

Outlook

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Medical Care Group

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Washington University
School of Medicine

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ON THE COVER

Pediatrician Paul S. Simons, M.D., greets Mr. and Mrs. Mitchell Ganim and, chronologically, Russell, Lila and Thomas, at the new Medical Care Group facility entrance. See Page 3.

BACK COVER

Cardiologist Glenn O. Turner, M.D., pauses on his rounds in St. John's Hospital in Springfield, Mo. See Page 6.

The Vice Chancellor Comments



This issue of *Outlook* lists contributors to the Alumni Medical Teaching Fund for 1972-73. More than \$172,000 was received from 1,213 alumni, a significant increase over previous years. In 1971-72, 1,115 alumni contributed over \$140,000; in 1970-71, 997 contributed more than \$126,000. Compared to 1970-71, there has been a 21 per cent increase in alumni participation and a 36 per cent increase in total gifts. Not only have more alumni responded, but, on the average, they have been more generous.

Alumni support is vital for three reasons. First, and most important, it represents a vote of confidence that

means a great deal to faculty, administration, and trustees. Second, many outside agencies and individuals look for such support before making contributions themselves. Finally, alumni gifts make possible many important programs.

We are grateful to our alumni for their generous support. We want their support to continue and to grow. We intend to do all we can to warrant the further confidence that will lead to even greater alumni participation and generosity.

Samuel B. Guze, M.D. '45
Vice Chancellor for Medical Affairs

One-Stop Health Care Service Expands at Washington University



Medical Care Group Director Gerald T. Perkoff, M.D., left, and Metropolitan Life Insurance Company Execu-

tive Vice President William S. Thomas met with the media in the main waiting room prior to the dedication.

Health Maintenance Organization (HMO) is a term that has been getting an increased amount of publicity during the past several months.

The Medical Care Group (MCG) of Washington University, the nation's only prepaid group practice owned by and operated as an integral part of a medical school, is one of the pioneer

HMOs. It has made "one-stop health care service" more of a reality in St. Louis.

In November, the MCG moved its operations from the fifth floor of the Wohl Clinic Building to larger and more inviting facilities at 4570 Audubon Ave., a block to the east.

At the dedication, MCG Director

Gerald T. Perkoff, M.D., described some of the changes that had occurred during the five years the program had been operating.

"Today we have more than 1,800 persons enrolled from Metropolitan Life Insurance Co., Monsanto Co., and General Motors. It has been exciting for us to watch the growth of the



Dedication speakers Dec. 1 were from left, William H. Danforth, M.D., Washington University chancellor; William S. Thomas, executive vice president, Metropolitan Life Insurance Company; Samuel B. Guze, M.D., vice chancellor for medical affairs; Gerald T. Perkoff, M.D., Medical Care Group Director; and R. Dean Wochner, M.D., director of the Division of Health and Hospitals for the City of St. Louis, not in the picture.

experimental program sponsored by Metropolitan Life, and to see it develop into its present on-going status, Dr. Perkoff remarked.

"Now that we have adequate space and increased staff to serve a larger number, we are anxious to do so. All employees of Washington University have been invited to enroll.

"The emphasis of this operation is on ambulatory stay-well care. The pilot study has demonstrated dramatic reductions in hospital confinement and provided ways to control costs for enrollees compared to those persons in a 'control group' who continued to be treated in the traditional fee-for-service way."

Dr. Perkoff, who also is professor of medicine and of preventive medicine and public health, noted that the MCG is designed to provide comprehensive

medical care services including diagnostic radiology, laboratory examinations, immunization, eye examinations, well-baby care and psychiatric treatment—all offered for a fixed, prepaid monthly fee.

At the ceremonies opening the gaily decorated facility, William S. Thomas, Metropolitan's executive vice-president, commented that demonstrated techniques of sound business practices, such as effective cost control and efficient utilization of time by both doctors and patients is the best solution to providing better medical care.

"The fact that 90 per cent of the enrollees have continued in the program certainly is a positive indication that the Medical Care Group is providing the care and services they expect," he noted. "Also, the pilot study has shown that the MCG rate of hospital day use

was 43 per cent less than the control group for nonsurgical cases, and overall, hospital utilization was reduced by 23 per cent."

Chancellor William H. Danforth, M.D., lauded Dr. Perkoff and his staff for what they had accomplished, and then made this observation: "Some of the greater problems in medicine are centered around health care in the city. With the many years of experience and leadership exhibited in this field, the commitment and energy of those like Dr. Perkoff, Dean M. Kenton King, M.D., and the late Carl V. Moore, M.D. (Busch Professor of Medicine and head of the Department), stand out."

Also on the program was R. Dean Wochner, M.D., director of the Division of Health and Hospitals for the City of St. Louis. He commented on the favorable long association of the city with the School of Medicine, and observed that "A program such as the Medical Care Group, designed and directed by Dr. Perkoff was destined to succeed, and that is a real reflection on this community."

Samuel B. Guze, M.D., vice chancellor for medical affairs, remarked that "The concerns of the Medical School in providing this kind of care are multiple: the low cost, the efficiency of time on the part of the staff and of the patient, the location in the middle of the city, and the technical and scientific quality of care."

"The medical care group provides a superb place for students and house staff to see personally the excellent quality health care than can be provided in prepaid group practice."

In a tour through rooms splashed with orange, red and gold following the ceremony, MCG Medical Director Lawrence Kahn, M.D., associate professor of pediatrics, replied to such questions as "How large a staff do you have to take care of the 1,800 patients?"

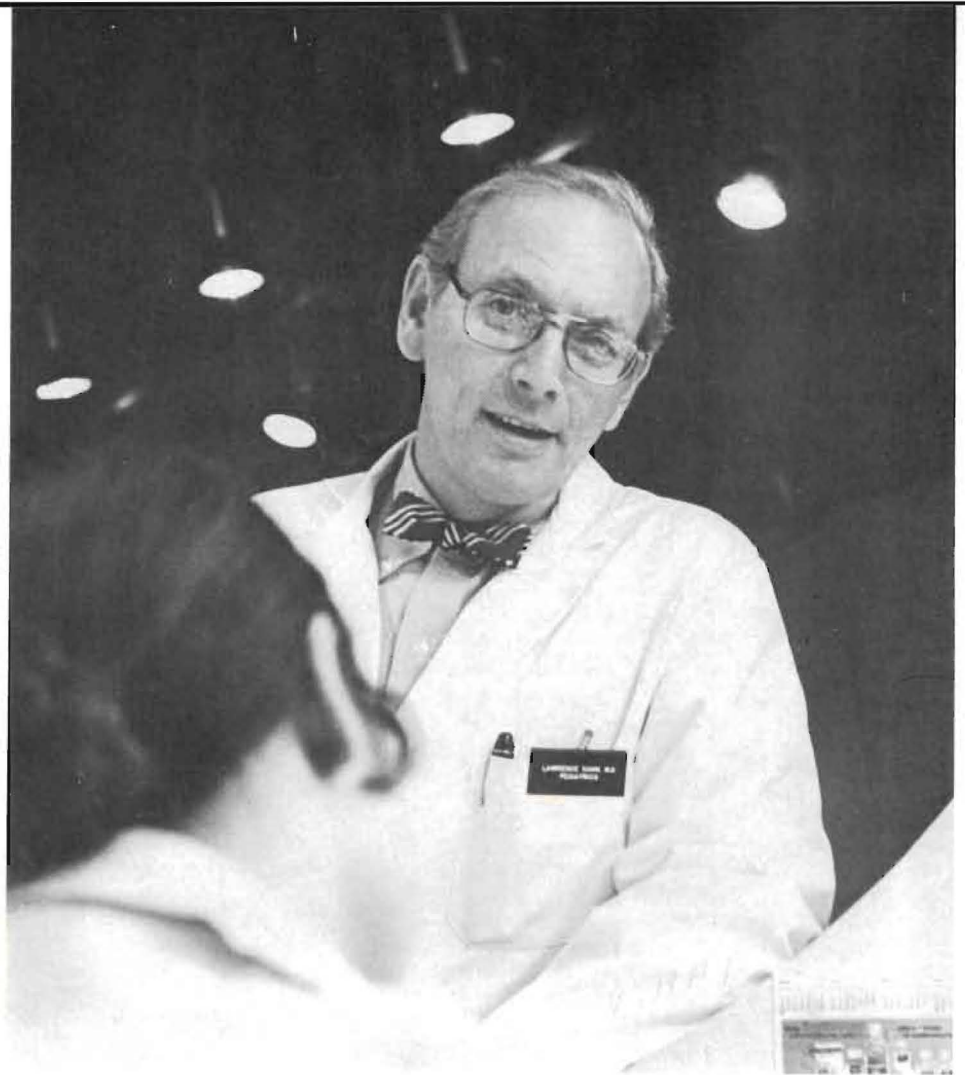
He answered that the staff available was capable of handling several thousand people in addition to the present enrollees. There are three internists, Carl G. Harford, M.D., professor of medicine; Owen S. Kantor, M.D., and Gerald G. Morris, M.D., both assistant professors of medicine and of preven-

tive medicine; as well as Dr. Perkoff. Two additional internists will be joining the staff in July.

The pediatricians are Paul S. Simons, M.D., instructor in pediatrics; and James K. Turner, M.D., assistant professor of pediatrics. The obstetricians are M. D. Kao, M.D., assistant professor of obstetrics and gynecology; and Ronald P. Wilbois, M.D., instructor in obstetrics and gynecology. Frances M. Watson, MSW, provides social services. The ancillary staff is comprised of 14.

As a postscript to the dedication, it might be of interest that in the initial offer of enrollment, some 350 Washington University employees, about 10 per cent of the faculty and staff, applied, representing 750 individuals.

Phillip J. Haas, administrative director for the Medical Care Group, said, "We are pleased that so many joined. Several have commented on the more inviting aspects of prepaid medical care that include the predictable outlay of expenditures for medicine as well as the high quality and accessibility of the care."



Lawrence Kahn, M.D., is MCG medical director.



Across from the reception desk in the colorfully decorated facility is the pharmacy. The architect tastefully

splashed hues of orange, red, sunburst and purple throughout the building.

1972 Alumna First to Wear Navy Flight Surgeon Wings



Jane O. McWilliams, M.D. '72, is the proud possessor of wings. Not just any old wings, but gold ones that signify she is a duly qualified U.S. Naval Flight Surgeon.

That in itself is a good story.

But in a society where *firsts* play such an important role, it is refreshing to report that a Washington University School of Medicine alumna is the torch bearer here. Lieutenant McWilliams of Nags Head, N.C., and Lieutenant Victoria M. Voge of Austin, Texas, were the first women doctors accepted in this highly competitive Navy course.

And, naturally, on Dec. 20, 1973, they

of the 23-member class.

Dr. McWilliams entered the Navy and began this 26-week course last July shortly after she completed her internship at the Upstate Medical Center in Syracuse, N.Y.

Now she is stationed at Keflavik, Iceland, where she will be flight surgeon for patrol squadrons' flying personnel and for the families of the Naval and Marine forces attached. Her assignment is "to keep flight crews flying safely and effectively as much of the time as possible," and that is no small task.

So what does it take to become a flight surgeon?

"During my six months of training I was exposed to two weeks of military indoctrination, 16 weeks of clinical instruction, and finally, eight weeks of learning to fly," Lt. McWilliams explained.

The clinical phase focused on specialty training and practical work in subjects particularly important to aerospace medicine: ophthalmology, otolaryngology, cardiology, neuropsychiatry and physiology.

The 26-year-old Navy doctor mentioned that the entire learning experience dealt with the special environmental stress situations of particular concern to aviators and astronauts. These were recreated by facilities such as low pressure chambers, ejection seats, and the human centrifuge which simulates weightlessness.

"And then there was the flight training," she said smilingly. "Sure, it was a lot of hard work, but there were fun and thrills to more than make up for it."

All student flight surgeons go through the same rigorous training pilots and crewmen experience so that the problems of aviators in the air will be understood—and because the physicians are, at times, members of crews.

"This training included the 'Dilbert



The first physician-astronaut, Navy Medical Corps Captain Joe Kerwin, chatted with Doctor McWilliams during her training.

Dunker,' a cutaway cockpit that gets splashed in the drink, and we got the opportunity to demonstrate what we learned about water survival. Of course, the solo flight was the real thrill to remember."

Flight Surgeon McWilliams was one of less than 150 to receive wings in 1973, and joins the select group of 3,800 who have graduated from the Naval Aerospace Medical Institute in Pensacola, Fla., in its 51 year history.

How does she approach her assignment of treating aviators?

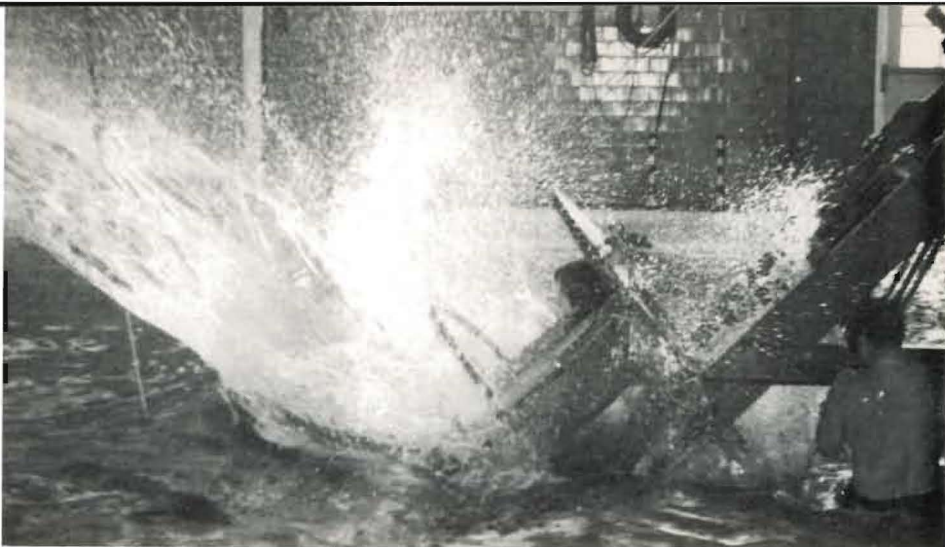
"I believe that the training we received was outstanding. We learned that pilots are a whole different group than untrained physicians can be expected to treat. A pilot, who might appear healthy to an 'unspecialist,' might look very sick to us," Dr. McWilliams commented.

When asked about problems of being one of the first female flight surgeons, the reply was that she hadn't felt any real pressures, and that the men she had examined didn't seem to regard her, the woman doctor, any different than other Navy physicians.

"The opportunities to practice medicine and the professional improvement potential is great," she said, "and I've never been with a nicer group of people."



Captain Fred Evans was Lieutenant McWilliams's instructor in ophthalmology at the Naval Aerospace Medical Institute.



Baptism—via the "Dilbert Dunker."



Glamorous? Not by a long shot. OFFICIAL U.S. NAVY PHOTOGRAPHS 7

Glenn O. Turner, M.D. '42: Evangelist for Heart Disease Care

A heart attack is a frightening experience. Just ask someone who has survived.

In southern Missouri, to start with, and now universally, a larger number are surviving—in no small part due to the efforts of a Washington University School of Medicine alumnus.

And although he prefers to remain silently in the background, Glenn O. Turner, M.D. '42, has been a very vocal advocate of reducing the large number of deaths and/or disabilities due to heart attacks with the Early Warning System (EWS).

As you will notice from the attached *Reader's Digest* reprint, Dr. Turner isn't mentioned until the fifth paragraph. But, because of the nationwide (and through translations, worldwide) exposure to this subject most vital to him, the Springfield cardiologist knows he will hear from many people—and perhaps even a few of his peers.

"It has been a long, hard battle to get this story to the public," he related. "But within the past few years we (the many people who encouraged me, and the hundreds who worked with me) have been rewarded by this publicity, and in Springfield by the dramatic evidence in 'my own hospital.'"

St. John's Hospital has a lot to be thankful for—including a 90-bed comprehensive cardiovascular care division. That's correct, 90 beds devoted to this need of a total of 700. Amazing, isn't it? Particularly so when it is pointed out that the CCU occupancy rate is 90 per cent, and naturally, the survival rate is high because the persons-in-need were given the treatment when they required it—and in many instances this need was recognized because of the efforts of Dr. Turner.

But the hospital really is another story—or at least a chapter in the book. And that leads us right up to the one Dr. Turner has upcoming: *Cardiovascular Care Units: Function and Design*, to be published soon by the Charles Press.

In this volume, in which he is collaborating with Richard Ames, an editor for *Medical World News*, Dr. Turner will unveil the rationale for expanding

St. John Hospital's CCU from seven beds to 90. Also given special treatment will be "the Springfield Wall," the convenience and control panel of equipment contained behind the bed in each unit of the 20-bed acute care section.

"We have written each chapter as if it were a feature story for a magazine," he commented. "Although there will be a lot of technical information of particular interest to cardiologists and emergency care specialists, we believe the book will be welcomed by the nursing staffs and hospital administrators as well. We'd like to think of it as a potential textbook."



As can be visually compared, Glenn Turner hasn't changed a lot from the 1946-47 Barnes Hospital private residents photo to the pictures taken in his busy practice today in The Clinic of Internal Medicine, where he is senior partner in a seven-member group, or in the hospital.

Oh, he has, like most of his classmates from the Medical School Class of '42, lost a little hair—but it is still dark brown. His trimness is accentuated by a thin angular face, and the bifocals in no way decrease the laser effect of his piercing eyes.

He carries what goes undetected as "a doctor's black bag," but which ef-

ficiently has ready for instant use many items not normally therein. One of the "whenever I get around to it" things he has been asked to do is a picture-feature for *Medical Economics* about his specially packed case.

Because he is such a staunch believer in efficiency, at all hours, he allows very few minutes to be wasted. Keeping abreast of the advancements in his specialty is achieved partially by listening to tapes in the recorder in his car—or in either the upstairs or downstairs bathrooms of his home.

As both an efficiency measure and one of good understanding between Dr. Turner and his patient, information for the chart is recorded while the patient is still in the office. He also keeps a small recorder with him at all times to avoid forgetting anything.

In her 20-plus years as Dr. Turner's secretary, Elda May Lee has managed to keep up with his extensive correspondence; although now she has two assistants to help her stay on top of the paperwork flow.

"The Springfield Clinic of Internal Medicine was patterned after St. Louis' Grant Clinic," Dr. Turner pointed out. "While I was a medical student, and then after military service as a Barnes house officer, I made a point of visiting the various internists' offices looking for contemporary ideas. Dr. Sam Grant's operation really impressed me the most."

Why did he decide to practice in Greene County? Partly, it was because of family ties. Born near Ozark, and graduated valedictorian at age 15 from Nixa High School (both in adjacent Christian County), Glenn Turner might have accepted a journalism scholarship to University of Missouri if he could have afforded the room and board. Instead, he attended Southwest Missouri State College in Springfield while living with a physician uncle.

"I got sidetracked into medicine. And instead of journalism at Mizzou, I got a B.S. in Medicine in 1940, and then the M.D. at Washington University in 1942—at the ripe old age of 23."

So after completing his residency and looking at the purported opportunities in other areas, Dr. Turner de-

cided that Springfield was really where he wanted to set up practice.

Today W. Yates Trotter, Jr., M.D. '55; Daniel L. Dolan, M.D.; John J. McKinsey, M.D.; J. William Cheek, M.D.; John D. Bentley, M.D.; and Kenneth D. Herfkens, M.D., are partners with Dr. Turner. They are supported by a staff of 25.

So what has Glenn Turner accomplished since 1947?

Well, for starters, a practice with many more patients than he wishes he had; a lovely, charming wife and four children of whom he is very proud; a comfortable home, and membership in the country club. But this could be said of a large percentage of doctors.

How about some of the today remembered, tomorrow forgotten items? Like the past presidencies of the Greene County Tuberculosis Society, the Ozarks Regional Heart Association, the Greene County Division of Missouri Heart Association, the St. John's Hospital Medical Staff, the Missouri Thoracic Society, the Missouri Chapter of American College of Chest Physicians, and the Missouri Heart Association?

Oh, there were the thank you letters, and in 1972 Southwest Missouri State University presented him an Outstanding Alumnus Award, but 1973 was the year that the nation and the world

heard about and appreciated Glenn Turner. His story was in *Reader's Digest* and he received a Gerard B. Lambert Award Special Recognition for his involvement in the Early Warning Signs of Heart Attack Public and Professional Education Project. Of the 1,800 entries submitted, only 10 received the Lambert Award and only 18 got special recognition.

And that is really what precipitated this feature.

The Early Warning Signs (EWS) program of the American Heart Association and its attendant activities has brought more attention to Dr. Turner, Springfield and Greene County than anyone ever imagined.

The publicity of anything relating to medicine has, for years, been apprehensively shelved under the "ethics" umbrella by a large number in the profession. But this Springfield cardiologist believed that "the Middle Ages" are past and that here (the EWS) was something that needed to be promoted, so when asked to direct the program he accepted the challenge.

If you aren't familiar with them, please see the illustrations in the *Reader's Digest* reprint which tell what the early warning signs are. Similar drawings have been printed in numerous other publications, including many newspapers, particularly in

southern Missouri.

Other messages relating to the EWS have appeared on television, and have been played on radio. Service clubs also have welcomed the EWS talk with accompanying slides (often shown with Dr. Turner's own projector).

How was this "broadcasting" accomplished, and what has been the outcome?

Dr. Turner relates the beginning to the 1967 annual meeting of the Greene County Division of the Missouri Heart Association where he gave a presentation on heart attack warning signals. Unaware to him, there was a newspaper reporter in attendance. The next day's headline was "Many who 'Drop Dead' Have Had Forewarnings."

Within 48 hours calls came from two patients motivated by the article to seek help. Two others said their hospital arrival would have been days earlier if the story had been published sooner. And much to Dr. Turner's surprise, there had been no adverse public response and no calls from outraged peers.

Numerous organizational meetings followed, many of them dealing with finances. A request to the Missouri Regional Medical Program was approved, with warm support, particularly from Director of Planning George E. Wakerlin, M.D., formerly medical direc-





tor of The American Heart Association, but turned down by RMP at the national level "for fear of triggering undue public anxiety."

But a \$16,000 Missouri Heart Association grant was received, and the task was begun.

"Hundreds of hours of creative work were being given by a wide range of enthusiastic local media specialists who helped us to develop the scripts, films, slides and other materials on heart and other chest pain patterns that were the core of our program in 1971-72," Dr. Turner recalled.

Two weeks before the July 18, 1971 public information launch date, all hospitals and physicians in the area were alerted to expect an increase in patients with "chest pains."

The eight spot announcements for both television and radio were prepared with due consideration for the supposition that such messages about heart attack would have an adverse

public effect. Included were specific details of the nature and location of pain, but also reassuring information about the harmless chest wall discomfort of tense individuals.

Newspaper features, also a series of eight, were accompanied by line drawings that could be reproduced in black or in several colors. Wallet-purse cards with the EWS message also were printed.

And was all this exposure successful?

"Results of the program have exceeded expectations," Dr. Turner beamed. "Along with the tremendous interest by the total media, and the apparent acceptance by members of the medical profession of 'all this advertising,' we also made some encouraging observations."

After release of the EWS information, the patient-physician reaction time was shortened from a median of 4.6 hours to 2.8 hours. Also, it was de-

termined that those patients who had contacted their doctor first, arrived at the hospital after about the same time-lag as those who came directly without physician contact.

"Twenty-five per cent of the patients said they had responded because of the media exposure. Physician reaction was measured by a poll of 300 in the area. Of the 35 per cent who answered, nearly all indicated no overload. A similar response came from 97 per cent of the hospitals."

Relating to the follow-up study of 117 heart attack suspects demonstrated that there has been an increase in both real and false cases—but the doctors and hospitals have been able to handle the load.

"We feel that an EWS program does not create 'nervousness' in laymen as some have feared, but simply brings in people who already are 'nervous,' he noted. If a person does not have heart disease, we do him an incalculable ser-



vice by delabeling him and correcting his erroneous 'self diagnosis.' ”

“Several patients have told me that the expense and discomfort of angiography is preferable to the anxiety they faced before 'not knowing.' ”

Noting that now his hospital is better equipped with its 90-bed CCU, Dr. Turner marvels that there wasn't an overload “because we are utilizing such a large percentage of these beds today.”

The successful EWS story of southern Missouri is being told in many other places, and fortunately for the thousands of potential heart attack victims, the program, or something similar, is being repeated or at least is in the planning stages.

“Good gracious, I'm proud,” Glenn Turner says with a smile, and then hurries away—still on his rounds as a doctor, always in the role of evangelist for heart disease care, and waiting for the next challenge to present itself.

P.S. This story, written in late 1973, has had a few interesting additions: In early January Dr. Turner went to El Paso, Texas, where in two days he helped launch a multi-media saturation-type of EWS program. He was on five television and three radio programs, was interviewed by both newspapers, and spoke at a conference for news media representatives, hospital administrators, doctors, nurses and Heart Association personnel.

En route home, he stopped in Dallas to meet with the Heart Association in a gathering hosted by surgeon Stephen P. Londe, M.D. '63. Dr. Turner commented that Dr. Londe is highly oriented in public and professional education in heart disease, and collaborated in a documentary on heart attack produced by a Dallas TV station.

Dr. Turner also is sharing ideas with a West Coast film company for the story of what actually happens to a heart attack patient—from the scene of

his illness, through transport to the hospital, entry into the CCU, sequential events which transpire inside, and winding up with his return to a happy and gainful life.

And, he mentioned that in February *Medical World News'* Annual Cardiovascular Review will print the sequence of diagrams, similar to the ones in *Reader's Digest*, plus a couple more, from the original art done for the Missouri EWS publicity.

As a parting thought, Dr. Turner said, “I feel that much of the future in patient care, especially in rural areas, hinges on the effective delivery of the products of research of our university centers to the patient regardless of where he might live, and this is the duty of health professionals in localities like my own, most of which are remote from the medical centers. Only by this means can the huge gap between what can be done and what is actually being done be eliminated.”

To most people, Project HOPE means a great white hospital ship, as advertised in numerous magazines, doing good deeds abroad. In fact, the ship usually stays only 10 months in each port and often leaves behind land-based projects to carry on the basic work of teaching at all levels, from physicians to nurses' aides.

Since its founding in the late 1950s by William B. Walsh, M.D., Project HOPE (Health Opportunities for People Everywhere) has sailed in a refitted U.S. Navy hospital ship named S. S. HOPE to many countries: Indonesia and Viet Nam (1960-61), Peru (1962-63), Ecuador (1963-64), Republic of Guinea (1964-65), Nicaragua (1966), Colombia (1967), Ceylon (1968-69), Tunisia (1969-70), Jamaica (1971), and Brazil (1972-73). At present, significant land-based projects are active in Colombia, Ecuador, Peru, Jamaica, Tunisia and Brazil, as well as in Ganado, Arizona, and Laredo, Texas.

Project HOPE is financed by private contributions and staffed by both short-term volunteers, committed for

month assignment in Jamaica as a senior resident in medicine, shortly after completion of a general medicine residency. My wife, Carol, a librarian, obtained a position with the university library.

The S. S. HOPE's 1971 stay in Kingston, Jamaica was adjudged quite successful, particularly in the areas of continuing education for local physicians, training of nurse anesthetists, re-training of paramedical personnel, and immunization in rural areas. At that time an embryonic effort was made to establish specialty training programs at the University of the West Indies School of Medicine. This was felt necessary to halt the "brain drain" of young West Indian doctors leaving to study specialties and to practice in other countries, particularly England, Canada and the United States.

The University of the West Indies was established in 1946, with the help of Great Britain, to train people from the British Commonwealth in Antigua, Bahamas, Barbados, Belize (British Honduras), British Virgin Islands,

Dominica, Grevada, Guyana, Jamaica, Monseratt, St. Kitts-Nevis-Anguilla, St. Lucia, St. Vincent, Trinidad, and Tobago. It was set up in Mona, a region above Kingston which used to be a plantation.

The first medical class was graduated in 1954. The medical course is based on the British system, lasts six years after high school, and leads to the degrees of Bachelor of Medicine and Surgery. About 100 medical students are admitted annually, most from Jamaica, Trinidad, and Barbados, although three U.S. citizens are enrolled. About 80 graduate annually. Many are on government scholarships with compulsory service agreements. All graduates must serve the "house officer" year (internship) in a government hospital.

The University Hospital has 500 beds, with all specialties represented on open wards. Most departments have or are developing training programs accredited in the United Kingdom. Some subspecialties, such as urology, neurosurgery, and neurology, do not have distinct beds.

Teaching With Project HOPE in Jamaica

from two to six months, and long-term salaried personnel, who usually sign for at least a year. Volunteers include students, trainees, and experienced individuals in many varied health professions from nursing, medicine, and surgery, to hospital administration and prosthetics. Full-time staff are usually experts in a particular area.

Arrangements for volunteers differ according to the individual project. The S. S. HOPE seeks experienced professionals and will provide one round-trip air fare to the site, room and board, but no salary. Medical students and residents are welcome but must pay their own expenses. Opportunities for families to go along are limited.

A land-based project, for example in Jamaica, may provide round-trip air fare from the U.S. for the whole family, rent allowance up to \$275 monthly, and a low cost rental car—but again no salary.

Resident physicians as well as academicians are sought, for reasons to be described later. Positions are in demand, and it is advisable to apply one year in advance. I obtained a 2½

By Robert G. Harmon, M.D. '70



Although the quality of the faculty is quite good, the numbers are limited and time is occasionally diluted by outside, part-time commitments. Most faculty members, now, are West Indians.

The quality of housestaff is variable but continually improving as the number of applicants increases. Most are West Indian, but some from the United Kingdom take elective rotations for 6 to 12 months. The British system of training, with apprentice-type experience, still predominates (Jamaica gained its independence from Great Britain in 1962).

The goals of Project HOPE in Jamaica are to restructure and improve specialty training programs, to train paramedical personnel (especially nurse anesthetists), and to encourage West Indian physicians to practice in the Caribbean area. This is to be carried out over a five year program. Implementation requires a continual supply of senior residents and faculty from the United States to fill in gaps and upgrade teaching. Usually, HOPE has in each department one or two

residents on short-term assignment and one faculty member on short or long-term stay.

My assignment covered three areas. At first, it involved the usual ward registrar (resident) activities including night call, casualty (emergency room) consultation, admitting, and responsibility for patient care and teaching on a ward. The American system of informality and early responsibility for medical students and housestaff was encouraged and well-received; reportedly a welcome addition to the lecture-oriented British system.

Consultants (full-time attending physicians) were often reluctant to grant much additional responsibility to housestaff. Gradually, however, a blend of the good points of both systems is being achieved. The British

phoid fever, and varieties of worm infestations.

Nearly all epidemic infectious diseases have been eradicated by the country's excellent Ministry of Health. Laboratory and x-ray support were good, although the concept of an emergency seems to be different in a developing country. There were long waits and constant bed shortages in the intensive care unit run by anesthesiology. Nursing support was good, but limited somewhat by outdated job descriptions. Project HOPE is working to improve the role of nurses.

The next assignment was to develop a chief residency position, while helping to consult on a firm (ward team) attended by a part-time academic, part-time private internist. It was possible to immediately increase the amount of

two years of general medicine, and one year of research or subspecialty. Only gradually will subspecialties, chief residency and other North American training techniques emerge.

The final assignment was to develop a rural clinic high in the mountains above Kingston. This community where I was sent, like many others, had no doctor. Jamaica has 22 general hospitals for a population of about 2 million people on an island roughly 150 by 50 miles. Most of the 1,300 physicians (about 80 per cent) are in either full-time or part-time government practice.

This ratio of one physician per 1,500 population is misleading since most doctors are in Kingston (population 600,000), leaving some rural areas of 50,000 to 80,000 with only one doctor looking after a 100-bed hospital.

With the Department of Social and Preventive Medicine, HOPE physicians reorganized and up-graded the rural clinic facility; screened, treated, and referred patients; conducted a health survey of the area; set up a permanent elective in community medicine for senior medical students at the facility; set up plans for regular rotations by housestaff; and amazed the Minister of Health.

The memory of riding two hours up to this jungle village to treat the proud, strong, and stoic mountain people still lingers. Perhaps by teaching community medicine more effectively, the brain drain to developed countries may be slowed.

In conclusion, I would urge readers to seek out assignments abroad, particularly in developing nations which so desperately need professional manpower for teaching and patient care. One can have nothing but praise for the work being carried out by Project HOPE. Further inquiries can be addressed to Project HOPE, the People-to-People Health Foundation, Inc., 2233 Wisconsin Avenue, N.W., Washington, D.C. 20007.

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system is particularly good in that the consultant is nearly always well prepared and tends to be an excellent generalist as well as specialist. His skills as physical diagnostician, as well as those of the housestaff, are remarkable.

The spectrum of disease encountered on the wards did not differ greatly from that in the USA. Hypertension and strokes were quite prevalent, as expected with Jamaica's population being approximately 90 per cent black. Diabetes was the other major prevalent disease. Unusual diseases encountered included tropical neuropathy, idiopathic cardiomyopathy, veno-occlusive liver disease, occasional ty-

teaching at the bedside and in informal discussions.

An obvious defect in teaching concerned the lack of medical subspecialty divisions. Neither the funds nor the faculty are available to staff separate consultation services, so the internists on the faculty conduct occasional rounds and once-weekly clinics in their particular subspecialties. Registrars gained their experience in a somewhat random fashion.

In the British system, a registrar could spend six graduate years gaining enough elective subspecialty training to pass the British boards and feel ready for a hospital position. The goal is four years of training: internship,

Alumni Activities

The President's Letter

The start of the New Year brings to us many opportunities as well as challenges, and I believe we should welcome both. One of 1974's choicest opportunities will be the courses offered by the new Office of Continuing Medical Education being directed by Associate Dean Elmer B. Brown, M.D. '50, and taught by the finest of the Medical School faculty.



The three-day program in May, held in conjunction with the Alumni Class Reunions, will be an outstanding and comprehensive seminar on "Management of Medical and Surgical Crises." A continuing education course in morphologic hematology, and a symposium on obstetrics and gynecology also are upcoming.

I also would like to inform you of a new committee of the Medical Center Alumni Association. As all of us busy practitioners know, an often neglected need is for assistance in planning our estates. Sure, all of us have had insurance men, brokers and others call on us with investment advice, but soon after they depart the office we realize that they have not presented the whole picture. So we often remain confused.

The Alumni Financial Study Support Committee has been formed to obtain this kind of information. This group, composed of alumni vitally interested in the Medical School, will be consulting with experts in the areas of insurance, taxes, estate planning and related subjects. And beginning with the next issue of OUTLOOK, it is planned that highlights of this information will be presented in a series of articles.

I would welcome correspondence from the medical alumni on this important subject—or any matter relating to the improvement of the organization and/or the School of Medicine.

James A. Wood, M.D. '49
President, Medical Center
Alumni Association

Pre-'20s and '20s

Nelson W. Sheley, '17, reports he still is in practice in Los Angeles, Calif.

The widow of **Bert Y. Glassberg** (he was Class of '25) has given his books and manuscripts to Washington University's Medical Library. Dr. Glassberg was instructor of clinical medicine from 1928-1969, and emeritus instructor until his death in 1971.

Charles W. McLaughlin, Jr., '29, Omaha, Neb., was elected president-elect of the American College of Surgeons at its annual congress.

'30s

Stanley L. Harrison, '30, Evanston, Ill., has been appointed associate director of the American Academy of Pediatrics. He also was made an honorary member of the American Academy of Pediatrics for his work in promotion of dental health for children in the United States.

Brian B. Blades, '32, Louis Saltz Professor of Surgery and chairman of the department at George Washington University School of Medicine, Washington,

Alumni Receptions Attract Radiologists, Orthopedists

Washington University Medical Center Alumni Association sponsored receptions Nov. 26 in Chicago and Jan. 18 in Dallas.

More than 100 attended the Chicago gathering at the Radiological Society of North America. Ronald G. Evens, M.D. '64, professor of radiology and director of the Mallinckrodt Institute of Radiology, was the host. Mrs. Ruth Moenster represented the Alumni Office.

In Dallas, about 135 came to the party for the American Academy of Orthopedic Surgeons. Fred C. Reynolds, M.D. '34, professor of orthopedic surgery, and Marshall B. Conrad, M.D. '45, assistant professor of orthopedic surgery, were hosts, and Mrs. Claire MacConnell was the Alumni Office representative.

On April 1 James A. Wood, M.D. '49, Association president, will be host at the reception in the Americana Hotel in New York City at the American College of Physicians meeting.

D.C., at the Clinical Congress of the American College of Surgery, paid tribute to Evarts A. Graham, M.D., Bixby Professor of Surgery at Washington University from 1919 until his death in 1957.

F. Richard Crouch, '36, Farmington, Mo., retired from the practice of obstetrics and family medicine, and is now active in ornithology, natural history and Scouting.

Gilbert S. Goldman, '37, Pompano Beach, Fla., is working in the emergency room at Imperial Point Hospital, Fort Lauderdale.

Robert E. Shank, '39, Danforth Professor and head of Washington University's Department of Preventive Medicine and Public Health, has been appointed Nutrition Chairman of the American Heart Association.

'40s

G. Bruce Lemmon, Jr. '41, is president of the Springfield, Mo., Little Theater and actively involved in The Common Cause and Planned Parenthood programs. This summer he will be filling in on the staff at a Presbyterian Spanish-American clinic in New Mexico.

H. Clagett Harding, '43 March, Portland, Ore., trains dogs to ski and skate.

Stanley S. Kanter, '43 March, Brookline, Mass., is assistant clinical professor of psychiatry at Harvard Medical School, and clinical associate at the Boston University School of Theology. His specialty is individual and group psychotherapy.

James H. Cravens, '43 December, Quincy, Ill., a member of the Physicians and Surgeons Clinic, was elected president of the Central Illinois Pediatric Society.

A. Hall Thatcher, '45, Oceanside, Calif., recently was named Citizen of the Day for his many civic activities. These include training firemen, police, and life-guards in emergency medical care at Tri-City Hospital where he also is chairman of planning for a new 500-bed medical center. Active in the American Cancer Society, during the past 20 years he has informed 45,000 people about the disease. He is president of Cassidy Medical Service and Investment Corp., and an instructor at Palomar College.

Kenneth R. Dirks, '47, Silver Spring, Md., has been promoted to brigadier general in the U.S. Army Medical Corps. He is serving as Assistant Surgeon General for Research and Development for the Department of the Army, and as Commanding General of the Army Medical Research and Development Command.

Bernard T. Garfinkel, '48, St. Louis, has been named a team physician for the St. Louis Football Cardinals.

Arthur S. Greditzer, '48, was elected vice-chairman of the Santa Barbara Medical Foundation Clinic board of governors and president of the Psychiatric Society in that California city. He was on the program at the American Psychiatric Association's annual meeting in Hawaii.

Marcus B. Bond, '49, Madison, N.J., has been named corporate medical director for the American Telephone and Telegraph Company in New York.

George S. Woodard, Jr., '49, San Francisco, Calif., was promoted to brigadier general and is now commanding general of the Letterman Army Medical Center.

'50s

John R. Kiser, '50, is associate clinical professor of medicine at the University of California, San Diego School of Medicine, and an associate member of the General Medical Division of Scripps Clinic and Research Foundation in La Jolla.

Robert I. Pfeffer, '50, St. Joseph, Mo., has been appointed commissioner on the accreditation commission of the American Association of Medical Clinics.

Ernest L. Wynder, '50, New York, president of the American Health Foundation, has organized a group of health professionals to devise health insurance plans to pay for preventive health services.

Marvin E. Levin, '51, St. Louis, is co-editor with **Lawrence O'Neal, '46**, of "The Diabetic Foot," published by the C. V. Mosby Co.

Richard V. Bradley, '52, was installed as president of the St. Louis Medical Society for 1974. He is a clinical instructor of surgery on the Medical School faculty.



El Macho, held by Eduardo Slatopolsky, M.D., associate professor of medicine, recently has been getting publicity for Washington University's Renal Division. Both newspaper and television have featured the red-combed 15-pound rooster that is providing a highly sensitive antibody used to measure the parathyroid hormone level in the blood—particularly important in the study of bone disease in dialysis patients. While other roosters have been involved in this research, only El Macho's antibody is of a high enough quality to be measured in patients' blood.

Grant Izmirlian, '52, St. Louis, received a Charter Fellowship at the American Academy of Family Medicine convention in Denver. His specialties are industrial, emergency and family medicine.

Merton B. Berger, '55, Atlanta, Ga., is serving as a consultant to the regional flight surgeon of the Federal Aviation Administration, the Fulton County Department of Family and Children Services, and to Georgia's Division of Vocational Rehabilitation. He also is the medical advisor to the Bureau of Hearings and Appeals of the Department of Health, Education and Welfare. He is a Fellow of the American Psychi-

atric Association, of the Royal Society of Health, of the American Academy of Psychosomatic Medicine, and of the American Geriatrics Society. He is a diplomate of the American Board of Psychiatry and Neurology and on Emory University School of Medicine faculty.

Roger J. Meyer, '55, Evanston, Ill., associate professor of health care at the University of Illinois School of Public Health, has published several monographs on local health care systems and serves as medical coordinator of HEW's Social and Rehabilitation Services. His major research is in health care accountability and childhood injury epidemiology.

Nina Lowy Steg, '55, Wayne, Pa., has been appointed chief of pediatrics at the A. I. DuPont Institute in Wilmington, Del. She is also co-director of a team studying hypertension and kidney disease in adolescent males with a \$120,000 HEW grant to Medical College of Pennsylvania.

W. Yates Trotter, Jr., '55, Springfield, Mo., was installed as president of the medical staff of St. John's Hospital.

Robert E. Caraway, '56, Woodland Hills, Calif., has been re-elected chief-of-staff at Woodview Calabasas Psychiatric Hospital.

August Geise, '56, was elected president-elect of the St. Louis Medical Society. His specialty is neurosurgery.

R. Thomas Hunt, '56, Orinda, Calif., is the 1973-74 president of the California Blood Bank System.

Harriet S. Kaplan, '56, Torrance, Calif., is head physician of the Crisis Clinic and Emergency Service in Harbor General Hospital, and has an appointment

as assistant professor of psychiatry at UCLA School of Medicine.

James C. Lowe, II, '56, Birmingham, Mich., is the newly appointed head of the division of preventive medicine at Henry Ford Hospital.

Arthur Berken, '57, Bethpage, N.Y., has been appointed associate professor of clinical medicine at State University of New York in Stony Brook. He has written about "Reticuloendothelial System Function in Diabetes Mellitus" to be published in *Diabetes*.

Ruth Sights Gurd, '57, Bloomington, is assistant professor of biochemistry in the medical sciences at Indiana University. Her major research is in neurochemistry and medical education.

Frederick D. Peterson, '57, was installed as the 1974 president of the St. Louis County Medical Society. His specialty is pediatrics.

William F. Hejna, '58, Chicago, Ill., was elected dean of Rush Medical College of Rush University and vice president

for medical affairs of Rush-Presbyterian-St. Luke's Medical Center. He is a professor of orthopedic surgery and has been associate dean for surgical sciences and services since 1970.

'60s

Richard A. Grossman, '62, Bangkok, Thailand, is a member of the World Health Organization Research Team at the Chulalongkorn University Hospital. He is a consultant in epidemiology for a research group on fertility regulating methods.

Stanford Lamberg, '63, Baltimore, Md., was appointed associate professor at Johns Hopkins University and chief of the division of dermatology for City Hospitals. He co-authored a paper in the October *Journal of Clinical Investigation*: "Synthesis and Degradation of Hyaluronic Acid in the Cultured Fibroblasts of Marfan's Disease."

James C. Ellsasser, '64, assistant professor of orthopedic surgery, is one of the two new team physicians for the St. Louis Football Cardinals.

Earl H. Parrish, '64, Medford, Ore., is in the private practice of plastic surgery.

Perry G. Rawson, '64, St. Louis, has joined the pathology staff at St. Luke's Hospital.

Robert S. Richmond, '64, is the medical director of the Baltimore, Md., Red Cross Regional Blood Program.

Carolyn Bauer Robinowitz, '64, Bethesda, Md., an assistant professor, is the director of education in the Department of Psychiatry and Behavioral Sciences at George Washington University School of Medicine. She is also an assistant professor of child health and development. She is active in the American Association of Psychiatric Services for Children, the American Academy of Child Psychiatry and the American Psychiatric Association.

Charles Wallas, '64, is the temporary medical director of the American Red Cross, Washington, D.C. regional blood program.

Brian H. Gross, '65, Winchester, Mass., is secretary to the medical staff at Kennedy Memorial Hospital for Children in Boston where he is chief of anesthesiology and respiratory therapy. He is a consultant at Children's Hos-



After cutting the ribbon to officially open St. Louis Children's Hospital's Intensive Care Unit for Newborns, St. Louis Mayor John H. Poelker and St. Louis County Supervisor Lawrence K. Roos were given a tour by Norine Sgarlata, patient care consultant. The \$600,000 facility annually will enable the Washington University Medical Center hospital to provide more than 600 critically ill infants a chance to survive.

Receptions Scheduled

The Washington University Medical Center Alumni Association will sponsor receptions at the following meetings:

American College of Physicians, April 1, New York

Missouri State Medical Association, April 6, Kansas City

Federation of American Societies for Experimental Biology, April 8, Atlantic City

American College of Obstetricians and Gynecologists, April 29, Las Vegas

American Society for Clinical Investigation, May 6, Atlantic City

American Psychiatric Association, May 6, Detroit

American Medical Association, June 24, Chicago

Graduates of the School of Medicine, former house officers, faculty and former faculty, spouses and friends are invited.

pital Medical Center. His research involves anesthesia for children with handicaps and his special interests deal with anesthesia for small valuable animals.

Paul P. Sher, '65, New York City, after two years in the Bethesda Naval Hospital is now assistant director of clinical laboratories and director of clinical biochemistry at University Hospital. He has been appointed assistant professor of pathology at NYC School of Medicine.

Clifford Schultz, '66, Berkeley, Calif., is a staff cardiologist at Herrick Memorial Hospital after completing a cardiology fellowship and chief medical residency at the Stanford Medical Center.

Eric W. Friedrich, '67, Columbus, Ohio, is assigned to the SAC Lockbourne Air Force Base Hospital. His specialty is otolaryngology.

Kenneth Geiger, '68, has completed his residency in neurology at Albert Einstein College of Medicine and has opened an office in Hawthorne, Calif.

Hunter Heath III, '68, San Francisco, Calif., is chief of the endocrinology section at Letterman Army Medical Cen-

ter, and clinical instructor of medicine at University of California Medical Center. He has published several papers on his research in PTH/Calcitonin/Calcium metabolism and metabolic bone disease. In September he will become a research fellow in mineral metabolism at the Mayo Clinic.

Edward L. Knuteson, '69, Monroe, Wis., has joined the department of dermatology at the Monroe Clinic following a residency at the Washington University Medical Center.

Charles L. Rich, '69, Alexandria, Va., is clinical associate in the Laboratory of Clinical Neuropsychopharmacology, National Institute of Mental Health, St. Elizabeths Hospital, Washington, D.C. His research is on the subject of possible biomedical mechanisms relating to chronic schizophrenia.

W. B. Jerry Younger, '69, Durham, N.C., is a hematologist at the Cambridge City Hospital and is associated with Harvard Community Health, a group practice.

'70s

Clifton G. Harris III, '70, Watertown, Mass., after two years as flight surgeon for the Army's 82nd Airborne Division has begun a surgical residency at Boston University Hospitals.

Laura F. Wexler, '71, Boston, is senior medical resident at Massachusetts General Hospital, and has received a cardiology fellowship for 1974-76.

Former House Staff and Former Faculty

Robert R. Goodin, M.D., has been promoted to chief of cardiology at University of Louisville School of Medicine. He was also named "Professor of the Year" by the student body for 1972-73. He has articles on coronary artery disease in *Annals of Internal Medicine*, and the *Journal of Thoracic and Cardiovascular Surgery*, both December, 1973.

Jack W. Love, M.D., is practicing thoracic and cardiovascular surgery in Santa Barbara and working as a research physiologist at the University of California. He is co-developer of "the first truly lifelong, rechargeable pacemaker" for cardiac patients.

Nancy Newman, M.D., assistant professor of ophthalmology at the Pacific Medical Center and assistant clinical professor of ophthalmology at University of California at San Francisco, recently returned from a trek across the Himalayas in Nepal. Dr. Newman has a new book on "Eye Movements" being published, and is in *Who's Who in American Women* and *International Who's Who of Women*.

Frederick H. Taylor, M.D., has been named president-elect of the Southern Thoracic Surgical Association at its annual meeting in Louisville, Ky.

Vicente Bautista Tuason, M.D., is an associate professor of psychiatry at University of Minnesota Medical School, and chairman of the Department of Psychiatry at St. Paul-Ramsey Hospital Medical Center. He has received a Fellowship in Medicine Modified for Psychiatry at the Royal College of Physicians and Surgeons of Canada.

M. B. Weber, M.D., F.R.C.P., F.A.C.P., is an associate on the University of Toronto Faculty of Medicine and has clinical practices in Neurology at North York General Hospital and Sunnybrook Hospital. His 1973 publications were in the *Canadian Family Physician*, "The Management of an Epileptic Disorder," and in *Current Therapeutic Research*, "The Treatment of Muscle Contraction Headaches with Diazepam."

IN MEMORIAM

Alumni

Alphonse H. Meyer, '11 .. Aug. 26, 1973
Frank P. McNaalley, '17 .. Oct. 23, 1973
Alfred Goldman, '20 Nov. 25, 1973
Henry A. Romberg, '26 ... Nov. 4, 1973
Willard C. Schwartz, '27. Date unknown
William H. Doyle, '34 Dec. 23, 1973
John B. Jones, '35 Aug. 12, 1973
Allan B. Phillips, '35 Sept. 11, 1973
Horace E. Jones, '38 Dec. 24, 1973
Donald J. Mariea, '41 July 25, 1973
William C. Stahl, '41 June 23, 1973
Paul E. Nielson, '44 Oct. 15, 1973
Marcella M. Krahenbuhl, '50
..... Sept. 29, 1973
Julius F. Paulin, '73 Nov. 30, 1973

Former House Officers

William Y. Burton, M.D. March 5, 1973
Garland A. Reynolds, M.D.
..... Aug. 1, 1973

Names Make News

Academic Excellence Awards Go to 21 Medical Students

Washington University School of Medicine honored 21 students for scholastic excellence in the 1972-73 academic year at the annual awards assembly.

Recipients and their awards were:

Scott P. Bartlett, Ogden, Utah—Dr. Robert Carter Medical School Prize, \$200 sophomore class award for meritorious performance.

James M. Barton, Champaign, Ill., and Robert Black, Short Hills, N.J.—Lange Medical Publications Book Awards for the sophomore class for meritorious performance.

William Coleman, De Soto, Mo.—Medical Alumni Scholarship Fund Prize, \$200 awarded annually for scholastic excellence, and the Roche Award, a gold wrist watch and scroll to the student who best exemplifies the ideals of the modern American physician. He received the McCordock Prize and the Carter Prize in 1972 and the Dames Prize in 1971.

Diane Elliot, Salem, Ore., and Glenn T. Hammonds, Fort Scott, Kan.—Carl F. and Gerty T. Cori Prize in Biochemistry, \$100 award each for superiority in the field.

Colleen K. Flint, San Diego, Calif.—Edmund V. Cowdry Prize in Histology, \$100 for meritorious performance in microscopic anatomy, and the Antoinette Frances Dames Prize in Physiology and Biophysics, \$100 for superior scholarship in the field.

Kenneth L. Gammon, Raleigh, N.C.—Lange Medical Publications Book Award for the freshman class.

Richard Gangnes, Santa Ana, Calif.—Louis and Dorothy Kovitz Fellowship in Surgical Research, for superior scholarship in the field.

Jonathan M. Mann, Waban, Mass.—Lange Medical Publications Book Award for the junior class. He received the McCordock Prize in 1972.

Monte T. Mellon, Johnstown, Colo.—Lange Medical Publications Book Award for the freshman class.

Margaret Woolf Meyer, San Diego, Calif.—Richard S. Brookings Medical School Prize, \$250 for meritorious performance during the junior year. She received the Smith Award in 1972.

Joseph J. Pasternak, Des Moines, Iowa—Brookings Prize, \$200 for meritorious performance during the sophomore year, and the McCordock Book Prize for general excellence in pathology. He received the Cori Prize and the Cowdry Prize in 1972.

Patricia Ann Penkoske, St. Charles, Mo.—Lange Medical Publications Book Award for the junior class.

Kent R. Rasmussen, Tempe, Ariz.—Brookings Prize, \$100 for meritorious performance during the freshman year.

Beverly Ringenberg, St. Louis—Dr. Robert Carter Medical School Prize, \$100 freshman class award.

Laurence E. Stempel, Northbrook, Ill.—\$100 Antoinette Frances Dames Prize in Physiology and Biophysics, Gill Prize and the Kehar S. Chouke Prize, both \$50 awards for superior scholarship in anatomical work.

Sharon Tiefenbrunn, St. Louis—Dr. Margaret G. Smith Award, \$150, for outstanding achievement in the first two years of medical school by a woman student.

Kathleen G. Todd, Portland, Ore.—Ciba Book Award, for laudable extra-curricular community service.

Thomas M. Ulbright, St. Louis—Howard A. McCordock Book Prize, awarded at the end of the second year for general excellence in pathology.

Keith A. Wichterman, New Berlin, Ill.—Carter Prize, for meritorious performance during the junior year. He received the Brookings Prize for the sophomore class in 1972.



Pictured at Student Awards Assembly were: back from left, Glenn Hammonds, Monte Mellon, Laurence Stempel, Robert Black, Thomas Ulbright, Kent Rasmussen, Keith Wichterman, Scott Bartlett and Joseph

Pasternak. Front, Colleen Flint, Beverly Ringenberg, Diane Elliott, William Coleman Kathleen Todd, Sharon Tiefenbrunn and Patricia Penkoske.

Students, Faculty Cited By Medical Honor Society

Twenty senior medical students and three faculty members have been initiated into the Washington University chapter of Alpha Omega Alpha, national honor society.

ΑΩΑ recognizes outstanding scholarship and leadership in medicine and related fields. It is considered the profession's most prestigious honor society. The seniors were chosen by their classmates and the medical faculty from among the 116 who will receive the Doctor of Medicine degree in May.

New student members are William Coleman, De Soto, Mo.; Arthur J. Crumbley, College Park, Ga.; Ronald K. DeGuerre, North Canton, Ohio; Lewis Fischbein, Short Hills, N.J.; Jeffrey Golden, St. Louis; Michael Gutwein, West Hempstead, N.Y.; Mark Jaffe, Ardsley, N.Y.; Richard Jacobs, St. Louis; Stefan Kozak, St. Louis; Mark Leshin, Robstown, Texas; Howard Liang, St. Louis; Jonathan M. Mann, Waban, Mass.; Margaret Woolf Meyer, San Diego, Calif.; David S. Olander, Monmouth, Ill.; Patricia Ann Penkoske, St. Charles, Mo.; Fredrick Schwartz, Hildreth, Neb.; Mark Wener, Miami, Fla.; Keith Wichterman, New Berlin, Ill.; Jeffrey Willbrand, St. Charles, Mo.; and David L. Yarian, Auburn, Ind.

The Chapter also elected as honorary members Gerald Medoff, M.D. '62, associate professor of medicine and assistant professor of microbiology; Robert K. Royce, M.D. '42, associate professor of clinical genitourinary surgery, and Teresa J. Vietti, M.D., professor of pediatrics and associate professor of radiology.

Philpott Succeeds Hudgens As Planner of Curriculum

Gordon W. Philpott, M.D., associate professor of surgery, has been appointed assistant dean for curriculum at Washington University School of Medicine.

He succeeds Richard W. Hudgens, M.D., who has gone into private practice, but who will remain on the faculty as associate professor of clinical psychiatry.

In his new position, Dr. Philpott will counsel students in planning their clinical junior and elective senior years' schedules. He also will work with members of the faculty in keeping courses contemporary.

Dr. Philpott received his preclinical education at Yale University, and was graduated cum laude in 1961 from Washington University School of Medicine where he was elected to Alpha Omega Alpha, medical honorary society.

The 38-year-old physician received his graduate surgical training at Barnes and Allied Hospitals. He was a research associate at the National Institutes of Health from 1963 to 1965.

In 1968 Dr. Philpott joined the Washington University faculty as an instructor in surgery. He was promoted to associate professor in July, 1973.

Dr. Philpott's awards have included a James IV Association of Surgeons Traveling Fellowship in 1972 when for two months he studied medical education and cancer research in England.

A member of the Medical School's Faculty Council executive committee, Dr. Philpott also is on the Barnes and Allied Society council. He is chairman of the Department of Surgery core curriculum committee and a member of the oncology committee.

A Fellow of the American College of Surgeons, he also is a member of the Association for Academic Surgery and the American Association for Cancer Education.

Half-Million Dollar Pledge To Pediatric Neurology Paid

The Allen P. and Josephine B. Green Foundation's recent gift of \$35,000 to Washington University School of Medicine was final payment of a \$500,000 pledge to support pediatric neurology.

The Mexico, Mo., Foundation presented the check to Philip R. Dodge, M.D., professor of pediatrics and of neurology, head of the Edward Mallinckrodt Department of Pediatrics and medical director of St. Louis Children's Hospital.

The endowment was established in 1964 with an initial donation of \$100,-

000 for the study and treatment of children with disorders of the brain and spinal cord. At that time a Division of Pediatric Neurology also was begun, and located in Children's Hospital.

Dr. Dodge, in expressing his gratitude said, "The effects of the Foundation's decade of commitment to the Medical Center have been far reaching. This exemplary act has provided a solid underpinning for our pediatric neurology program."

In addition to the endowment fund, Dr. Dodge indicated that the Foundation has made substantial gifts to Children's Hospital to facilitate research, service and teaching in pediatric neurology.

Neurophysiologist Elected To Faculty Governing Body

Alan L. Pearlman, M.D., associate professor of neurology and of physiology and biophysics, has been elected preclinical representative to the Executive Committee of the Faculty Council of Washington University School of Medicine.

He received the A.B. degree from the State University of Iowa in 1958, and the M.D. degree from the Washington University School of Medicine in 1961.

The 36-year-old physician was trained at Barnes Hospital, the National Institute of Mental Health Laboratory of Neurophysiology and at Massachusetts General and Beth Israel Hospitals in Boston.

He joined the Washington University School of Medicine faculty in 1969 as assistant professor and Coates Scholar in Neurology, and was promoted in 1973.

ACF Initiates 11 Fellows

Eleven with Washington University School of Medicine affiliations have been inducted as Fellows of the American College of Surgeons. They are James G. Bucy, Ronald M. Burde, Dale F. Burton, Samuel A. Canaan, Jr., Rudolph E. Catanzaro, Shu S. Cheuk, James C. Ellsasser, Robert J. Kingsbury, Joseph A. Kopta, Gershon J. Spector and Boyd E. Terry.

Annual Giving by Graduates To Washington University School of Medicine Medical Teaching Fund July 1, 1972 to June 30, 1973

Eliot Society

Robert R. Anschuetz
Jerry L. Beguelin
Eugene M. Bricker
Milton A. Broemser
Donald W. Bussmann
William G. Hamm
Stanley F. Hampton
Robert M. Hardaway
J. Ted Jean
Glen P. Kallenbach
Stanley Kanter
Jules A. Kernen
Joseph J. Mira
Sydney S. Pearl
Johannes F. Pessel
Charles M. Polan
Harold B. Rapp
Bernard Robins
Richard Y. Sakimoto
Hyman R. Senturia
Samuel D. Soule
Donald B. Strominger
Richard A. Sutter
Pauline A. Swarm
Richard L. Swarm

Chancellor's Committee of 500

John P. Adams
Seymour Advocate
Robert A. Anschuetz
Jack Barrow
R. Robert Bates
Parker R. Beamer
Jerry L. Beguelin
Leonard Berg
Grace E. Bergner
C. Read Boles
Bryce H. Bondurant
Donald S. Bottom
Sidney S. Boyers
Eugene M. Bricker
Clifton H. Briggs
Milton A. Broemser
Seymour Brown
James H. Bryan
Lyle W. Burroughs
Donald W. Bussmann
Edward W. Cannady, Jr.
Paul B. Champlin
Patrick M. Cockett, Jr.
William J. Crowley, Jr.

Clarmont P. Doane
Robert L. Dorrrough
Robert C. Drews
Robert H. Duemler
Mark D. Eagleton, Jr.
Orwyn H. Ellis
Stephen S. Ellis
Edward T. Emura
Ronald G. Evens
Robert E. Fechner
Henry T. Friedman
Robert H. Friedman
Roger L. Fuller
Bernard T. Garfinkel
Seymour Gassner
Frank Glenn
Anne T. Goetsch
William B. Goldstein
Samuel B. Guze
William G. Hamm
Stanley F. Hampton
Robert M. Hardaway
John R. Haslem
John A. Headrick
Louis H. Hempelmann, Jr.
Albert E. Hensel, Jr.
John C. Herweg
Helmuth E. Hoff
Raymond F. Holden, Jr.
John L. Horner
Donald H. Ikeda
Constantine S. Innes
Charles J. Jannings III
J. Ted Jean
Freeman L. Johnston
Bertram W. Justus
Glen P. Kallenbach
Stanley Kanter
Jules A. Kernen
Wendell C. Kirkpatrick
John H. Knowles
Louis Kovitz
Abraham D. Krems
Paul Kunkel
Obert M. Lay
I. Wallace Leibner
Alan W. Livingston
Virgil Loeb, Jr.
Carl A. Lyss
Guy N. Magness
C. Alan McAfee
Bert H. McBride
Cornelius S. Meeker
William F. Melick
Robert S. Mendelsohn
Charles Miller, Jr.
Joseph J. Mira
Roland F. Mueller
Jack Mullen
James F. Nickel
James G. Owen
Thomas L. Ozment
Sydney S. Pearl
Johannes F. Pessel

Walter R. Peterson
Kenneth E. Pletcher
Charles M. Polan
John A. Putnam
Harold B. Rapp
James A. Read
Bernard Robins
Ernest S. Rogers
Jean F. Rogier
Henry A. Romberg
Philip Rosenblatt
Allan M. Rossen
Robert K. Royce
Richard Y. Sakimoto
Robert B. Salmon
Robert G. Scheibe
Ben H. Senturia
Hyman R. Senturia
James C. Sisk
Gerald L. Smith
Samuel D. Soule
Richard H. Spitz
Thomas N. Stern
Robert B. Stewart
James M. Stokes
Donald B. Strominger
Richard A. Sutter
Pauline A. Swarm
Richard L. Swarm
Donald L. Sweazy
Jessie L. Ternberg
William L. Topp
Stanley M. Wald
Willard B. Walker
John M. Wallace
Arnold D. Welch
George S. Wilson
John C. Wilson
George W. Winn
Theodore K. Yim

Medical School Century Club

James T. Adams
John P. Adams
William B. Adams
Seymour Advocate
Helen M. Aff-Drum
Robert C. Ahlvin
John T. Akin, Jr.
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Class Year	Number in Class	Number of Donors	Percent of Donors	Amount of Contributions	1942	80	23	28.7	2,810.00
					1943 March	86	37	43.0	3,518.71
					1943 December	98	40	40.8	4,032.18
					1944	83	27	32.5	4,005.00
1907	3	1	33.3	\$ 30.00	1945	88	30	34.0	6,921.25
1910	4	1	25.0	2,000.00	1946	86	28	32.5	2,741.69
1914	2	1	50.0	12.50	1947	88	28	31.8	3,743.90
1915	3	2	66.7	275.00	1948	84	42	50.0	5,988.00
1917	10	2	20.0	300.00	1949	91	24	26.3	1,665.00
1918	9	1	11.1	1,000.00	1950	78	30	38.4	5,378.00
1919	21	3	14.3	400.00	1951	93	39	41.9	4,737.50
1920	19	10	52.6	2,355.00	1952	95	30	31.6	3,345.00
1921	14	3	21.4	160.00	1953	95	32	33.6	4,653.33
1922	19	1	5.3	25.00	1954	94	30	31.9	5,302.50
1923	24	9	37.5	660.00	1955	94	37	39.4	4,017.50
1924	30	3	10.0	225.00	1956	98	35	35.7	3,194.69
1925	35	15	42.8	1,875.00	1957	92	26	28.2	2,072.50
1926	37	8	21.6	1,440.00	1958	86	31	36.0	2,272.50
1927	50	14	28.0	1,870.00	1959	86	32	37.2	1,192.50
1928	44	11	25.0	3,045.00	1960	85	31	36.5	3,332.50
1929	51	9	17.6	1,275.00	1961	84	37	44.0	3,101.00
1930	51	11	21.6	530.00	1962	85	31	36.5	3,642.50
1931	48	9	18.8	1,248.35	1963	75	19	25.3	929.00
1932	62	24	38.7	2,255.00	1964	80	22	27.5	1,575.83
1933	75	27	36.0	4,194.50	1965	83	27	32.5	824.00
1934	64	24	37.5	42,105.20	1966	84	16	19.0	225.00
1935	68	24	35.3	3,437.50	1967	75	10	13.3	232.50
1936	76	30	39.4	2,492.50	1968	83	14	16.9	440.00
1937	74	16	21.6	570.00	1969	81	17	21.0	548.00
1938	82	26	31.7	2,580.00	1970	86	13	15.1	157.50
1939	81	29	35.8	2,427.50	1971	92	7	7.6	300.00
1940	82	28	34.1	4,296.00	1972	93	5	5.4	75.00
1941	74	21	28.3	2,380.00	TOTAL	3,993	1,213	33.2	\$172,438.63

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