medicine from 1963 to 1975, is recognized world-wide for the Washington University School of Medicine’s Health Administration and Planning master’s degree program.

The inscription on the plaque that Dr. Robins received reads: “The members of N.A.M.I. realize that no one has contributed more to the rational and empirical understanding and treatment of serious mental illness than Eli Robins, M.D. For this pioneering effort we offer him our Distinguished Service Award and our sincere thanks.”

**Surgical Centers can’t replace hospital-based programs**

With hospital costs rising at a record pace and with insurance companies refusing to pay benefits for certain procedures unless they are done on an outpatient basis, more and more people are considering using free-standing surgicenters when the need for minor, elective surgery arises.

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In 1962, operators manned a 1,000-station switchboard and handled a daily task load of 20,000 routine and emergency calls. Barnes boasted of having the largest hospital communications system in St. Louis.

Long-noted as a pioneer in medical research and patient care, Barnes is now setting records in the field of telecommunications through the installation of the computerized custom Dimension 2000 telephone system.

Over 500 miles of cable and 5,729 push-button phones have been installed throughout Barnes' and the Washington University School of Medicine's 51 buildings and 500 plus floors. Video display screens and sleek, desk-top terminals are replacing antiquated manual directories, while a 256K memory chip and two microprocessors—technology not yet a year old—are providing room for growth into 25,000 stations and 12 separate users (Barnes and adjacent hospital groups, for example). Information is being compiled for a new, 6,000-listing directory.

The cutover this Fall from the current Centrex system is marking the culmination of the largest single site phone installation in the country for a medical environment. The changeover also makes Barnes only the fifth in the country to install a distributive communications system, with the first being implemented at the University of Arizona last April.

Dimension's two microprocessors are giving Barnes new capabilities and over 150 options, including speed dialing, automatic call-back, tele-
conferring and the ability to change phone numbers and services internally, without a service call or rewiring. Future options include the ability to transmit memos, messages and other documents via the telephone and to manage a building’s lighting, heating and cooling system with a simple phone call.

“We’re moving into the office of the future with the Dimension system,” said American Telephone and Telegraph Information Systems, Inc., spokesman Tom Benner, who envisions a paperless society in which virtually all correspondence is sent over the phone. “Since the Dimension system is software-driven, moves and changes can be performed internally, and new technology can be added as it becomes available. The Dimension system can handle up to 12 different microprocessors.”

Room for growth was a primary factor in deciding to adopt the new system, according to Barnes new telecommunications director Michael McCoy, whose 18-member staff is responsible for keeping the communication channels open and flowing for the mini-metropolis known as Barnes Hospital.

“With nearly 5,000 employees working in over 60 departments and 61 patient care areas, 400 residents and 998 doctors on staff, Barnes is a city unto itself,” said Mr. McCoy. “The amount of equipment we’re installing is equal to that used by many small- to medium-sized towns throughout the midwest.”

The annual statistics for Barnes telecommunications department are also impressive: 416,000 incoming routine and emergency calls; 374,145 answered calls; 185,820 voice pages; 463 STAT pages; 175 code 7s (cardiac arrest), and, on a lighter note, 2,611 telephone repair requests. In addition, these figures do not include the thousands of calls placed each day by direct dialing from individual departments.

Innovations in telecommunications service are not just a recent endeavor for Barnes, however. Shortly after its opening in 1914, Barnes became one of the first hospitals to offer phone service to its patients. Starting with just a handful of operators, trained at “Ma Bell,” and a crude switchboard, the department soon grew to include 11 operators and 800 telephone lines.

Serving both the Barnes Hospital complex, which at that time included McMillan and St. Louis Maternity Hospitals, now closed, the Mallinckrodt Institute of Radiology and WUMS, Barnes also became one of the first hospitals in the city to offer doctors a voice-paging system—a loudspeaker and microphone.

Decades passed and the telecommunications office once again expanded in order to serve the David P. Wohl, Jr., Hospital (1953), the Barnard Free Skin and Cancer Hospital (1954), and Re- nard Hospital (1955). In 1962, Barnes saw 27,296 patients and boasted of having the largest hospital communications system in the city with a daily task load of 20,000 routine and emergency calls. Operators now manned a 1,000-station switchboard, and a direct-line dialing system was developed for the first time to the more than 300 patient phones.

In 1968, faced with overburdened and outdated equipment, Barnes installed a new, 2,100-station switchboard and 1,450 phones. The automated age in phone service was now being ushered in. New features included an easier method for transferring calls (one press could notify the operator, rather than repeated tries), and a more compact switchboard that had 60 percent of the stations in front of each operator. Barnes claimed the distinction for the first time as having as much equipment as many medium-sized towns in Missouri.

In December of 1973, Barnes telecommunications system was once again overhauled because of increased demand as the hospital switched to Southwestern Bell’s latest electromechanical whiz—the Centrex system. Compact push-but-
Media spotlight

Highlights of the media’s coverage of Barnes Hospital during the last month are as follows. Readers desiring a photocopy of newspaper or magazine articles about Barnes should contact the public relations department at (314) 362-5290.

Television

A five-part series on cancer and innovative treatments that have resulted in personal “success stories” was videotaped at Barnes in September and will be airing on KMOX this month. Several Barnes/WU cancer specialists were interviewed for the series.

Barbel Holtmann, Barnes/WU plastic surgeon, was videotaped for an upcoming segment on the use of the argon laser to treat port-wine stain birthmarks. The story will air on KMOX.

Portions of a September 19-23 series on emergency medicine that aired on KTVI were videotaped at Barnes, a Level I trauma center. Medical and science reporter Kathryn Pratt interviewed Dr. Robert J. Stine, director of Barnes emergency department, for the story.

Dr. Dean Burgess and Dr. R. Joseph OB, Barnes’ Retina Consultants, Ltd., were interviewed for September 20 segments on ocular histoplasmosis by KMOX, KSDK, and KPLR. Ocular histo is a vision-damaging syndrome that is the second leading cause of blindness in young adults in the geographic regions of the Mississippi and Ohio River Valleys. The syndrome strikes one of every 2,000 persons living in this area, which includes St. Louis.

Dr. Allan S. Jaffe, director of Barnes cardiac care unit, was interviewed for a September 6 segment on cardiopulmonary resuscitation (CPR) that aired on KMOX. Joe Burke, patient care manager of the emergency department, was also interviewed, while Patti Crimmins, an instructor for the department of education and training, demonstrated the life-saving technique.

KSDK’s Tom O’Neal interviewed Dr. Jack Hartstein, Barnes/WU ophthalmologist, for a September 2 segment on refractive keratoplasty, a relatively new surgical treatment for near-sightedness.

Dr. John S. Daniels, Barnes/WU physician, discussed the dangers of usingabolic steroids for increased strength in sports with KMOX’s Max Leber for a September 1 story.

New research on how birth control pills can actually help prevent cancer was the subject of an August 23 segment. KMOX’s Max Leber discussed the new findings with Dr. Marvin H. Carmel, Barnes/WU gynecologist and cancer specialist.

The August 17 groundbreaking ceremonies for Barnes’ new emergency department were highlighted during the evening newscasts of KTVI, KMOX, KSDK, and KPLR. Group W Cable also covered the event.

Dr. James C. Warren, Barnes obstetrician/gynecologist-in-chief, was interviewed by KTVI’s Kathryn Pratt for an August 17 story on the importance of prenatal care.

Dr. Godofredo M. Herzog, Barnes/WU obstetrician/gynecologist, discussed pre-menstrual syndrome for an August 7 segment on KPLR.

The laundry department’s purchase of a $1,800 darning machine which is expected to save $5,000 during its first year of operation and other cost-saving methods will be highlighted on cable television.

vision networks throughout the country in a story geared toward hospital administrators produced by Fiedler-Berlin T.V. Productions in Studio City, California.

Research indicating that one-half an aspirin per day may help to ward off heart attack in those suffering from atherosclerosis and other forms of heart disease was discussed by Dr. Allan S. Jaffe, director of Barnes cardiac care unit, for a recent segment on KSDK.

Dr. Burgess discusses the results of a five-year study examining the use of the argon laser in treating presumed ocular histoplasmosis with KMOX radio.

Radio

Ocular histoplasmosis, a vision-threatening syndrome, and the promising results of a five-year study of laser treatment conducted at Barnes by Dr. Dean Burgess, Barnes’ Retina Consultants, Ltd., was the subject of a September 20 interview between Dr. Burgess and KMOX.

Linda Knight, patient education coordinator for the department of education and training was interviewed about Barnes’ weight loss program on September 25 by KATZ.

Dr. Michael J. Gast, Barnes/WU obstetrician/gynecologist, discussed the FDA’s recent ban on Bendectin, a drug previously given to pregnant women to combat morning sickness, with KWMU for an August 22 segment.

Robert Shircliff, a Barnes vice-president, was interviewed by KMOX and KWMU for their August 16 newscasts. Mr. Shircliff discussed construction plans for the new emergency department, which will give Barnes trauma facilities that are second to none. The project will cost about $10 million and is scheduled for completion in 1985.

Dr. Scott M. Nordlicht, Barnes/WU cardiologist, and Dr. Clarence S. Weldon, Barnes/WU cardi-thoracic surgeon, were interviewed for a full-page feature and photo spread titled “Details of a patient’s coronary bypass” that appeared September 11 in the Belleville News-Democrat. Reporter Roger Schlueter followed the medical and surgical treatment of Belleville resident Seral Smith, who recently underwent triple coronary bypass surgery at Barnes.

Barnes plastic surgeons’ use of the operating microscope to replant severed limbs and to transplant muscle from one area to another to restore function to damaged hands and fingers was highlighted in recent features in the St. Louis Post-Dispatch and the O’Fallon-St. Peters County Tribune.

Kidney transplantation was the subject of a September 9 article in the St. Louis Post-Dispatch written by Bill Vogler. Mr. Vogler interviewed Robert Smith, a recent Barnes patient who donated a kidney to his 14-year-old son, Kenneth. Kenneth was hospitalized at Children’s Hospital. The operation was performed at Barnes. The story also ran in the O’Fallon-St. Peters County Tribune.

“Steroids” was the title of a September 1 story in the St. Louis Post-Dispatch. Dr. Bernard T. Garfinkel, Barnes/WU internist and medical director for the St. Louis Cardinals, discussed the side-effects associated with large doses of steroids, including hypertension, infertility, and damage to the prostrate gland and liver.

An August 30 article in the St. Louis Globe-Democrat highlighted a recent kidney transplant operation performed at Barnes in which 19-year-old David Herndon of Belleville, Illinois, donated a kidney to his 11-year-old sister, Barbara. The transplant was also featured in the Belleville News-Democrat.

Bone marrow transplants were highlighted in a recent article in the Evansville Courier Press. BMT patient John Duncan and Carol Josephs, assistant head nurse of the BMT center, were interviewed for the story.

The Barnes School of Nursing’s affiliation with the University of Missouri—St. Louis, which became official last spring, was the subject of an August 24 article in the South Side and West County Journals.

Dr. James L. Cox, Barnes cardiothoracic surgeon-in-chief and head of the division of cardiothoracic surgery for WUMS, was interviewed August 17 for an upcoming St. Louis Magazine article on the Washington University Medical Center.

The department of education and training’s classes on prepared childbirth, refresher prepared childbirth, Cesarean birth, sibling preparation, breastfeeding, and parenting were highlighted in an August 17 article in the West County, South County and South Side Journals.

William Johnson, a St. Louis resident who was hospitalized at Barnes after being bitten by a Gila monster, was the subject of an August 16 article in the St. Louis Post-Dispatch.

Dr. H. Phillip Venable, Barnes/WU ophthalmologist, was honored in August 11 article outlining his medical career and contributions to his specialty in the St. Louis Sentinel. Dr. Venable was recently honored by the hospital for reaching the 25 years of service milestone.

Deborah Bobinette, director of volunteers, was recently interviewed by the Health and Social Service Journal of Great Britain. Mrs. Bobinette discussed Barnes’ innovative patient representative program, which is one of a handful of all-volunteer programs in the U.S.

Chymopapain injections, a non-surgical treatment for herniated or “slipped” discs, was the subject of a recent column in an Evansville, Indiana, paper. Dr. Lee Ford, Barnes/WU orthopedic surgeon, was interviewed for the story.
Gifts to Barnes Hospital

Listed below are the names of persons (honorees in boldface) who have made contributions during the period August 9 to September 9 to the funds at Barnes Hospital. Because Barnes is a private hospital and does not receive public funds, it relies on the gifts to individuals to continue providing quality patient care and to support research aimed at improving the lives of our patients.

Donations to the hospital may be made through the Barnes Hospital Auxiliary or the Development office.

Auxiliary Tribute Fund

IN MEMORY OF:
William A. Bordus
Charles E. Caggott
D/M Henry G. Schwartz

Mary-in-Law of Mary Bussel
Staff on 5400 Nursery
Pat Bohem
(for heart research)

Mary Feely
Claybourgh
Warren, Sharon, Jodi and Jeremy Danzinger
Pet Incorporated

Lousie Goldbeck
AARP Chapter 2198
Richard V. Bradley, M.D.
Ray & Mary Dougherty
Bonnie & Ralph Lang

Robert E. Groves
Hanni Hermann

Mrs. Frederick Herman
M/M Edward D. Jones, Jr.

Arthur Kenny
Ruth E. Green

Robert Knight
Dr. Brent T. Allen
Mary Delly & Bob Arthur
Patti Black

Bone Marrow Unit Fund

Sunset Hills Chapter 2346 of the American Association of Retired Persons, Inc.

IN HONOR OF:
Anita Bernardi
M/M Kirk M. Baker
D/M Lawrence J. Cavazos
D/M Michael J. Shea

Ann Rodgers
M/M W. G. Bowman
M/M Ronald Bramhall
M/M Albert H. Busch
M/Jack Cronin
D/M Michael Diggs
D/MTerry A. Doland
Kathy Dooling
E. C. Balentine

Lafayette Family Group
M/M B. Malcolm Larsen
M/M Lewis H. Malone
M/M Mark K. Malone
M/M Leonard W. Massman
M/M John E. McAlistcer
M/M R. G. McKelvey
Elizabeth P. Mitchell
Betty A. Neely
Diana Olsen
Emily P. Parker
M/M Hubert G. Paulsell
M/M Clayton Peterman
Rosemary E. Redmond
M/M Grover W. Riddle
M/M Russell Ritchey
Naomi T. Roach
St. Lukes Episcopal
Church Youth Ministry

M/M Robert John
Shames
M/M Michael J. Shea
Southwest Truck Body Co.
M/M Gregory C.
Steinkamp
TGF Liquid
M/M James L. Titus
M/M Paul Walmann
G. O. Welfelders
M/M Charles Wells
M/M Ernest Woolfolk & Children

Barnes Annual Fund

Carl W. Adams
Joseph Anselmo
William Ayward
M/M Josh Barnes
Steve Bartok
H. S. Bassett
Laura B. Braun
Dorothea L. Briggsman
Robert F. Burns
Mrs. R. A. Bullock
Ruth Burnis
William T. Byrd
Emil Carabelli
Andy Carosy
Lydia Claibagh
Marianne Coffman
Lorene W. Creech
Barnardine Crowley
Versal DeCicco
Tommy Dorsey
Donald Douglas
Claudia Dzwornyjski
Ruth Ellsasser
Katherine C. Eppenberger
M/M Charles Everting
Alice Factory
Mary J. Fogleman
M/M Joseph J. Frisella
Margaret L. Gazdik
Deborah Gilula
M/M Vernon Goedocke
M/M Charles Good
Jassie Green
Ruby E. Haney
Robert J. Hatch
Steve Hechinski
M/M Michael R. Hidusky

Herbert C. Hunter
Harvey O. Jones
Harry E. Keyman
Melvin Kolitz
Paul J. LeGrand
Alma Lemcke
M/M Joseph Levy
Clyde E. McCraw
Virginia McRae
Paula Meikner
M/M Mrs. Reinking Gift
Maggie Tholen
Francis E. Reese
James E. Murray
M/M Charles L. Neely, Jr.
Andrew J. Nolan
George W. Quinn
Sydol Palmer
Elise Pritchett
M/M William Paul Rogers
M/M Milton Sachs
Dorothy Sanders
Ressie Scales
Helen M. Schaeffer
Henry W. Schick
Mary Ann Sedlack
Edward Senturia
Louis Silverman
T. E. Simpson, Sr.
Lester Smissman
Ray G. Smith
M/M Blaine J. Spies
M/M Alan L. Steffen
Harriet Stull
Dora M. Turner
Anna R. Wickham
W. J. Woodru
M/M C. C. Wooten
Richard C. Young

Patient Care Fund

Anonymous
Alpha Nurses, Inc.
E. C. Balentine
M. S. Barad
Donald L. Brittain
Robert W. Daugherty
Rus & Joan David
Velma Davis
Annette V. Devos
Roger P. English
Russel Glouser
Mary Gross
Esther Golden
Eleanor Hacker
Daryl Hargis
David J. Harrington
Arthur L. Heintze
Vincent P. Hess
Mrs. Robert B. Hiller
Helen Hogan
R. W. Jacobsmy
Earl Kellogg
Carl Koch
F. W. Koetler
Howard R. Koven
Agnes Leitze
Helen Martin
Marie R. McDonogh
Michael J. Moynihan, Jr.
Arnold M. Mott
Marilyn Rose Napier
M/M Edward Overtuft
Rob Roy Ratliff
Norman W. Springett
M/M J. Steinback
Erwin Wiehe
Diane Zentnerbover
Esther Zobrist

IN HONOR OF:
Dr. Lee Ford
Francis Ford
Magram Ford
Dr. Allan E. Kolker
Ingram F. Boyd

Scott Jablonow Endowment Fund

IN HONOR OF:
Anniversary of Dr. & Mrs. Joseph Raider
M/M Jack A. Jablonow

F. W. Koetler
Howard R. Koven
Agnes Leitze
Helen Martin
Marie R. McDonogh
Michael J. Moynihan, Jr.
Arnold M. Mott
Marilyn Rose Napier
M/M Edward Overtuft
Rob Roy Ratliff
Norman W. Springett
M/M J. Steinback
Erwin Wiehe
Diane Zentnerbover
Esther Zobrist

IN HONOR OF:
Dr. Lee Ford
Francis Ford
Magram Ford
Dr. Allan E. Kolker
Ingram F. Boyd

Alvin N. Lasky Memorial Fund

Robert B. Hollander

IN MEMORY OF:
Walter J. Gleiber
D/M Harold Joseph
Noah Stanley Walden
D/M Harold Joseph
Ethel Shlesinger
Mildred Feldman

IN MEMORY OF:
Phyllis Bleischfeld
M/M Joseph H. Feldman
Recovery of Nathan Cohen
Mildred Feldman

IN MEMORY OF:
Myra Kolditz
Paul J. LeGrand
Alma Lemcke
M/M Joseph Levy
Clyde E. McCraw
Virginia McRae
Paula Meikner
M/M Mrs. Reinking Gift
Maggie Tholen
Francis E. Reese
James E. Murray
M/M Charles L. Neely, Jr.
Andrew J. Nolan
George W. Quinn
Sydol Palmer
Elise Pritchett
M/M William Paul Rogers
M/M Milton Sachs
Dorothy Sanders
Ressie Scales
Helen M. Schaeffer
Henry W. Schick
Mary Ann Sedlack
Edward Senturia
Louis Silverman
T. E. Simpson, Sr.
Lester Smissman
Ray G. Smith
M/M Blaine J. Spies
M/M Alan L. Steffen
Harriet Stull
Dora M. Turner
Anna R. Wickham
W. J. Woodru
M/M C. C. Wooten
Richard C. Young

Hospital notes

The following are reported on staff, effective July 1: Drs. Edmund C. Couch, assistant pathologist; Thomas R. Dykman, assistant physician; Alex St. Evers, assistant anesthesiologist; Martha G. Farber, assistant anesthesiologist; Richard J. Ferry, assistant neurologist; Bruce Frank, assistant orthopedist; Mark F. Hrbars, assistant pediatrician, and Allan J. Jacobs, assistant obstetrician/gynecologist.

Also reported on staff effective July 1 are: Drs. Christine Janney, assistant pathologist; Leander K. Lee, assistant anesthesiologist; David F. Mendelson, assistant neurologist; Donald A. Skor, assistant physician; William D. Snider, assistant neurologist; James L. Spadaro, assistant physician; J. Regan Thomas, assistant otolaryngologist, and Elbert P. Truluck, assistant physician.

Dr. Sudhakar R. Vaddi, assistant anesthesiologist, and Mehermoon F. Watcha, assistant anesthesiologist, are also reported on staff effective July 1. Also reported on staff are: Drs. Jane E. Kosa, assistant anesthesiologist, effective July 18; Paparoa Tattini, anesthesiologist, effective July 28, and Robert E. Eberhard, assistant anesthesiologist, effective August 1.

Dr. Mokhtar H. Gado, Barnes/WU radiologist, has been elected President of the American Society of Neuroradiology, an organization of over 600 board-certified radiologists concerned with the development of training standards and independent research in neuroradiology.

Dr. Charles B. Anderson, Barnes/WU general surgeon, was elected president of the Missouri chapter of the American College of Surgeons at the association’s 16th annual professional meeting June 17.
Lou Brock

Baseball star Lou Brock visits activity therapy

What do baseball great Lou Brock, football star Dan Dierdorf, musician Russ David and professional wrestlers Spike Huber, King Kong Brody and Debbie Combs have in common, other than their celebrity status?

They have all donated their time to participate in activity therapy’s evening program for psychiatric patients.

The evening program, which is held each week night, is designed to give psychiatric patients, many of whom suffer from chronic depression, an opportunity to socialize and interact with others, according to Jim Clancy, the department’s assistant director. More importantly, it helps enhance their feelings of self-worth.

“Many of our patients suffer from low self-esteem and a low sense of gratification and fulfillment,” said Mr. Clancy. “When entertainers and other local celebrities come in, it helps increase the patients’ sense of self-esteem. When someone that is well known takes the time out to talk to them, it makes them realize that they are important in their own right.”

So, what makes a busy, well-known sports figure and personality like Lou Brock choose Barnes out of the hundreds of speaking requests he receives each week?

“I think that the biggest thing we’re faced with in life in any situation is fear,” said Mr. Brock, who delayed a local appearance with sports announcer Howard Cosell an extra 30 minutes in order to fill all of the patients’ requests for autographs. “I wanted to share that the big turning points came in my life when I had the courage to try and do something that the odds said I wouldn’t be able to accomplish.”

In addition to bringing in local celebrities, activity therapy shows films and movies, hosts their own version of popular television game shows, holds square dances and presents speakers who discuss topics ranging from alcoholism to community support groups.

Patients participate in the evening program on a voluntary basis, and family and friends are encouraged to attend, according to Mr. Clancy. “We want the family to become involved and informed about the patient’s illness,” he said.