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1978 Clinic Yearbook

Duncan Salmon

Ronald Springel

Marc Surkin

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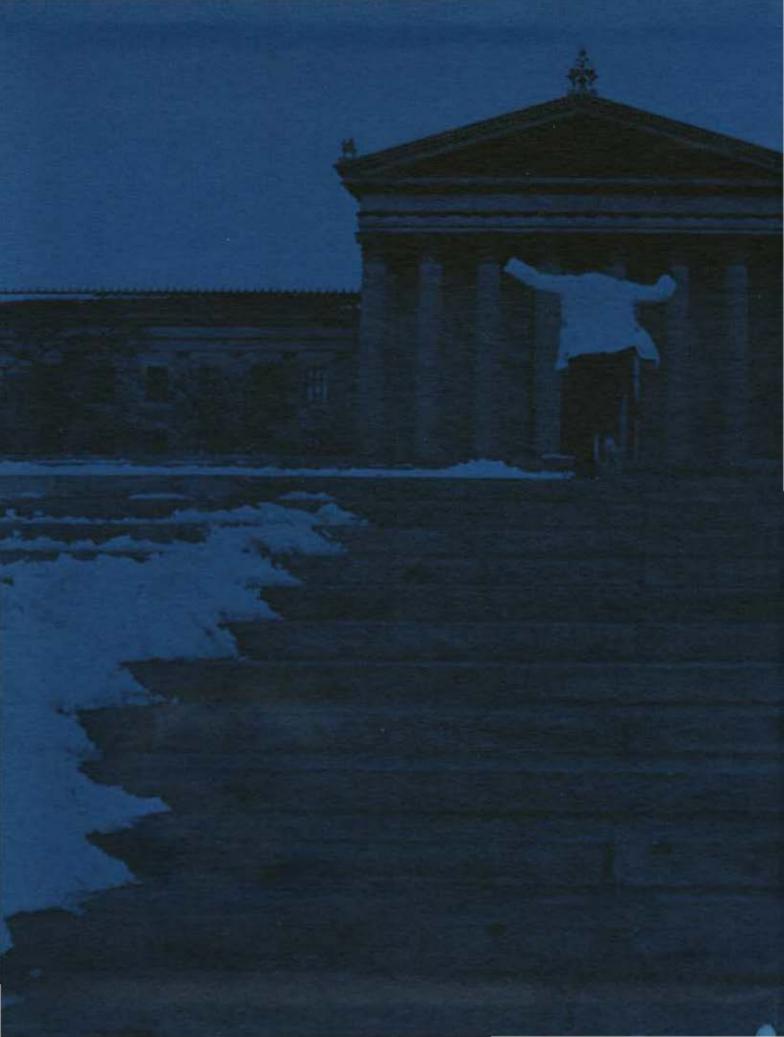
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CLINIC

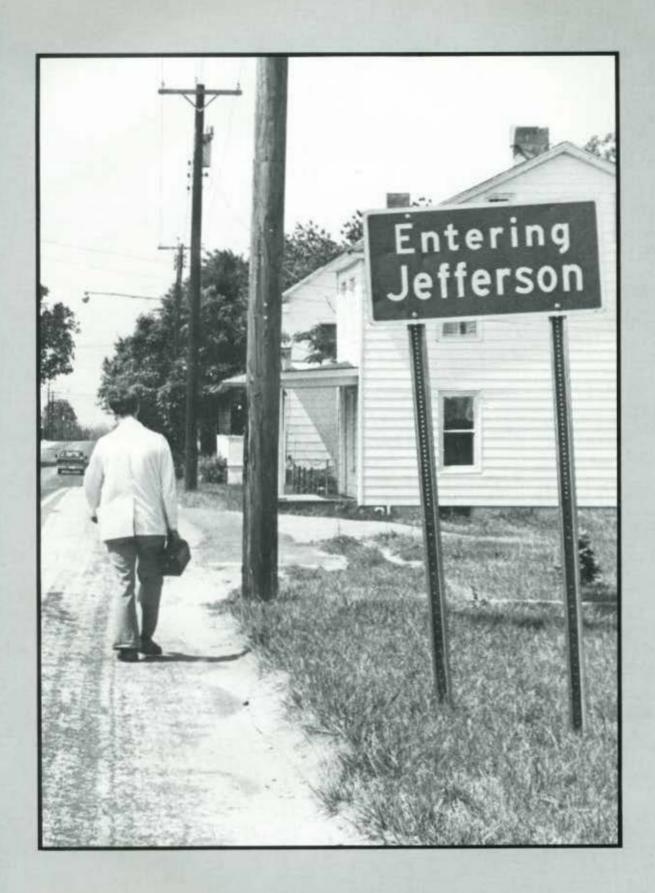


1978







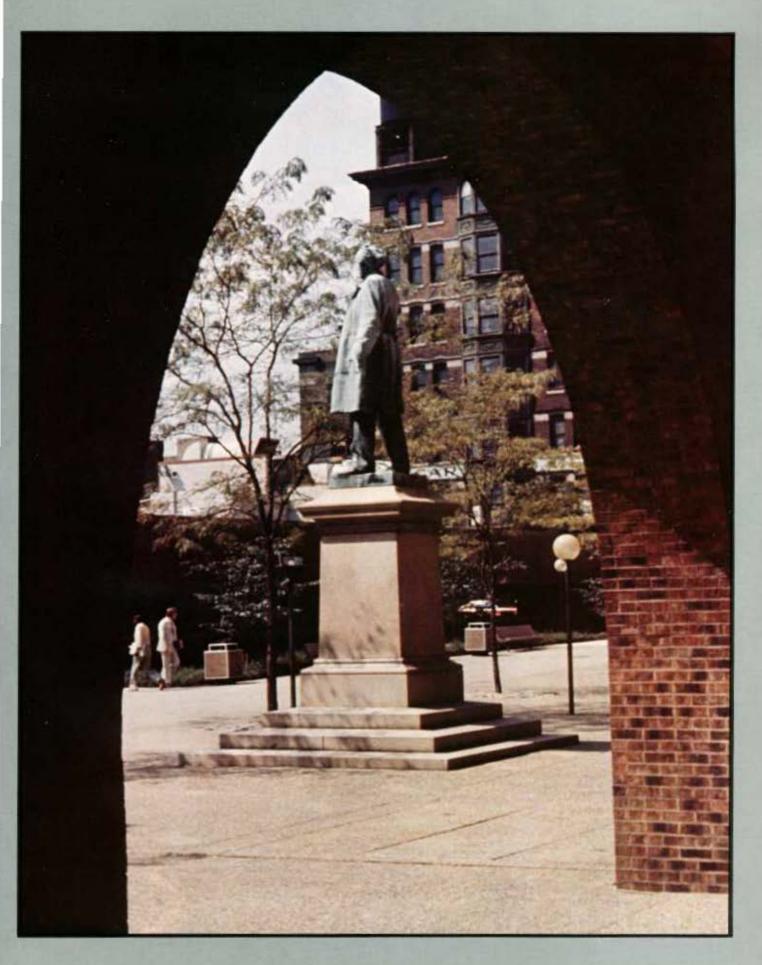


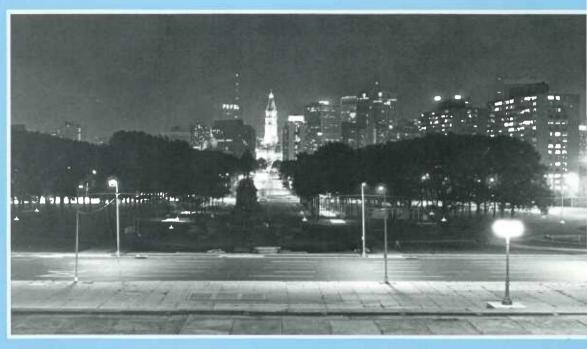
1978 CLINIC JEFFERSON MEDICAL COLLEGE



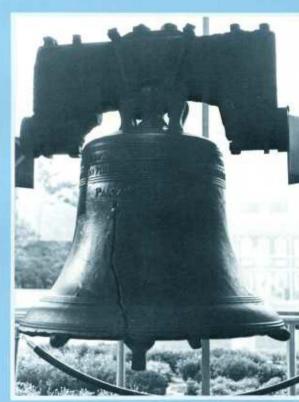
CO-EDITORS

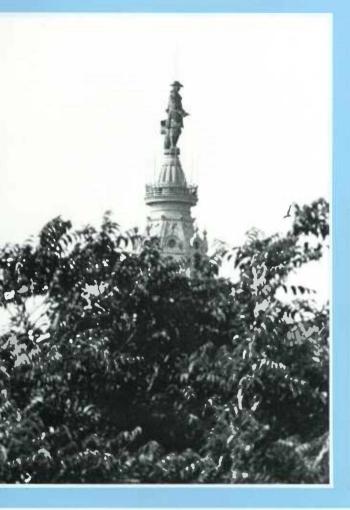
Duncan Salmon Ronald Springel Marc Surkin

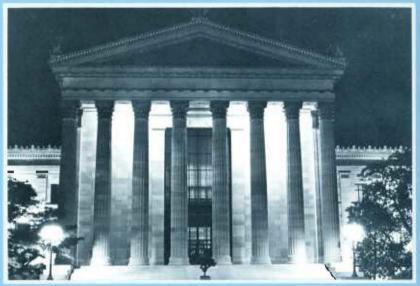




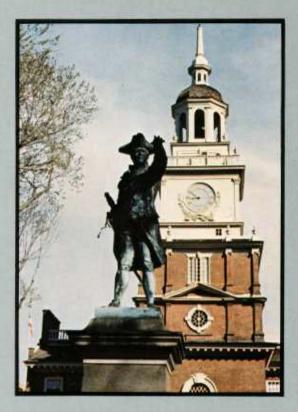
IN PHILADELPHIA, CITY OF CONTRASTS . . .









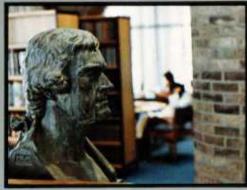




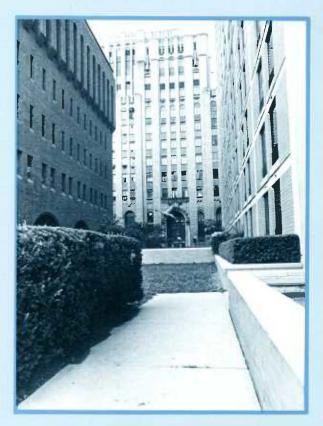


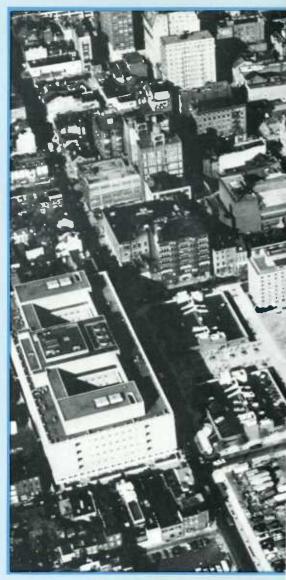




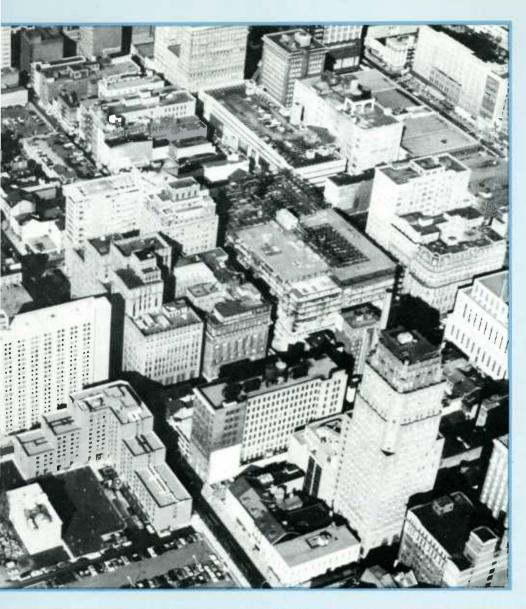


IS JEFFERSON . . .



















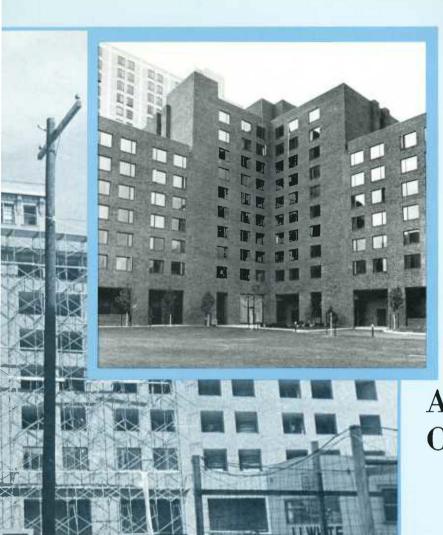












AND FOUR YEARS OF CHANGE













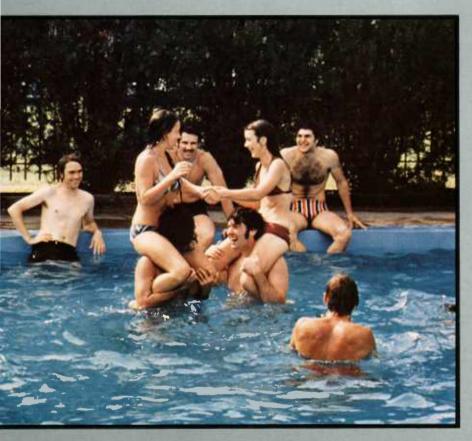








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The Senior Class Portrait

Thomas Behrendt, M.D.
Professor of Ophthalmology
Associate Professor, Department of Family
Practice



One of the highest honors which can be bestowed upon a member of the Jefferson Medical College faculty is the selection of that person by the graduating class, to pose for a portrait which is presented to the College as a gift. This year the Class of 1978 has chosen Dr. Thomas Behrendt as the worthy recipient of this honor, in recognition of his outstanding dedication to the medical education of Jefferson's students.

Dr. Behrendt has been at Jefferson since 1963 and has been deeply involved in teaching for more than ten years. He lectures freshman medical students on the recognition and treatment of ophthalmic emergencies; he meets extensively with sophomores to expose them to the normal eye and to its common diseases. In the junior year, students in Family Medicine are instructed by Dr. Behrendt in primary care ophthalmology; he also teaches several groups of seniors each year in three — and six-week ophthalmology electives; these electives are in great demand and are always filled to capacity.

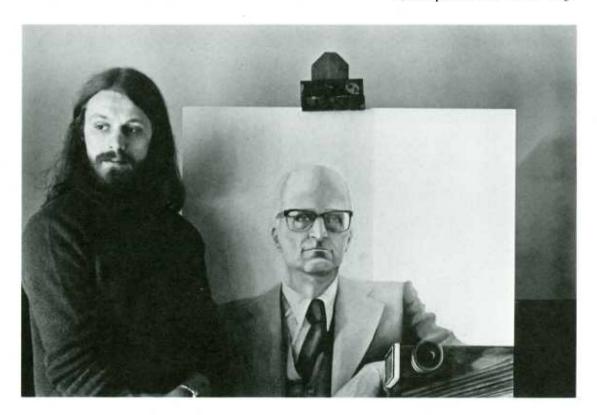
Dr. Behrendt's approach to teaching is a non-proselytizing, dynamic one which succeeds brilliantly in making a difficult, often confusing subject clear and interesting. Not content with one slide projector, he often utilizes two and three projectors at once in his efforts to teach ophthalmology for the non-ophthalmologist.

Dr. Behrendt was born in Germany but raised in Brazil, where he attended medical school. He also studied physical mathematics, a field in which he has earned the better part of a Ph.D. degree. He has authored or coauthored thirty-eight publications to date, and published a solo paper in the American Journal of Ophthalmology while still a medical student. Currently his main interests in ophthalmology are the non-surgical aspects of the retina. His outside interests include a consuming passion for chess,

a great love of classical music and a thirst for sailing. He also reads avidly and is fluent in six languages.

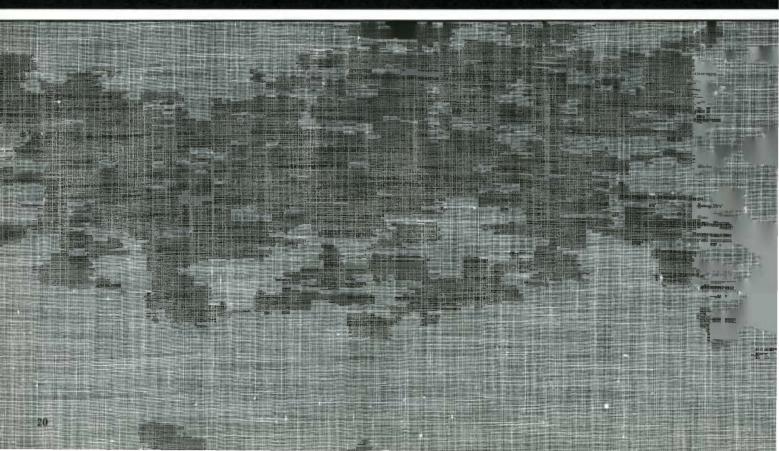
Dr. Behrendt brings to his teaching a concentrated intensity and a sincere interest in the students' education. He is an excellent lecturer and is equally at ease addressing a large auditorium or a single student. It is with great pride and appreciation that the Class of 1978 presents his portrait to the Medical College, where it will join the ranks of many other portraits of Jefferson's great teachers.

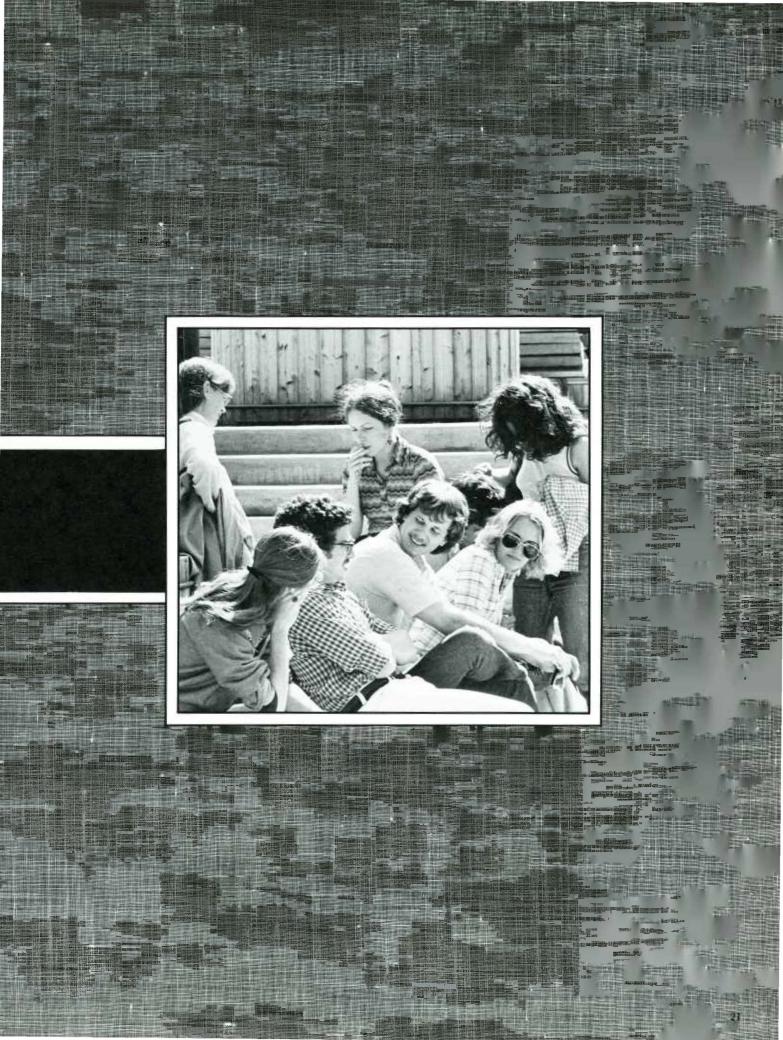
Portrait painter: Eric Van der Vlugt.

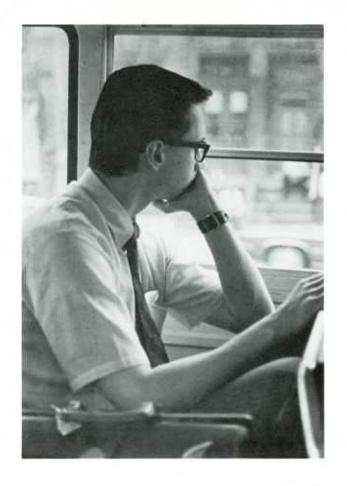


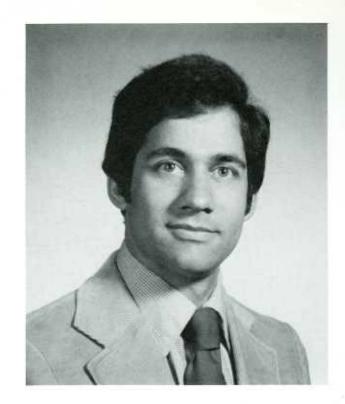


SENIORS

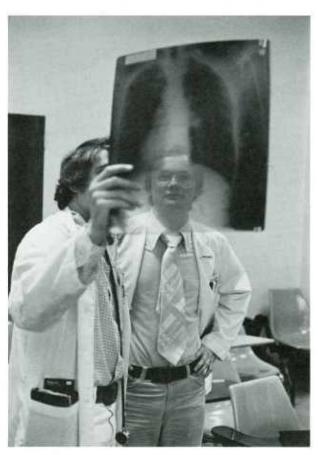




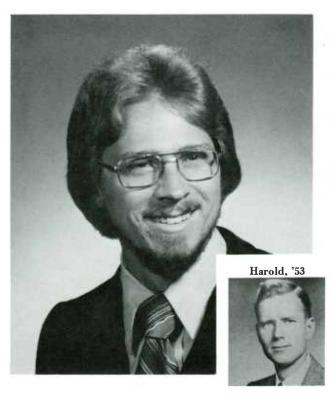




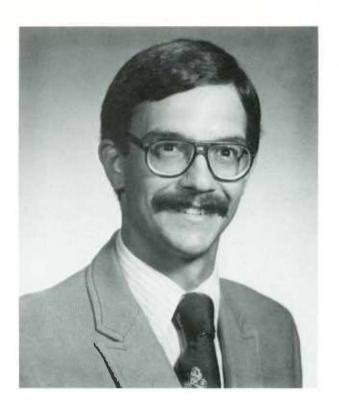
Richard P. Abramowitz, M.D. Syracuse University, B.S.



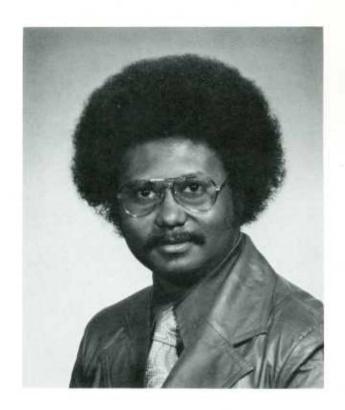
"The head is rightfully at the center of the body." Ramón Pechuga y Cabeza, M.D.



Gregg P. Allen, M.D. Oberlin College, A.B.



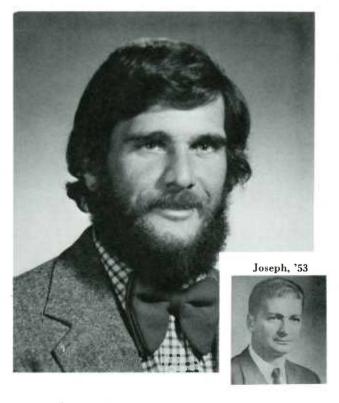
John William Anagnost, M.D.
Rutgers University, B.S.



Ronald W. Andrews, M.D. Drexel University, B.S.



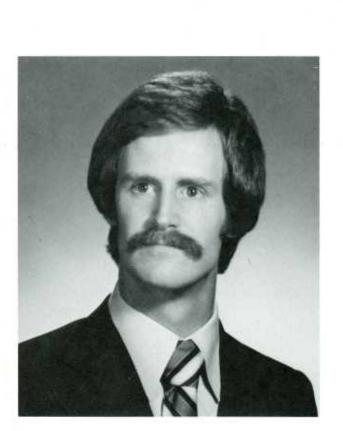
Gerald L. Andriole, M.D. Pennsylvania State University, B.S.



Francis B. Armao, M.D. University of Pennsylvania, B.A.



Andrew J. Baron Jr., M.D. University of Scranton, B.S.



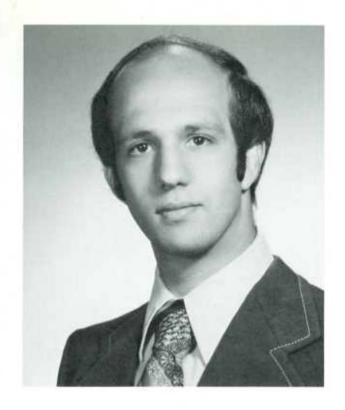
Charles B. Austin Jr., M.D. Juniata College, B.S.



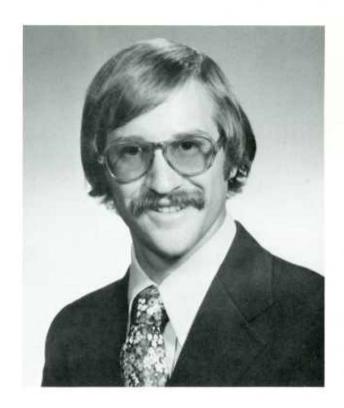
Theresa R. Benecki, M.D. University of Delaware, B.A.



The Jefferson Cryptorchid Society



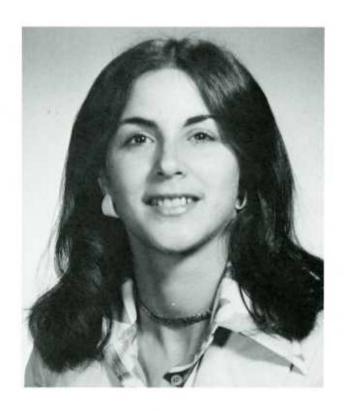
Robert L. Benz, M.D. University of Pennsylvania, B.A.



Robert B. Berger, M.D. Rutgers University, B.A.



hung up in a moment of fun

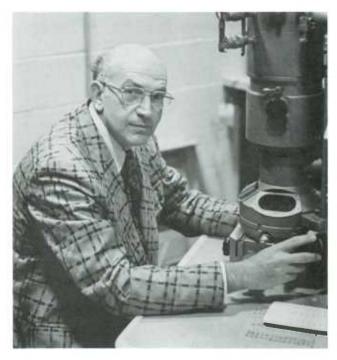


Loretta D. Bonanni, M.D. Villanova University, B.S.

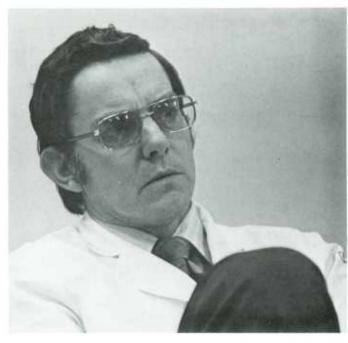
ANATOMY



What's this fork doing in here?



I've had this thing for five years, and I still can't figure out how to make it work.



You say Merklin fell asleep in lab and got dissected?



Two heads are better than one.

2 the lumbricals. are zion nt d mb tlas

The Hand Friday January 10, 1975 9-10 a.m. Page 2 of 5

attach to the extensor expunsions of (H. p.4, lower.) 8,72) are more ventral to the dorsal. join or close fingers to each other. as dorsal with respect to the

ated by the Ulnar nerve. = wormlike; are also associated with thin, wormlike muscles (the p.4, middle;

the Flexor Dinitorum Profundus in

epansions of the Extensor Digitarum,

l aspect of the proximal phalances. ingeal joint and extend the phalanges. agram H. p.4).

nd stroke with your pencil without

Approximates the thumb I't inserts through two (i) Oblique head - from metacurpals.

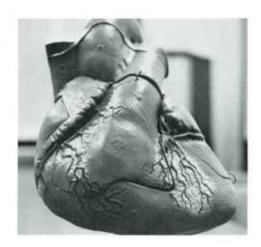
(ii) Transverse head metacarpat.

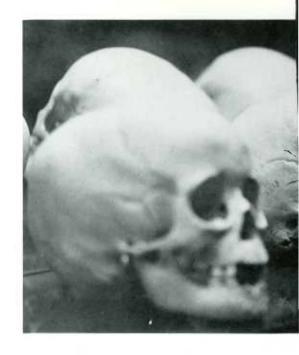
(3) This muscle is located

Atlas 65, 71.) Is innervated by the Ul Therefore, if one tests testing the integrity of (b) Opponens Pollicis.

(1) Name follows from action Originates from the rad first metacarpal and the by the square on the di r'Pollicis Erevis. extends from flexon net Is more superficial tor Pollicis Brevis.

extends from flexor ret located bones of the car and the Trapizium - to the first phalanx. These four miscles form the ball of the thumb - the thener region (Thener eminence; 4. p. 1, upper; "ollinshered figure 13-2.)





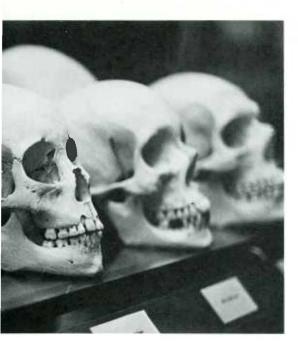


Hold the liver, hold the lettuce, messed up orders don't upset us.





Marc Eden: Before

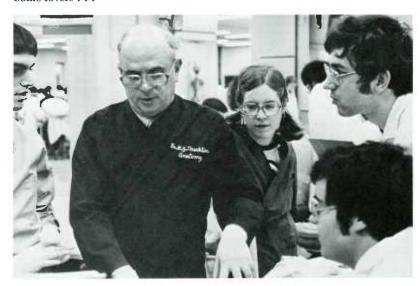




. . . and after



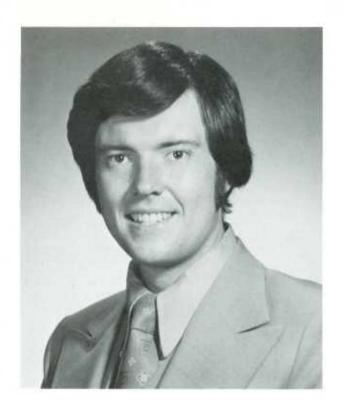
Some lovers . . .



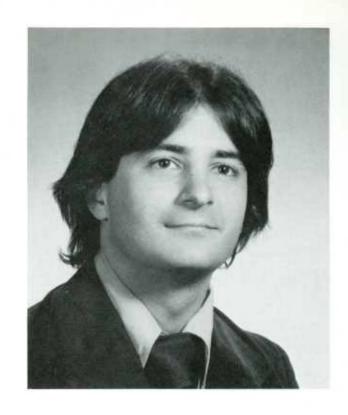
try positions . . .



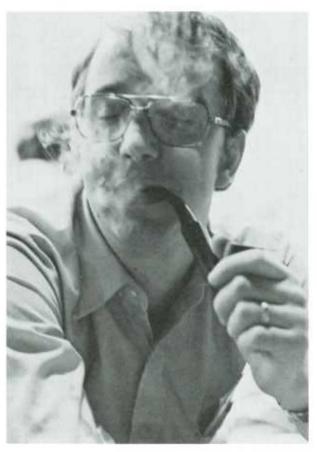
that they can't handle.



Robert L. Boran Jr., M.D. St. Joseph's College, B.S.

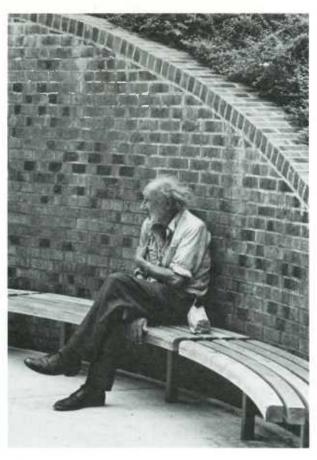


Michael W. Border, M.D. Pennsylvania State University, B.S.

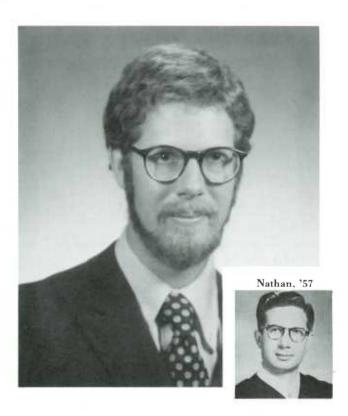


"This plesente wede, that aide ye faeble mynde . . ." Chaucer

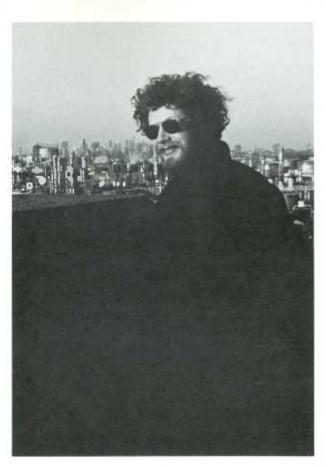




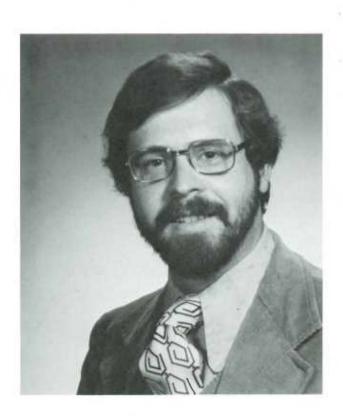
Hahnemann Visiting Professor



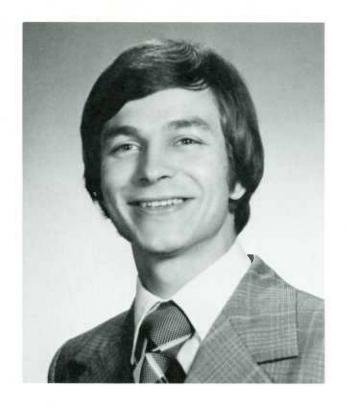
Jack Brillman, M.D. Hamilton College, B.A.



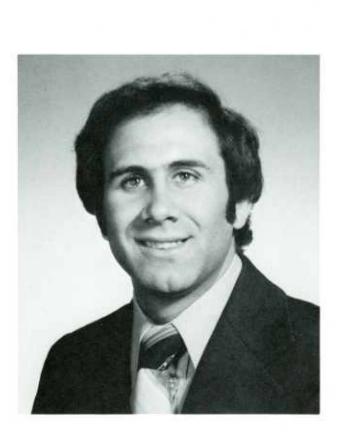
Medical College of Pennsylvania Visiting Sperm Donor



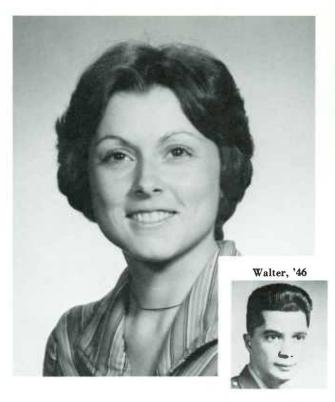
Jeffrey Barry Bronstein, M.D. Dickinson College, B.S.



Douglas L. Brozell, M.D. University of Pittsburgh, B.S.



Nicholas A. Busillo, M.D. St. Joseph's College, B.S.



Barbara Matteucci Busillo, M.D. University of Pennsylvania, B.A.



Richard S. Buza, M.D. Pennsylvania State University, B.S.

A Short History of Ourselves, the Class of 1978

YOU LUCKY STIFF

It is a pleasure to inform you that you have been accepted for membership in the Class of 1978 at the

JEFFERSON MEDICAL COLLEGE

of

THOMAS JEFFERSON UNIVERSITY

Fellow medical students . . . teachers . . . and Alumni look forward to your association with Jefferson

Philadelphia, Pennsylvania

Director of Admissions

ORIENTATION

"All the world's a stage And all the men and women merely players: They have their exits and entrances; And one man in his time plays many parts, His acts being seven ages. At first the infant, Mewling and puking in the nurse's arms. And then the whining schoolboy, with his satchel, And shining morning face, creeping like a snail Unwillingly to school . . ."

-Shakespeare, As You Like It

The curtain opens on a new day, clean slate, bright and full of promise. This is the place, 1020, bulky monolith, coarse orange brick in the early September sun. Up the steps, glass doors, don't look back. Relax, relax, look for someone as lost as you. It'll all work out just fine. Gee, odd name for an auditorium...

"Ladies and Gentlemen: Outside this room, one hundred people are just waiting for any one of you to drop dead. You are, as you all know, a highly select group . . ."

Cascade of impressions and facts of dubious importance. As the overload increases and each address blends into the next, my mind drifts back to the beginning of this adventure. Back to the time when I decided to be a doctor, a notion at once so crazy and so desperately serious. Years of careful test taking, long nights, silly labs, worrying about science grades. Wondering if the gamble would pay off, trying not to think about what would happen if it didn't. Why exactly do people put themselves through this trial?

I remember when the acceptance came. Winter, shivering in front of the mailbox; good God, it's a fat letter from Jefferson! Shaking, tear the damn envelop and lo — I'm in, I got into medical school, accepted at Jefferson! Jubilation and relief. Flashbacks from my interview — balding and pompous professor with my life in his hands. Probing for weak spots. Then the tour. Didn't seem to be much to the place, nothing but medicine. The swimming pool and gym were deeply impressive. That question and answer period. Seemed like most of the others wore triple knit slacks and white socks. Suspicious bulges of slide rules in their pockets. Strange questions. "Ahh, What is the student to cadaver ratio here?" How can I compete against all those nerds!

But look here, says I have ten days to tell them yea or nay. Hold out for someplace better? No way. Too risky. I'm lucky to get in anywhere. So I send my reply, registered mail. Everyone happy for me. Isn't it a wonderful calling to battle disease and tend to the suffering? Damn right. It's medical school for me, medical school at Jefferson, I'm going to be a Doctor!

Now as I sit patiently in Solis-Cohen, that time seems years away. "Medicine should not be an excuse from living." (Why would it be, is this already the first intimation of the fabled obsessive-compulsive personality?) I listen intently even through the dullest speeches.

Classmates are more interesting. My class at college sure looked a lot different. Short hair is rampant, neat-



ness suddenly back in vogue. Wedding rings. Married classmates! What bizarre stuff is this? How about these Penn State kids, moving in giggling clumps that stand out like the proverbial sore thumb. Tentative friendships rapidly rise and fall, instinct eventually leads to the few you are comfortable with and who seem likely to be supportive.

We're told to buy all the textbooks. Financially ruinous advice. Attend all the lectures, don't rely on the note service. Note service? The first distant hint here of the cavalry riding to the rescue of the confused and hopeless settlers. All lectures taped, typed, corrected, and distributed? Too good to be true! But there was no catch and prospects for the next two years brightened considerably.

A senior student (how distant and godlike that position) advises: "You are about to step onto a rapidly accelerating elevator, which goes faster and faster each year. It will blow your mind, and you will wonder from time to time if you can make it to the top without falling off. But let me reassure you. Jefferson doesn't accept people with the intention of flunking them out. All you have to do is hang on tight, the elevator will do the rest. And believe me, when you get there, it really IS worth it." Good grief, I hope so!

Settling down to life in Philadelphia. Light years away from college. No real campus hang-outs, not much community. Fending for myself. Learning how to stack unwashed dishes. Studying the mating habits of the

cockroach. Lord, housekeeping is a bothersome job! So this is what the big bad world is like. Hope I can settle down enough for the first hurdle. Good thing I had biochem in college. But wouldn't it be incredibly awful to flunk the first test!

CELL AND TISSUE BIOLOGY

"The rod produces an effect which terminates itself. A child is afraid of being whipped, and gets his task, and there's an end on it."

—Boswell's Life of Johnson

I start medical school warily, a bit frightened. I think of my cousin's friend's brother-in-law who I heard had a nervous breakdown his first year. Could it really be as bad as all that. This protein chemistry is no sweat, nothing too novel at all. Sit in lecture, listen, look around, drink coffee, scratch, sleep.

"Have any immersion oil?" Damned if I can see that brush border. Might as well give it up. Can't believe how heavy this microscope can be when carried four floors.

Dr. Schepartz, disguised as a well known Secretary of State, discusses amino acids. The topic wears thin. Dr. Allen, that one man blackboard note service, gives us the inside dope on lipids. Dr. Callahan presents carbohydrates and presides over the birth of the Locust Medical Society. Dr. Kalf starts his mucleic acid lec-

tures and there seem to be hundreds of them. What's this got to do with medicine? Is this all really necessary?

The first test! Stark terror. The night before and ten lectures not even looked at yet. I resort to prayer. Humble, repentant prayer. Lots of it. It seems impossible that I will pass. I get an 82. Don't want any repeats of that horror show. I'm much better prepared for the second test. There's hardly a fact I don't know. Bound for glory. But you guessed it, got an 82.

Completely baffled by those ER visits for ATP. Hope I'm not too much in the way. At least I get to wear that white coat. Pretty spiffy, eh? The eternal triangle becomes significant as the only memory of M&S. Might have had something to do with preventive medicine. Dr. Chepenik gives us a break with his patented salient points. Biostats. The Duke of Chance informs a dubious class that he's like a laxative; there will be times when we will need him. National Boards part II will turn out to be a prominent example.

After twelve weeks the first final looms. Been through it too many times in college and it's the same drudge here. Day and night blend into one. Sleep an irregular luxury. Never enough time. Don't even get to the last set of notes. (Turns out to be the first of at least five times I decide I can't be bothered with that cursed coagulation cascade.) Christ, this final weighs a ton. Every question with either several right answers or no

right answers at all. Get an 82. My head is reeling. A weekend to recuperate.

And now for something completely the same . . .

STRUCTURE AND FUNCTION

"Depend upon it, there comes a time when for every addition of knowledge you forget something that you knew before. It is of the highest importance, therefore, not to have useless facts elbowing out the useful ones."

-Sherlock Holmes

Easy does it, just slide into the rhythm of school. Monthly tests, monthly cycle. A few weeks of relaxation, one week of diligence, one week of madness. But seventeen weeks of this structure and function? Good God, it will be deep spring before it all ends. The reality of being an M.D. seems totally remote; an alien concept. Just plugging away at those old lecture notes.

Met the cadaver. He's a curious chocolate brown color and not so creepy to look at if you keep the face covered. We're warned that several students would faint, but no one does. The stench of the formaldehyde fills the air and is soon to pervade the whole fifth floor, the elevator, my clothes, my hair. Little squirt bottles of fluid to keep the corpses damp.

9-10	AA METAB, (3)	AA METAB. (5)	T 10 ""	AA HETAB, (8)	a a
3-10	Dr. Schepartz	Dr. Schepartz		Dr. Baldridge	
0-11	DIABETES MELLITUS. CORREL. LECT.	BIOSTATISTICS	LIPID METAB. CONFERENCE	INBORN ERRORS IN AA METABOLISM, CORREL,	MEPATIC FAILURE, COUNEL, LECT,
	∂r. Rupp		Pr. Allen	Dr. Carpenter	Or, Benson
1-12		AA METAB. (6)	NEUWOCHEMISTRY		AA CHEM, (3)
	er B	Dr. Schepartz	Dr. Koszelka		Dr. Kalf
-2	APPROACH TO THE PATHENT	NERVOUS TISSUE (1) Dr. Moskowitz	UNIVE SITY	NERVOUS TISSUE (2) Dr. Moskowitz	MEDITE INE AND SOCIETY
2-3	MALAUR	Dr. Moskowicz	MOUN.	Dr. Moskowitz	AND
	111 32		STUDY TIME		1
j-t _i		NERVOUS TISSUE		Lab A RERVOUS TISSUE	5
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j-5					
	A PART OF THE PART				Y

First lab: cut the chest open with a circular saw and start ripping out lungs. What a way to treat what used to be a person! But soon it becomes all in a day's work. Bone boxes and skulls, slightly used. In fact, I could swear my skull had a sloped forehead and brow ridges. Also poor Yorick . . .

Coach Lefer and the physio squad quickly punt away our goodwill with that textbook list. Ten tons of books, another financial disaster.

Lectures start. Bore snore. Nerve physiology and thoracic anatomy. Doctor Koszalka explains muscles, muscles. Embryology becomes a reality with Dr. Johnson. Histology lab is about as welcome as the plague. Why do these cells all look alike to me? Not even Dr. Jensh can save me from ennui.

Christmas vacation and back home to face an overdose of "my grandson the M.D." syndrome. Dinner table consults, flattering and frustrating. Answering medical questions as best I can, based on what I've read in Reader's Digest.

Back to school. Damn those clods with the Caribbean tans. Winter comes. No one notices. How could all those mucles fit in that tiny forearm. Cadaver looks a bit ragged. Seventeen cardiovascular lectures. It seems like they're all on shock.

I discover that skipping class is as easy as staying in bed, more addictive than morphine, and more fun than both together. Blessed be the note service. I might be able to lead a reasonable life if it weren't for those damned exams every month. What torture trying to cram. If only I had one more day!

The lectures drag on. Spath: the final frontier. Dubious pulmonary physiology. Dr. Hausberger and the pelvis, an anatomic conundrum. Complete dissociation of anatomy from physiology. Men grow old, children mature, spring comes. Nixon still won't resign. S and F grinds on.

ATP Monday afternoons. Physical diagnosis. Every sign seems incredibly subtle. Every heart sounds the same no matter what they label it. Will these things ever become more comprehensible? I'll just have to cross that bridge when I get to it. M and S Friday afternoons, but after all, one does have one's priorities.

Anatomy lab, useful for socializing. "Haven't found that gluteal nerve yet? We're been digging around in this fat for an hour and a half."

"Isn't this it?"

"That's just some random tendon."

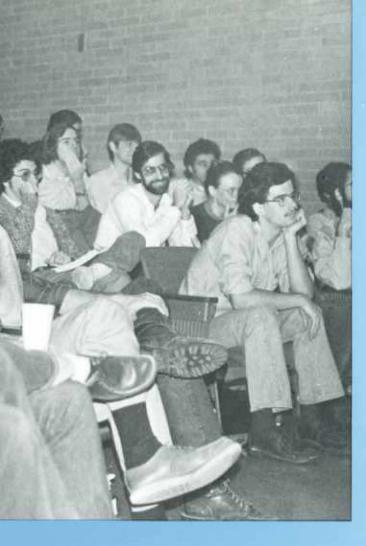
"Wish they were painted yellow like in Grant's Atlas."

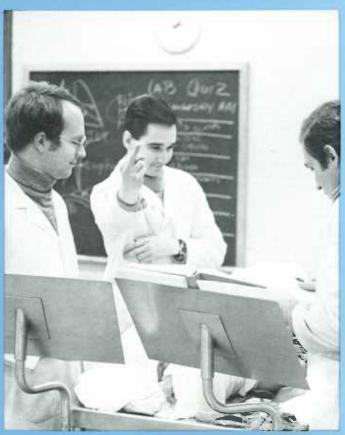
Prescribed notes for head and neck. Six thousand foramina and autonomic ganglia in the most bizarre places. The cadaver by now is 140 pounds of ground meat with bone splinters.





". . . connected to the shoulder bone."





April. The final is imminent. Two full binders of notes. Every dish I own is piled in the sink. The old apartment looks like the aftermath of some disastrous zoologic experiment involving the gorillas rumored to exist on the sixth floor. The anatomy practical. Which way is up? Candy on the windowsill. At some spots, an x-ray to read. X-ray? What's that?

The whole mess is finished. Bodies taken away for mass burial in some forgotten place. Written exams not too bad, surprisingly reasonable in fact. Got their multiple choice system decoded by now. The lab coat is hopeless and gets burned. Grant's Atlas disgustingly greasy.

Confidence mounting. Sure I can survive things here. Still a nagging feeling — am I any closer to really being a doctor? How is all this stuff applied? Emerging from finals, pale-faced and bleary eyed, I notice with a start that there are buds on the trees. Birds are singing. Spring, unaware and uncaring of the grisly business indoors, has arrived in style: returning me to the living, seducing me away from books and dark amphitheatres. Relax, time for vacation.

NEUROSCIENCES

"These are begot in the ventricle of memory, nourished in the womb of pia mater, and delivered upon the mellowing of occasion."
—Shakespeare, Love's Labour Lost

At last, a block broken down to a manageable size. Four weeks, how intimidating could it be? Sit back, take a breather. Especially in view of the oninous warnings about Path. Of course, giving quizzes every Monday is dirty pool, but they're probably only show. After all, I flunked every one and still managed an 82.

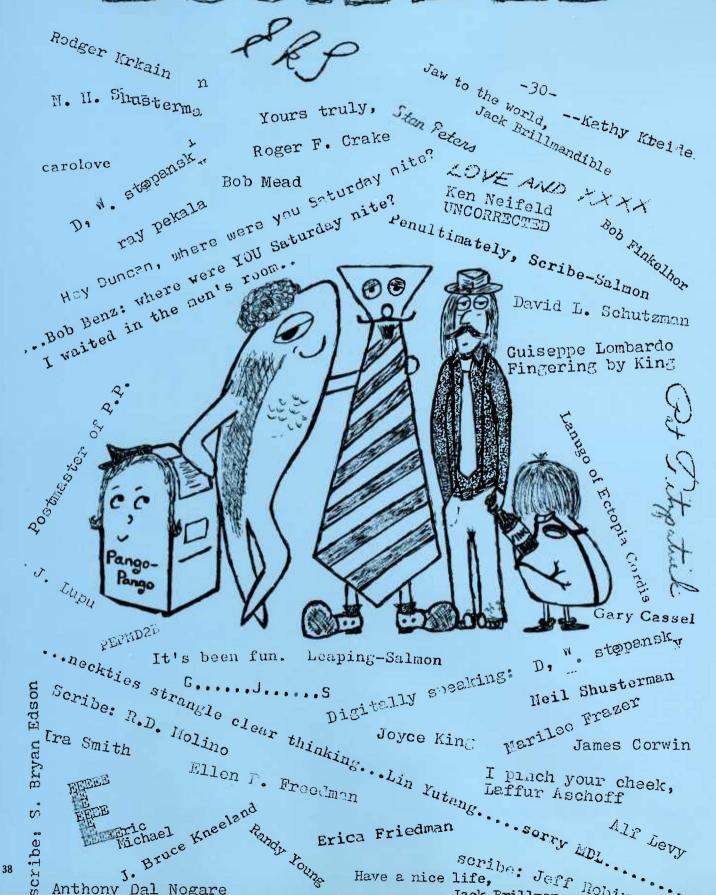
Dr. Berry holds the limelight. Tracking the tracts, fine way to spend a spring day. They cross, ascend, decussate and baffle. The inferior olive near the superior pimento. I prefer the inferodorsodorsopeduncularovaltine nucleus myself. Like trying to memorize the positions of the pieces of fruit in a holiday jello mold.

Pickled brains in finger puckering brine. Feel like old rubber. This is the seat of the intellect? My untutored eye sees all the internal structure of a baked potato. I'll be hanged if I can find any substantia that's nigra.

Neurophysiology thrown in there as well. Dr. Azerinsky: Mr. REM they call him. My thoughts are pretty jumbled. I think it has something to do with action potentials. M&S meanders through legal medicine. It is even occasionally interesting, though as a freshman my chances for a lawsuit seem slim. They aren't on to me yet.

All in all, a reasonable and decent enough course with plenty of time to steel oneself for the exam and the pin-cushioned brain practical. Melanocytes get stimulated. Apartments emerge cleaner. Couples are restored

SCRIBES



to conjugal bliss.

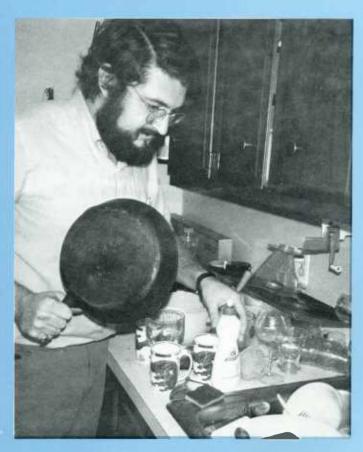
In one sense, a turning point here: the end of the non-clinical sciences. Sadly enough, I felt no closer to being an M.D. than I had a year ago; only a bit worse for the wear. The thought of pathology, widely rumored to be hopelessly demanding and generally impossible throws terror into my innocent heart. This was offset, at least partially, by the promise of finally getting on with it and learning some real diseases. After the long dulling year it's hard to feel enthusiastic; instead there's a vague nervousness and a hint of intellectual vertigo, as in the calm before the storm.

PATHOLOGY

"Oh, I get it, we're on a trip to Mars. Now all I have to do is learn Martian."

-Tom Swift

Spring bursts into full summer. Normal students from Bangor to Baja are discarding books and pencils. Four more weeks for our numbed bones. First day, my spirits sink under the weight of a bloated sheaf of handouts. Inflammation, amyloid, pigments. A whole handout on pigments? Hot summer nights trudging through them. Hot summer days looking at Kodachromes and translating Spinglish. Well, even if these are the real diseases, it's still no great thrill. A seed of doubt germinates: Is medicine really for me? Thank God for



Little bugger's in there somewhere



the note service. The first path exam and welcome to the world of questions drawn from thin air. The final insult: a summer homework handout. Inborn errors of metabolism. Mine gets salty, sandy, and weatherbeaten; everything except read.

That's it then. A year of medical school and no nervous breakdown. As hard as I'd like people to believe? Not really, just put in the plodding time. I think any fool could do it; look at me.

I started the year perceiving the body as just a collection of organs sloshing around. This conception had sharpened a bit, but otherwise I felt like I'd travelled very little of the path leading to the golden gates labeled "M.D." And my hard-won knowledge was rapidly deserting me. In the frantic quest for detail, the broad outlines had been overlooked.

Back to school. Back to a mischieviously grinning Gonz. Moving up in the world by moving down to Solis-Cohen. Not as steeply banked, but same painted cinder block walls, same blue seats, same instinctive drowsiness on entering. A change of venue but no reprieve. Holy cow, look at that mile high tower of handouts. They can't be serious! Last year's path was just spring training, this is the major leagues. Handouts pretty fall colors: Liver a lovely icteric, Urinary Tract a tasteful straw color, Bone a bleached white. No time for lectures now. Group C has broad grassroots support and an enthusiastic following.

A barrage of the obscure. The Berlitz School of Path. Diseases I've never heard of invariably associated with fourteen symptoms I've never heard of. Synapses groan under the strain. Memory grapples and falters. No system is ignored, no cell left unturned. I easily digest sugar-coated spleens, strawberry nevi, nutmeg livers,

and peau d'orange. Many of these are uncommon but not rare, others are merely conundrums (v.s.).

Biweekly photo shows, featuring John Hageman in a trainman suit, flit by so rapidly I'm six sets behind before you can say, "What's the matter, Ed?"

M&S and ATP are on Wednesdays now. Wednesday off, just like a real doctor. M&S is about psych, even though the final is about PSRO, whatever that is. ATP is rumored to be dermatology and neuropathology, but Jefferson's ingenious "Lump all the tests at once" system ensures that I'd never get more definite about these lesions than "rash". Dr. Berry deserves mention for his prognosticatory review sessions.

Tests are, of course, sheer desperation, but great God Curve is benevolent. Anyway, here I am, all set to go. If I know all this path, what else could there be? Well, that silly notion is crushed by the final. Filling in the little marks answer on the answer sheet alone takes an hour. Glad to hand in that monster, high point of my life almost. After this course I'm ready to set down and compare notes with Job. Oh no, not another long winter block . . .

MICROBIOLOGY AND PHARMACOLOGY

"Throw physic to the dogs; I'll none of it."
—Shakespeare, Macbeth

Seems like Jefferson's winning a long war of attrition. Feeling bugged, drugged, and drained. This is a block that's hard on all of us, especially tough for your narrator. What can one say about a block whose high points are a jar of anchovy paste and a maxim relating some worm to wristwatches. Something to pass the time before we can get on with ICM.

By now I'm so accommodated to transiently memorizing facts of dubious value and so used to slipping through these exams that fourteen weeks make little impression. Just doing what I have to do to get through.

Immunology the third time through finally starts to make some sense but it's downhill from there. Big batches of bugs and it's almost impossible to remember which ones are Gram whatever, much less retain which bug goes with which disease. Does anyone ever catch Yersinia enterocolitica anyway? Oh, for medicine finals, I see. Viruses are yet worse (Eastern equine encephalitis?) but even they're welcome buddies compared to parasites. None have names shorter than nineteen letters, few are ever seen north of Tierra del Fuego. Brightly colored fingers are my badge of honor.

"How's your unknown doing?"

"I think it's either Cryptococcus or something else. I'm waiting for the stool culture. How's your twenty-two year old sailor?"

Med School Blues

Woke up this mornin',
Looked down at my shoes.
Yeah, they were still on
Had them med school blues.

My mind was a cobweb.
I needed a bath.
Something was looming —
Hell, my final in path.

Seems I've done it again.

Need just one more day.

For too many years

It's been this just way.

Just looked in the mirror,
Beard rough as sand,
Eyes are all bloodshot,
'Twas the last late-night stand.

Oh, how many tunes—
Has it been this way:
The last ones in school
On some late summer day?

Some say we'll be rich
If we stick to the rules.
But, it's my humble opinion
We'll be asocial fools.

A quick cold shower, My head starts to clear. A damn good thing 'cause The hour grows near.

The system will mold us.

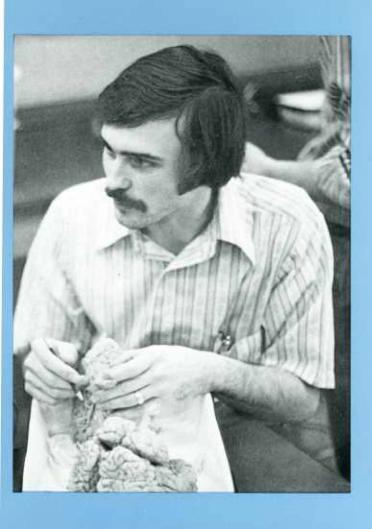
Make us proud of our feat
But those who most suffer
Are the people we'll treat.

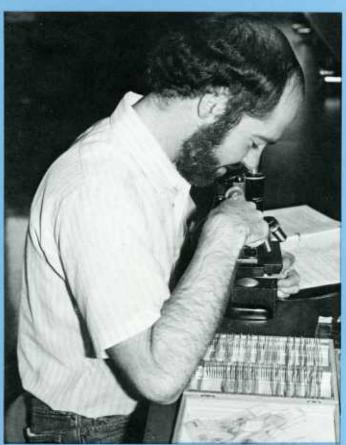
But, with all of this, I'm as bad as the rest. S'pose I've wasted time bitching. Now I run to the test.

Let's hear it for Jeff.
I'm paying my dues—
Got my coffee and pencils
And those med school blues.

M.F.S.







"Well, whatever he's got it's not sensitive to vancomycin. Just got transferred to the ICU. Comatose. Septic shock."

While it appears I get mostly sneers from the micro people, the pharmacologists seem to try a little harder. Dr. Vogel cooing in Teutonic, Dr. Triolo putting out contracts of toxins. A completely dull subject seeming only somewhat dull. There are impossibly long lists of drugs. Fortunately, only a few are in any general use. Unfortunately, I don't know which few. There are twenty-three possible side effects and each drug has a random eleven of them. A recreation of the scene is as easy as picking up a handy phone book and memorizing a page.

Some of my classmates take an independent study pharmy. "Blip, blip, does not compute. Do not pass Go." They skip class and study from special notes. The rest of us skip class and study from note service notes.

At least I don't mind living in Philadelphia too much. Everything is accessible to my own two feet. Many of my classmates live nearby; married suburbanites are a distinct subspecies, though their ranks are swelling by leaps and bounds. Lots of local color. Tenth street is straight out of a Dicken's novel. Never thought I'd be able to see this street life without a trip to Bombay.

Anyway, the neuronal circuits are so bombarded with noise that the important features are getting lost in the din. The hell with it. I'll learn what I need to know next year.

INTRODUCTION TO CLINICAL MEDICINE

"Toto, I have a feeling we're not in Kansas anymore."
—Dorothy, arriving in Oz

Dark winter morning, blustery and chill. Bad taste still in my mouth from the exams. Probably did fine, but the usual struggle trying to catch up at the end there. Nice to have a vacation though. Sure don't feel like starting a new block. Too much pressure, too much work, for too long. Glad the midterm isn't for seven weeks, gives me a chance to relax. But this should be a good block, clinical medicine, patients, learning real live doctor business. Hot dog!

Hmm, hematology lab. "What do you think she's got? Must be something really bizarre, this lymphocyte looks like a pizza. Or maybe it's a plasma cell. Where's that answer sheet?"

Bruise on my arm size of a walnut. Venipuncture last week. Dingbat over there had to poke six times, which hurt like hell, and then he forgot to take off the tourniquet before pulling out the needle. Heard some one in the other section fainted. Poor patients, if they only knew!

First hematology, then off an a whirlwind guided tour of this mortal flesh. Endocrine, renal, pulmonary. Glad they're going over all this stuff, it seems like I was in danger of starting next year without knowing anything useful, a babe naked in the woods. Hard to reorient myself to trying not to blithely forget it all immediately after the final. Systems come and go. Haven't been to lecture in a couple weeks now. Damn, have to start getting it together for that midterm.

Good thing we're starting off these history and physicals on kids. More margin for acting dumb. Only one thing, you know how Olshin is always joking about what kids do when you check their hips? Well, last week. . .

But working up a real, live, grown-up person is a completely different experience. I mean, at least a child you have the obvious advantages of size and authority, if not intelligence. But how do I deal with someone older than my parents? Can't imagine doing a rectal on uncle Bill or a breast exam on Mrs. Olsen. Do I have a right to be doing this? Feel like I'm dressed up for Halloween. Don't see myself at all like a doctor, that's for sure.

Through those glass doors. So many things to remember, I'm sure I'll forget to ask about melena. Whitewashed corriders, trying to find the room, last minute perusal of the H&P book. Sweat runs down my back. Hope my patient's not too gorked out, wouldn't that be terrible. There are forty pounds of paraphernalia in my pockets and eighteen pounds of them fall on the patient during the exam. That H&P takes my partner and me two hours to do and three hours to write up. Hard to believe I'm ever going to be doing this routinely. This seems so much more important than that midterm.

It's cancelled! The midterm is voted down 240 to 2. A triumph for the people! It turns out we have it anyway, the day before the final, but class of 1978, I'm proud to be one of you. Besides, thirteen testless weeks is unheard of opulence.

Gives me time to concentrate on deciphering the junior year lottery. Three phases, I feel like a species of human pinball. More complicated than any classification of glomerulonephritis and living proof that the clinical years are moving toward me apace.

Final exams come and go, routine for an old hand like me. Two weeks to study for national boreds part I. It's a medieval torture to dredge up and read those notes from the dead past. The boreds are notable for their tedium, but after my two years of Jefferson preparation, not their challenge. And then June 8, 1976, I'm sprung. The bicentennial non-happenings are in full bloom in Philadelphia. Off to vacation and then junior year and beyond the unknown.

THIRD YEAR

"And then we're worn Hack'd, hewn with constant service, thrown aside To rust in peace, to rot in hospitals."

— Thomas Southerne (Whoever that is)

"Wake up, your ride is here."







Lazily, I open my eyes to full summer sun. Blue diamonds sparkle on the pool surface encouraging me not to go. Like a virgin adventurer, who in the gently flowing stream sees the white water of the oncoming rapids, I contemplate the junior year.

Dizzying roller coaster ahead, true test of body and spirit. This is the real thing. Out there by myself, new demands, new skills to be mastered. Look out, anything could happen. Standard deviations meaningless out

"Oh doctor, Mrs. Hiatus is having some chest pain again." What to do? I don't know, give me four choices. Damn those infuriating exams and sterile lectures that did nothing to help me prepare for this.

A conversation with an older friend comes back to me. "It's a different kind of pressure than the first two years. Suddenly, you have responsibility, you're making decisions that can affect people in real ways. So you put a lot more pressure on yourself, rather than having the screws put to you. But a real difference is that now your personablity counts. You have to deal with people all day long. If you're a jerk you're in trouble."

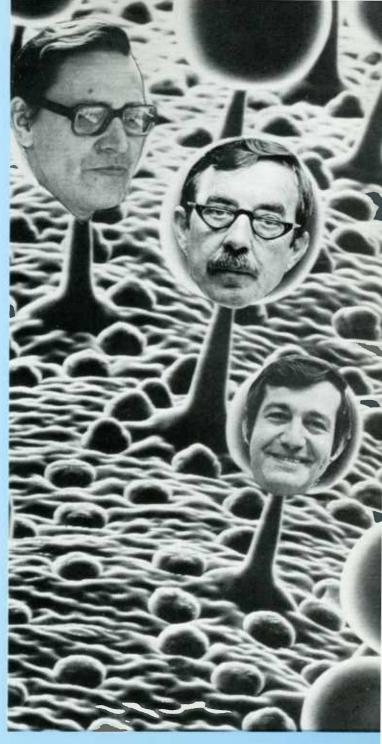
Suddenly scared, I imagine myself before a jury of attendings and residents whose only job is to find out what I'm really made of. Nightmares of being first and only call to a giant ICU filled with sequentially coding heart transplantees and hysterical families waiting in the wings for tactful consolation.

But I really don't know what to expect. I have other visions of grateful families crying their thanks, of beatific mothers showing their bouncy babies as proof of my handiwork, of lavish offers from Mass General. I just have to hope for the best and trust that it won't be too traumatic.

Drastic change in life style this year. The class of 1978 ceases here to exist as a discreet entity, it is finely splintered and scattered. My membership in group C lapses, I see my friends q6 weeks. Spare time, forget it. Making plans is a blatant invitation for some invisible attending to slip an admission in under the wire. There are times when a simple glimpse of the sun constitutes luxury. No time for routine chores. Have to cut conference to go to the bank. Tuition now \$4600, the old account is in chronic hypovolemic shock.

Tremendous emotional strain, especially at the beginning. Performing one procedure after another on hapless patients for the first time. None of them are simple. Try to act collected, try not to let on that I feel incompetent, hope they don't see through my disguise. Trepidation at constantly being called to evaluate situations I'm hardly experienced with based on data I scarcely understand. Might be exhilarating except that mistakes now have consequences. I worry that they underestimate the profound depth of my ignorance. But things get easier as the year wears on, an encouraging sign. Yes, I do believe I'm getting somewhere with this, there may be hope for me yet.

Psychiatry I find to be alternately interesting and de-



Mutant strain of killer fungus terrorizes sophomores



"Wind your watch and Wind your worm....

pressing. Stepping into those institutions is stepping onto another planet. Everyone shuffling around in one stage or another of dissociation from reality. Gone off the rails somewhere and now in advanced stages of decompensation. There but for the grace of God go I. Certainly, I feel powerless to reverse the process. I really don't know too much more about this than the proverbial man on the street. But I suppose these little interviews are for my benefit, not theirs.

The ever present clinic is in psychiatry frequently a lonely hearts club. Just trying to play Dear Abby as best I can; not really qualified for this sort of thing. It's a shame for these patients who come for professional help and wind up with me. I hate feeling like a fraud.

"Looks like you've gained four pounds."

"I swear I don't eat nuttin' but salads, Doc."

"Yes, yes, well you just try to stick to that diet and we'll see how you're doing in four months."

And that's all from family medicine.

Surgery is retractors: they are virtual extensions of my upper limbs. Holding them stock still at the end of an arm splayed out at some anatomically improbable angle for hours on end, pulling hard on someone's flesh. All seventeen forearm muscles plead for mercy.

OR personnel are masked and faceless, released thereby from any committment to common courtesy. I'm a robot. Best not to talk, just do what they say. Electric tension. I hop to the incredible pettiness of the OR nurses ("I saw that! Your hand went below your waist. Go scrub again for ten minutes!). Feeling like a good boy when they let me stitch, like when teacher let me erase the blackboard as a reward for good behavior. Feeling low when the surgeon yells at me, usually for not being able to read his mind. Demoralizing sometimes, until I realize that it's not my problem that he never learned to grow up.

Swings through anesthesia, urology, and orthopedics are tasteful vignettes, short enough not to wear out their welcomes.

Surgery is an interesting world to visit, but I'm not sorry to leave. Too much bad treatment by an indifferent house staff, too grueling, too many early mornings and late evenings. Starting to realize that being a doctor is full time work.

Rounds. That's what I do on medicine. Rounds. Work rounds, teaching rounds, formal rounds, grand rounds, walking rounds, talking rounds.

Lots of really sick people. This is the service we'll all wind up on eventually. Not all the patients make it through; a fact of life.

"How's Mrs. Conclusion?"

"Died last night."

"Post on her?"

"Don't know. Labs back yet?"

History and physicals are seven pages, complete with all negatives, pertinent and otherwise. No particular technical expertise is required which makes medicine a field accessible to we CCIIIs. A thorough knowledge of Harrison's is taken for granted. It is on the journal articles that points are won or lost.

"Have you read the article yet in Acta Medica Polonoski on burlap metabolism in renal failure?"

"Not yet, but Beans and Franks have an excellent review in the April '56 Annals."

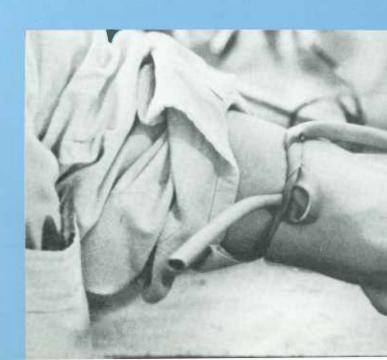
I really don't have the patience to read these articles. I xerox them to butter up the residents and memorize the authors' names. Seems like those medical residents really go for that sort of thing, they apparently know an awful lot. Will I ever be that knowledgeable? Scarcely seems likely. It's a long road to travel.

Pediatrics is sometimes a lot like being a veterinarian. Little squirmy, mewling, puking things, how can I get anywhere without a good history? Even the ones that can talk are too terrified of me to do so.

On inpatient peds I spend a lot of time hanging around watching. They're too small for me to do anything with. IVs: better get the resident. The nervous tremor of my hand makes the butterfly look like an athetotic baseball bat next to those veins. Kind of depressing, seems like most of these kids have been here a dozen times before.

Clinic is a lot more fun. Playing doctor is as easy as grabbing an otoscope in one hand and a Denver developmental scale in the other. Trying to spell Actifed is the tricky part. Dealing with these minor ills solo is



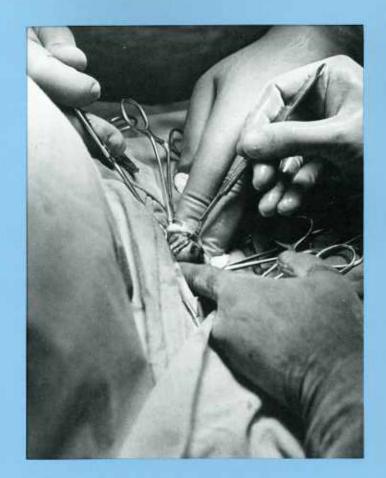


more therapeutic for me than them.

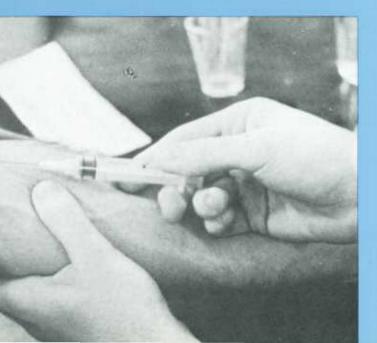
Obstetrics is a real twist, dealing as it does with a condition that's not pathologic. It's also the field with the least respect for time of day. Can't believe these residents do this for years on end. At least the H&P only takes ten minutes.

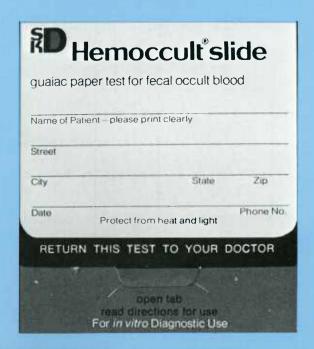
Awfully messy process. Amniotic fluid, meconium, blood, admixed into a torrent of genital slime. Scrub quick. Poor mother-to-be up on the table gasping and pleading.

"It's going to be all right, honey. Just breathe deeply. now push . . . push . . . PUSH . . . don't push." Black circle of hair suddenly appears. Grows bigger. "Push HARD!" Infant's cry, there it is. Little whining.









flailing person. Just slithered right out. Absolutely startling. Too bad about my new shoes though.

Mucking about in some hapless woman's pelvis is the last word in strained nerves. Do I really have any right to be doing this? Nurse watching, I'm bravely trying to act like I know what I'm doing. I wouldn't know an enlarged ovary if it shook my hand. Hard to imagine that ten years ago I was conjuring fantasies about this sort of thing. If my mother saw me now . . .

Not much to this gynecology stuff. A week of reading and all is clear. Don't even have to confabulate the answers to patient's questions. That's a welcome switch. A glimmer of hope moreover. Maybe I'm not a lost cause after all; perhaps some day I'll even be competent at this.

Whew, what a year. A watershed between callow student and strutting M.D. No choice about the transition; it's sink or swim. A lot that's suddenly new: long days that seem like a continuous oral examination, having to justify responsibility by bluffing competence, routinely inflicting pain with various steel needles - the trademark of the student on call. Every day brings forth situations new and baffling. A whole year of tense moments: praying some blood will return from the damned long-dwell as sweat collects under my suddenly confining white coat; the spine prickling uneasiness of talking with a moribund patient; performing some painful procedure on a living breathing person on the basis of only some vague description of it I once heard somewhere — put up to it by some Little Ceasar of an intern who has meanwhile disappeared. Too often, I have to swallow pride and call the resident to direct situations I am completely at a loss to handle. These residents come in all varieties, but one thing's for sure, even the most space-brained of these hell-hounds appear to know more than I ever will. A few, very few, are even courteous and considerate. But then again, one tends to forget that CCIIIs are people too, morose and zombie-like though they may act. But somehow after it all I now introduce myself to patients as "Doctor" and don't give this technical misrepresentation a second thought.

FOURTH YEAR

"'You are old, Father William' the young man said, 'and your hair has become very white;

And yet you incessantly stand on your head —

Do you think at your age, it is right?'

'In my youth,' Father William replied to his son,
'I feared it might injure the brain;
But now that I'm perfectly sure I have none,
Why, I do it again and again.' "

Lewis Carrol, Alice in the OR

"Oh doctor, Mrs. Nightshift is having more chest pain." Hmm, let's see here, this S-T depression is new, and that's obviously a Graham-Steele murmur. "Better turn up the nitrous and let's start some prophylactic vincristine." Young Ben Casey here, right on the ball. He knows what to do. A bit different than a year ago when my responses ran to the motif of "Write a note? What's a note?" Must have been some sort of osmotic process; knowledge running down the concentration gradient between its external avalanche and my internal ignorance. Life is so much more pleasant when every situation doesn't leave me goggling like a dead halibut.

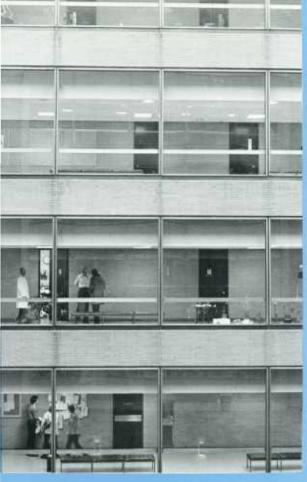
National Boreds part II pose little difficulty to my highly trained (in test taking) intellect. Lo and behold, no more tests! Nineteen years of schooling and free of them at last. There is something to be said for getting old. Home free now, top of this heap. Like seniors anywhere, pause to relax and reflect on the return on the \$17,200 Jefferson's gotten from me. Chance to polish rough edges and act sociable for a while. Classmates unseen for two years emerging from behind the wainscotting and from under flat rocks.

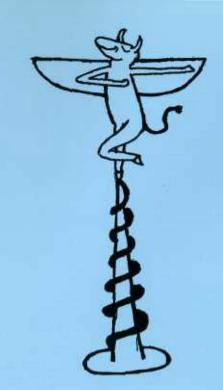
No block lasts longer than six weeks. All are electives, none too bothersome, some even interesting. The basic science a nostalgic throwback to the simpler days of yore. While I'm drawn to the occasional textbook out of spontaneous curiosity, the demands of patient care and the desire to appear less of a numb-skull in the hospital run stronger.

A bit of paranoia about the match; it forces one to start to define the future, like it or not. But there's supposed to be room for everyone, and there's always Mercy Catholic for us unmatched rejects. Long interviewing holidays fit right into the low-key pace of the year.

This fourth act finishes, the script now played out. The curtain falls and I step from the stage of the Academy of Music, diploma clutched tightly. No more hiding behind youth and inexperience anymore. Very sobering. Reins of responsibility drawing tight. Soon to be at the bottom of yet another ladder. Intern, intimidating phrase, medical jargon for cannon fodder. Off to another planet entirely. Hope the natives are friendly.



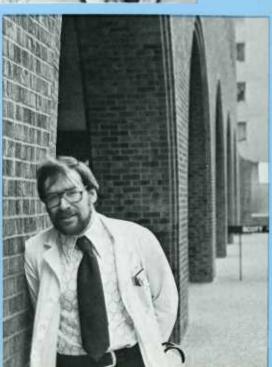






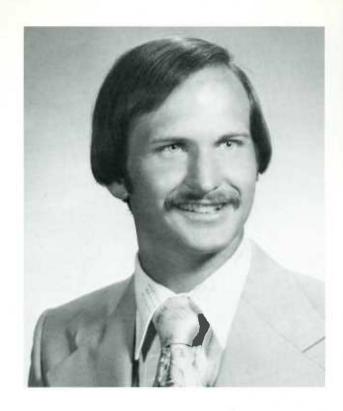








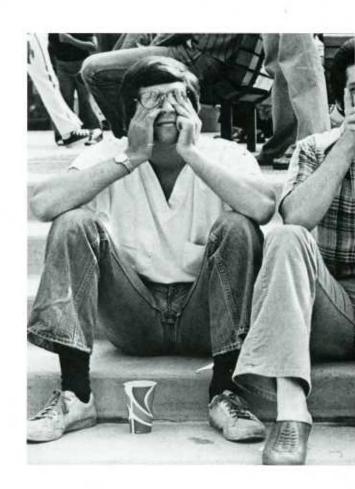
John F. Camp, M.D. LaSalle College, B.A.

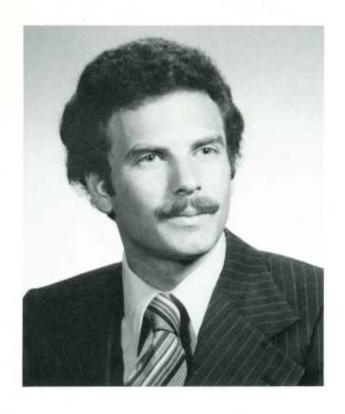


Asher B. Carey III, M.D. Duke University, B.S.

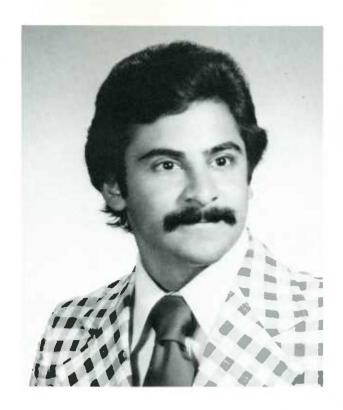


Christine A. Byrnes, M.D. University of Delaware, B.S.

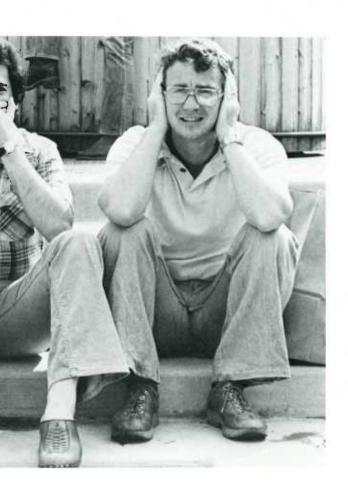


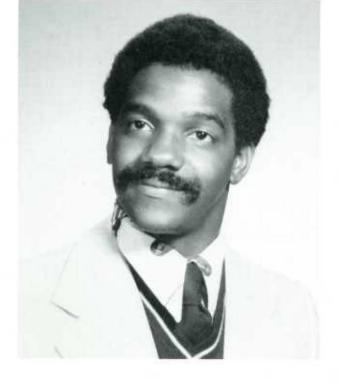


Gary H. Gassel, M.D. Lafayette College, A.B.

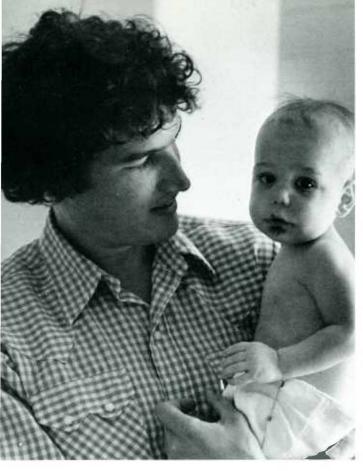


Harry Louis Chaikin, M.D. University of Pennsylvania, B.A.





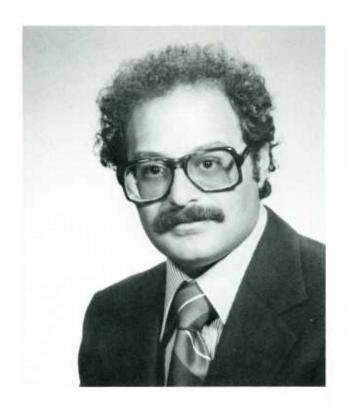
Harold A. Gofer, Jr., M.D. Cheyney State College, B.S.



"Divide your attentions equally between books and men." Sir William Osler



Anthony B. Colangelo, M.D. Temple University, B.A.



Stanley A. Cohen, M.D. Franklin and Marshall College, B.A.

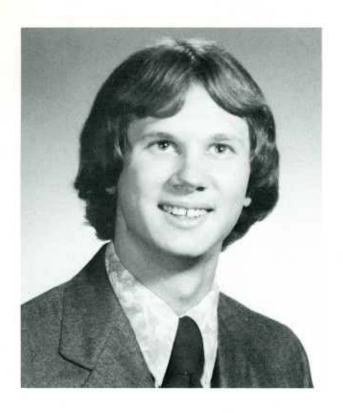


James H., '03

James D., '35



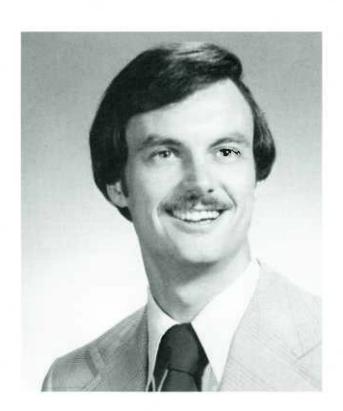
James H. Corwin III, M.D. University of Virginia, B.S.



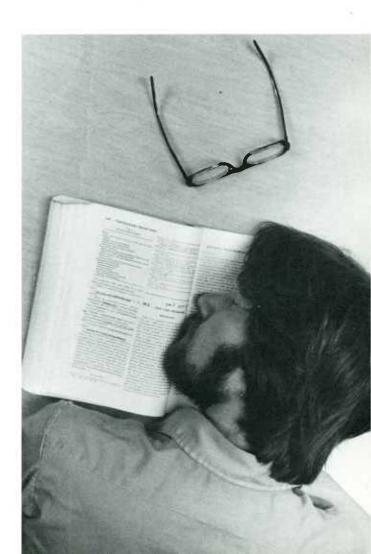
Johnson G. Coyle, M.D. Juniata College, B.S.

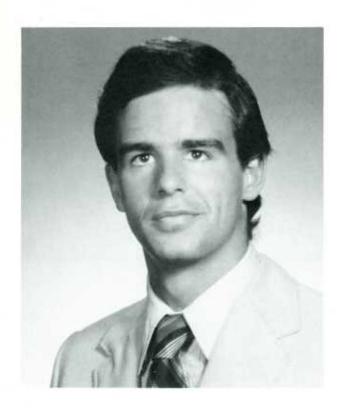


Roger F. Grake, M.D. University of Scranton, B.S.



Gregg E. Gregan, M.D. Lafayette College, A.B.

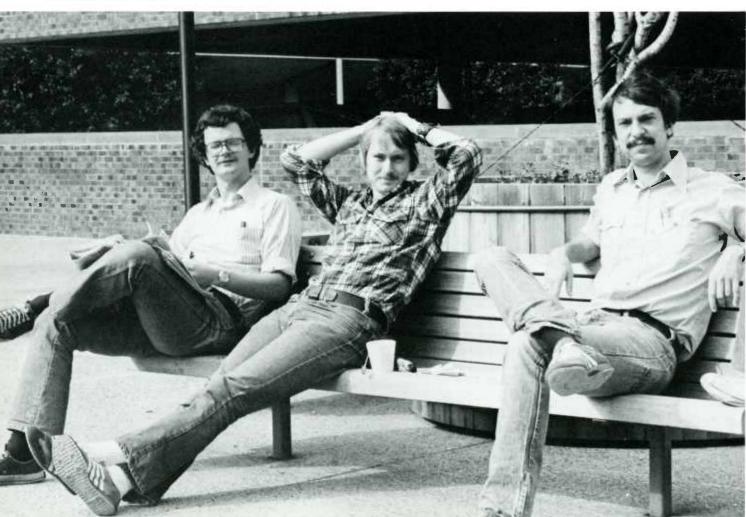




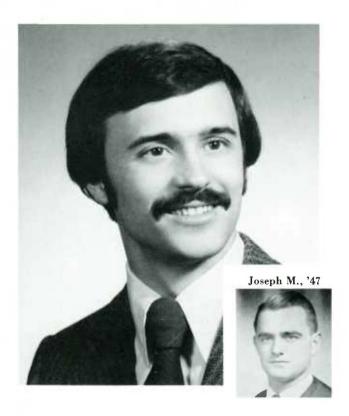
Anthony R. Dal Nogare, M.D. University of Delaware, B.S.



Fredrick G. Dalzell, M.D. Princeton University, B.A.



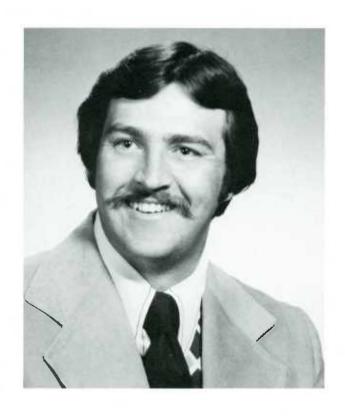
Fulminant Pitt's Disease



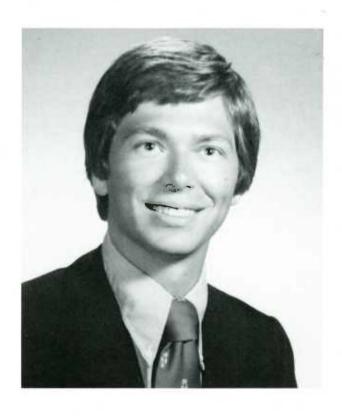
Thomas J. Danyliw, M.D. St. Michael's College, B.A.



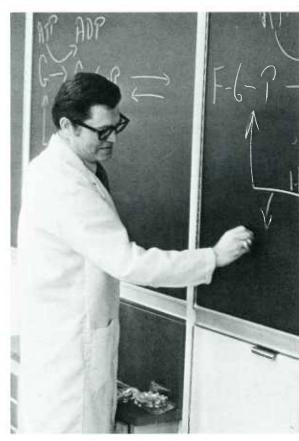
Allan S. Davis, M.D.
Case Western Reserve University, B.A.



Harold J. Davis, M.D. University of Scranton, B.S.

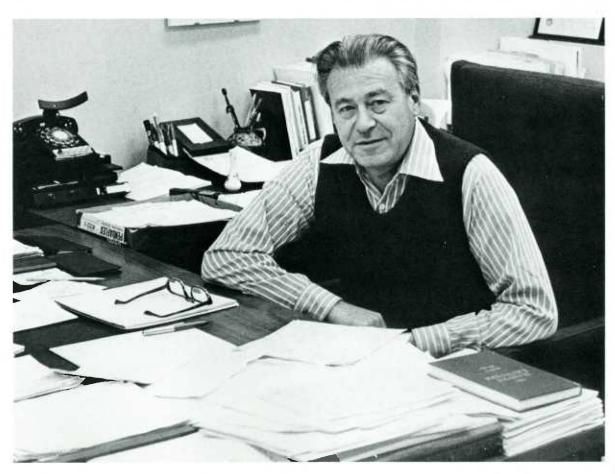


John 6. Dethoff, M.D. Lehigh University, B.A.



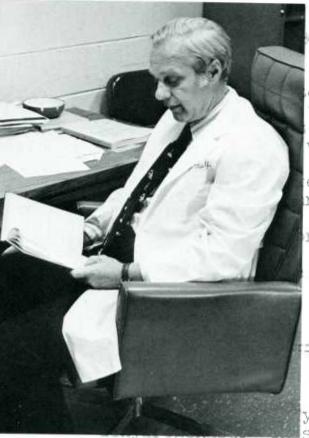
BIOCHEMISTRY

Stroboscopically photographed at 1/10,000 of a second; yet the hand is still a blur.



In actuality, immunology is nowhere near as complicated as I make it seem.

Cell and Tissue Biology Lipid Metabolism (3) Dr. Allen 11-12 Tuesday, 10-8-74



ODY METABOLISM

ones is low.

the caloric consumption of an individual pathway.

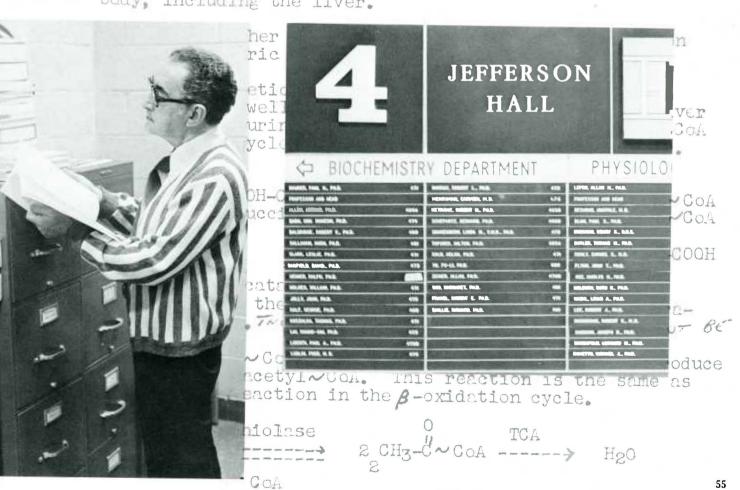
very important in the normal individual.

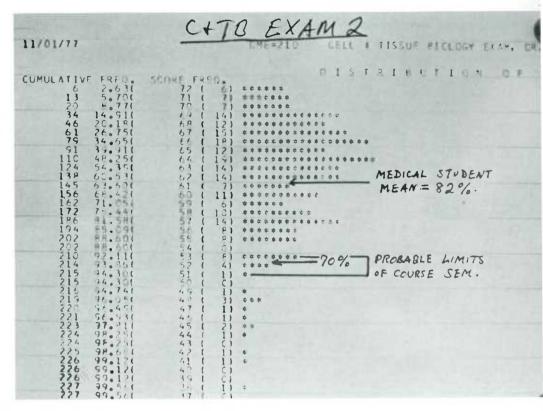
etone body metabolism increases during ntrolled severe diabetic.

n of ketone bodies) by the extra-hepatic acid is oxidized back to acetoacetic

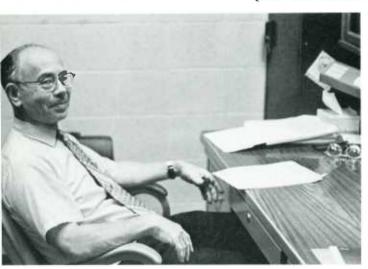
yzing this reaction is eta-hydroxybutyrate s enzyme is fund in all tissues of the

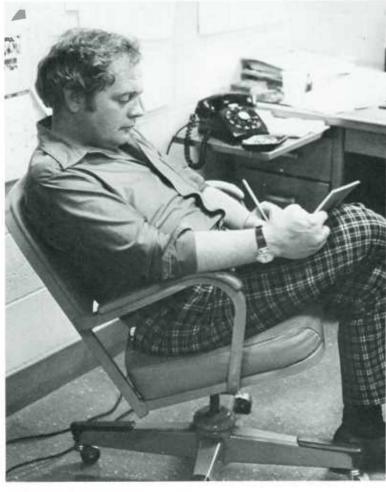
body, including the liver.



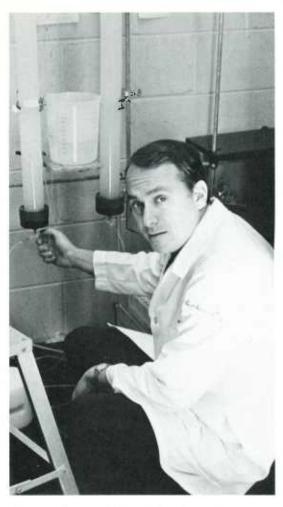


Quick! Call Menduke. 90% passed!

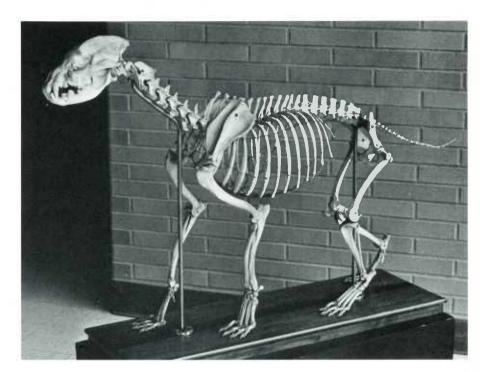




Faculty Advisor — Locust Medical Society



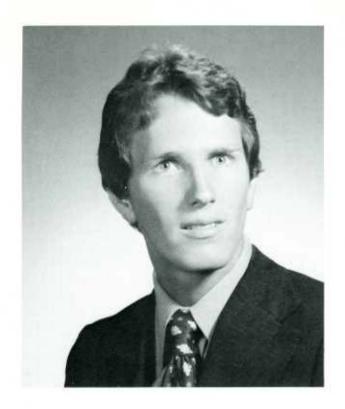
One step closer and I'll pull the plug.



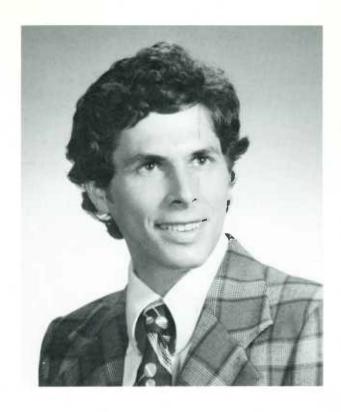
I must be barking up the wrong tree. How did I end up in Biochemistry?



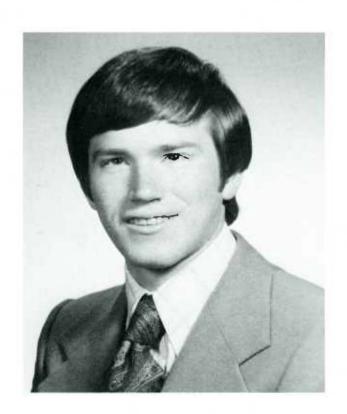
Who's an FLK?



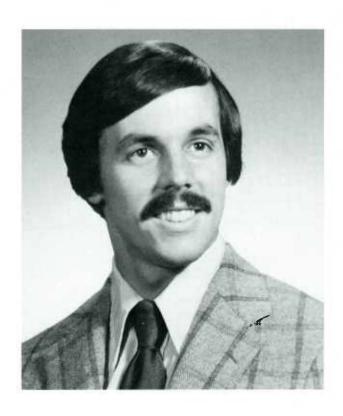
Daniel Bradley DiCola, M.D. West Virginia University, B.S.



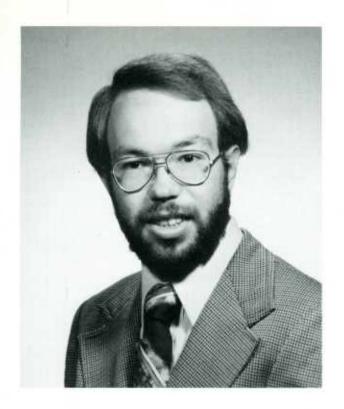
Jeffrey W. Dietz, M.D. George Washington University, B.S.



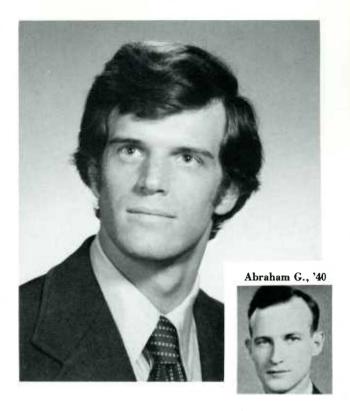
Otto E. Dove, M.D. Pennsylvania State University, B.S.



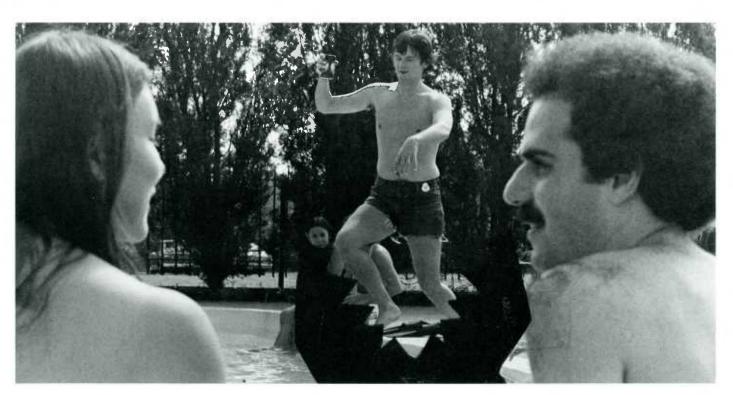
Steven B. Edson, M.D. Pennsylvania State University, B.S.



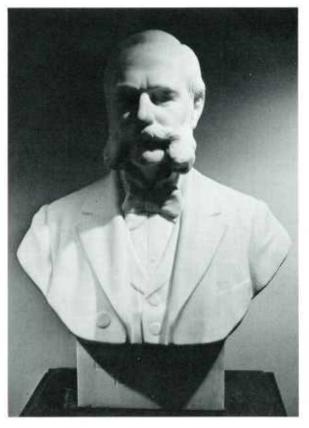
James W. Egel, M.D. Pennsylvania State University, B.S.



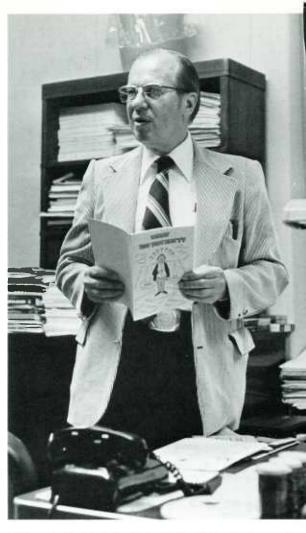
Steven B. Eisner, M.D. Lehigh University, B.A.



Eric's life insurance? - Why, George Lubeck of course!



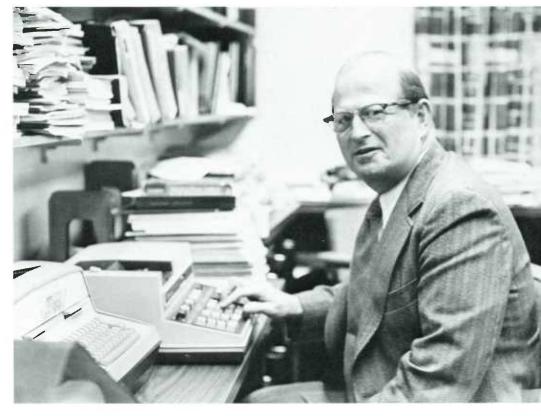
Carlos Finlay: dead of yellow fever



Willard A. Krehl, A.B., M.S., Ph.D., M.D.: Professor of Community Health and Preventive Medicine and Chairman of the Department, and Professor of Medicine



Al Portfolio: medical student



Hyman Menduke, A.B., M.A., Ph.D.: Professor of Community Health and Preventive Medicine (Biostatistics) and Director of Sponsored Programs; "Master of the Bell-Shaped Curve" (the Duke of Chance)

You really learn a lot in these 24-hour shifts . . .



EMERGENCY MEDICINE







As soon as I finish this Coke, I'm taking a coffee break.

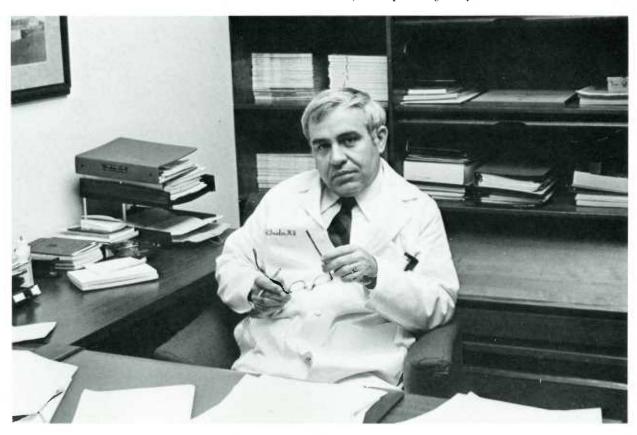
Ahh, Fifi!

FAMILY MEDICINE





Is that an S3, or the pounding of my own heart?



M. Lloyd Dosis? No, I've never heard of the man.

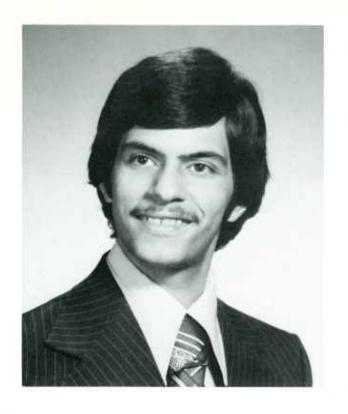


"Man with hole in pocket feel cocky all day."

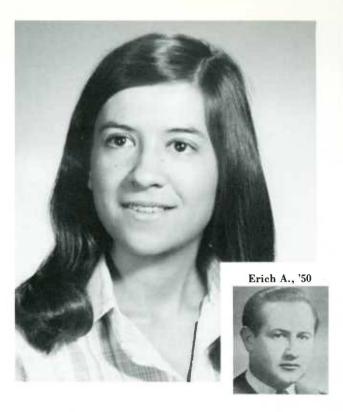




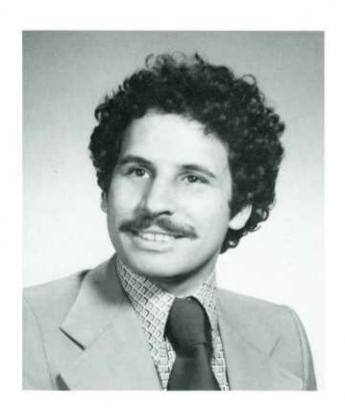
Good God! Watson's on 6 Main, being worked up by a CCIII . . .



William G. Ellien, M.D. Pennsylvania State University, B.S.



Deborah C. Everts, M.D. University of Pennsylvania, B.A.



Larry A. Feiner, M.D. George Washington University, B.S.



Marciana Durbano Filippone, M.D. University of Delaware, B.A.



Marc J. Finder, M.D. Pennsylvania State University, B.S.

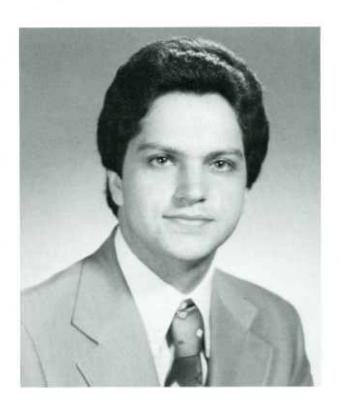


Robert S. Finkelhor, M.D. University of Pittsburgh, B.S.

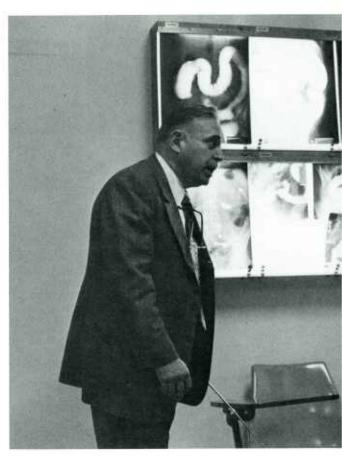




Latricia G. Fitzpatrick, M.D. Trinity College, B.S.



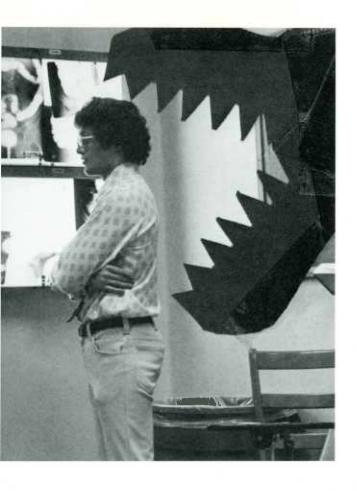
Rafael A. Fleites, M.D. John Carroll University, B.S.

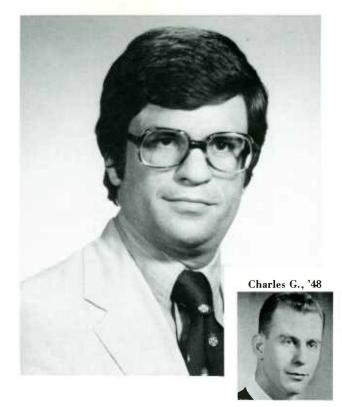


George! Behind you!



Margaret S. Flinn-Sugar, M.D. Barnard College — Columbia University, B.A.





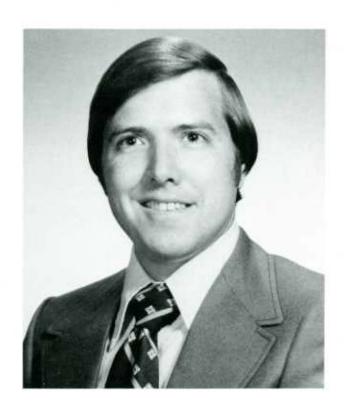
George G. Francos, M.D. Franklin and Marshall College, B.A.



Daniel F. Flynn, M.D.

Northeastern University, B.A.

Harvard School of Public Health, M.S.

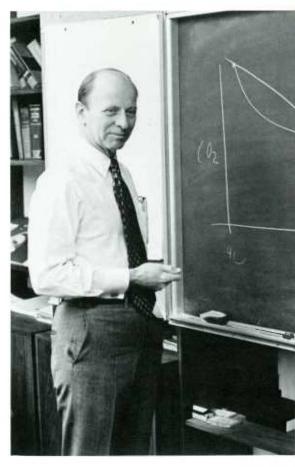


Charles K. Foulsham II, M.D. U.S. Naval Academy, B.S.

MEDICINE

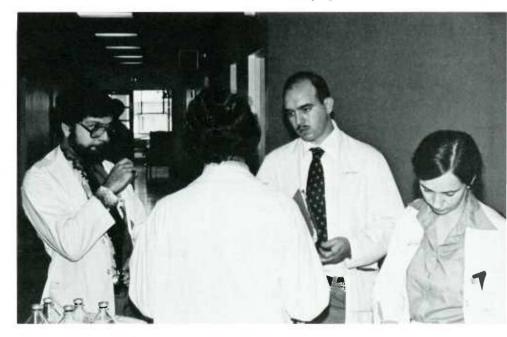


My new artificial stomach will put Tagamet in the doghouse.



I think I've finally figured out how Simethicone works.





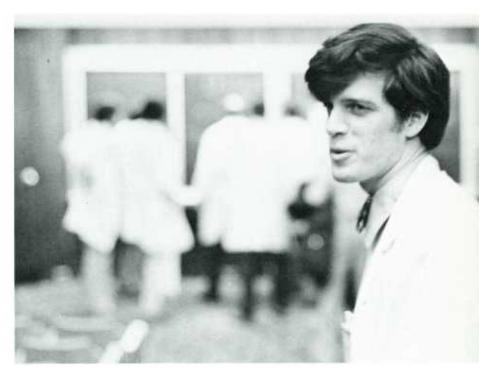
I hate to tell you this, Bob, but Mrs. Jones is impacted again.



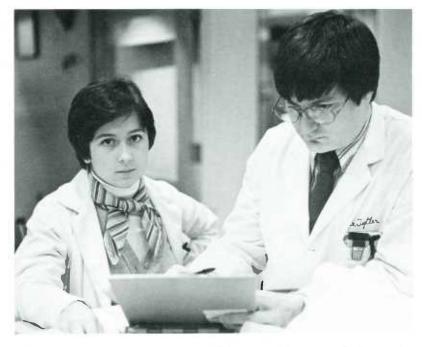
And if you're working up two patients in the same room, you can do both at once.



Take a gram of methotrexate and call me in the morning.

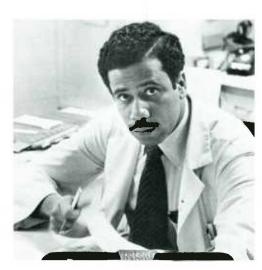


The Promised Land always lies on the other side of a wilderness. — Havelock Ellis



When life gives you lemons, make lemonade.





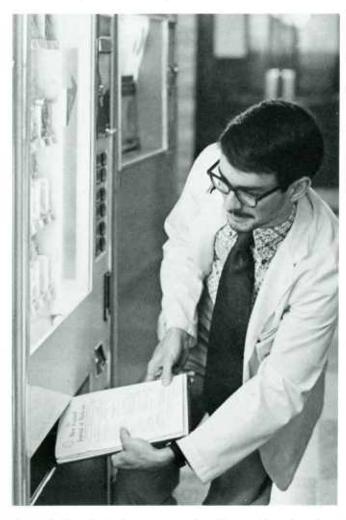
My resident will kill me if I can't come up with the twenty causes of hammer toes.



Hamartomas? I thought there were only sixteen causes.



Marcus Welby never had it so good.

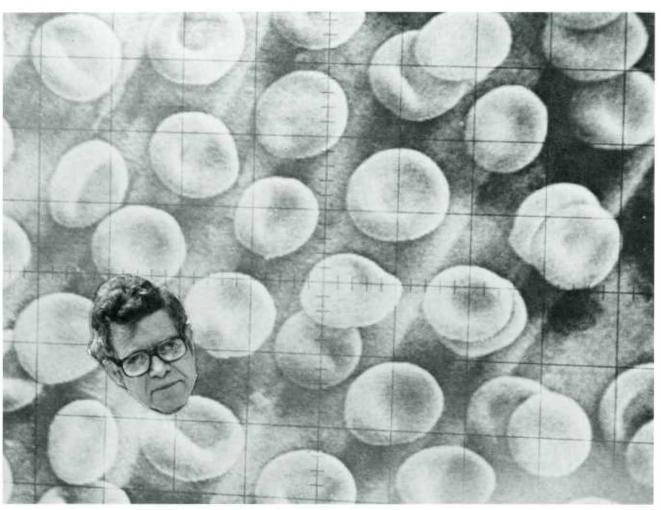


I can't believe the junk you get out of vending machines these days.

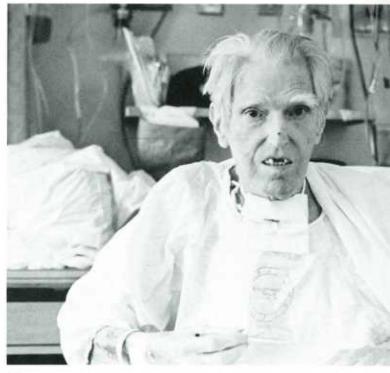




Risk factors? What risk factors?



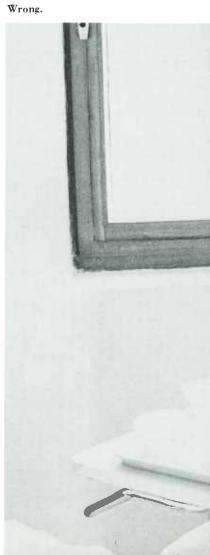
Normochromic, normocytic erythrocytes and one megaloblast.



Of the three patients on this page, which one is oriented x3?

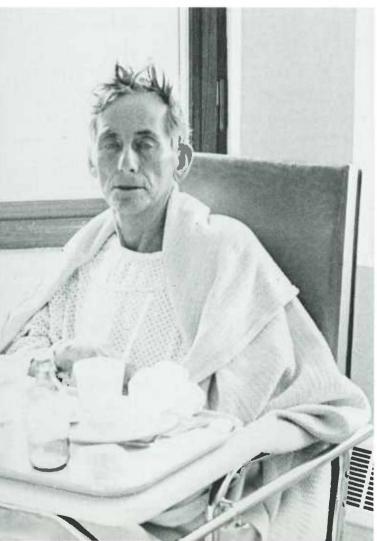


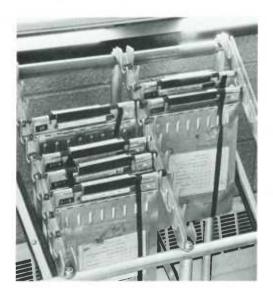




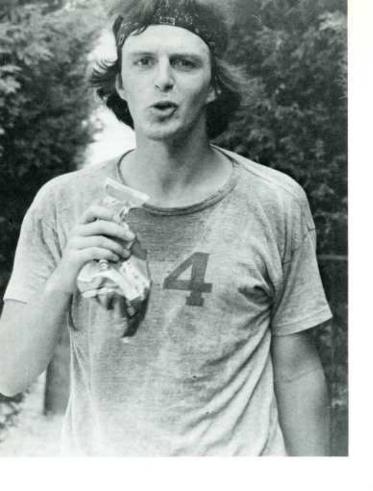


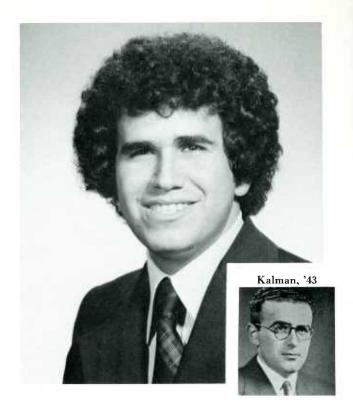






In the cause for humanity we must agree that: All men are human beings All human beings are valuable And all the rest is commentary. — Burton Blatt





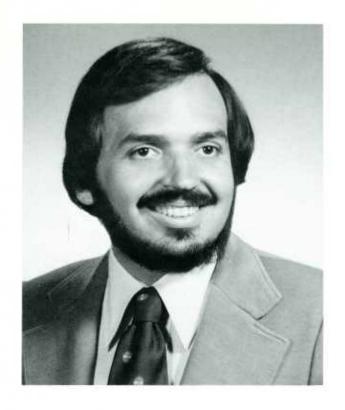
Harry A. Frankel, M.D. Washington University, A.B.



Ellen D. Freedman, M.D. Pennsylvania State University, B.S.



Erica S. Friedman, M.D. Pennsylvania State University, B.S.



Jose Ramon Garcia, M.D. Drexel University, B.S.



Gerald L. Gary, M.D. Lincoln University, B.A.



Cheryl H. Geisler, M.D. Brooklyn College, B.A.

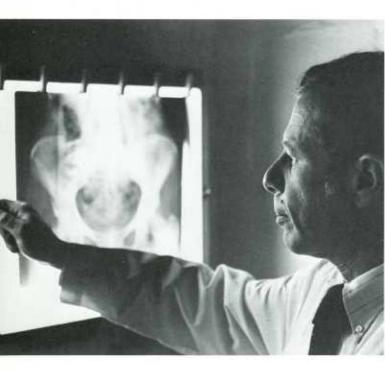


Edward Geisler, M.D. Brooklyn College, B.S.

ORTHOPAEDICS



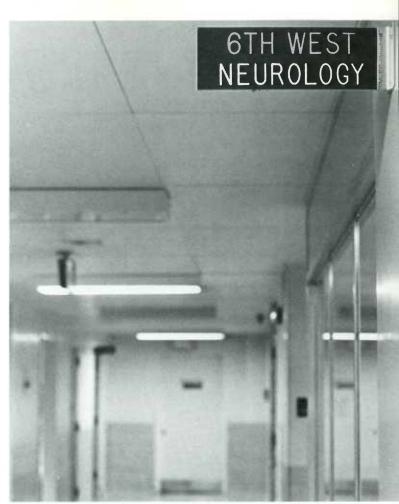


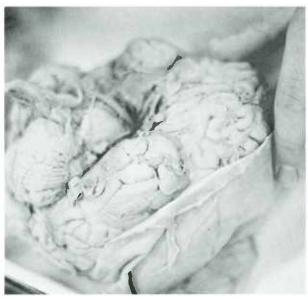




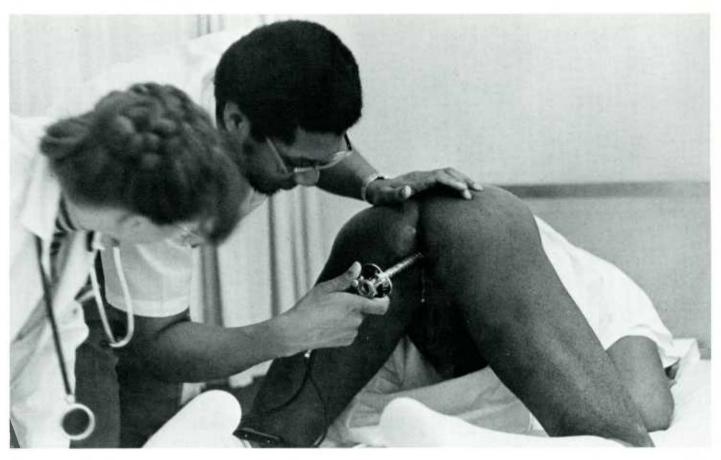
NEUROLOGY



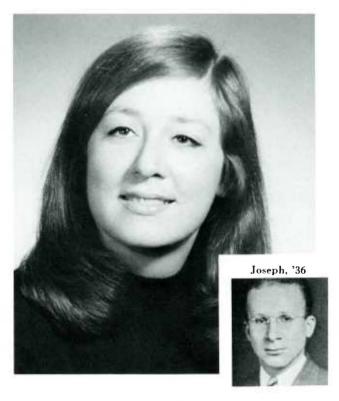




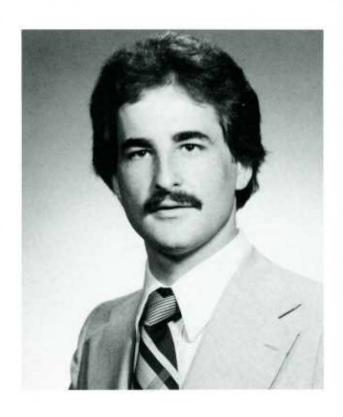




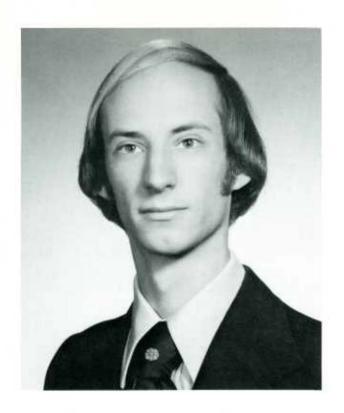
"Roto-Rectum, that's our name!"



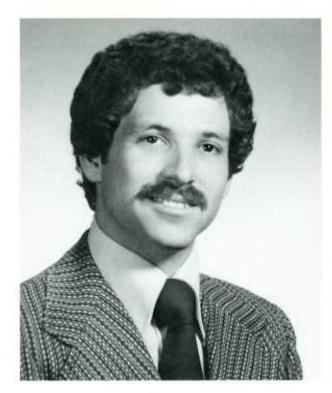
Susan M. Ginsberg, M.D.
Tufts University, B.S.



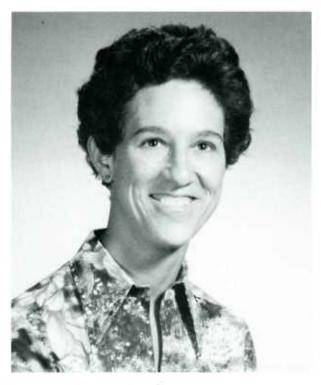
David S. Ginsburg, M.D. Muhlenberg College, B.S.



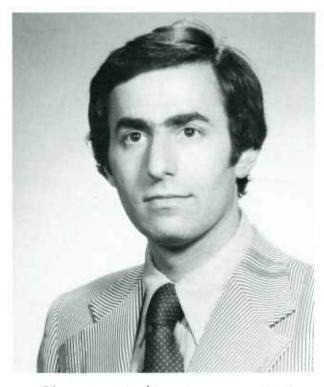
Leter James Ghonos, M.D. University of Michigan, B.S.



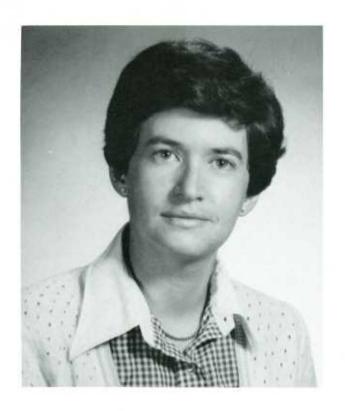
Eric D. Glasofer, M.D.
Lehigh University, B.S.
Thomas Jefferson University, Ph.D.



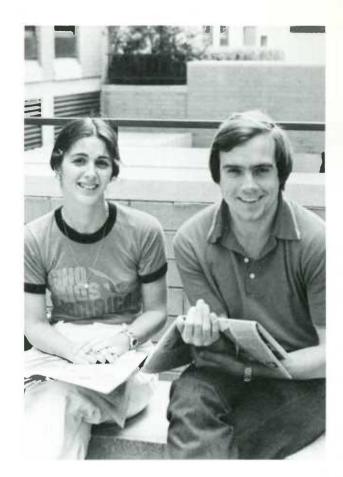
Barbara Wyler Gold, M.D.
Bryn Mawr College, B.A.
University of Pennsylvania, M.S.

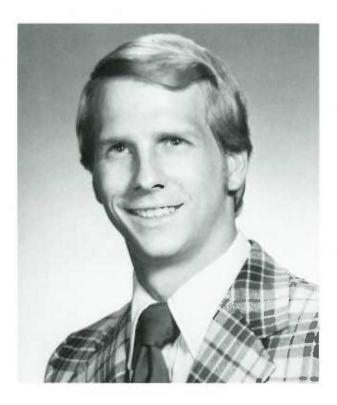


David M. Goodman, M.D.
Pennsylvania State University, B.S.
Pennsylvania State University, B.S.E.E.



Christine Grad, M.D. University of Pennsylvania, B.A.

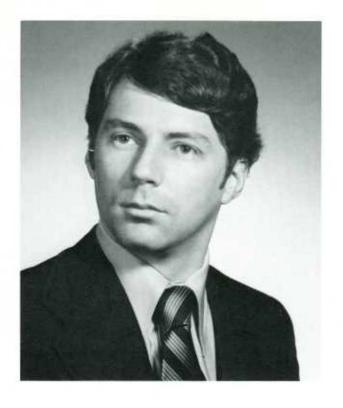




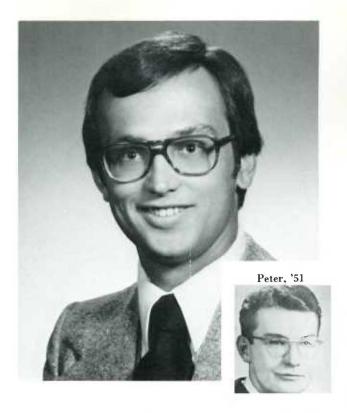
Glenn Edward Graybeal, M.D. University of Delaware, B.A.



Allen's First Date Kit



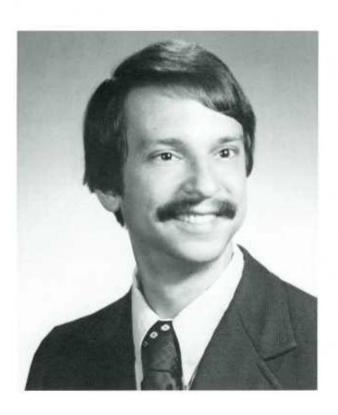
Gregory C. Griffin, M.D. Dartmouth College, B.A.



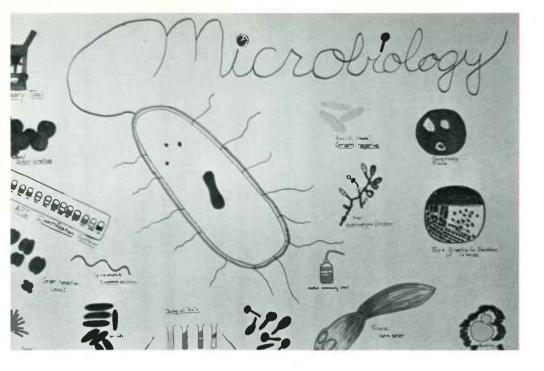
Frank Guillard, M.D. Indiana University of Pennsylvania, B.S.



Gary David Gutbezahl, M.D. Pennsylvania State University, B.S.



Raymond A. Haibach, M.D. Pennsylvania State University, B.S.





I got a digital worm. It doesn't need winding.

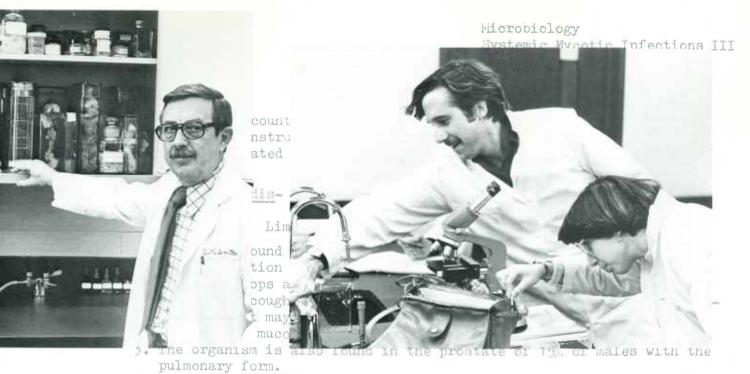


Where the telescope ends, the microscope begins. Which of the two has the grander view?

Victor Hugo



If you PRINT this you're dead.



I ligit logions and recovery is usually uneventful. rifo idia hae gro road rm t toth 103 ever Bl for

at 37°. There is a

s nephew is in JMC 79!) staining ascospores.

stilbamide. mycetin.))

South American

rea of the body. Mastomycosis. sions are painless ing margins.

contain the disease. Fatality is less than 1%

reated disseminated form.

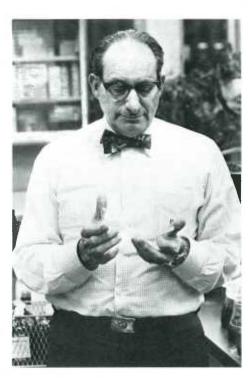
temperature.

enriched medium at 37°, it is a thin walled yeast y multiple bidding (mouseketeer ears).

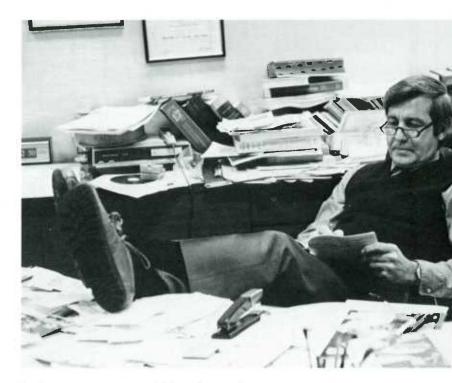
Therapy- amphotoricin B; some have dabbled in sulfonamides.

III. Ccccidioides immitis- Coccidioidomycosis, San Joaquin Valley Fever, Valley Fever, Desert Rheumatism.

- A. Not really studied until WWII when troops were trained to fight the
- B. The organism is found in arid, alkaline soil in many parts of the world, such as the south-west US. The organism grows after a rain. The soil then dries and arthrospores form. These are kicked up by the harsh desert wind and inhaled.



Hmm, looks like another positive Salmonella from Doc Watsons.



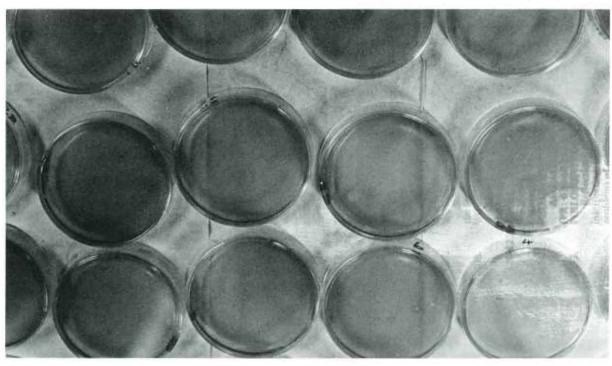
I'm lecturing tomorrow and I haven't got a thing to wear.



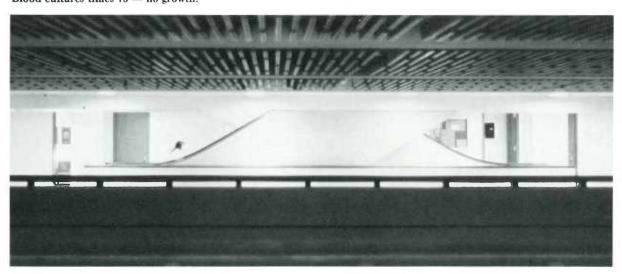
That's Jussi, not Juicy.

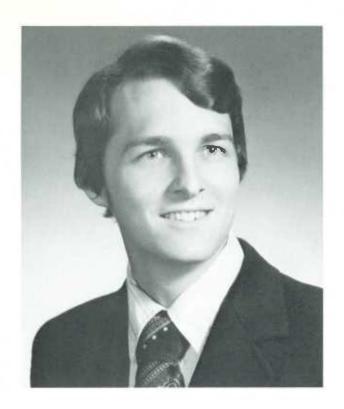


Guess whose rectal swab lights up on dark field.



Blood cultures times 75 — no growth.



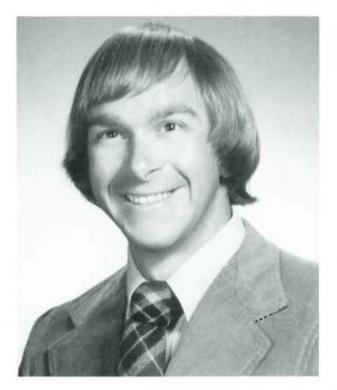


Bruce Cameron Hall, M.D. Pennsylvania State University, B.S.

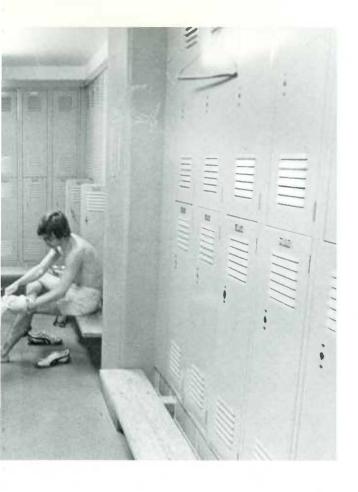




Louis Hammerman, M.D. Emory University, B.A.

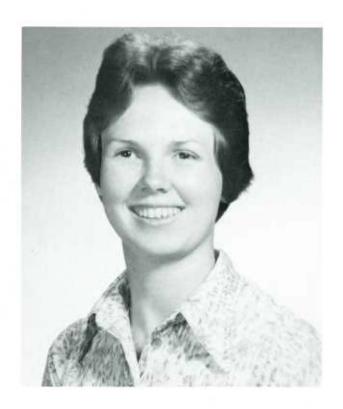


J. Clarke Hankey, M.D. Carnegie-Mellon University, B.S.





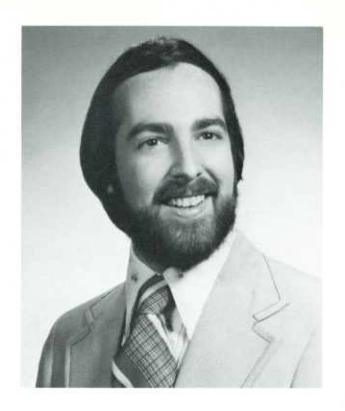
Arthur Heller, M.D. SUNY Binghampton, B.A.



Latricia Marie Harper, M.D. Chestnut Hill College, B.S.



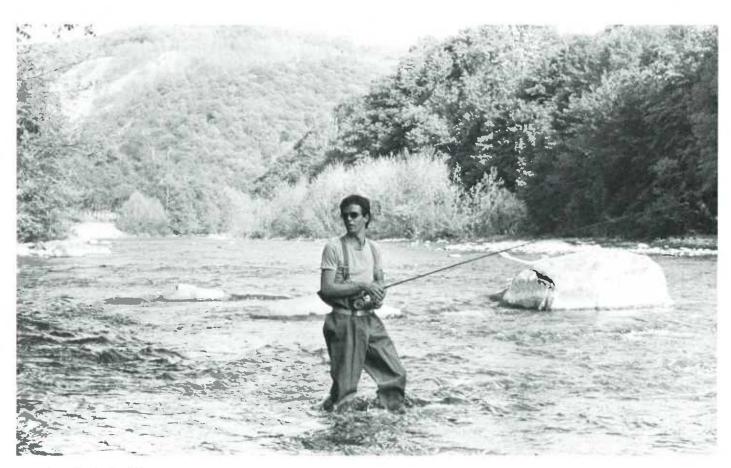
Marilyn M. Hart, M.D. Thomas Jefferson University, B.S.



Steven S. Herbets, M.D. St. Joseph's College, B.S.



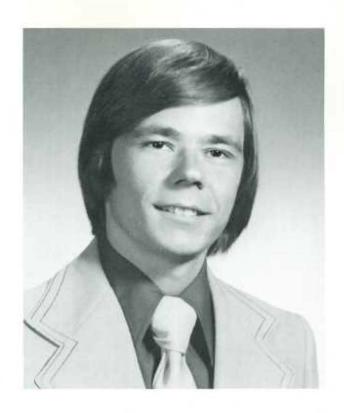
Leonard Y. Kerman, M.D. Pennsylvania State University, B.S.



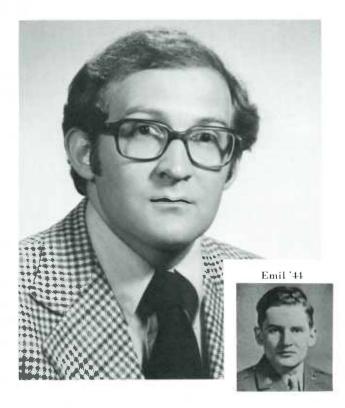
Tell them I'm in the OR.



Sally Louise Herpst, M.D. Pennsylvania State University, B.S.



Kenneth Donald Hoellein, M.D. West Virginia Wesleyan College, B.S.

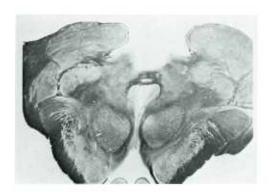


E. Paul Howanitz, M.D. King's College, B.S.



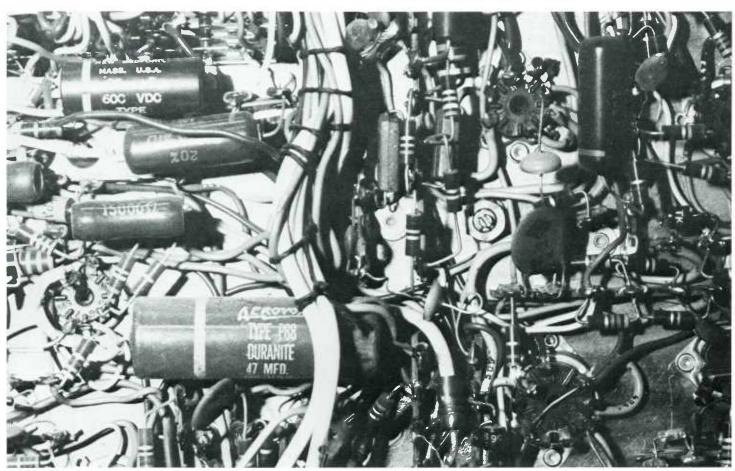
Susan Lynne Hunker, M.D. Pennsylvania State University, B.S.

NEUROANATOMY





Help lick Lethal Midline Granuloma!



Trace the median longitudinal fasciculus, from its origin in the brain to its insertion in the knee.

III. Page 13/15 - 11

A. Figure 7. Inferior colliculus section.

1. MLF, medial lemniscus, ventral trigeminothalamic tract, and spinothalamic tract.

2. Two nuclei om median plane are the Trochlear nuclei.(IV)

3. Course of IV: acsends dorsally and crosses to the opposite side. It is thus the only cranial nerve which crosses, and which lihas a dorsal exit.

4. Cerebral aqueduct or iter, surrounded by periaqueductal

(what else?) gray or iter gray.

5. Lateral lemniscus; carries auditory signals to the inferior colliculus.

B. Figure 8, superior colliculus.

VTTT, and Medial Lemniscus) now as in cross-section.

ted the ventro-lateral side, and in-

the median plane flanked by the MLF. low a ventral course and exit beeduncles.

gin of the rubrospinal tract.



or or ement. gh infor

and

V,VI

3. Fibers of CBT are both crossed and uncrodded, with each



parts: lpebral fisers end here) ssure.(these

l lesion of luntary move-This is an teral side nilateral in-

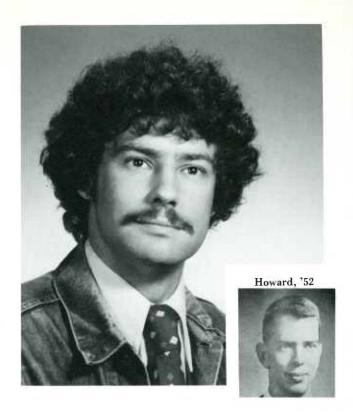
request, but stimuli.(or

nvolved with on. ted a change in attern upon

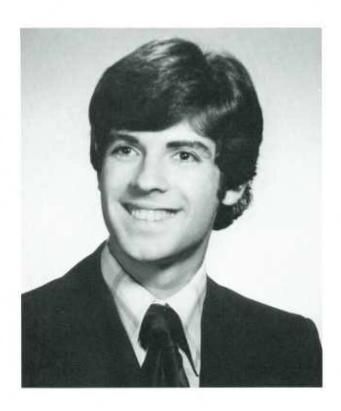
2. Same thing occurs with stimulation of spinal or cranial nerves if the RF is intact.



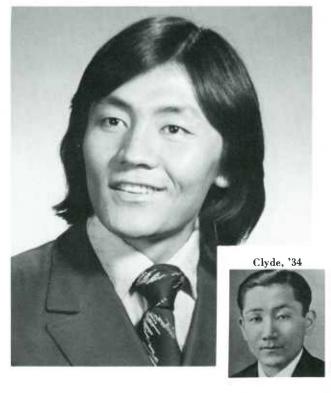
Thomas A. Hutchinson, M.D. Lehigh University, B.A.



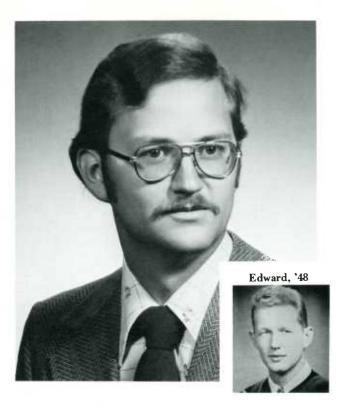
Robert Hugh Huxster, M.D. Colby College, B.A.



Glenn Alan Hyatt, M.D. St. Joseph's College, B.S.



Clyde Kideo Ishii, Jr., M.D. Washington University, B.A.



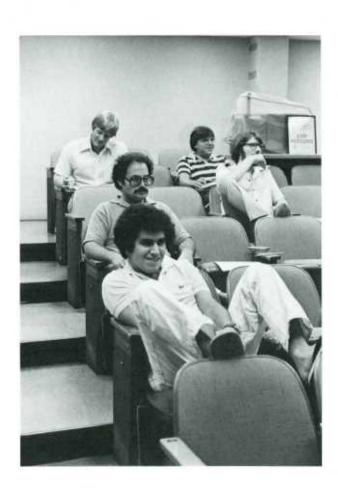
Eric William Jahnke, M.D.
Juniata College, B.S.

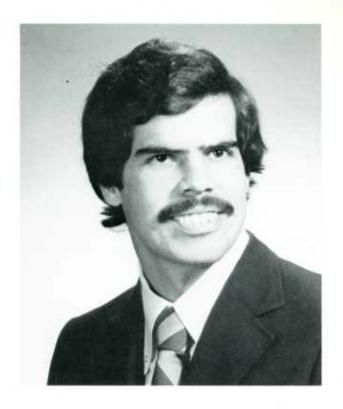


Sjanna Johnston, M.D.

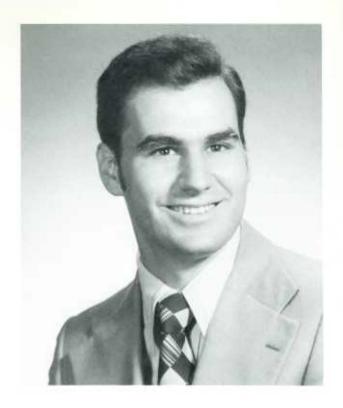


I've been here 81 years waiting for a well-baby check.





Thomas Kenny Jones, M.D. University of Delaware, B.A.



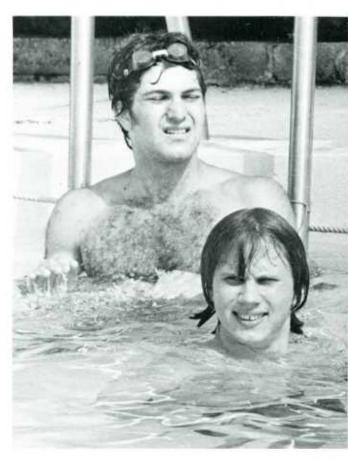
Allen Steven Josephs, M.D. Temple University, B.B.A.



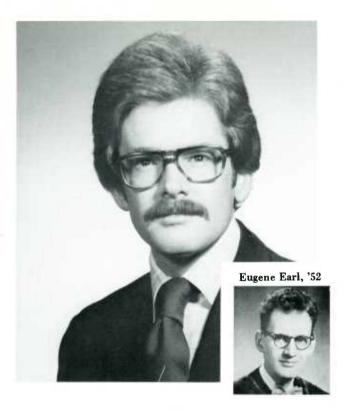
Raymond Richard Jones, M.D.

LaSalle College, B.A.

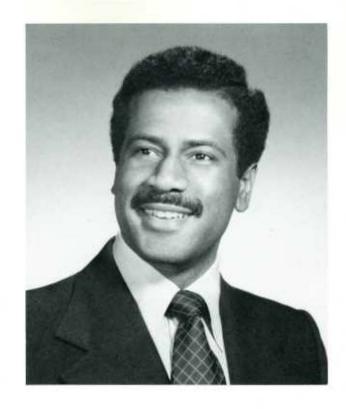
Drexel University, M.S.



The heads of the class



Daniel Paul Regel, M.D. Loyola College, B.S.

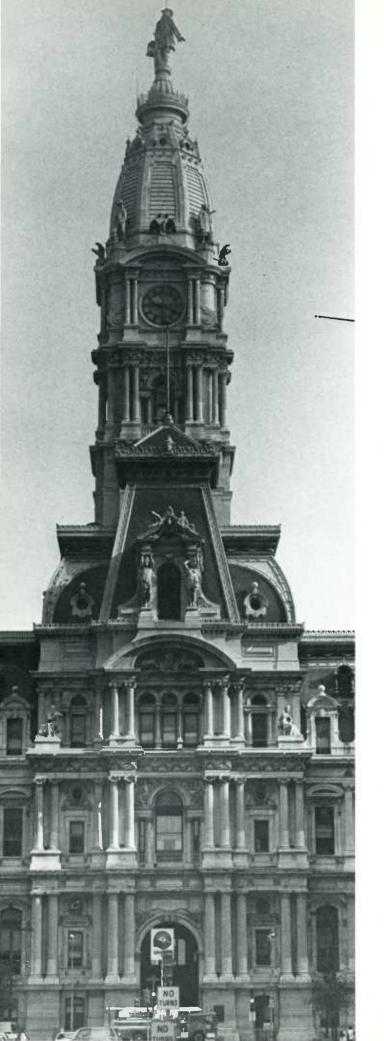


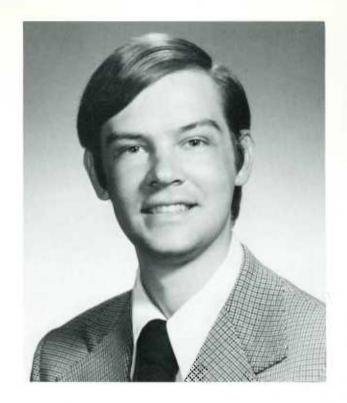
George R. Kenner Jr., M.D. Howard University, B.S.E.E.



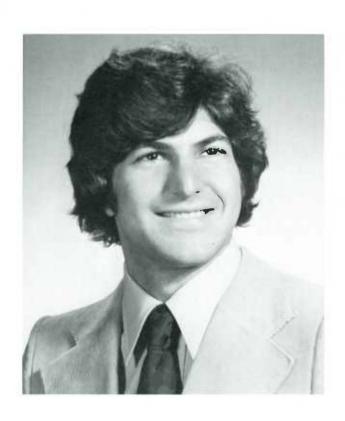


Joyce Ruth King, M.D. Tufts University, B.A.





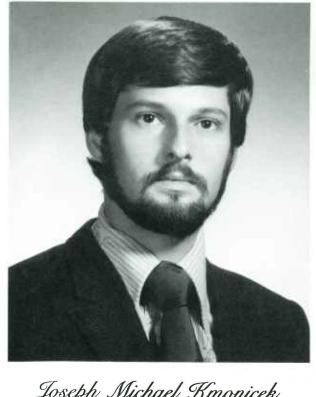
Chris Allen Kittle, M.D. University of Delaware, B.A.



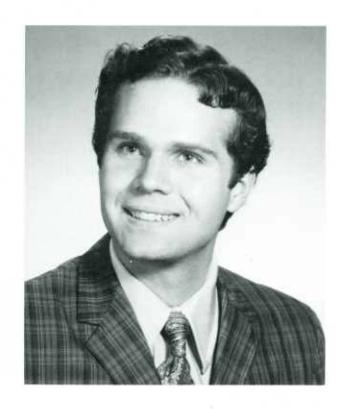
Howard Simon Klein, M.D. Pennsylvania State University, B.S.



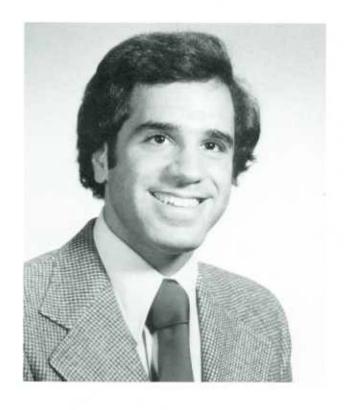
Marian Baldrige Klepser, M.D. Mount Holyoke College, B.A.



Joseph Michael Kmonicek, M.D. State University of New York-Buffalo, B.A.



John Bruce Kneeland, M.D. Stanford University, B.S.



Kenneth Kovalsky, M.D. University of Maryland, B.S.

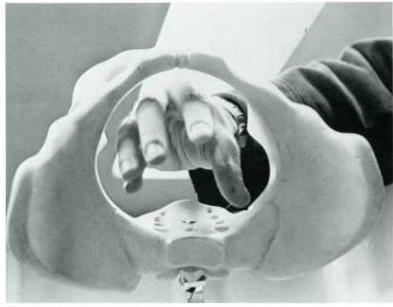
OBSTETRICS AND GYNECOLOGY



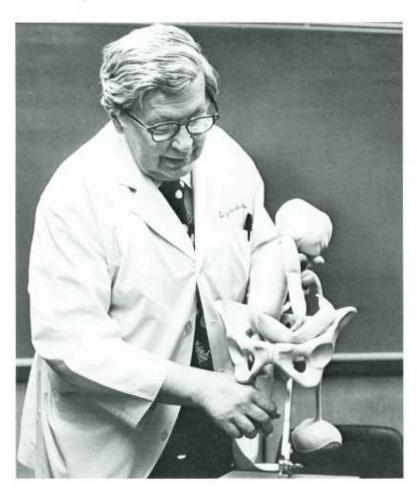
I came all the way from clinic thinking this was a massage center.

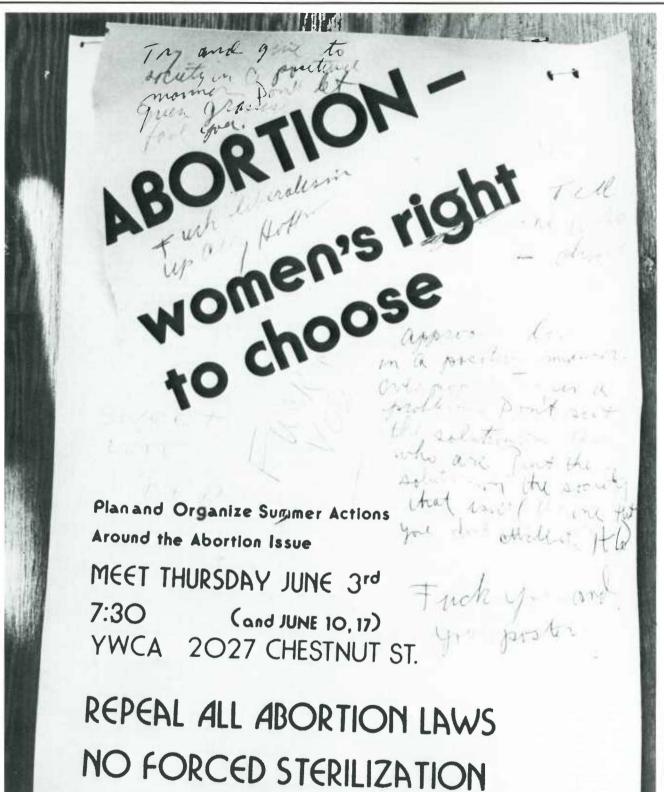
There are but three events in a man's life: birth, life and death. He is not conscious of being born, he dies in pain, and he forgets to live.

- Jean de la Bruyere



Consider the pelvis as a whole.





FOR FURTHER INFORMATION CALL 594-5201 or BA2-2499
WOMEN UNITED FOR ABORTION RIGHTS

99

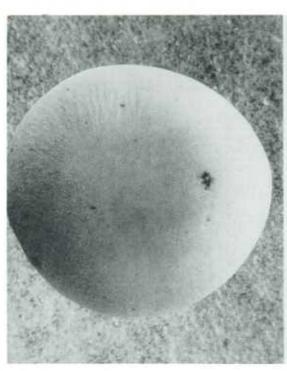


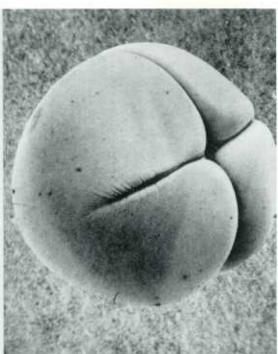






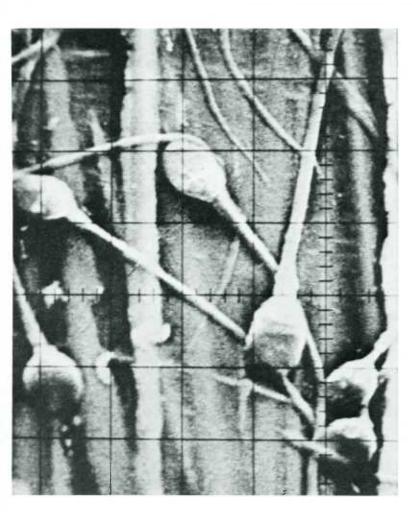


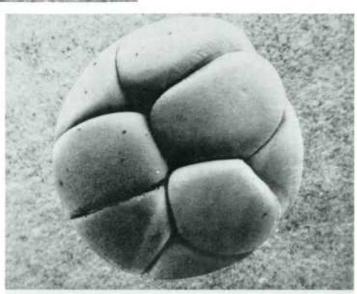


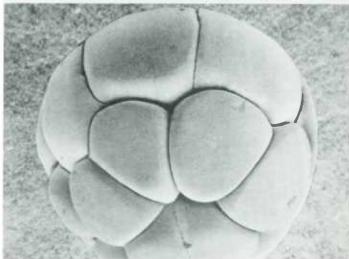


A rather special phenomenon manifests itself which I should like to call neotenic thinking. Before a thought has fulfilled itself and matured, it gives birth to a new one, scarcely born, incompletely formed, brings still another into the world, a litter of others which similarly respond to one another by means of unexpected and unseizable references, which I have not so far succeeded in rendering.

— Henri Michaux







ist six things wrong with this picture

1. The Resident's hair is too long.

2. Everyone in the picture is female except for the three males.

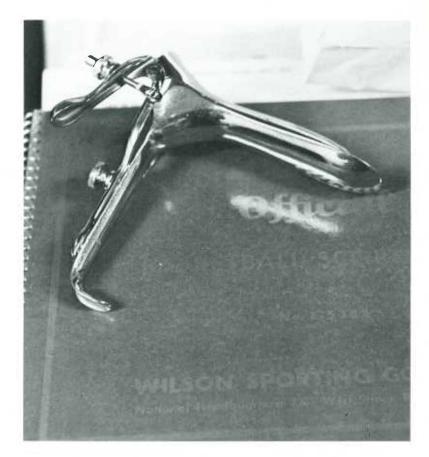
3. The O₂ line was crossed with the N₂O line.

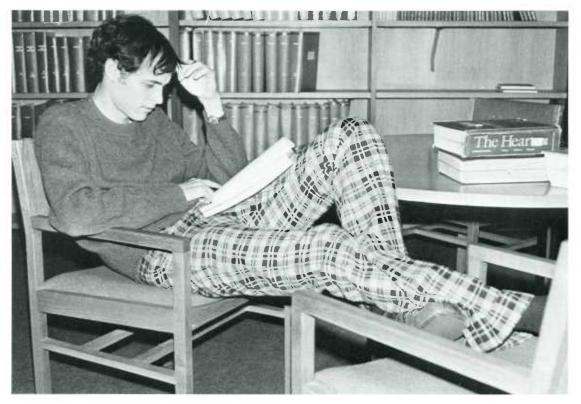
4. The patient's watch is not on Standard time.

5. The "Pit" is running too fast.

6. The patient is pulling when the doctor says push.







Trichotilomania



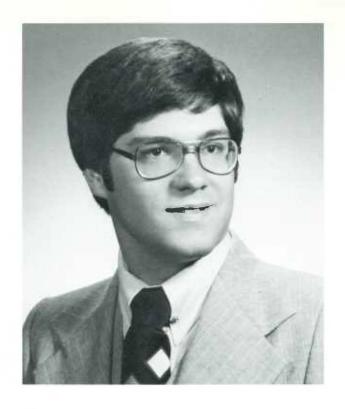
Anesthesiology



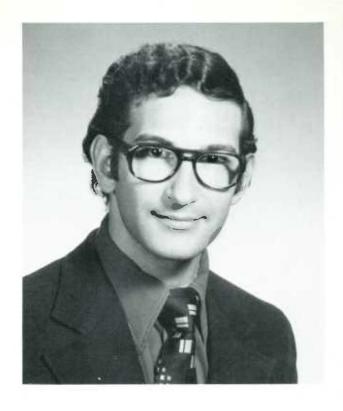
Must be a slow day. Only six medical students asked me out.



Hi, Call me J.J. I invented Code Blues.



Rudolph M. Krafft, M.D. Pennsylvania State University, B.S.



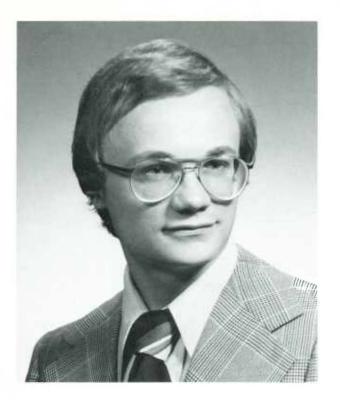
Stephen T. Kramer, M.D. University of Pennsylvania, A.B.



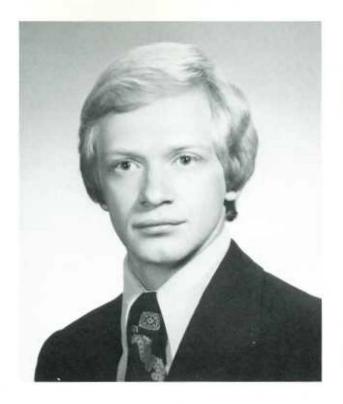
Katherine C. Krause, M.D.
Wellesley College, B.A.
Bryn Mawr College, M.A.



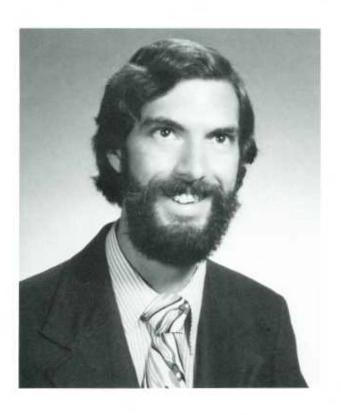
Kathleen A. Kreider Pennsylvania State University, B.S.



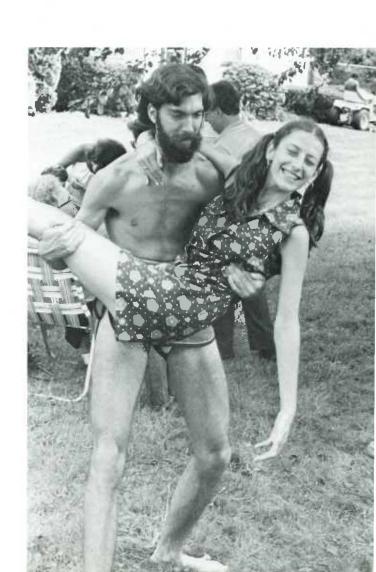
Robert Krupa, M.D. University of Scranton, B.S.

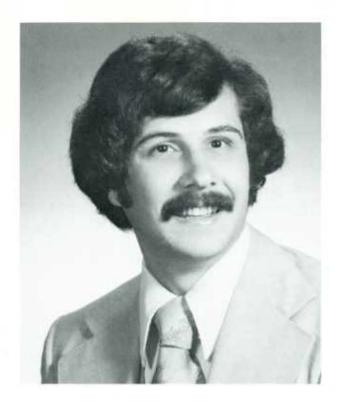


Lawrence M. Kuklinski, M.D. Gannon College, B.S.



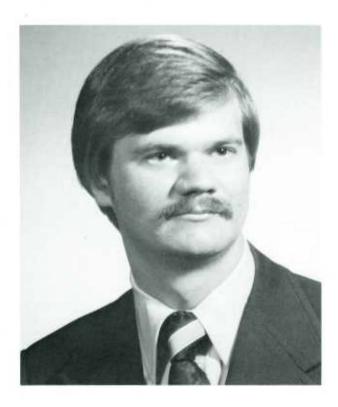
M. David Lauter, M.D.
Johns Hopkins University, B.E.S., M.A.



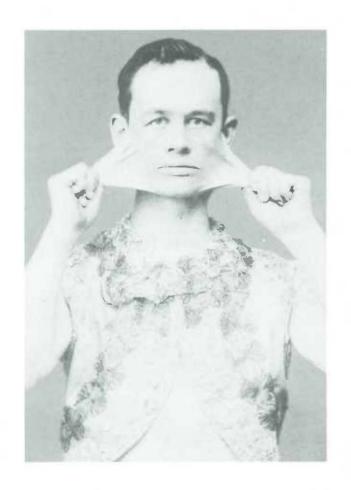


David Michael Lavin, M.D. Houghton College, B.S.



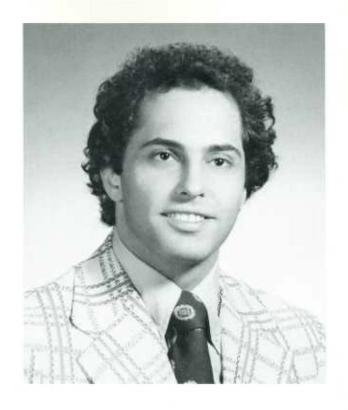


Richard John Lazar, M.D. King's College, B.S.

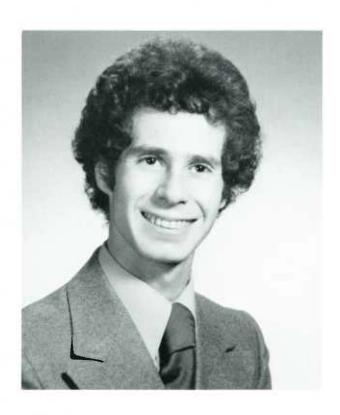




Raymond Bruce Leidich, M.D. Pennsylvania State University, B.S.



Nat Elliot Levinson, M.D. University of Pittsburgh, B.S.



Alfred Levy, M.D. Emory University, B.A.



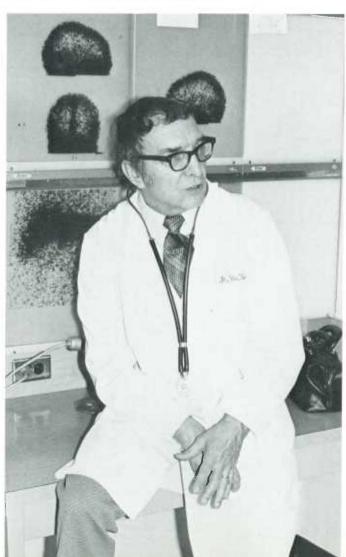
Gaylyn Li-Ma, M.D. Mills College, B.A.

RADIOLOGY

Video Savant



I've been in this business 17 years, and I still can't figure out how they make sense out of all those little black dots.

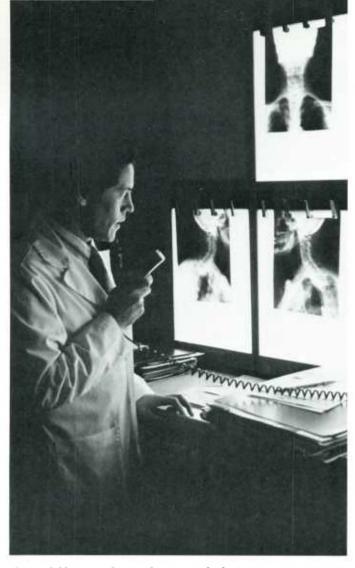


I wonder if he's tried Whisk.



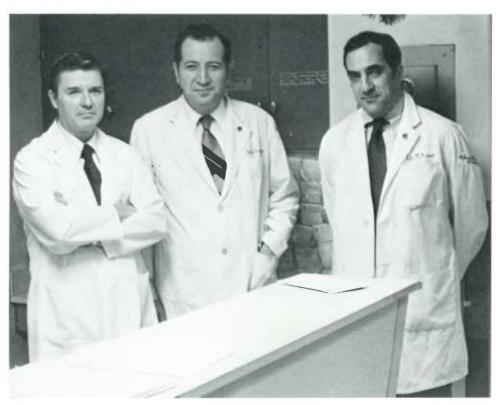
I've heard of airport security, but this is ridiculous.





Cervical films reveal normal uterus and adnexae.

REHABILITATION MEDICINE

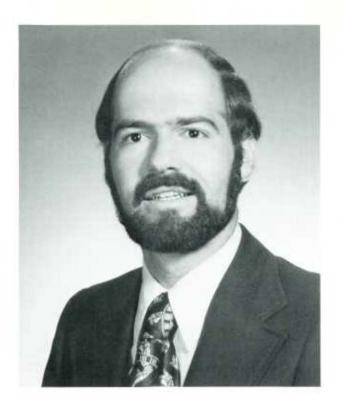


We'll take three pounds of below knee.

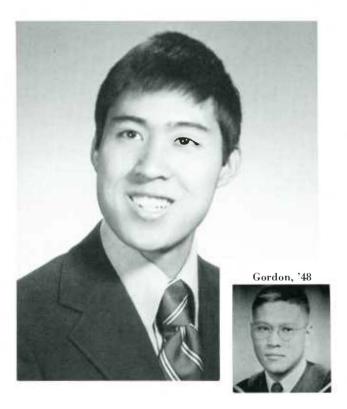


Our legs fit your legs; they hug you, they hold

109



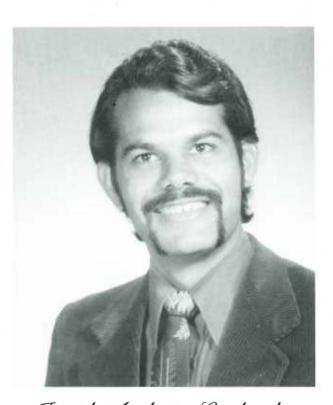
Robert M. Lintz, M.D. Ursinus College, B.S.



Gurtis R. Liu, M.D. Tulane University, B.A.



I'm just a regular guy . . . a ramblin', gamblin' guy.



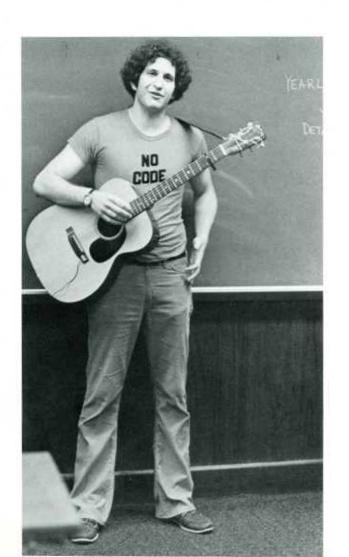
Joseph Anthony Lombardo, M.D. University of California-Berkeley, A.B.



Kimberly R. Long, M.D. Pennsylvania State University, B.S.

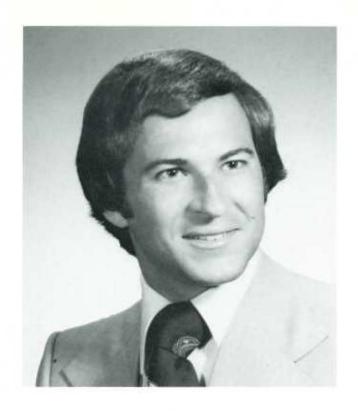


Carol Anne Love, M.D. University of Pennsylvania, B.A.



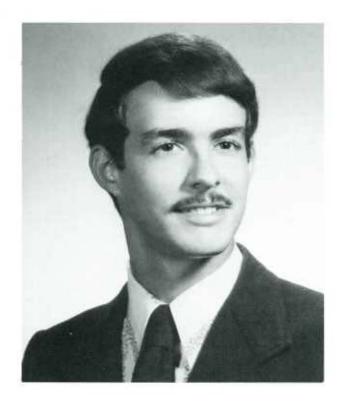


Janice Lupu, M.D. University of Maryland, B.S.



George Michael Lynch, M.D. Pennsylvania State University, B.S.

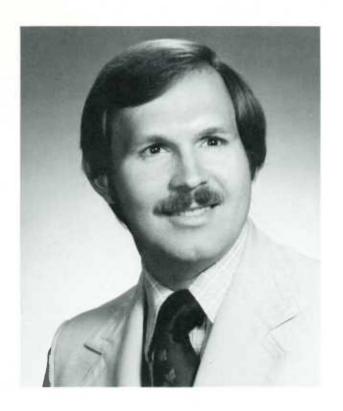




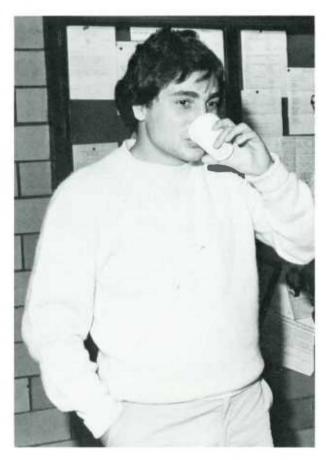
Frank W. Maletz, M.D. University of Pennsylvania, B.S.



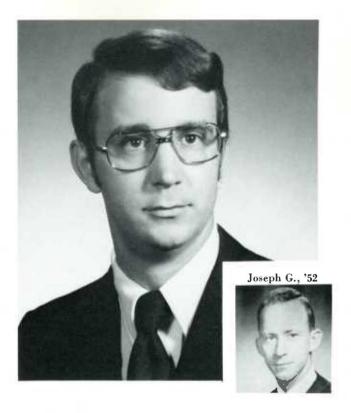
Francis A. Marro, M.D. LaSalle College, B.A.



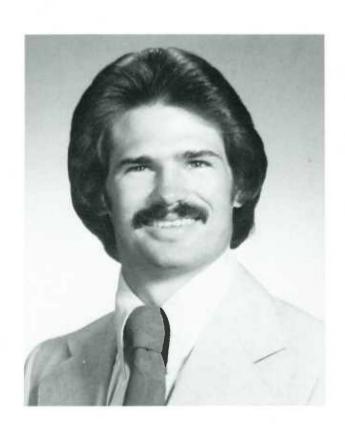
Richard A. Martin, M.D. University of Scranton, B.S.



I wonder where I put that urine sample . . .



Joseph G. Matthews II, M.D. University of South Florida, B.A.

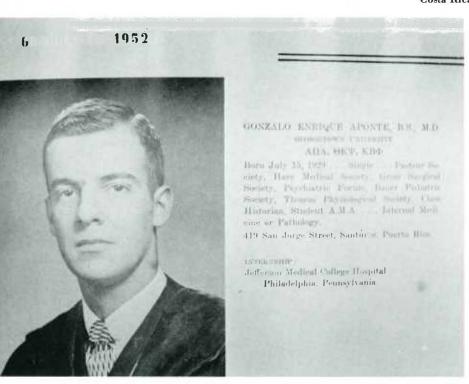


Stephen A. Mayer, M.D. Texas Christian University, B.S.



Pathology

After the Situs Inversus slide will be the one of my vacation to Costa Rica.



sack then even his hairdresser didn't know for sure.



This is a low class Pap smear.

IV-COMPOSITION AND PATHOGENESIS OF AMYLOID DEPOSITS

The elucidation of the chemical rature and pathogenesis of amyloid deposits has lagged far behind the recognition of the clinicopathologic manifestations of the disease. Much has been learned of late, but this knowledge is still incomplete. Therefore, a totally unifying concept of pathogenesis is not yet possible. Studies with X-ray crystallography have shown that amyloid fibrils consist basically of polypeptide chains arranged in anti-parallel conformation. They are insoluble and relatively resistant to proteolytic digestion. About 10% of the fibril consists of glycoprotein, and this moiety has a characteristic appearance when examined with the electron microscope. Serum proteins also may

ride present cumulates as

n to be derived,
n a protein
ma, many
yloidosis) or
dosis?).
sing (fibrilcinoma of
le "processing

to be the fibril is

the light polypeptide chain of an immunoglobulin and/or its amino-acid terminal fragment. In this respect, lambda chains apparently

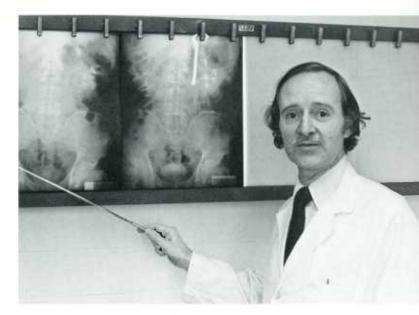
enic has sic c cas ave l mylo

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ndary
hyloid
'immunoin some

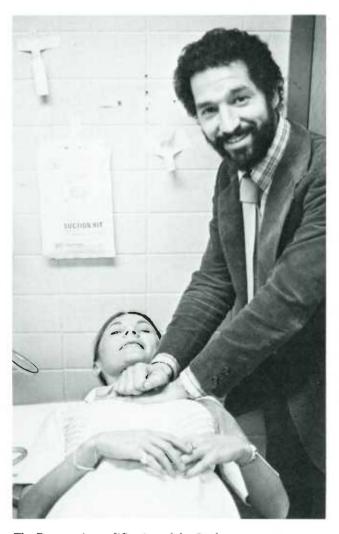
by factors
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ell) and the
result

END OF THE NOTES ON AMYLOIDOSIS

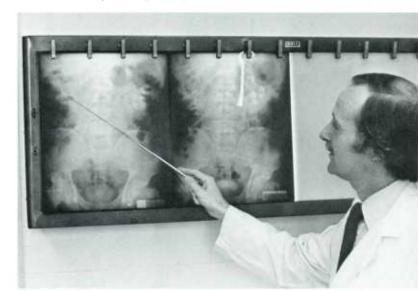


Get on the Schuylkill Expressway here.

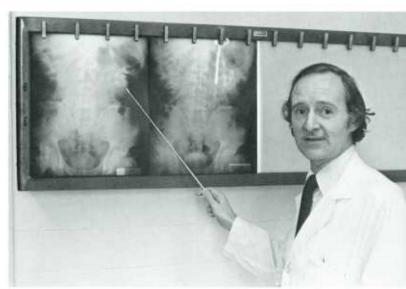
UROLOGY



The Brownstein modification of the Crede maneuver.

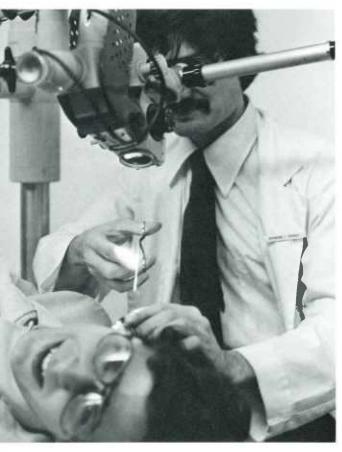


Just below the armpit take a left,



And my house is the third on the right.

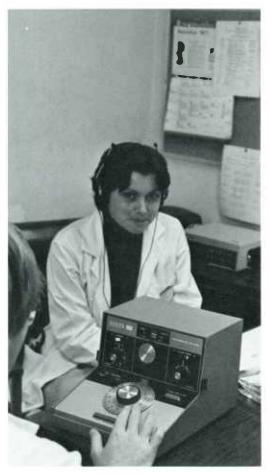
OTORHINOLARYNGOLOGY



I can see China.

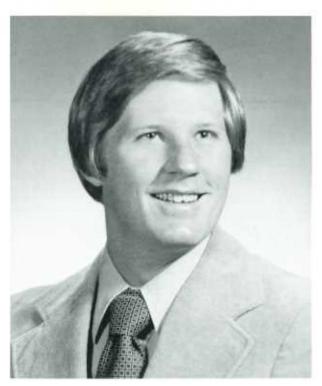


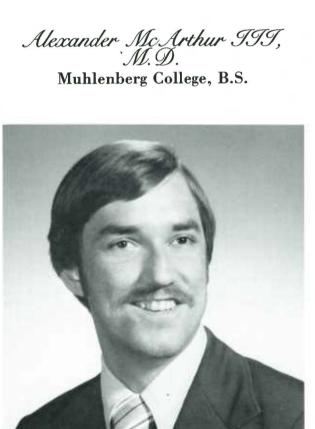
HEENT — WNL (We Never Look).



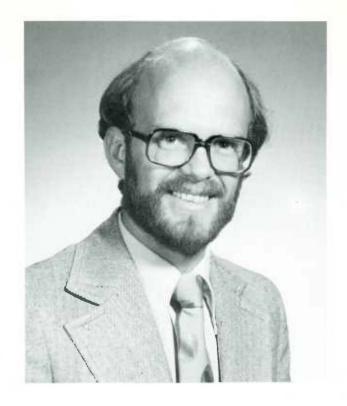
Come in Rangoon . . .



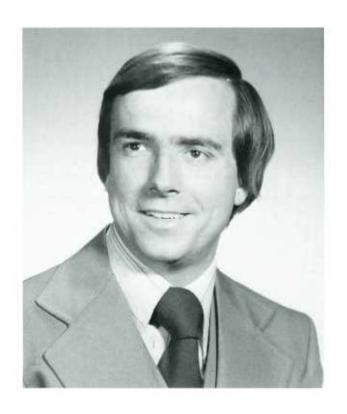




Francis M. Methus, M.D. University of Pittsburg, B.S., M.S.



Robert J. Mead Jr., M.D. Juniata College, B.S.



Thomas S. Methus, M.D. University of Pittsburg, B.S.



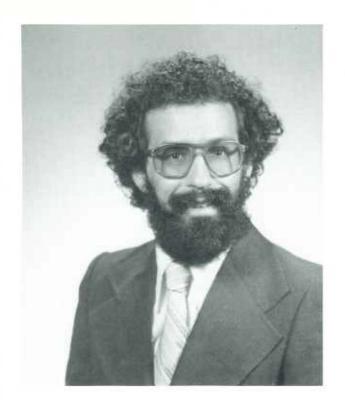
Eric J. Michael, M.D. University of Delaware, B.A.



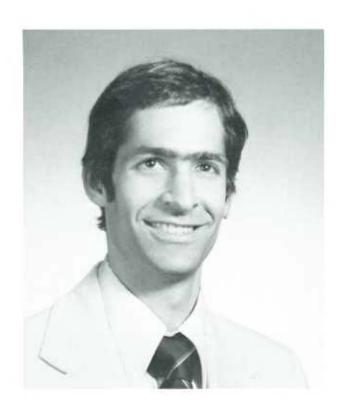
William D. Miller, M.D. Pennsylvania State University, B.A.



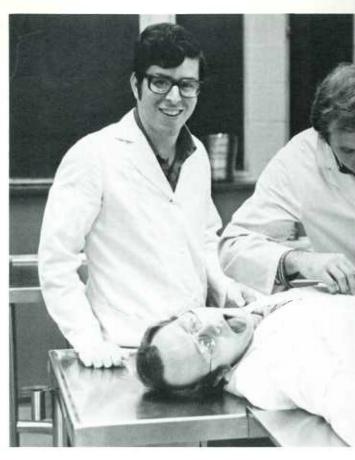
This is my new handout on amyloidosis.



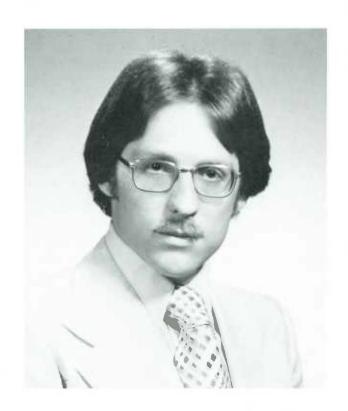
Robert Mogul, M.D. New York University, B.S.



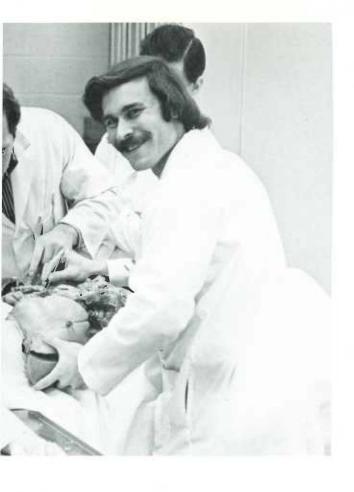
Robert D. Molino, M.D. Harvard University, A.B.

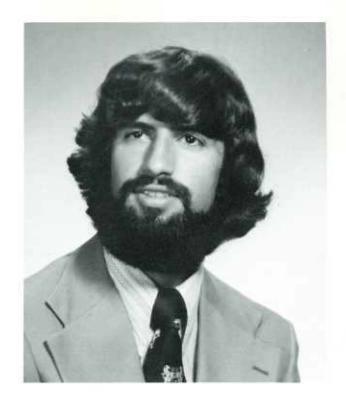


His friends dismember him well

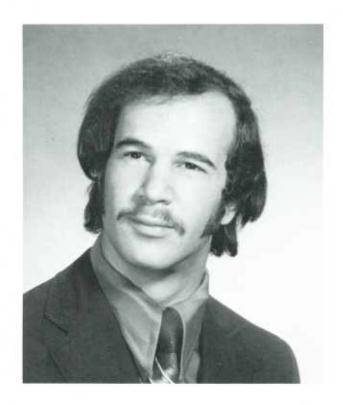


Laul W. Montigney, M.G. University of Delaware B. Ch.E.

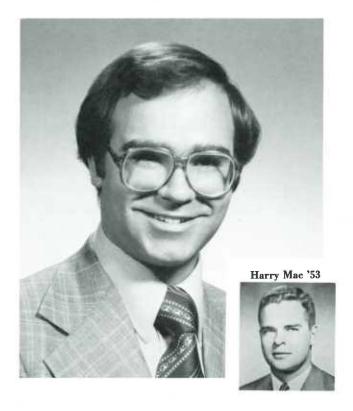




Bruce Erwin Nayowith, M.D. Pennsylvania State University, B.S.



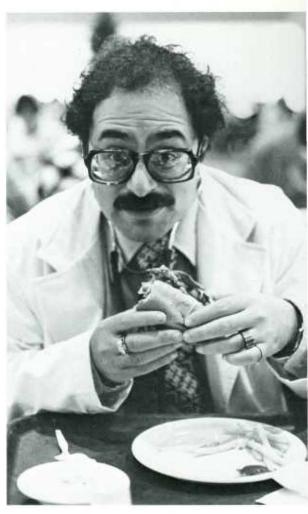
Bruce Z. Morgenstern, M.D. Pennsylvania State University, B.S.



James T. Muffly, M.D. Colorado State University, B.S.

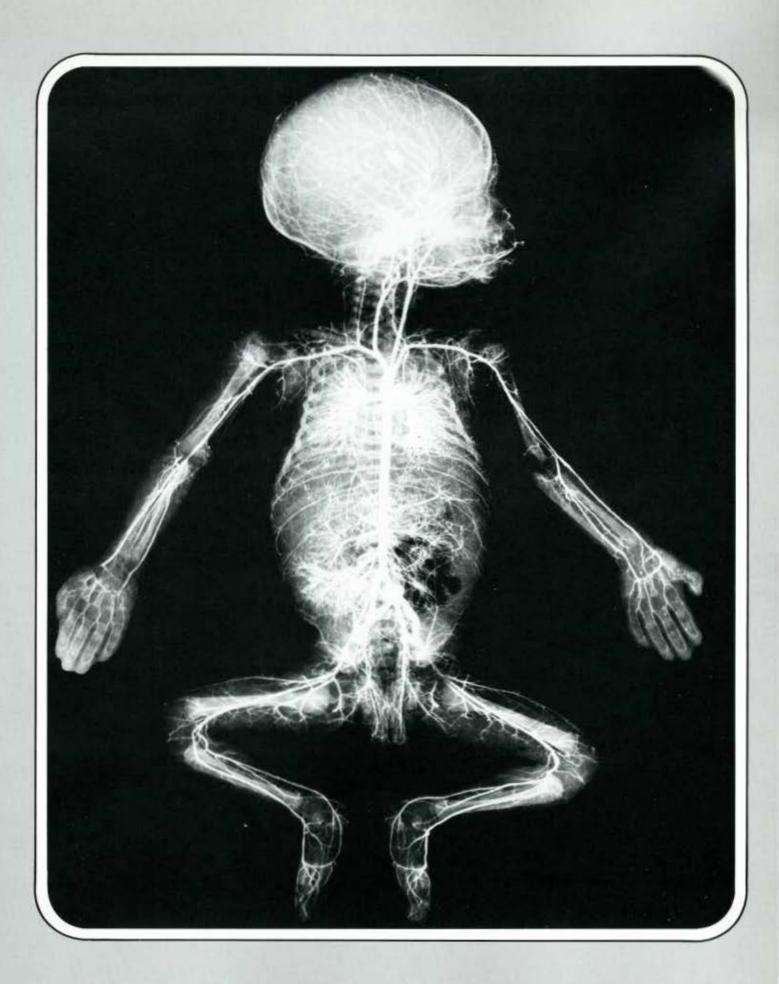


PEDIATRICS



Fetus. What fetus?



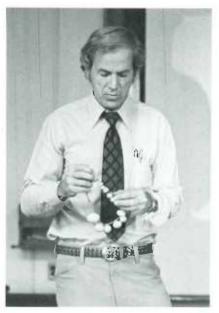








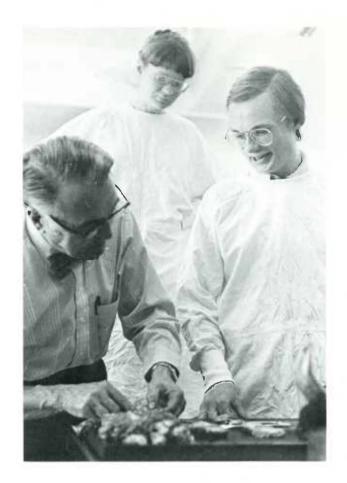






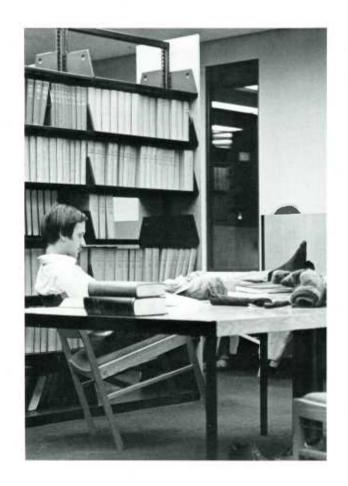


Martin L. Nee, Jr., M.D. Duquesne University, B.A.



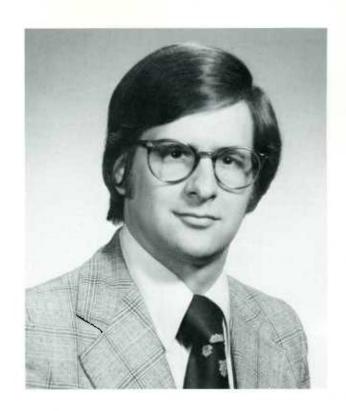


Kenneth Arthur Neifeld, M.D. Temple University, B.A.

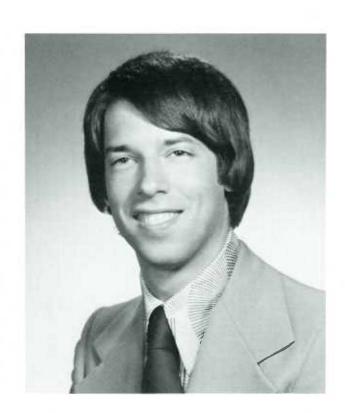




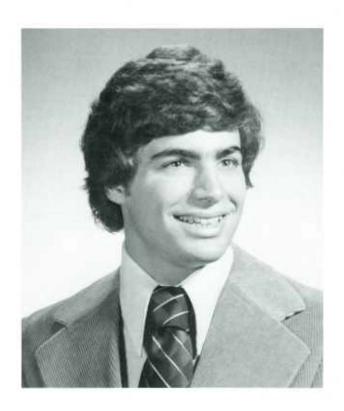
Diane G. Novenski, M.D. Syracuse University, B.A., M.A.



Brent R. Noyes, M.D. Lafayette College, B.S.



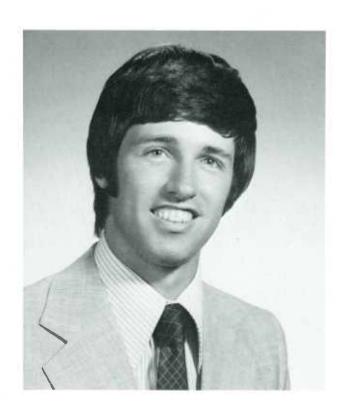
Barry E. Lackman, M.D. University of Pennsylvania, B.A.



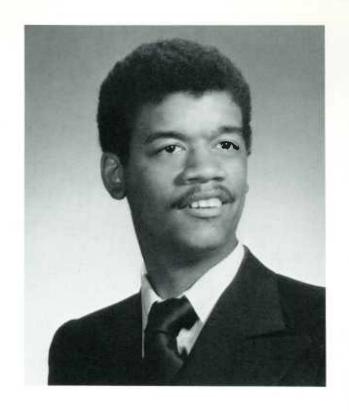
Bob Lee Pansick, M.D. Pennsylvania State University, B.S.



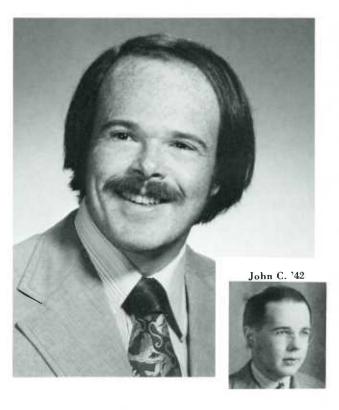
You will notice that the right testicle is undescended.



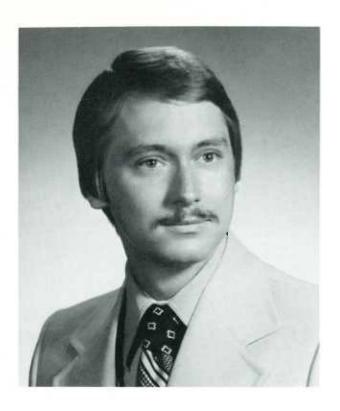
Arthur James Latterson, Jr., M.D. Waynesburg College, B.S.



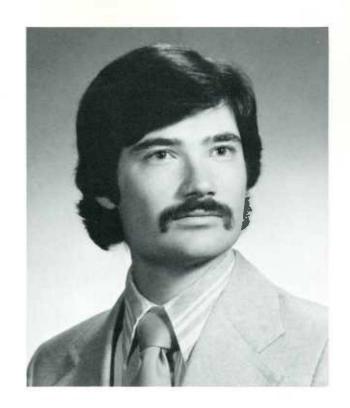
Donald B. Parks, M.D. Temple University, B.A.



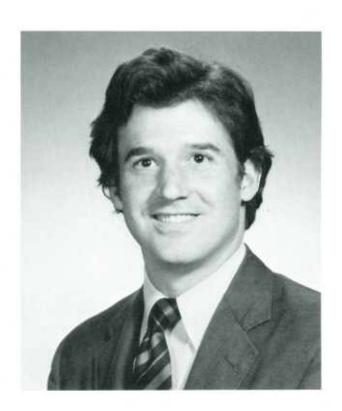
John W. Patterson, M.D. Rutgers University, B.A.



Fred L. Lavlikowski, Jr., M.D. Delaware State University, B.S.

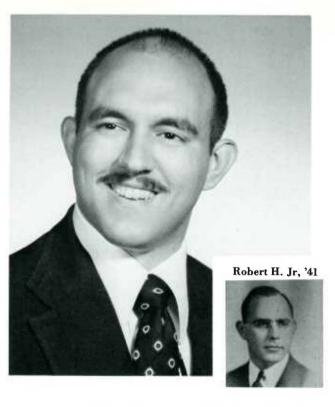


Raymond T. Lekala, M.D. Yale University, B.S.



Clifford H. Lemberton, M.D. Harvard College, B.S.

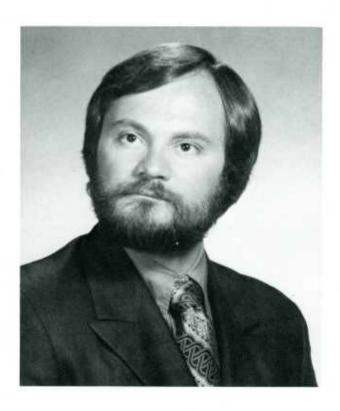




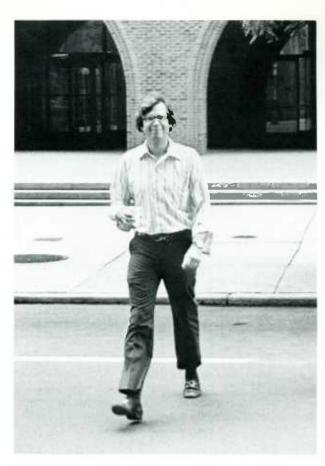
Robert H. Leters, III, M.D.

Muhlenberg College, B.S.

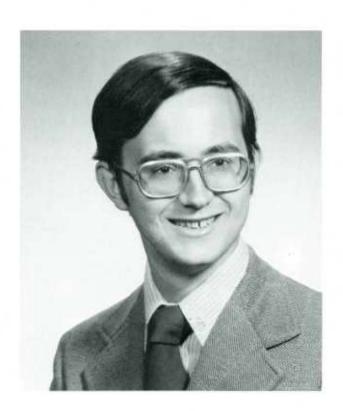
Wilkes College, M.S.



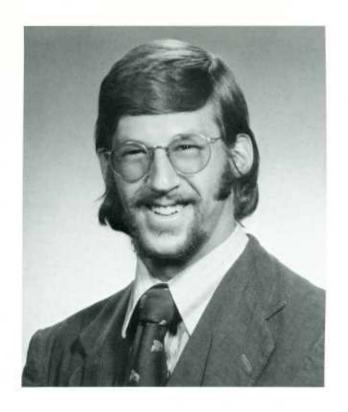
Stanley W. Leters, M.D. University of Pittsburg, B.S.



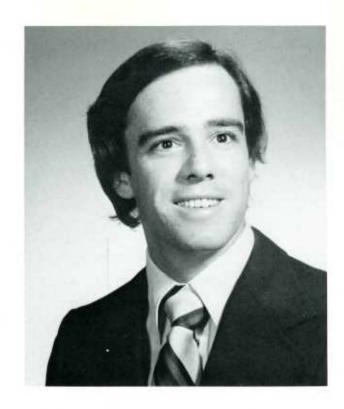
Oh, boy! 35 patients in GYN clinic, and the oldest is 12.



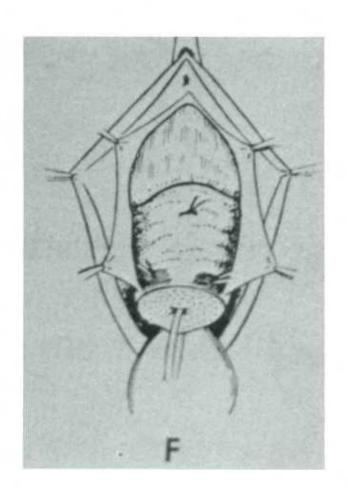
Joseph Anthony Letrozza, M.D. University of Pittsburg, B.S.

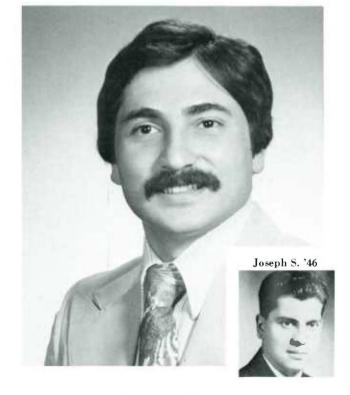


Paul E. Pilgram, M.D.
Pennsylvania State University, B.S.



Almerindo Lortfolio, Jr., M.D. University of Notre Dame, B.S.



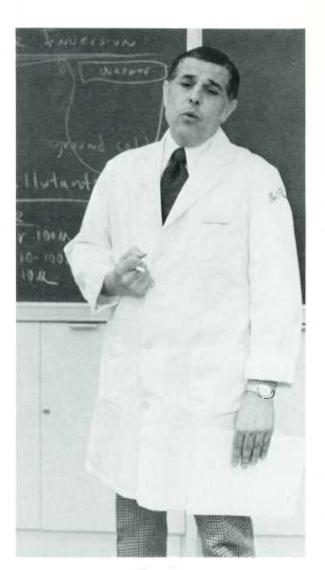


Samuel M. Luleo, M.D. University of Delaware, B.A.

PHARMACOLOGY



This stuff puts hair on your face.



Anyone who flunks toxicology swims with the fishes.



Pharmacology 11/13/75 10 AM Dr. Snyder page 7 of 8

rbital along with a therapeutic drug as effective as long (it will be met-

kin that causes centralobular necrosis) iving a variety of drugs that effected promobenzene as measured by the extent

METABOLIC 1 LIFE OF BROMO-9.8 + .8 min. BENZENE

sive sis

unc'

zen ect

ori

bol

in

of

no necrosis 15.5 ± 1.8 min. 15.5 ± 1.8 min. 15.5 ± 1.8 min.

necrosis 5.5 ± .5 min.

rome P450) and lalf life is

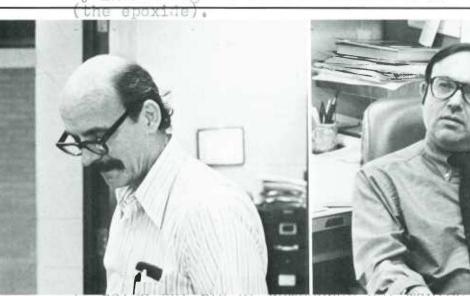
de (toxic meta-

no dramatic becasue a difcts are formed.

tabolized, one crease the toxiproducts or

+50.

by following another metabolic pathway. Or can increase toxicity by increasing the rate of formation of the active intermediate



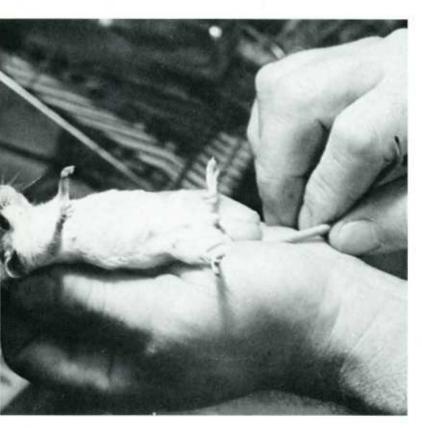
is also to of etabo-bound These cais. ably ctual ibl and that

many

cases is the detoxifying compound,

2. The fact that it will react with so many compounds means that occassionally some compounds will have their toxicity and carcinogenicity increased.

PHYSIOLOGY



Chocolate Mousse (serves six)
Step 1: Pull off tail
Step 2: Drench with darkest chocolate
Step 3: Beat until fluffy
Step 4: Anticoagulate and serve warm



Male pattern baldness on a rabbit.



I don't care if his name was Morris.

Steroid Metallism 2 3-7-75 10-11 page 3 of %

ing level of estriol indicates abnormal on of placenta or fetus. quantitative assay of urinary estriol is a idex of the viability of the fetus. ocedure is used extensively in diabetic cies, which have a high incidence of com-

radiol (H6 top, also check H2 bottom right) metabolized and inactivated by the liver and bil

ele urinary metol conjugated with

teroid since it ring A. The acidic on from the neutral lic end products of

tives in the liver.

t undergo metabolic ens accumulate hen transported

in some human

east cancer have the removal of es.

receptors in these

ncies does not guarantee a favorable response procedure.

Steroid creted by CL in an adult non-pregnant woman om above that it comes from placenta during

roduce progesterone as an intermediary in the er steroid hormones, but they only secrete

ation is very low in non-pregnant women, but ses during pregnancy (remember placental

inactivated in the liver, metabolic endcreted in both bile and urine. tabolite.

ous progesterone production.

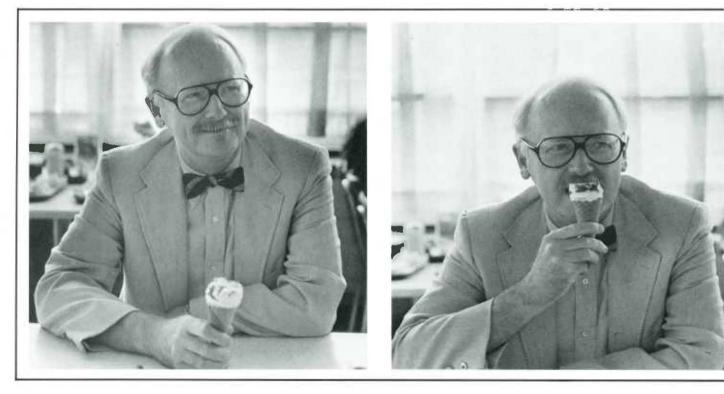


est

ate

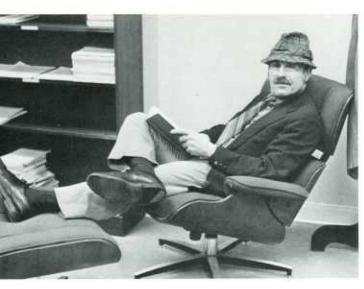
rms

ic



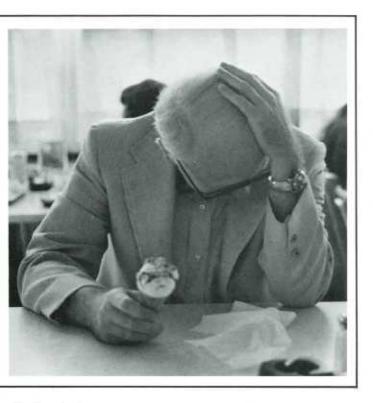
Those are the most pornographic pictures I've ever seen.

Who drew those anyway? (chomp)

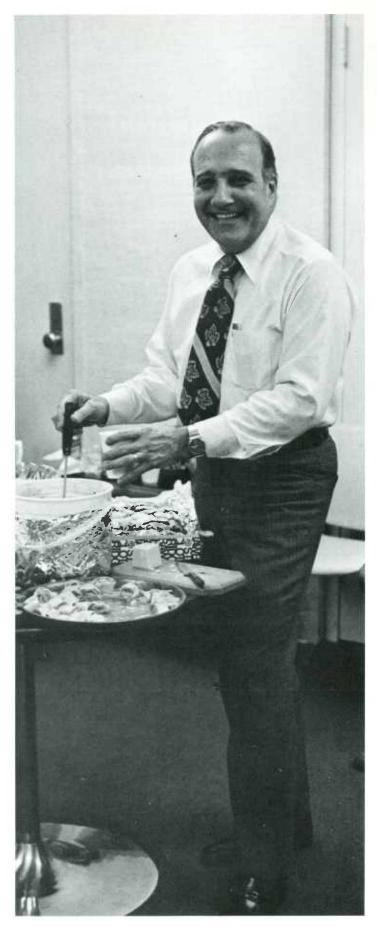


No, I'm not the discoverer of REM sleep. I made the M $\&~\mathrm{S}$ final.

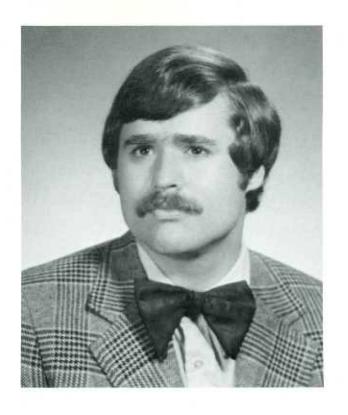
PSYCHIATRY



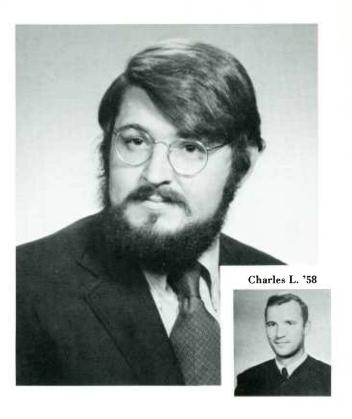
Oh, Rorschach.



He can dish it out, but can he take it?



David M. Reed, M.D. Tufts University, B.S., M.S.



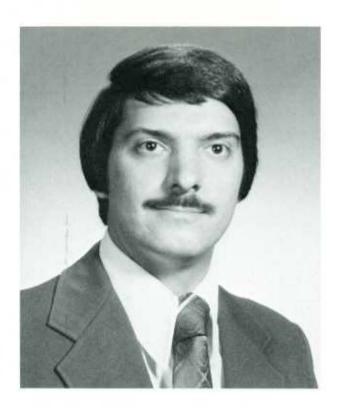
Charles L. Reese, TV, M.D. Princeton University, A.B.



Ann E. Reilly, M.D. Rosemont College, B.A. Bryn Mawr College, M.S.



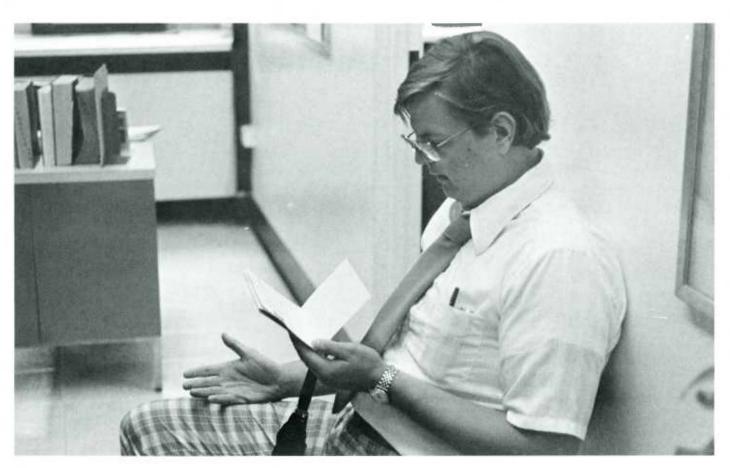
Jean G. Riley, M.D. Pennsylvania State University, B.S.



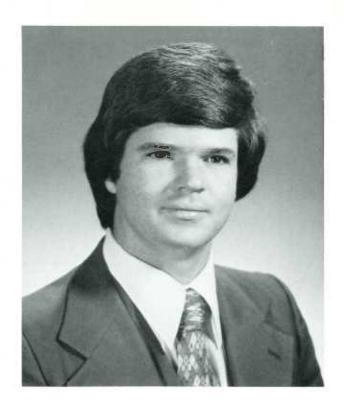
Albert A. Rizzo, M.D. Johns Hopkins University, B.A.



Jeffrey B. Robin, M.D. Pennsylvania State University, B.S.

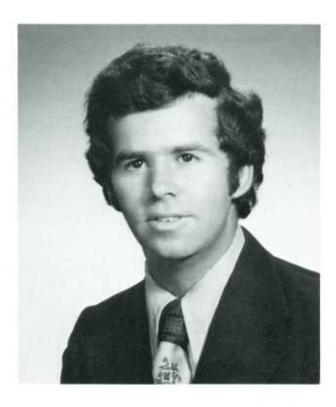


You mean I didn't even match at Mercy Catholic Medical Center?

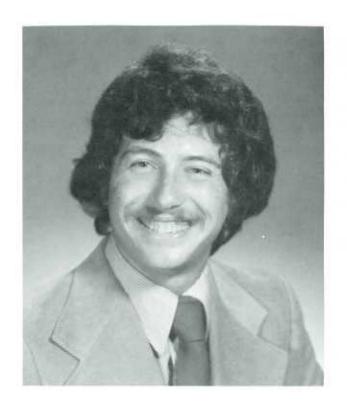


Richard W. Robinson, M.D. St. Joseph's College, B.S.

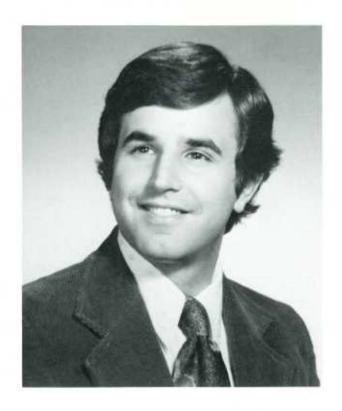




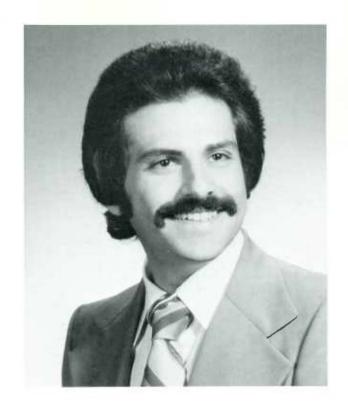
Warren L. Robinson, Jr., M.D. Ursinus College, B.S.



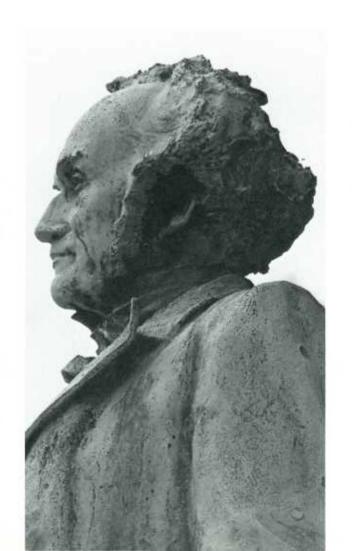
Marc K. Romisher, M.D. Pennsylvania State University, B.S.

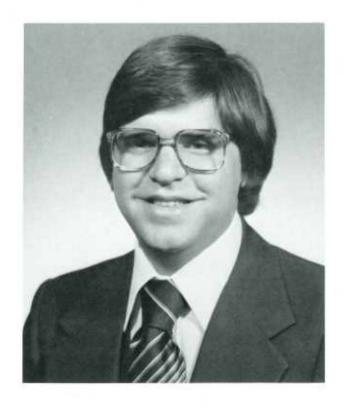


Kenneth C. Rosenberg, M.D. Yale University, B.A.

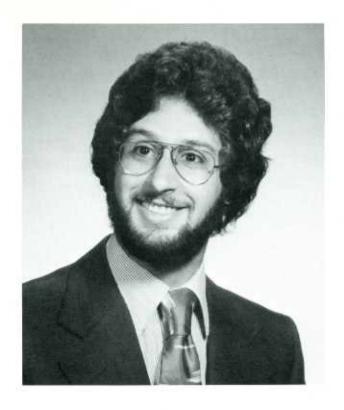


Harry M. Rosenblum, M.D. Rutgers University, B.A.

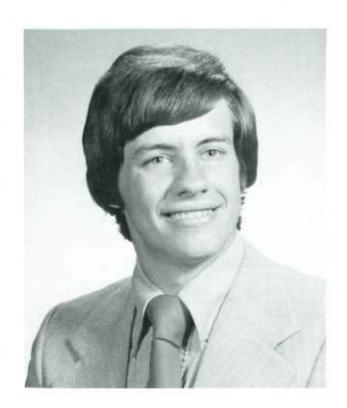




Norman Glenn Rosenblum, M.D. Villanova University, B.A., M.S. Thomas Jefferson University, Ph.D.



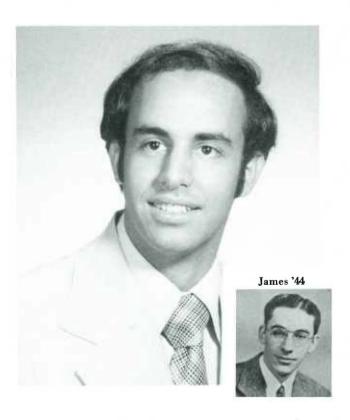
Norman R. Rosenthal, M.D. Pennsylvania State University, B.A.



Randall W. Rowand, M.D. Franklin and Marshall College, B.A.



When Norm Cohen tells a joke, everybody laughs.

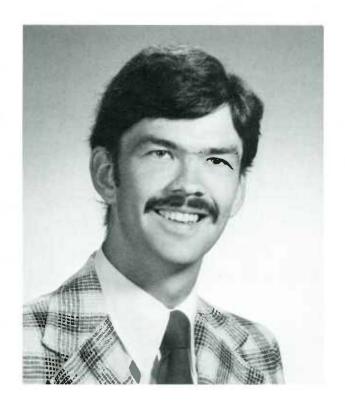


Michael Laul Russo, M.D. Franklin and Marshall College, B.A.

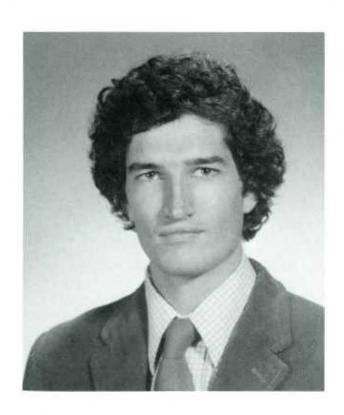




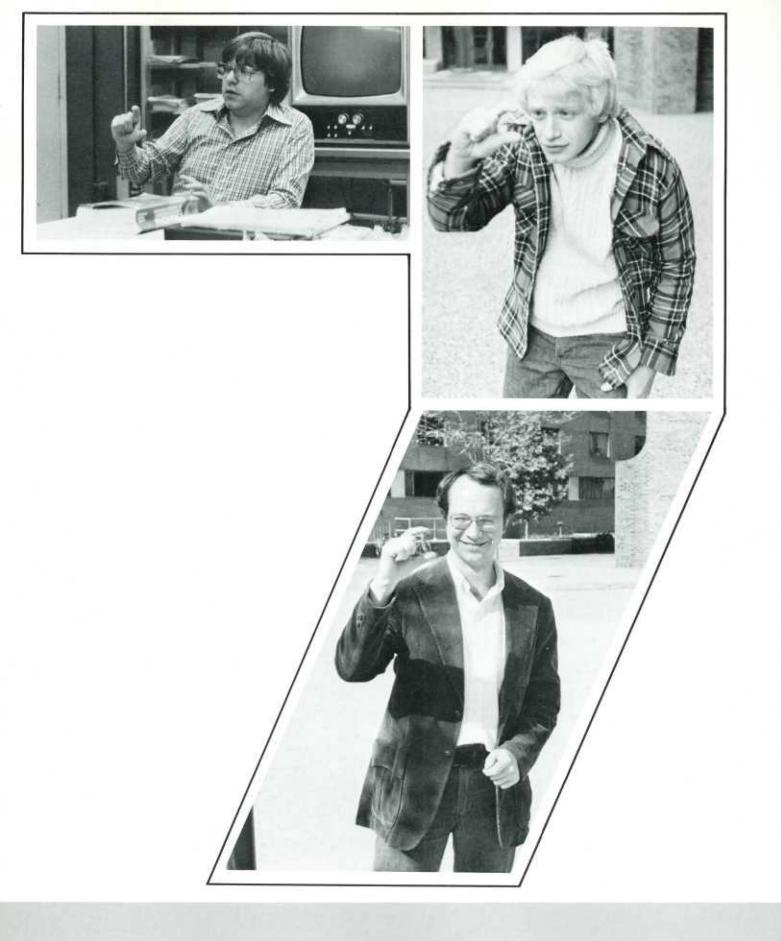
Boris J. Sawula, M.D. St. Joseph's College, B.S.



Timothy M. Ryan, M.D. University of Notre Dame, B.S.

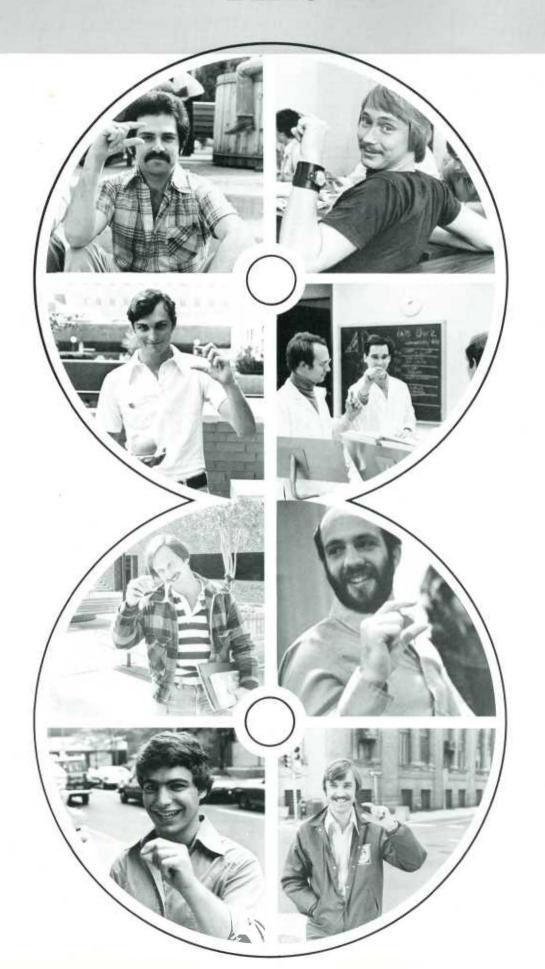


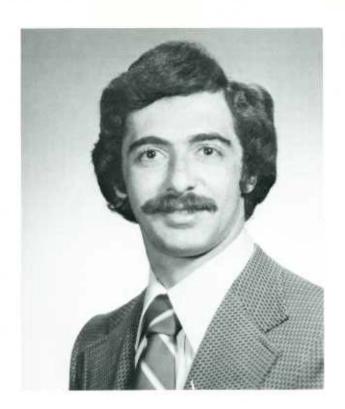
Duncan Salmon, M.D. Trinity College, B.A.



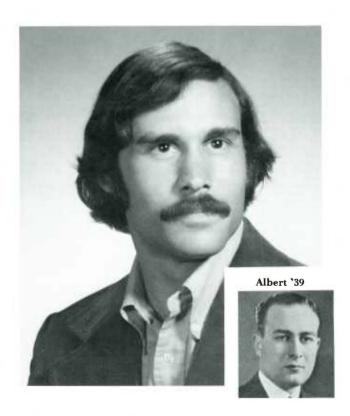
MINE IS

THIS BIG





Jerome G. Scavone, M.D. University of Scranton, B.S.



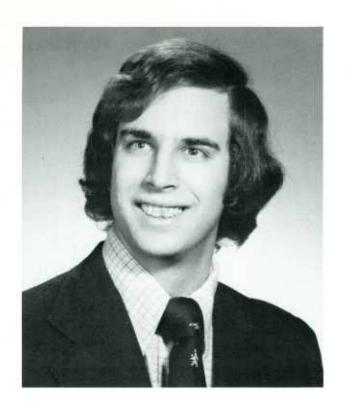
Mark F. Schiowitz, M.D. Franklin and Marshall College, B.A.



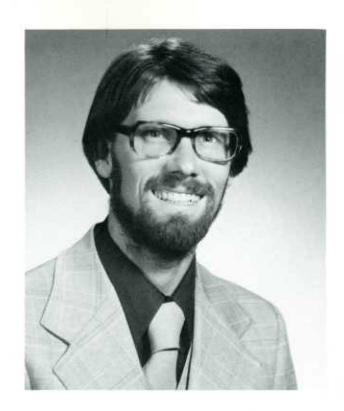
Roxie Ann Schell, M.D. University of Delaware, B.A.

By Jove, Dr. Mackowiak; you DID get Jack Daniels into the hospital Formulary!

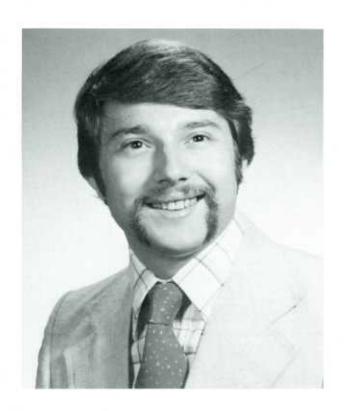




David Louis Schutzman, M.D. Haverford College, B.S.



Thomas B. Scott, M.D.
Pennsylvania State University, B.S.

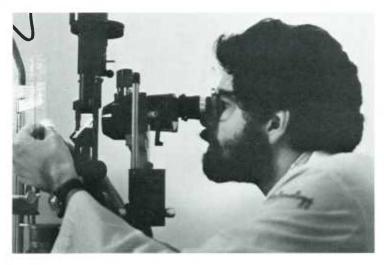


Alan Jeffrey Sears, M.D. Pennsylvania State University, B.S.

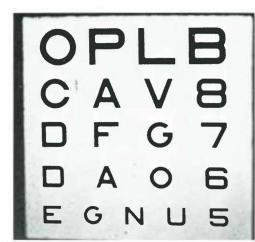


Nancy H. Sherman, M.D. Temple University, B.A.

Ophthalmology



F u cn rd ths u cn gt a gd jb s n optmtrst







Bang! You're dead.





Your vitreous is in bad humor.





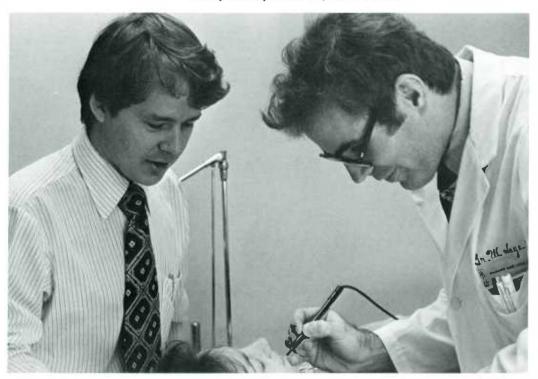
CPK 118

DERMATOLOGY

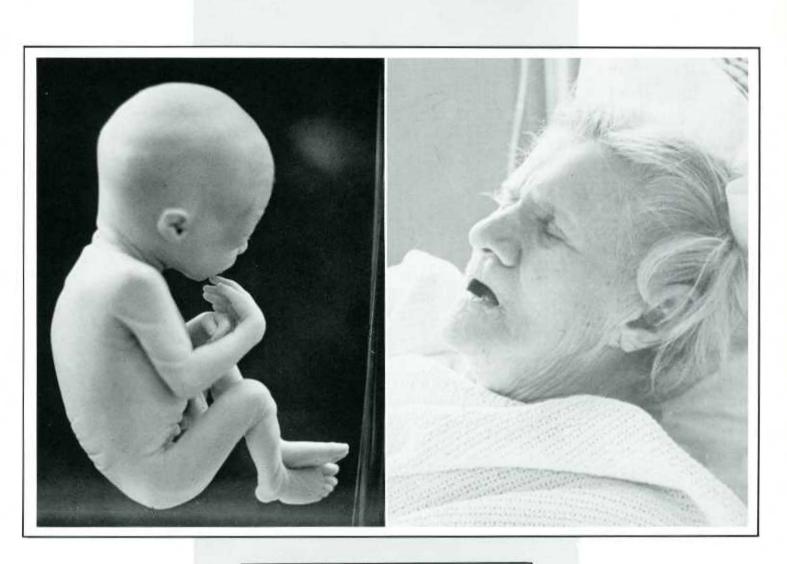




I already took my blouse off; this is a tattoo.

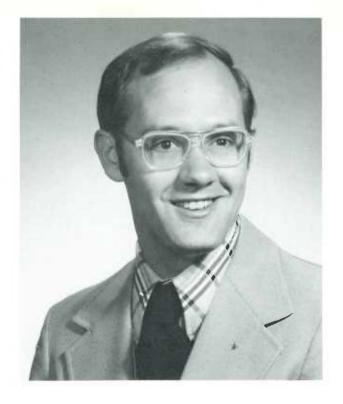


I always sign my work.

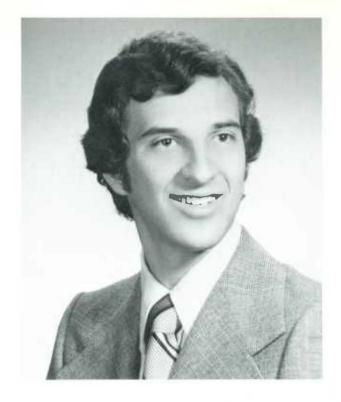


We shall not cease from exploration
And the end of all our exploring
Will be to arrive where we started
And know the place for the first time.

— Thomas Sterns Elict



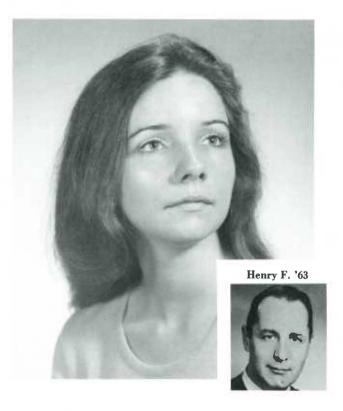
Scott Daniel Shumaker, M.D. Pennsylvania State University, B.S.



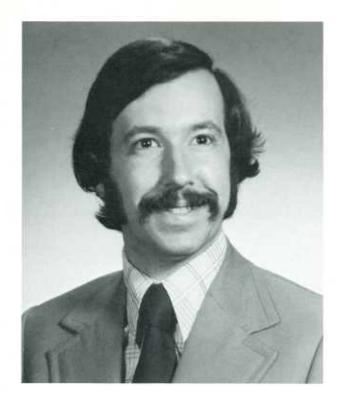
Neil H. Shusterman, M.D. Pennsylvania State University, B.S.



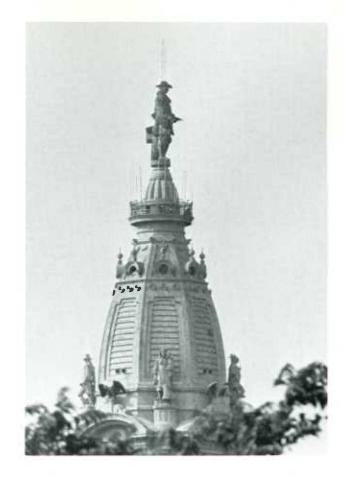
Rathryn M. Sipple, M.D. Pennsylvania State University, B.S.



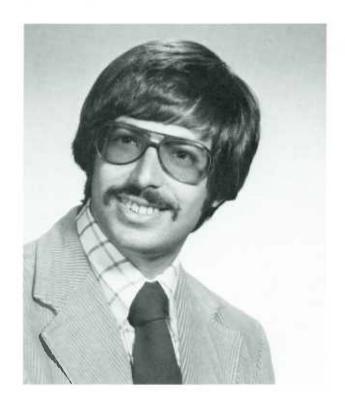
Ellen K. Smith, M.D. Trinity College, A.B.



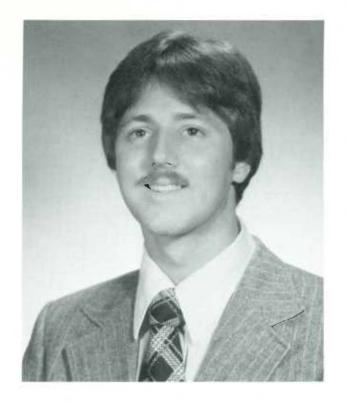
Tra U. Smith, M.D. Franklin and Marshall College, B.A.







Graig R. Smolow, M.D. Pennsylvania State University, B.S.



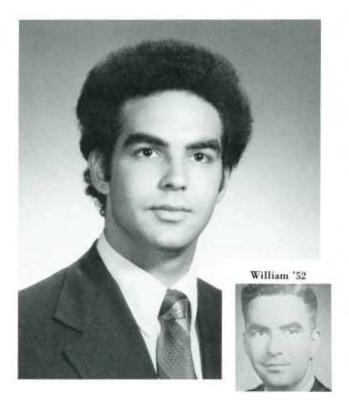
Ronald David Springel, M.D. Muhlenberg College, B.S.



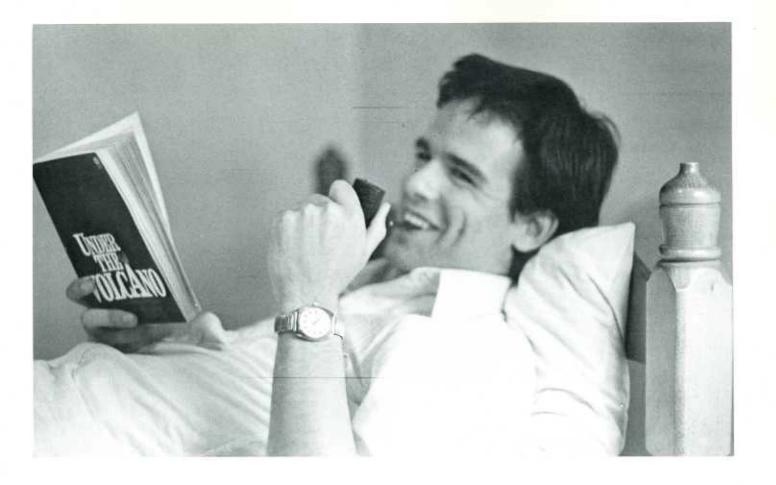
Janice Starsnic, M.D. Pennsylvania State University, B.S.

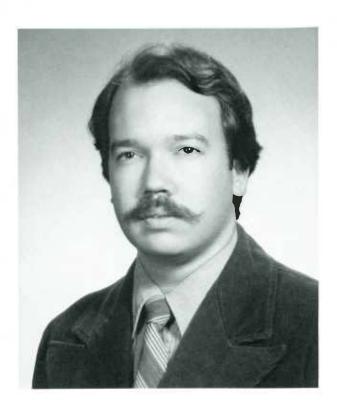


Congenital torticollis



David W. Stepansky, M.D. Pennsylvania State University, B.S.

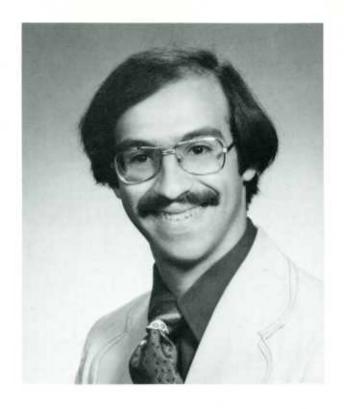




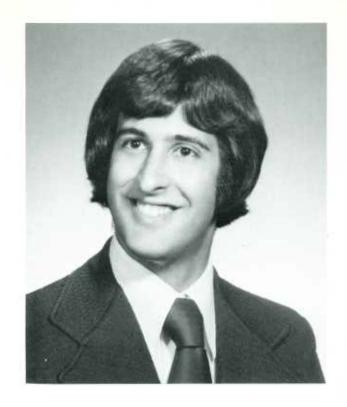
Charles Daniel Stutzman, M.D. University of Pittsburgh, B.S., M.S.



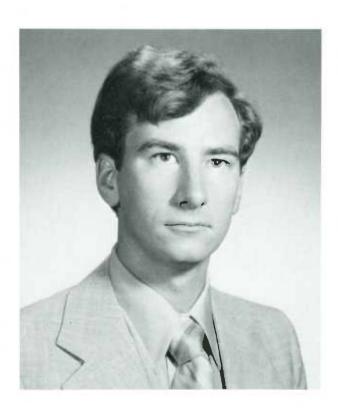
Jill Michelle Sumfest, M.D. Pennsylvania State University, B.S.



Marc Joan Surkin, M.D. Muhlenberg College, B.S.



Thomas S. Talamo, M.D. University of Notre Dame, B.S.



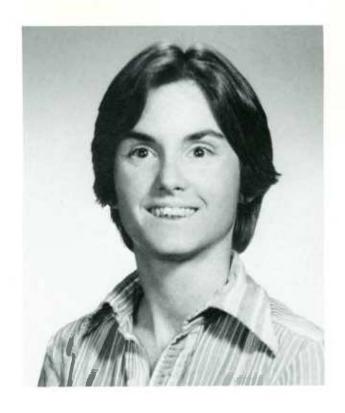
R. Blair Summersgill, M.D. Washington and Jefferson College, B.A.



"The ugliest of trades have their moments of pleasure."

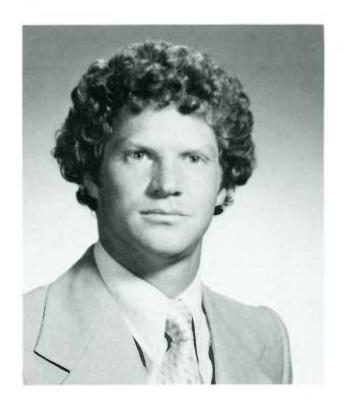


Fred Teichman, M.D.
Cornell University, B.S.

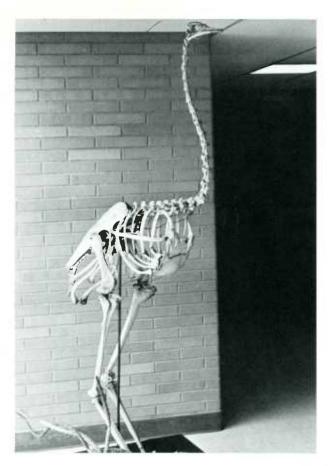


Helen Lage Ting, M.D.
Smith College, A.B.
University of Hawaii, M.A.

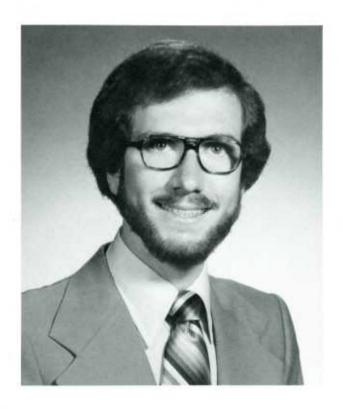




Edmund G. Topilow, M.D. Lafayette College



All right, who ate Big Bird?



David Haskell Trump, M.D. Albright College, B.S.



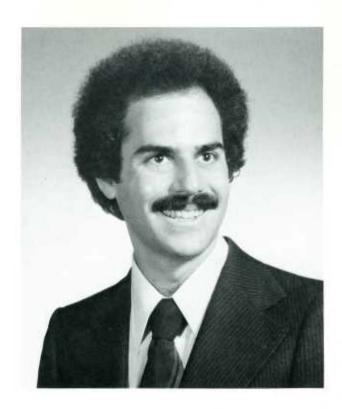
Dale Garolyn Tucker, M.D. Drexel University, B.S.



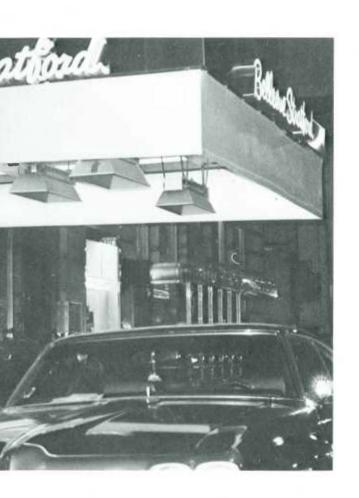
H.U.P.'s new Pulmonary Rehabilitation Center.

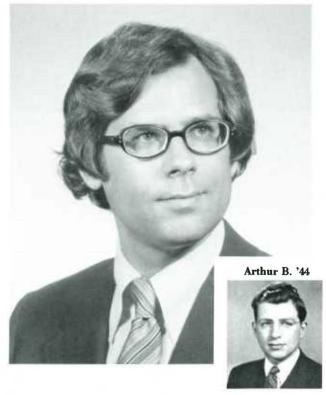


Marie Olivia Uberti, M.D. St. Joseph's College, B.S.



Bernard Lee Ullman, M.D. University of California — Los Angeles, B.A.





Gregory A. Van Gundy, M.D. Kenyon College, B.A.

SURGERY



Pull on that retractor, Goddammit!



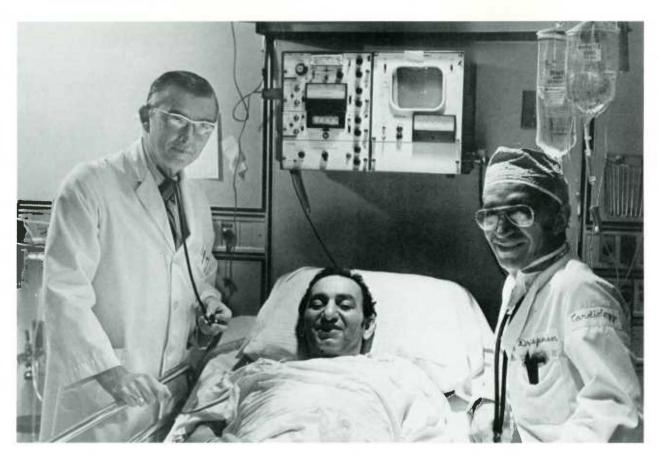
You may cut with impunity.



I always write progress notes with my index finger.



I'm becoming quite attached to this.



"It began one day last January when I was standing in McGinnis' Bar on Broadway, engulfing a slab of the world's richest cheesecake and suffering the guilty, cholesterolish hallucination that I could hear my aorta congealing into a hockey puck." Reflections on lipid metabolism by Woody Allen



Honor pricks me on. Yea, but how if honor prick me off when I come on? how then? Can honor set to a leg? No. Or an arm? No. how about a clavicle? Mayhaps. Or take away the grief of a wound? No. Honor hath no skill in surgery, then? No. What then doth hath surgery if honor hath it not? No. What is honor? It is most certainly not the making of huge amounts of money and the driving around in a Mercedes-Benz. No. Honor ith a word. Yea, what is that word honor? Thou hadst better know it; for it appeareth with frequency and dysuria on the boards.

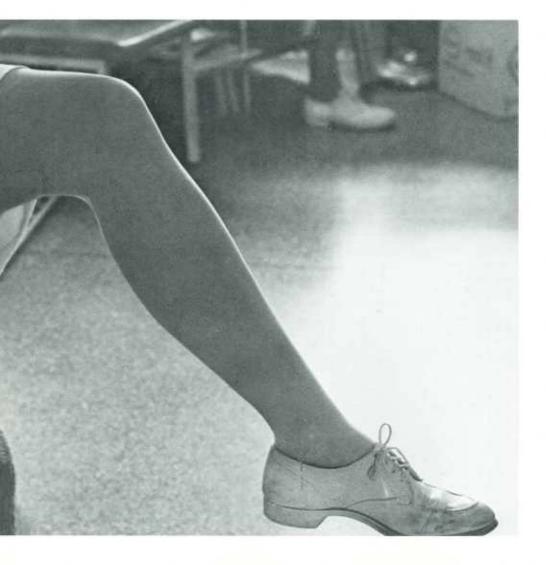
With apologies to Willie Shakespeare

My clothes don't have to match. I'm a surgeon.



A chirurgien should have three dyvers properties in his person. That is to saie, a harte as the harte of a lion, his eyes like the eyes of a hawke, and his handes the handes of a woman.

— John Halle, 1550





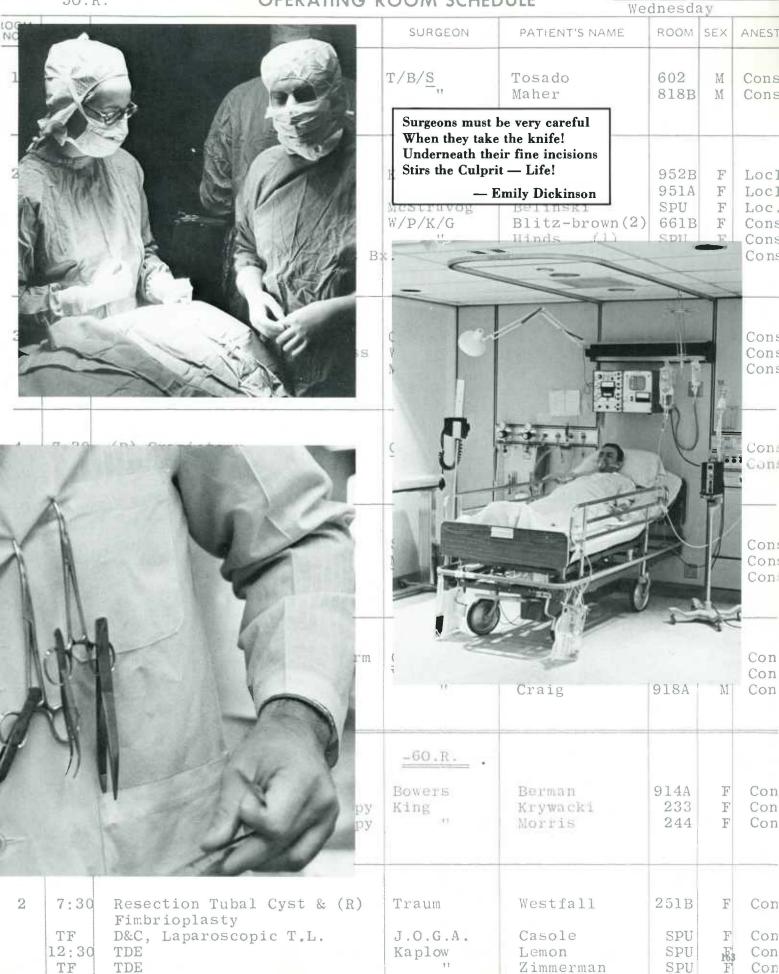
Lister?

OR-H-1 50.R.

Thomas Jefferson University Hospital

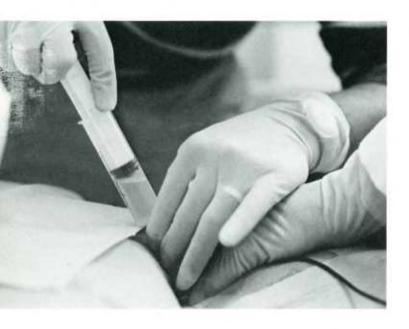
OPERATING ROOM SCHEDULE

DATE Jan. 11, 1977



Chiefly the mold of a man's fortune is in his own hands.

— Francis Bacon







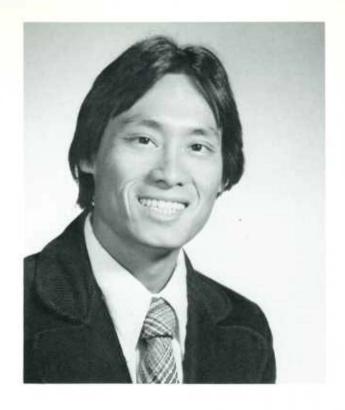




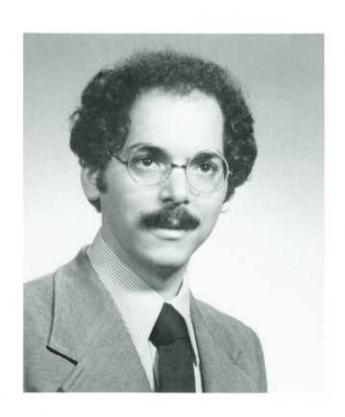




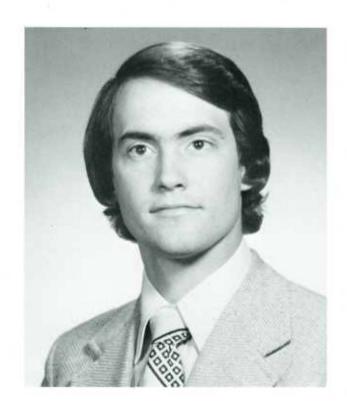
Bruce Van Shark, M.D. School of Fish, B.A.



Chi-Lun Wang, M.D. University of Delaware, B.S.



Howard H. Weitz, M.D. Muhlenberg College, B.S.

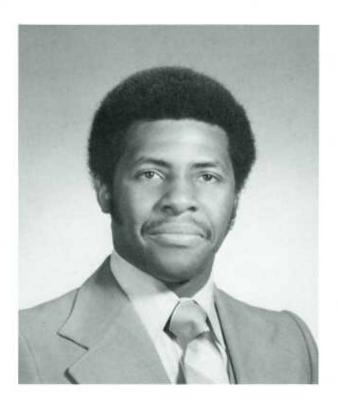


Christopher H. Wendel, M.D. Georgetown University, B.S.

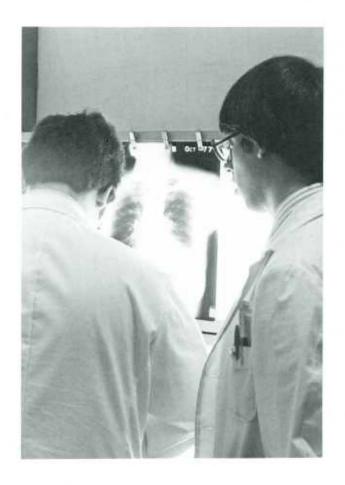


Eric J. Werner, M.D.
Trinity College, B.S.





Michael J. Wiley, M.D. Michigan State University



The History of the Hospital

It was a rainy September, 1877. The Phillies had just blown another pennant. Coca-Cola still contained Cocaine. and half the people in the U.S. were either male or female. Death stalked the land. Uriah McClellan, aghast at the havoc which this dread scourge was wreaking resolved to improve the lot of Philadelphia's unfortunates. Camden was full, so he started a meager infirmary above his Kosher Deli on 10th and Samson. So popular was his infirmary, that he soon opened a second above his haberdashery on 10th and Walnut.

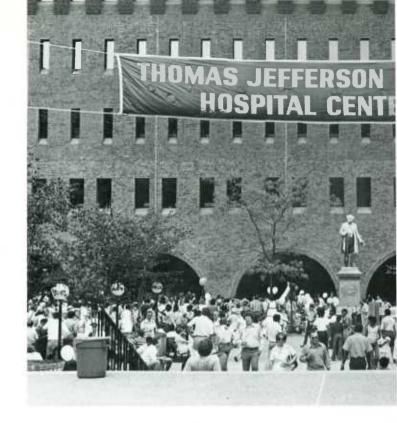
The great waves of Tsutsugamushi fever and the Yaws which overwhelmed the morgues of the last century were grist to his mill. Some claimed that his belfry was one seething mass of bats, but McClellan was a man with a dream.

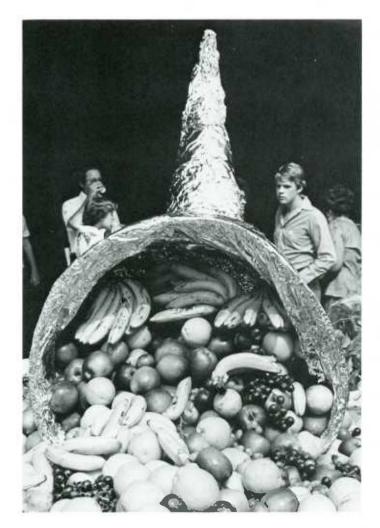
His hospital grew apace, soon expanding to occupy the abandoned sheep-dip works which became the present hospital. McClellan's hospital prospered thanks to his innovation of using readily available medical students to perform all scut work, a system so ingenious it persists to this day.

His standards of excellence attracted such luminaries as Samuel Gross, John Gibbon, Chevalier Jackson, Francis Bacon, J. Marion Sims and Grover Cleveland's jaw. The hospital mushroomed to the mecca it is today. Build a better mouse trap, and the world will beat a path to your door. Build a bigger rat maze, and you can call it Jefferson Hospital.

Happy Birthday.





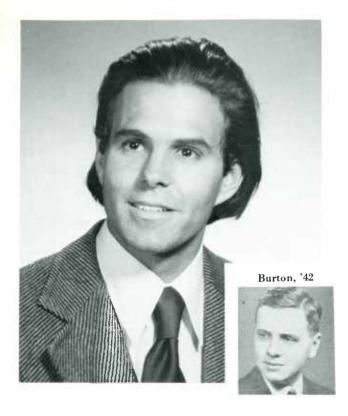






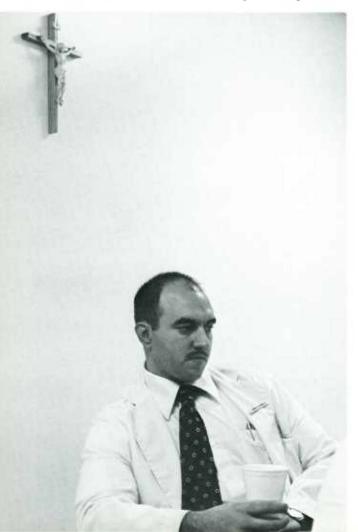






Burton Jeffrey Williams, M.D. University of Virginia, B. of Arch.







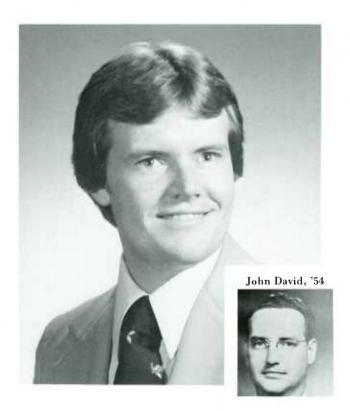
Linda C. Wilson, M.D. University of Delaware, B.S.



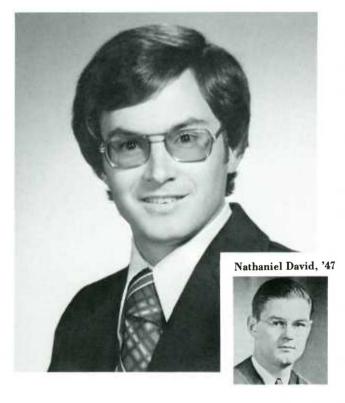
Eric H. Witte
Pennsylvania State University, B.S.



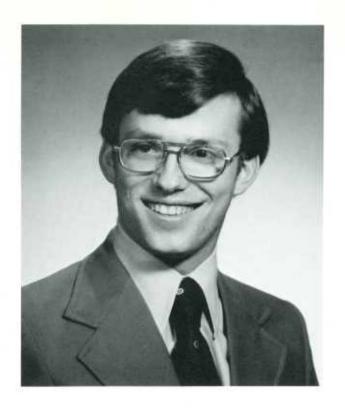
I haven't had a bite all day.



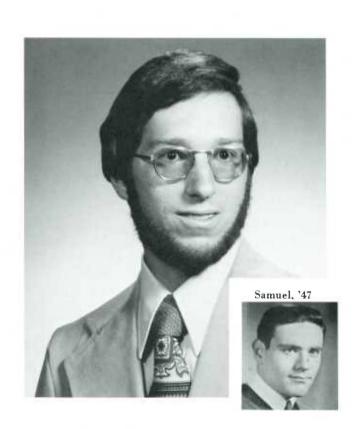
John D. Wofford, Jr., M.D. Millsaps College, B.S.



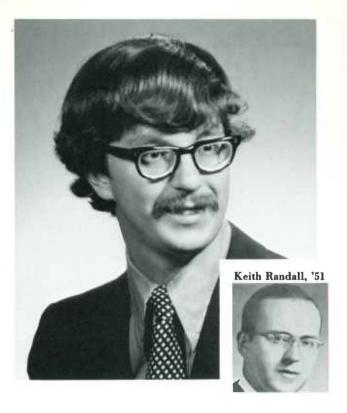
Douglas B. Yingling, M.D. Gettysburg College, B.A.



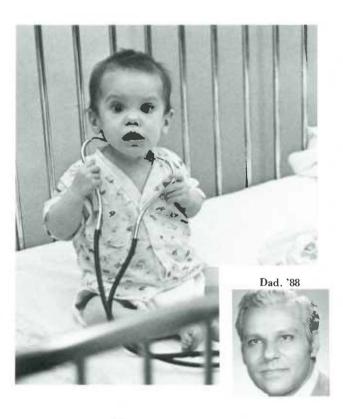
Frank James Yohe, M.D. Eastern College, B.A.



Joel B. Younger, M.D. University of California-Santa Cruz, B.A.



Keith R. Young, Jr., M.D.
Massachussetts Institute of Technology,
B.S.

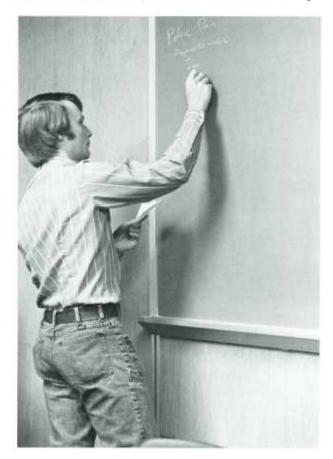


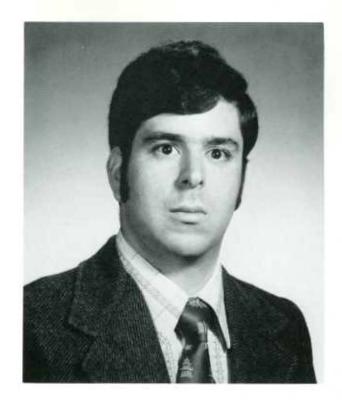
Ime D. Youngest, M.D.

Montessori School

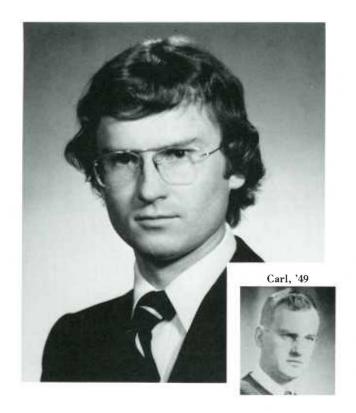


Who sees with equal eye, as God of all, A hero perish, or a sparrow fall, Atoms or systems into ruin hurled, And now a bubble burst, and now a world. Alexander Pope

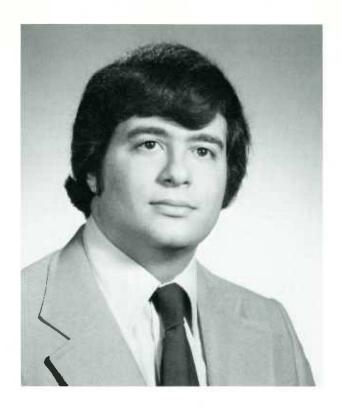




Victor Aaron Zachian, M.D. Villanova University, B.S.



Garl N. Zenz, M.D. University of Wisconsin, B.A.



Neal Jason Zimmerman, M.D. Pennsylvania State University, B.S.



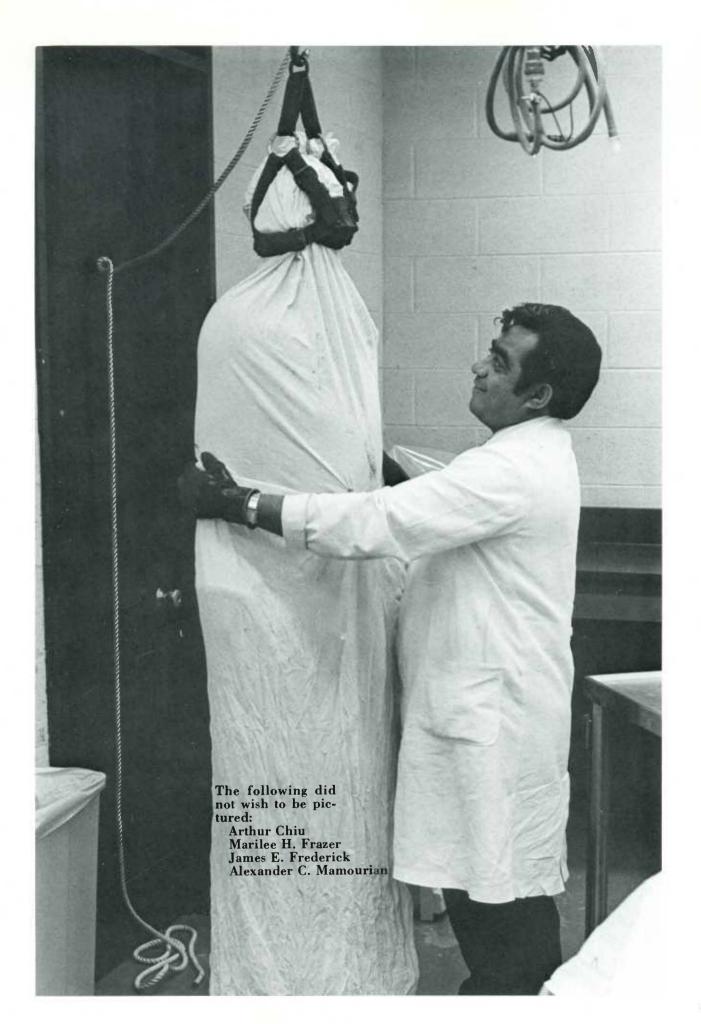
Edward Hanna, M.D.
Virginia Polytechnical Institute, B.S.



Valerie Gilliam Kenderson, M.D. Swarthmore College, B.A.



George J. Smith, M.D. Pennsylvania State University, B.S.



So you thought you could escape another test just because you're a senior. Well, you can't. Tests, tests, tests — all the rest of your life there will be tests. Tests for licensure, tests for relicensure, and of course later on your Wasserman test and the National Boards Part MCMVII. Not to mention your undescended tests.

The Following rules are to be strictly enforced:

Do not open this yearbook until told to do so.
 In the appropriate box, print your social security number. If you do not have one, make one up.

3) In the appropriate box, print your full name. If you do not have

one, make one up.

4) Only correct answers will be counted; therefore, if you do not know an answer, guess. If you do know an answer, you have probably read the question wrong.

All of these questions were taken from old medicine exams, which were mostly taken from old Reader's Digests. You have one hour to complete this exam. At the end of the examination, each of you is to turn in your No. 2 pencil and your No. 1 son. Before you leave the room you must sign the Jefferson Medical School Honor Code:

"During this examination, I have neither given nor received sexual

favors." (Name)

SECTION I

Directions: Each of the questions below consists of situations that are real and have been selected from TJUH teaching files. You will be asked to select the best answer(s) for the questions based on your vast and vague clinical experience. Note: any, all or none of the answers can be used for any particular question; only some, however, may be used, and only one will be considered correct.

Mr. Miller is a 46 y.o. asbestos miner and a 3 ppd smoker x 45 yrs. He now presents at the Jefferson Clinic with hemoptysis, hematemesis, hematuria, hematochezia, hematocolpos, hematocrit, and hemo-

stat.

- 1. Which of the following diagnoses can be ruled out at this point?
 - A. Congenital smoker
 - B. Kleptomania
 - C. Ahematocritosis
 - D. Progeria
 - E. Nictograficneozmonilia
- 2. Right you are in ruling out A. because Mr. Miller did not start smoking at birth but at one year of age. At this point what questions will you ask?
 - A. Do your feces float?
 - B. Is that a hemostat in your pocket or are you just happy to see me?
 - C. Do you always wear red underwear?
 - D. Family history of Progeria?
 - E. Do people tend to bleed on you?
- 3. At this point you have narrowed your diagnosis to kleptomania or Neografickneozmonilia and the patient's admission to having spent time in Monilia Bay supports your clinical hunch. You perform a physical exam and the only physical findings are absence of breath sounds, no heart sounds but a loud rub over the entire precordium. X ray reveals absence of lung parenchyma and confirms blood in the pericardial sac. You now revise your DDx; circle as many as you feel are compatible:
 - A. Bleeding heart liberal
 - B. Acquired absence of lungs
 - C. Kleptomania
 - D. Neografikkneozmonilia
 - E. Hemostat of Unknown Origin (HUD)
- 4. You decide to go back and question Mr. Miller to confirm your new hypothesis (Note: only ask the questions which correspond with your respective DDx above). You ask:
 - A. Do you favor police brutality?
 - B. Now then Mr. Miller, when did you first notice that you can't blow out a match?
 - C. Have you ever stolen a Subclavian Artery?
 - D. Can you spell Neograficneozmonilia?
 - E. O.K. buddy, where'd you get that hemostat?

5. Mr. Miller replies that he does favor police brutality but only of college students. He has never been able to blow out a match; in fact, he has noticed that he has never seen his breath in the cold winter air and always felt that he was "different" in this respect. He denies having stolen a Subclavian Artery or any vessel for that matter (except for a toy boat as a child). He cannot spell Neografckcknictozmonillea as you suspected. He continues to play with the hemostat in his pocket and claims it belongs to his mother, a nurse at PGH.

You are now close to your Dx. You feel comfortable with which of the following assumptions?

- A. Patient is indeed experiencing liberal pericardial effusion.
- B. The absence of lung parenchyma appears to be long standing, most likely congenital, and therefore does not merit any immediate attention.
- C. He has demonstrated the pathognomonic sign of Nictograficneozmonialia by failing to be able to spell the dread disease.
- 6. You decide to treat him empirically; circle the appropriate treatment:
 - A. Treat the liberal pericardial effusion conserva-
 - B. You decide not to give the patient an iron lung as he is already overweight and you have recently read in the NEJM that chronic use of iron lungs has a high correlation with rusty sputum production.
 - C. You tell the patient that he must learn to live with the Nictograficneozmonilia and that learning to live with the disease may put him into remission. Until that time you will cover him with Laetrille 10 mg., po, b.i.d.
 - D. Tell him to take two nurses, go to bed and call you in the morning.
- 7. A WD/WN 65 y.o. G19P10A9 B.F. ē a PMH of COPD, ASVD, CHF and DPA now presents to her LMD ē n, v and dx2, accompanied by occ. RLQ pain x2 hr PTA. Upon PE by her LMD this BF was noted to have moist rales in both the RLL and LLL. COR-WNL except PMI palp. in 6th ICS 2 cm lat. to MCL. S1 and S2 WNL. No m, t, 1 or h. Occ. ES. Liver is palp. 4 FB below RCM in MCL § nod. or tend. BS-WNL.

LMNOP-WNL. HMO unremarkable.

Further hx elicits PND, DOE, SOB and STP. Lab: EKG shows RBBB c LAH, QRS & BMW. Based on the above, the dx is:

- (1) LSMFT
- (2) (2Q)2 = 4Q
- (3) HEW consult
- (4) MGM c occ. VW
- (5) TGIF



- 1. This gentleman is suffering from:
 - (1) Testicular Feminization
 - Feminine Seminalization
 - (3) Gender Generalization
 - (4) Big Bazooms



- 2. This man is exhibiting:
 - (1) Exophthalmos
 - (2) Thyroid Storm
 - (3) Thyroid Drizzle
 - (4) Folie a deux



- 3. This shows:
 - (1) Advanced Hemochromatosis
 - (2) Mucous Plug
 - (3) Severe Priapism
 - (4) Big Bazooms



- 4. This is:
 - (1) Peau d'orange
 - (2) No code vegetable
 - (3) Chairman of the Department of Physiology
 - (4) A seedy character



- 5. This man:
 - (1) Brought peace to the Middle East
 - (2) Married a shiksa
 - (3) Eats massive amounts of Monosodium Glutamate
 - (4) A seedy character



- 6. This structure faces the Deanx Office because:
 - (1) It reflects the Administration's stand on most issues
 - (2) It is a source of inspiration for new policies(3) Its droppings then fall toward Orlowitz

 - (4) Birds of a feather flock together

Section II

1. Condylomata lata is:

(a) A lotta condylomata

- (b) A sister of Gina Lattabrigita
- (c) A new form of male contraception
- (d) Found in women with ulcers on their lips
- 2. Choose the least relevant:
 - (a) The medicine final
 - (b) MDF
 - (c) A residency interview at Hahnemann

(d) Studying about amyloidosis

- (e) Freshman, Sophomore, Junior and Senior years
- 3. A patient comes to you moribund. You would:
 - (a) Look moribund up in the dictionary because you don't know what it means.

(b) Make love to his wife

(c) Find out if he has blue cross and/or blue shield

(d) Start an airway

- (e) Start a fire
- For recreation medical students:

(a) Study biochemistry

(b) Study anatomy

(c) Neither (a) or (b) but stare into space

(d) Both (a) and (b) while staring into space

(e) Donate sperm

- 5. Hahnemann differs from Jefferson in that:
 - (a) All Hahnemann students wanted to go to Jefferson but couldn't get in

(b) Jefferson is a medical school

(c) There is nothing to do at Hahnemann

(d) Jefferson has the bull

(e) All of the above

6. S.L.E. is: (according to G.E.A.)

- (a) A disease that is uncommonly common some-
- (b) A disease that is frequently infrequent rarely

(c) Rarely a disease

(d) Who is G.E.A.?

7. Which is larger?

- (a) Dr. Lefer or Dr. Lefer's ego
- (b) The number of weeks in anatomy or eternity
- (c) The number of lectures corrected by the physiology department or zero
- The number of students who understood physiology or answer (c)
- 8. Anyone going into Orthopedics:

(a) Must be able to bench 250 pounds

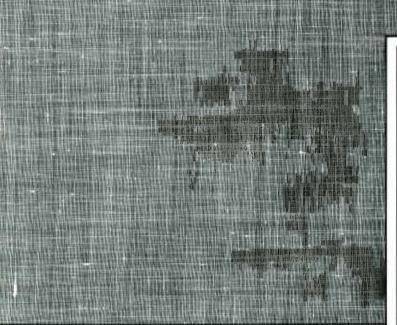
- (b) Must be strong as a bull and half as smart
- (c) Must be able to leap tall buildings in a single bound
- (d) Must know nothing about medicine

MATCHING:

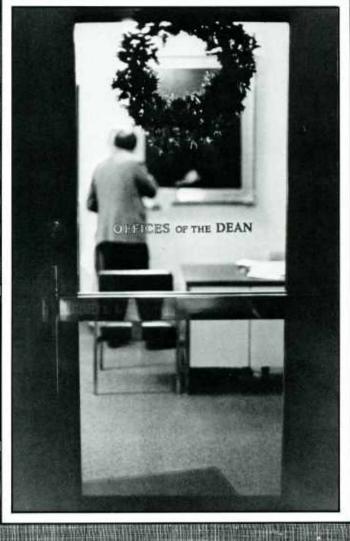
The following is a list of commonly used medical terms. Match them with the lay terms in the righthand column. Each term may be used once, more than once or all the time. No term is never used.

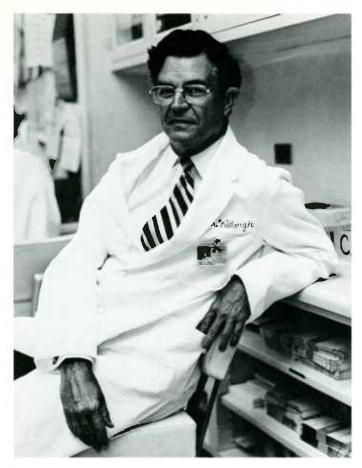
- (1) Pulmonary Gonorrhea
- (2) V.D. with Diabetes
- (3) Hemorrhoids
- (4) Terminal flatulence
- (5) Terminal dribble
- (6) Von Hippel-Lindau-Gilles de la Tourette-Argyll Robertson-Nestles Crunch Syndrome
- Mt. Everest Disease
- (8) Explosive disuterinemia
- (9) Idiopathic Thrombocytopenic Non-disjunctive Cumulus Nimbus
- (10) Horseshit Encephalitis

- (a) Spinal Mighty Jesus
- (b) Tubal lubrication
- (c) Vomiking cloggs
- (d) High blood
- (e) Claps of the lung
- (f) Sick-as-hell anemia
- (g) I caught somethin'
- (h) I got sugar(i) The miseries
- (j) Fireballs of the asterisk

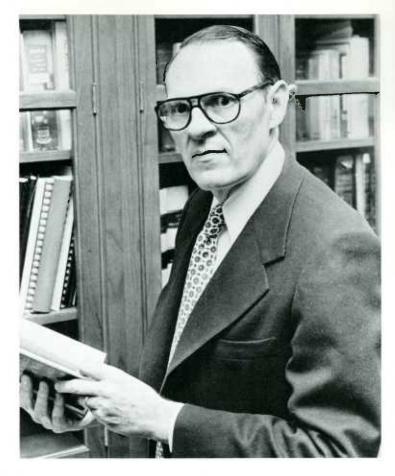








John H. Killough, M.D., Ph. D. Associate Dean and Director of Continuing Education



William F. Kellow, M.D., D. Sc. (Hon.) Dean and Vice President



"Sure, Bud. We'll let him in."

Office of the President



Message from President Bluemle

On behalf of the entire administration of Thomas Jefferson University I wish to extend our warmest congratulations to the Class of 1978, along with every good wish for happiness in the years ahead.

In many ways the next phase of your training offers the greatest promise of professional fulfillment. It also poses the greatest challenges. As resident physicians, you will have an extraordinary opportunity to translate the wealth of general medical knowledge you have acquired over the last four years into specific approaches to the care of many sick individuals -- now as professional participants rather than as student observers. For the first time the welfare of your patients will rest primarily in your hands.

Be sure to listen to your patients. They often say outlandish things which are really the essential clues to their problems.

Be patient and slow to get angry, even with a health care system replete with inefficiencies and bureaucratic trappings. Improvements in the system will best come from informed, deliberate thought and temperate actions.

As graduates of Jefferson you are now its emissaries. You have the opportunity to show the values and character of your institution, as well as your profession, wherever you are. And as Alumni, please remember that you will always be important members of the Jefferson Family. Best of luck, God's speed, and keep in touch.

Sincerely,

Lewis W. Bluemle, Jr., M.D.

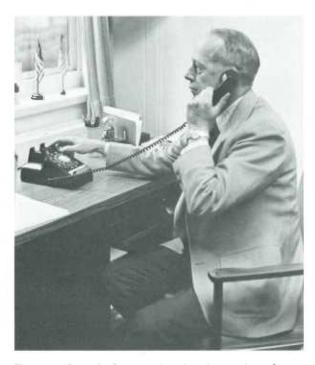
January 10, 1978

Lewis W. Bluemle, Jr., A.B., M.D. President of the University





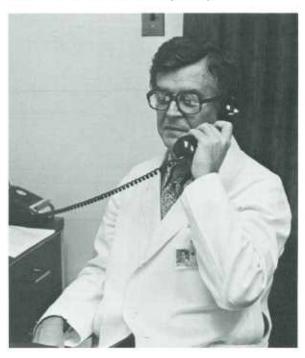
Now boys, this job is really a tough one; better watch out that we don't get burned. Who's going to handle it, Joe?



I'm sorry, Joe, it's almost registration time again and you know I always try to get down to the islands. Why don't you try John?



Well. . . . gee, sir . . . Yes, sir, you know how busy I've been trying to schedule Saturday classes. I'll talk to Art about it right away.



Sounds like a sticky wicky to me. Don't you think that you should talk to the Library about this?



What!? Don't dump that on my office! Better talk to $Jim \ . \ . \ .$



But this isn't a minority matter. If this goes through all the students will be screwed as usual.



How come I always get the boob jobs?



Robert C. Mackowiak, A.B., M.D. Associate Dean and Director of Student Affairs



I don't care if it is raining. I'm still going to run.



Joseph S. Gonnella, A.B., M.D. Associate Dean and Director of Academic Programs



Arthur R. Owens, B.A., M.B.A. Registrar and Coordinator Financial Aid





Samuel S. Conly, Jr., A.B., M.D. Associate Dean and Director of Admissions







The female woman is one of the greatest institooshuns of which this land can boste.

— Charles Farrar Browne





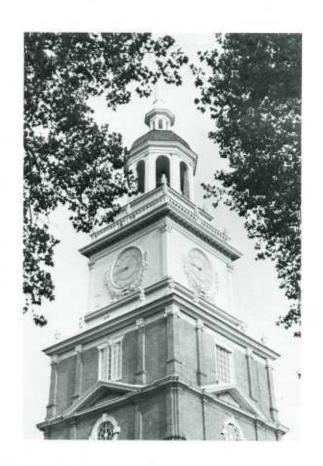
Thank heavens for Secretaries, without them what would little bosses

do.



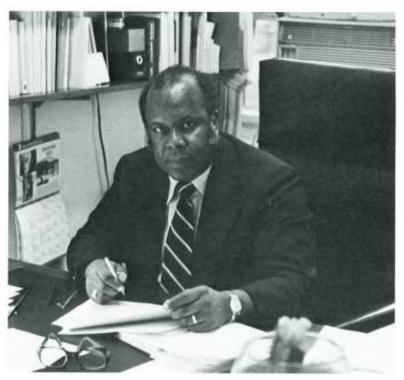








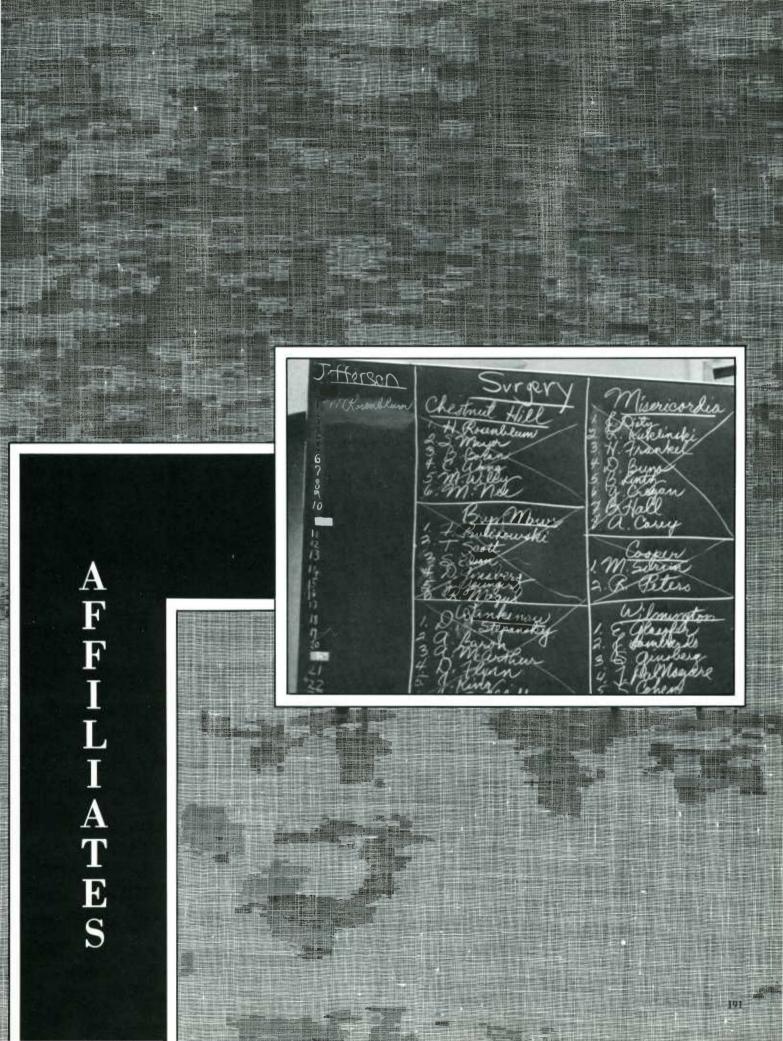
L'Chaim!



James H. Robinson, B.S., M.D. Associate Dean and Director of Minority Affairs



John A. Timour, B.A., M.A., M.L.S. University Librarian







LANKENAU HOSPITAL

For a modern hospital to honestly say that it continues to satisfy its patients' needs, it must be willing to change and grow and adapt. Lankenau has recognized this responsibility and is totally committed to it.

Representative of this commitment is the major building project now underway on Lankenau's 93-acre campus in Lower Merion. This is the most dramatic undertaking since the hospital's move to the Main Line in 1953.

Currently under construction are two buildings — South Wing and the Ambulatory Diagnostic Center. South Wing, slated for completion in late 1978, will be a five-story patient building containing 241 beds including a 30-bed medical-surgical intensive care unit. Completion of this building will allow for consolidation of all inpatient facilities plus combining what are now two separate ICU's. While our bed complement will remain at 425, our percentage of single bedded rooms will rise from eight to thirty-eight percent to meet the demands of such facilities. Furthermore, each room will have a private bath to further ensure patient privacy and convenience.

The one-story Ambulatory Diagnostic Center, to be completed this spring, will consolidate all out patient facilities including the clinic network, the depart-

ments of hemodialysis, gastroenterology, pulmonary service, cardiology, oncology, and satellite units for radiology and the laboratory.

In conjunction with the new buildings, there will be renovation of the existing facilities. This will enhance storage space, materials management, and other systems which will contribute to more efficient operation.

An operating suite designed specifically for outpatient surgery is also planned. The unit will include two operating rooms, a 30-bed recovery area, and waiting room. Its completion will increase Lankenau's ability to meet the rising trend

toward one-day surgery.

Among those who will be sharing the benefits of the building and renovation project are the 160 Jefferson medical students who rotate through Lankenau as

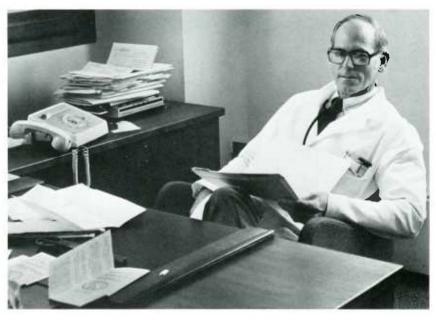
part of their core curriculum, and the more than 125 students who come here

on electives from Jefferson and other medical schools.

Lankenau's affiliation with Jefferson dates back to 1949 when students began receiving a portion of the medical and surgical training here. Today, Lankenau offers post-doctoral residencies in medicine, surgery, ob/gyn and pathology. The hospital also has affiliated residents from Thomas Jefferson University Hospital in orthopedics, otolaryngology and ophthalmology, and from the University of Pennsylvania in plastic surgery. Clinical fellowships are offered in infectious diseases, nephrology, gastroenterology, hematology, neurology, and cardiology.







CHESTNUT HILL

Chestnut Hill Hospital is proud of its affiliation with Jefferson Medical College which began in 1961 through the efforts of Dr. Joseph W. Stayman, Jr., Director of Surgery at Chestnut Hill Hospital, and Dr. John H. Gibbon, Jr., Professor of Surgery at Jefferson. The program progressed rapidly from a rotation of senior students throughout the hospital, to the approval by the Joint Commission for residency training and the resulting addition of Residents to rotation at Chestnut Hill.

As a result of the affiliation, almost 100 surgical Residents and more than 500 students on surgical rotations have received training at Chestnut Hill Hospital. In 1974, as part of the affiliation with the Family Medicine Residency Program, student rotations in Family Medicine were initiated. Currently, the Family Medicine Residency Program at Chestnut Hill Hospital provides rotations for 32 junior and 8 senior medical students from Jefferson Medical College each year.

Chestnut Hill is a community hospital where surgical students and Residents gain greater experience with patients requiring primary and secondary care as compared to the tertiary or highly specialized care provided by the university hospitals.

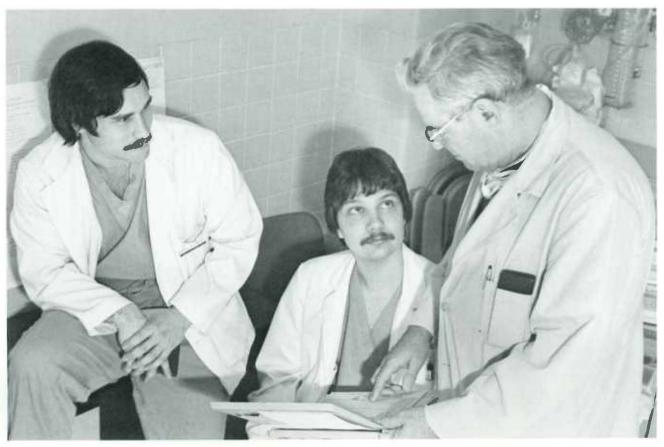
In the Family Medicine program students, under the supervision of and instruction by the Faculty of the Chestnut Hill Hospital Family Medicine Residency Program, gain experience with patients receiving ambulatory care in the Family Practice Unit and private practice settings.

A building program is underway which will replace some hospital facilities and modernize others. Clearly, Chestnut Hill is taking every possible step to ensure that it will continue to be a hospital where physicians and staff can provide quality health care and support medical education programs.









BRYN MAWR HOSPITAL



The Bryn Mawr Hospital was founded in 1891 and has kept pace with the growth of the Main Line communities which it serves since that time. Over the years, hospitals suitably equipped for this new age of medicine have grown larger and more complex. With this growth has come an interdependence with other medical institutions. In 1972 an affiliation agreement to improve "the common goals of patient care, education, research and community service" was signed by The Bryn Mawr Hospital and Jefferson Medical College of Thomas Jefferson University. This agreement is an extension of The Bryn Mawr Hospital's commitment to medical education and has successfully strengthened effective teamwork. It has also provided for the medical students and members of the House Staff a blending of the academic atmosphere of Thomas Jefferson and the community hospital environment offered by The Bryn Mawr Hospital.











LATROBE

Latrobe Area Hospital is located 35 miles east of Pittsburgh nestled in the foothills of the beautiful Laurel Highlands. The 352 bed hospital serves 125,000 persons in its continually expanding facility offering full emergency, medical, surgical, pediatric, obstetric, orthopedic, intensive-coronary care, restorative, extended, mental health, ambulatory and preventive care services along with all ancillary services such as physical therapy, occupational therapy, respiratory therapy, audiology and speech pathology, etc. The local communities are serviced by the hospital based Latrobe Area Hospital Ambulance Service and the Ligonier Ambulance Service on a 24 hour basis. Over 80 physicians offer full diagnostic and therapeutic services at the fully accredited institution.

The Latrobe Area Hospital-Jefferson Medical School affiliation started in 1974. Four residents a year are appointed to the three year Family Practice Residency program; also, junior and senior medical students are assigned to the Family prac-

tice rotation.

The main Family Practice Unit is located in the Ambulatory Care Center, a separate building, connected by an enclosed walkway to the hospital. Two Satellite Offices are now open in the communities of Saltsburg and Pleasant Unity, and a third satellite is planned. The units are directed by Robert S. Gordon, M.D. and Joseph R. Govi, M.D. The junior and senior students are assigned to the unit for a six-week period, and are provided a broad range of experience in community medicine, supplemented by an organized continuous education program, provided through the cooperation of the Department of Family Practice at Jefferson Medical College.

The Laurel Highlands Recreational Area offers eleven scenic ski centers, fishing streams and hunting in abundance. Historical settings are located nearby, such as Fort Ligonier which offers colonial lore and tradition, Bushy Run Park of French fame and Fort Necessity, built by George Washington. Events, such as the Rolling Rock Steeplechase, P.G.A. golf tournaments and Ryder Cup Tournament at Laurel Valley Golf Club, the St. Vincent College Summer Theatre and the Latrobe Air Show attracts thousands yearly to the area. The Westmoreland Symphony, Pittsburgh Symphony, beautiful Heinz Hall, Pittsburgh Ballet Theatre and the Civic Light Opera offer a full complement of cultural activities. The sport fan might enjoy the Pittsburg professional teams such as the Steelers, the Pirates or the Penguins.









PHILADELPHIA NAVAL REGIONAL MEDICAL CENTER

Students may receive instructions in Medicine, Pediatrics, and Otolaryngology at this hospital.





METHODIST

Methodist Hospital has had a teaching association with Jefferson Medical College dating back to the 1950's when medical students participated in clinical clerkships in Medicine, Surgery and Obstetrics and Gynecology at this South Philadelphia landmark. The association between the two institutions continued into the 60's with more students obtaining portions of their clinical training at this 249 bed community hospital.

As Jefferson Medical College expanded its enrollment, the need for well defined affiliate teaching facilities was evident and the Methodist Hospital signed a formal agreement with Jefferson in 1970, which has opened a broad range of clinical facilities to medical students in their clinical years.

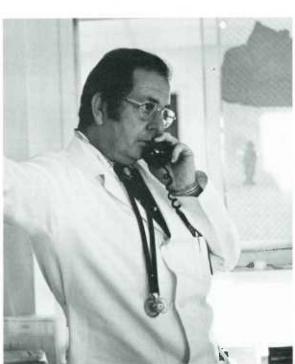
The community hospital atmosphere at Methodist affords medical students, interns and residents the opportunity to see the clinical side of the practice and art of medicine in contradistinction to "the ivory tower" atmosphere that pervades the Medical centers to which they are exposed. It allows the house staff to feel they are a part of the medical team treating an individual patient rather than just another strange face.











Dr. Ronald Fronduti is a medical resident at Mercy Catholic Medical Center

MCMC

A dynamic, expanding health care center

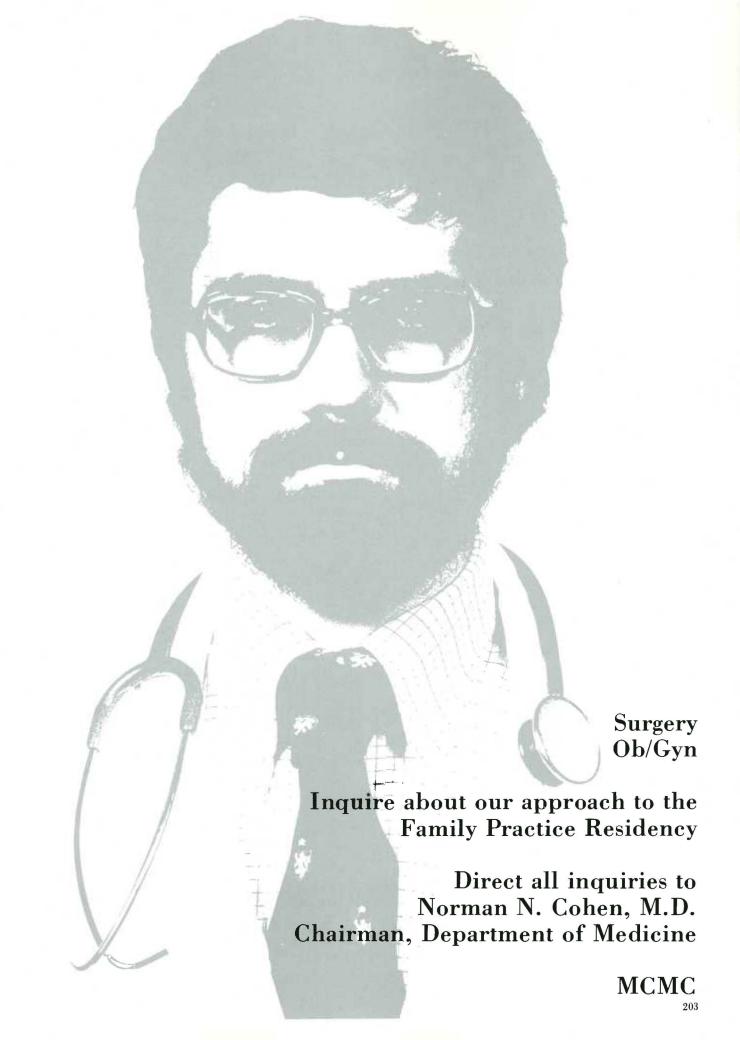
Two major teaching hospitals that serve urban and suburban Philadelphia Miscericordia; West Philadelphia Fitzgerald-Mercy; Darby

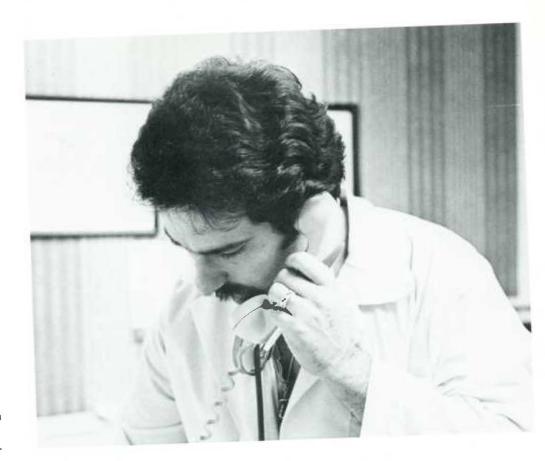
670 acute care beds Center's emergency rooms receive 70,000 patients per year

Active training programs with full-time directors in Internal Medicine Surgery Ob/Gyn Pediatrics Radiology Pathology

Rotating internship with Medicine

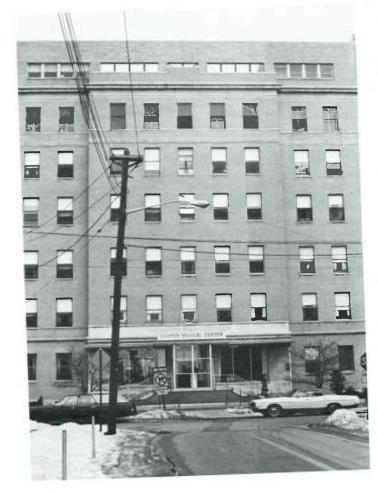






COOPER MEDICAL CENTER







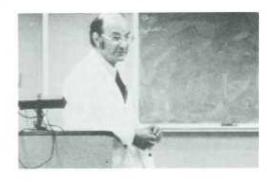




EINSTEIN MEDICAL CENTER DAROFF DIVISION

Medical education is a tradition at the Daroff Division, Albert Einstein Medical Center. Known as the Mount Sinai Hospital when its doors first opened in 1899, the Hospital began teaching programs for interns and residents in 1909, programs which have continued to this day. The Daroff Division's affiliation with Jefferson Medical College came about informally in 1968 when Charles Fineberg, M.D., then Chairman of Surgery at Daroff and professor of Surgery at Jefferson, arranged for surgical students from Jefferson to take both assigned and elective courses at Daroff. Then, in 1970, a formal affiliation in Surgery between the two institutions was signed, an action which led to the signing of a second affiliation between the respective departments of Medicine in 1972.

Programs for Jefferson students at Daroff include Junior Medicine and Senior Medicine, as well as, Pediatrics, Psychiatry, and Radiology. Sophomores learn the art of history taking and physical examination, and Freshmen spend time in the Emergency Unit. Many elective courses are also available.



COATSVILLE VETERANS ADMINISTRATION HOSPITAL





DELAWARE STATE HOSPITAL





The program consists of four years of basic residency training in psychiatry, constructed to prepare trainees for certification as psychiatrists. A four month block of the first year is spent in primary care training. Methods of training are in two main categories: 1) clinical assignments, and 2) teaching sessions. Clinical assignments of residents are controlled by the Director of Research and Education, designed to permit best development of the individual resident. Individual supervision is provided for the residents. Teaching sessions include subjects in basic and clinical psychiatry, basic and clinical neurology, reading seminars, and research seminars. Explicit emphasis is placed upon the trainee status of residents and their service to the hospital is subordinate to this requirement.

OUR LADY OF LOURDES HOSPITAL

Our Lady of Lourdes Hospital now participates with Thomas Jefferson University Hospital in five integrated residency programs and two fellowship rotations. There are 20 Jefferson residents and students matriculating through integrated programs in family medicine, internal medicine, obstetrics and gynecology, pediatrics, and surgery. Gastroenterology and nephrology fellows have added vertical depth and strength to the teaching conferences at Lourdes and we look forward to the addition of fellows in cardiology and pulmonary medicine as the programs continue to evolve and mature.

The elimination of free-standing internships and the development of integrated residency programs, have produced uniformity in strength of the "teaching-teams" previously not possible. The rapid and smooth growth of the programs in internal medicine at Lourdes is in the main due to the dedication and devotion to teaching of Dr. Carla E. Goepp, Assistant Professor of Medicine, Thomas Jefferson University. Dr. Goepp, the Program Director in medicine at Lourdes, has organized and guided the completely volunteer attending staff to provide a learning experience for the Jefferson residents and students which is truly admirable.

On March 21, 1976 Lourdes dedicated a new 50

On March 21, 1976 Lourdes dedicated a new 50 bed Rehabilitation Unit which will be the Regional Center for Southern New Jersey. In addition, Our Lady of Lourdes Hospital is in the planning stage to develop a Perinatal Center for Southern New Jersey.

Southern New Jersey.

The Family Health Center, established two years ago, has registered 924 families and a total of 2682 clients. This will be the nucleus for an active family practice rotation for residents and students. Organization of a Department of Family Practice is being developed. This will provide graduates in this specialty with opportunities for practice in the South Jersey area.





FRANKLIN HOSPITAL



Franklin Hospital is a 183 bed general hospital located in Venango County. An expansion and renovation in 1966 provided a modern well equipped facility that will be further expanded by a large program scheduled to start during the summer of 1978 and designed to meet the increasing demand for services at Franklin Hospital.

As a result of an intensive, ongoing recruitment program, the Medical Staff now consists of 53 young specialty physicians and dentists.

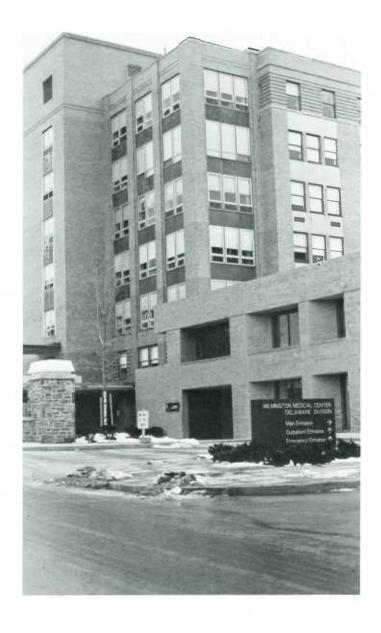




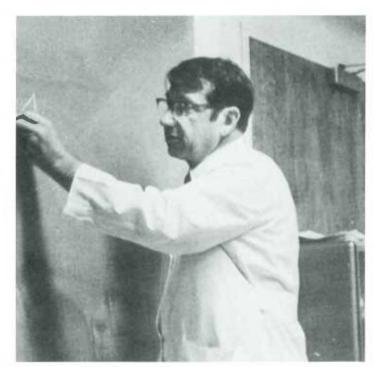
WILMINGTON MEDICAL CENTER

GOOD LUCK GRADUATES!

When you think of residencies — consider Wilmington Medical Center . . . When you think of practice — remember Delaware.

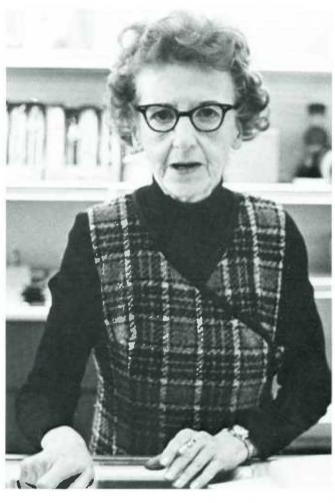


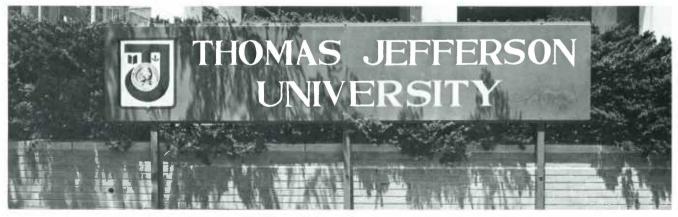


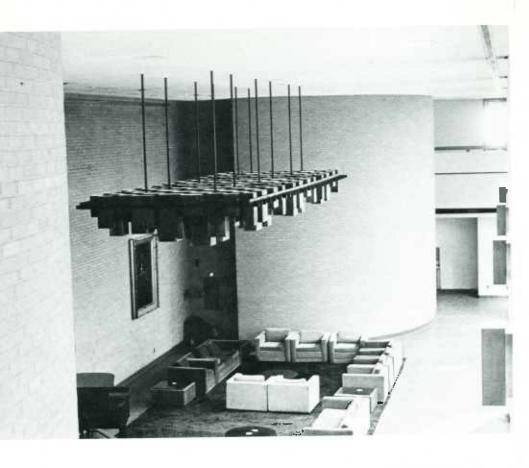


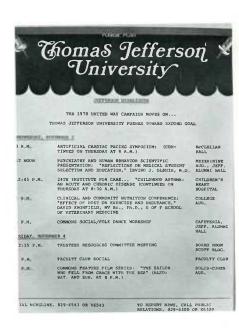
THOMAS JEFFERSON UNIVERSITY HOSPITAL

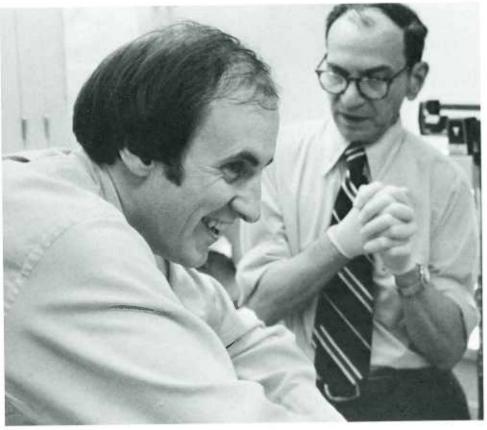








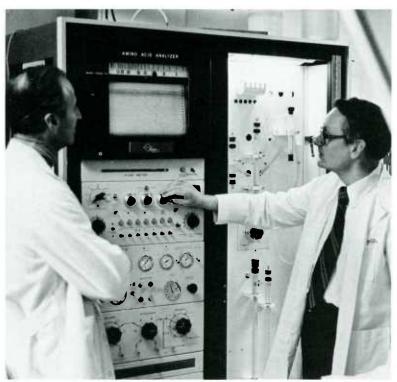


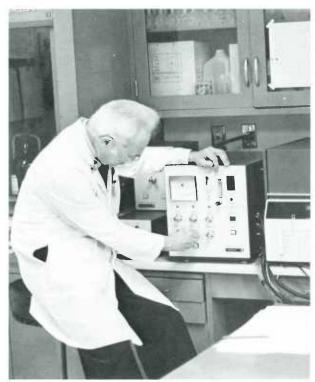




STEIN RESEARCH CENTER





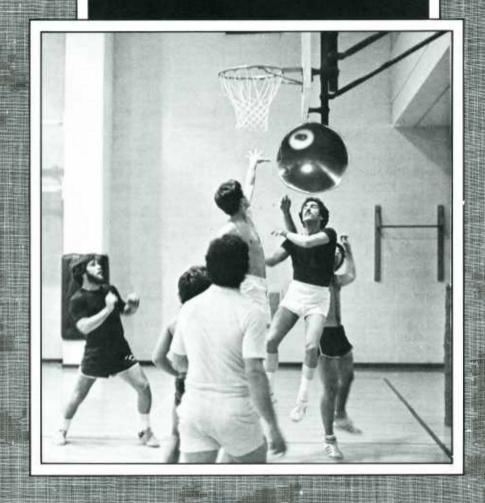








ACTIVITIES





JEFFERSON INTRAMEDICAL BASKETBALL TEAM

Back row: Jeff Argyll Robertson, Jeff Marcus-Gunn, Jeff Nieman Pick, Lindau vonHippel (coach), Jeff Wernicke-Korsakoff, Jeff (Giles) de la Tourette. Front row: Jeff Bilroth I, Jeff Bilroth II, Jeff Wermer Sipple. Out with injury: Jeff Brown-Sequard.

JEFFERSON THEATRICAL SOCIETY





The J. Marion Sims Society

Front Row: Dr. Warren Lang, Norman Rosenblum, President; Robert Reichman. Back Row: Gaylin Li-Ma, Victor Zachian, Fred Teichman, Susan Ginsberg, Harold Davis, Duncan Salmon. Not Pictured: Janis P. Campbell, Peter E. Bippart, Daniel Kegel, Thomas Hutchinson, Greg VanGundy, Frank Maletz.



The Hobart Amory Hare Honor Medical Society

Front Row, left to right: Bob Pansick, Victor Zachian, Pat Harper (Treasurer), Janice Lupu, Harry Chaiken, Barbara Leidich, Raymond Leidich, Front Row, left to right: Bob Pansick, Victor Zachian, Pat Harper (Treasurer), Janice Lupu, Harry Chaiken, Barbara Leidich, Raymond Leidich, Mark Snyder. Back Row: Allan Davis, Susan Ginsberg, Norman Rosenblum, Ann Reilly, Carl Zenz, Stephen Kramer (President), Marian Klepser, Robert Finkelhor, Kevan Herold, Steven Kazenoff, Michael Stulpin, Steven Mendelsohn, Allen Josephs, Sheva Stern. Not pictured: Philip Dzwonczyk (Vice-President), Neil Shusterman (Secretary), Barbara M. Busillo, Christine Byrnes, Robert L. Benz, James W. Egel, Bruce C. Hall, Glenn Hyatt, Howard S. Klein, Frank W. Maletz, Robert D. Molino, Martin P. Nee, Jr., Kenneth A. Neifeld, Joseph Petrozza, Alan J. Sears, Nancy H. Sherman, Graig R. Smolow, Marie O. Uberti, Steven Herbets, Richard S. Blumberg, Terry B. Bachow, John M. Berardis, Janis P. Campbell, Deborra K. Childress, Gaetano J. Capone, Thomas W. Gardner, Michael J. Guarino, Kevin R. Harris, Dale E. Johnston, Thomas J. Marshall, Jr., Steven G. Meranze, Lise M. Neifeld, Brian R. Ott, William B. Reeves, John C. Sacollidge, Jonathan W. Sastic, Lois M. Sastic, Sandra F. Schnall, Ira Sharn, Katherine M. Wagner. Sharp, Katherine M. Wagner.



Penn State University Jefferson Committee

Members, top to bottom: Bill Loeliger, Cathy Zuurbier, Jamie Lockard, Kathy Dougherty (secretary), Da-Shih Hu, Betsy McGuire. Not Shown: Pete Choyke, Norman Brest, Kevan Herold, John Woog (treasurer).



The Outing Club

Art Brownstein, Bob Coblentz, Tony Colangelo, Pat Corcoran, Bob DeGroof, Debbie Deller, Da-Shih Hu, Dan Mingle, Ellen Moore, Norm Numerof, John Peterson, Jean Repman, Dave Robinson.



The Family Physicians Society

Standing, left to right: Sue Packer, Dick Buza, Joe Devlin, Jamie Lockard, Rudolph Krafft, Carol Love, Kathleen Kreider, Tina Krause, Mark Chilton, John Friedline, Kevin Gill, Dr. Peter Amadio (advisor). Seated, left to right: Diana Metzger, Bill Lovett, Ray Nungesser, Terry Korinchak, Paul Bartos. Not pictured: Frank Yohe (president), Fred Pavlikowski.

Aeros

Left to right: Richard Spaide, Robert Boran, Marc Surkin, Andrea Jordan, Richard Yelovich. Not pictured: Richard Abramowitz, Barbara Matteucci Busillo, Duncan Salmon.



Top row, left to right: Jeff Gill, Andy Farkas, Mitch Edmundson, Rich Yelovich, Dan Wehner, Mike O'Leary, Paul Kearney, Bill Clements, John Widger. Bottom row, left to right: Brian Reeves, Larry Abramson, Roy Maynard, Paul Stander (president), Ken Smith, Ralph DiMattia. Not pictured: Jerry Andriolo, Gary Beste, Jim Billys, Dick Buza, Gregg Cregan, Otto Dove, Steve Edson, Jim Egel, Fred Fellin, Bob Gorson, Tom Grabiak, Jim Hopkins, Ray Ishman, Larry Kachik, Rudy Krafft, Waft Marchlewski, Jeff Metz, Bill Messerschmidt, Eric Michael, Dick Moberg, Ray Nungesser, Joe Paklovecciom, Fred Pavlikowski, Cliff Pemberton, Watt Prozialeck, Dave Reicher, Barry Rinker, Norman Rosenblum, John Sacoolidge, Mike Savage, Tom Scott, Dave Slagle, Jim Spigel, Warren Tripp, Ed Wong, Dan Biles.

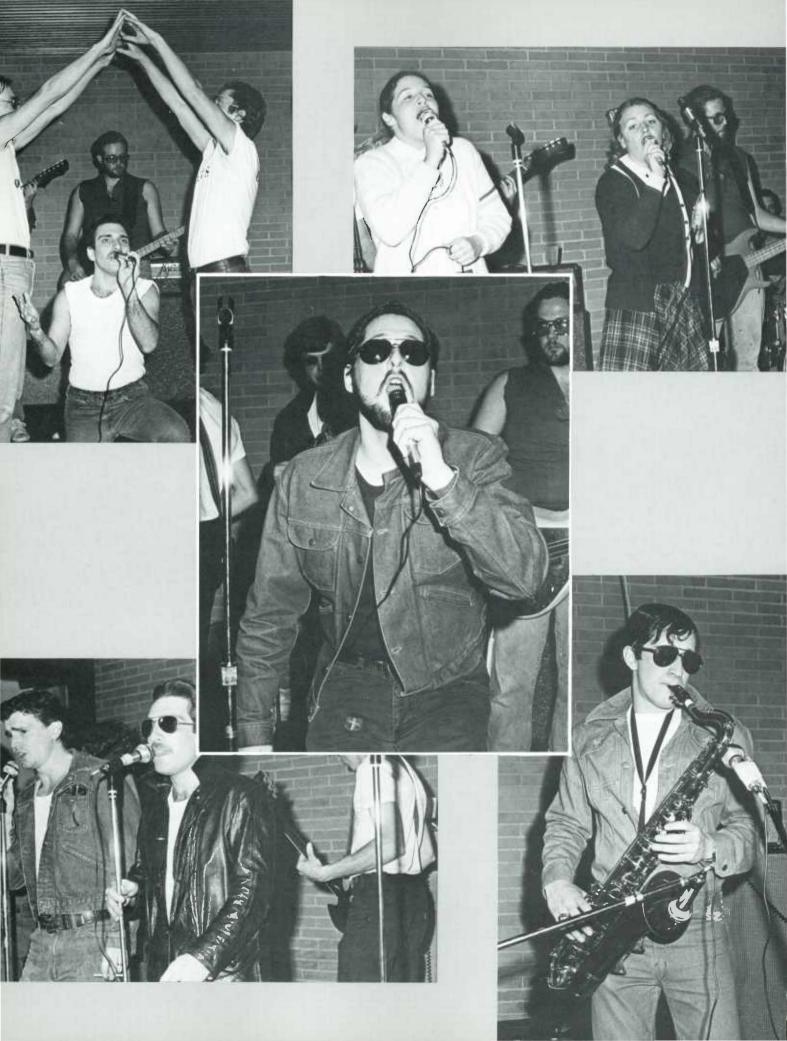


The Phi Chi Fraternity



The Phi Delta Epsilon Fraternity

Left row, top to bottom: Joan DiPalma, Barbara (Pittner) Leidich, Marie Spagnoli (social chairperson), Mike McCloskey, Judi Woodford (secretary). Right row, top to bottom: Hank Maxwell, Ray Leidich, Doug Brozell, Marc Surkin (treasurer), Gene Marcelli (president). Not pictured: Rich Veglia, Larry Webb, Rich Latuska (house manager), Carol Narkevic, Rich Abramowitz, Larry Kuklinski, Wayne Herrick.





THE RAFT DEBATE

Moderator: Wolfgang H. Vogel, Ph. D.
Devil's Advocate: Jay Jacoby, M.D., Ph. D.
Participants: Stanley K. Brockman, M.D. — Winner
James F. Burke, M.D.
Martin Weissberg, M.D.







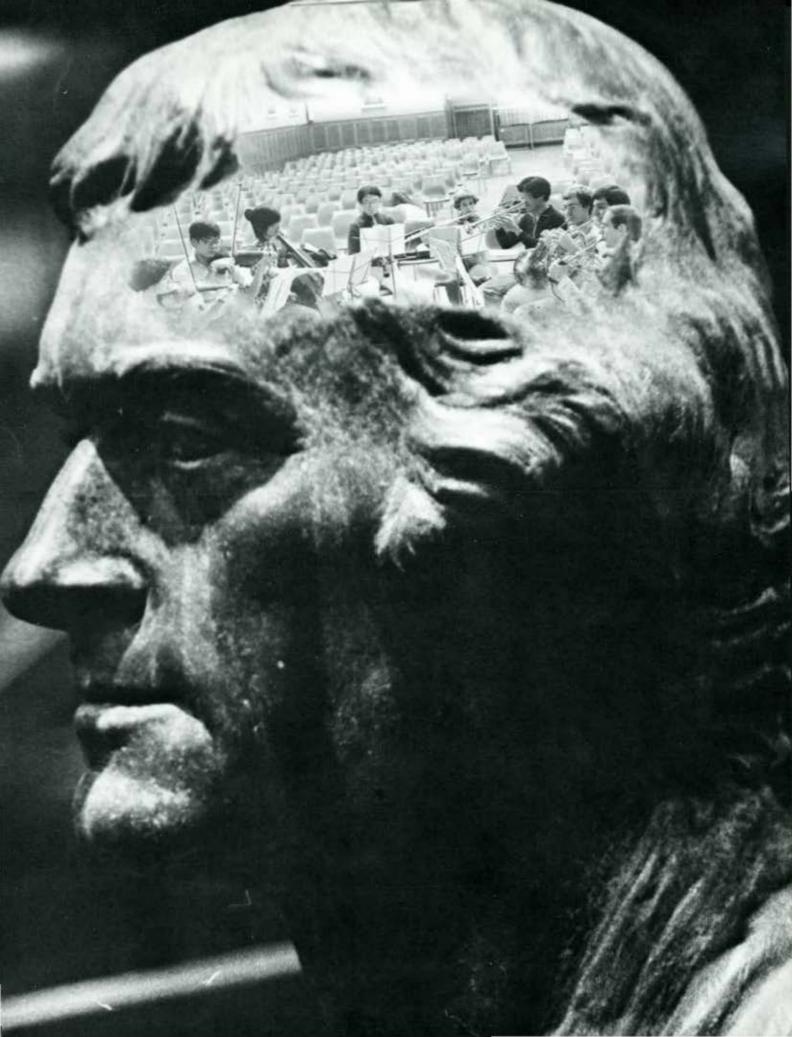
THE THOMAS JEFFERSON UNIVERSITY CHOIR

David Stepansky, President, Paul Ellis, Vice-President, Linda Berger, Beth Cohen, Connie Dance, Judy DiCristofaro, Cathy Farrell, Mamie Guidera, Anne Hench, Martha Herold, Marlene Ihle, Sue Jahnke, Mary Keller, Carol King, Karen Krylowicz, Christine Kuhnle, Pamela Leib, Linda Linton, Gale Berkenstock, Alisen Pippaut, Patricia Clancy, Helen Egner, Mary Rachel Faris, Diane Hamburg, Betsy Hurwitz, Karen Johnson, Joanne Kark, Kyla Kraft, Shonnie Lebovitz, Jane Lyncy, Mary Jane McClements, Patricia Miller, Shelley Pai, Deborah Malinak, Linda Linton, Willis Boyd, Sue Molinelli, Mary Lou Shoemaker, Marguerite Maerz, Mindy Manshil, Joanne McClintic, Kathy Miller, Susan Yenchick, Kathryn Morris, Gloria Mood, Linda Mulgrew, Linda Nowak, Pamela Peters, Kathryn Reihard, Andrea Rothman, Judith Troutman, Sno White, Jan Wofford, Anke Wuebber, Barbara Payne, Deborah Ranish, Katherine Reier, Debbie Schaudt, Janice Schier, Beverlt Shock, Beth Snyder, Lori Stein, Kathy Sullivan, Judith Trump, Emily Wofford, Fredi Wolgin, Peggy Young, Carol Wheeler, Peter Bippart, Doug Brozell, Dan Diehl, Karl Doghramji, Mitch Edmondson, Joseph Goldschmidt, Kenneth Baer, Buz Berger, Sol Berman, Paul Ellis, Guy Giordano, Peter Gkonos, Wayne Herrick, Da-shih Hu, Rob Kiefner, James Kolker, David Lauter, Jeff Harner, Chuck Herold, Ray Hillyard, Sam Lauchs, Don Myers, Bob Witt, Mark Lebovitz, David Mannino, Fred Martin, Gary Silko, Barry Skeist, David Trump, Eugene Viscusi, Lee Wugofski, Randy Young, Seth Adelman, Accompanist.

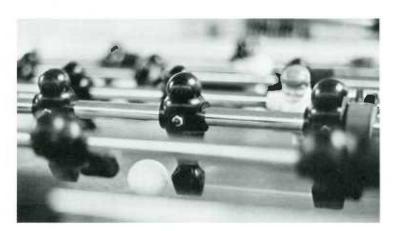


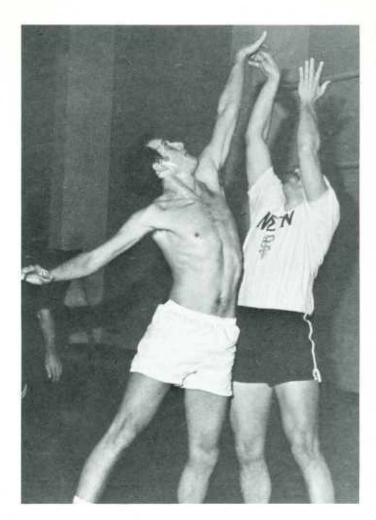
THOMAS JEFFERSON UNIVERSITY ORCHESTRA

Gail Greenspan, Da-Shih Hu, Lee Au, Erika Thickman, Mindy Manshil, Jeff Fong, Mark Hurtt, Ken Buckwalter, Sam Laucks. Not Pictured: Bill Lovett, Violet McKee.

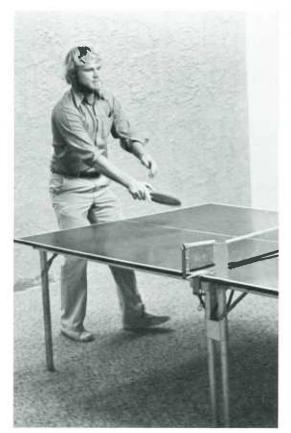


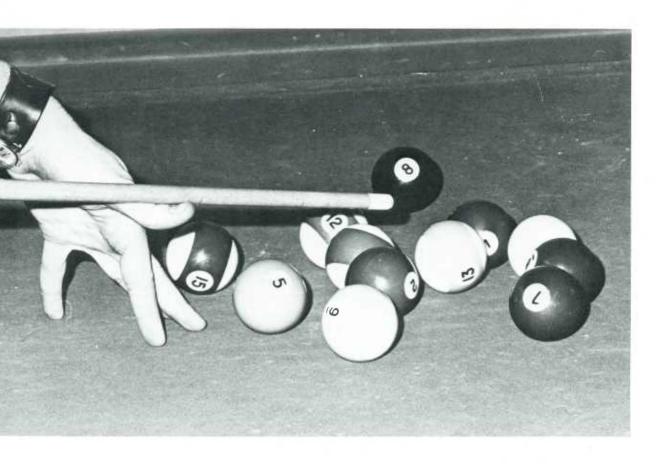




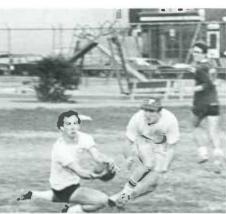
















GIBBON SURGICAL SOCIETY

President: Greg Creegan; Vice president: Dan Kegel. Leo Maguire, Lex McArthur, Ed McGinnis, Buck Boylston, Bill Dleliger, Bob Boran, John Martell, Mark Anderson, Bard Parker, Bill Kocher, Corey Ruth, Mark Rubin, John Skibber, Mark Repka, David Kuranoa, Howard Appendectomy, Marty Nee, Clyde Ishii, Cathy Thomas, George Cour, Tad Nowinski, Steve Corse, Mike Murphy, Marty Shinst, Martin Carney, Jim Balshi, Ane L. Phissher, John Widger, Stan Miller, Christine Kuhnle, Jane Mooney, Kevin Gill, Stu Gordon, Barry Snyder, Art Sheoden, Bob Werkman, John W. Smith, Paul Curtis, Sam Lauchs, Maryanne Ritchie, Wan-Hang Lo.



PHI ALPHA SIGMA MEDICAL FRATERNITY

Back row, left to right: Paul Guillard, Stu Gordon, Cory Ruth, Steve Goll, Leo Maguire, Tom Griffin, Steve Corse, Jerry O'Brien, Bill Polacheck, C.J. Lamb, Jere Wayner, Joe Goldschmidt, Steve Bell, Harry Mateer, Ed Silverman, Rich Lorraine. Front row, left to right: John Woynarowski, Jim Rupp, Bob Snyder, Steve Gadomski, Bill Leisner, Victor Au, Rich Silver, Tom O'Malley. Others not shown: Seniors, Gregg Allen, Charlie Austin, Bob Benz, Joe Kmonicek, Francis Marro, Rich Martin, Lex McArthur, Francis Metkus, Martin Nee, Brent Noyes (sex life — in frequent), Jamie Patterson, Al Rizzo, Jeff Robin, Randy Rowand, Alan Sears, Ira Smith, Craig Smolow, Fred Teichman, Brian Hoover, Mark Spector, Bruce Cohen, Dave Johns, Kim Lamon. Juniors, Noah Babins, Bob Bagian, John Berardis, Steve Cherry, Luther Corley, Richard Cruz, Alan Erickson, Scott Farquhar, Tom Gardner, Alan Gilson, Steve Grubbs, Paul McCreedy, Lawrence Miller, Bob Mitchell, Neil Remington, Martin Scott, Mitch Smokler, Mike Snedden, Donn Tokairin, Mike Vincent, Joe Walsh, Dave Baer, Bob Bashore (president), Bill Kesselring (vice president), Paul Ellis, Peter Christ. Sophomores, Bob Allen, John Bonner, Kevin Boyle, Frank Conley, Tom Corley, Barbara Friedman, Tom Griffin, Charles Holdsworth, Bob Lehman, Drew Mellew, Stan Miller, Shahab Minassian, James Squadrito, James Wilson, Terry Wilson. Freshman, Jeff Amer, Charles Bryner, Francis Day, David Ellis, Glenn Freas, Hervey Froelich, Gordon Langston, James McWeeney, Bob Mirabile, Fred Mallin, Joe Schauer, Paul Schroy, John Siegle, Mark Smith, Alan Stiner, Steve Sudler, Charles Thompson.



ALPHA KAPPA KAPPA MEDICAL FRATERNITY

First row: John Patterson, Doug Hume, Paul Curtis, Bill Dunn, Thurmon Gillespy. Second row: Rick Finegold, Ray Haibach, Steve Myrick, John Woog. Third row: Bill Melemore, Jinnie Armenti, Dave Mannino, Ray Wargovich, Marshall Jordan, Tony Gaspary, Dave Fishman, Bob Werkman, John Martell. Fourth row: Rick Ziegler, Tad Nowinski, John Collingwood, Mike Rommel. On Statue: Rich Fields, (vice president), Mike Kornhauser, Chip Abrahamsen (president). Not pictured: Dave Podrasky, Bob Abrahamsen, John Stagias, Ken Hood, Greg Jack, others.

NU SIGMA NU MEDICAL FRATERNITY

First row: Lloyd Trujillo, Bob Mann, John Angstadt, Marty Carney, Mark Chilton (president), Vince Viscomi, Rob Finley. Second row: Bob Witt, Jeff Wilt (vice president), Rob Kester, Curt Lamperski, Bob Brackbill, Bob Marcello, Tony Cetrone. Third row: Tim Cates, Jim Balshi, Boris Sawula, Chris Wendel, Tim Ryan, Stu Gardner. Not pictured: Brad Beacon, Mac Carabasi, Don Fishbein, Phil Gilman, Ray Hillyard, Scott Kennedy, Bob Kiefner, Mark Kruger, Scott Lawson, Mike Lynch, John McManigle, Doug Michael, Mike Murphy, Dennis Montero, Rick Rybarczyk, Bernie Scherer, Tom Talamo, Tom Wilson, Doug Yingling.





INTER-FRATERNITY COUNCIL

Back row, 1-r: Dave Podrasky, Vince Viscomi, Mark Chilton, Steve Myrick, John Widger. Front row, 1-r: Jim Squadrito, Rob Bashore, Jim Rupp, Mike McCloskey.

ARIEL

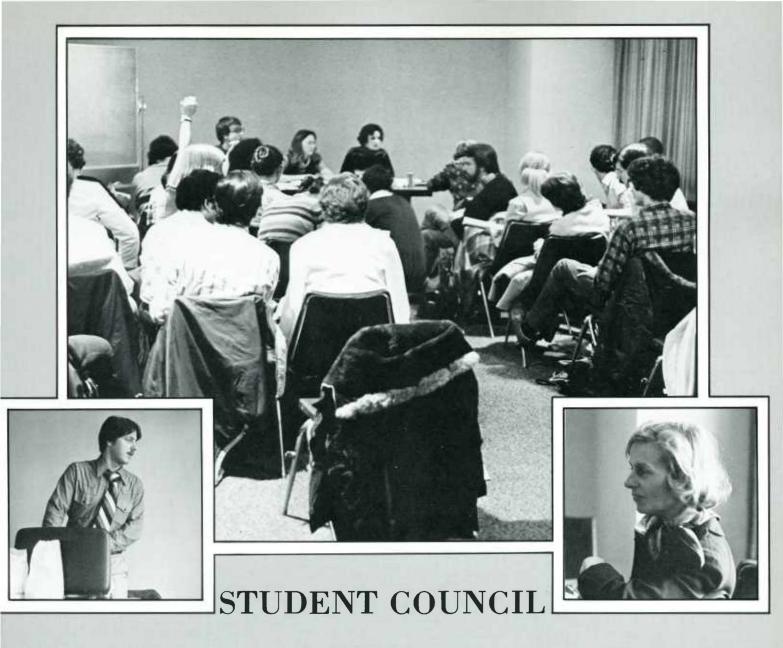
Back row, l-r: Gail Greenspan, Scott Waldron, Jane Mooney, Marty Trichtinger, George Risi, Chris Kuhnle, Ed James, Rich Perry, Brenda Peterson, Marianne Ritchie. Front row, l-r: Betsy McGuire, Rich Margolies, Jamie Lockard (Editor), Dave Gastfriend, Pat Sokas, Shahab Minassian





AMERICAN MEDICAL STUDENT ASSOCIATION

Robert Maro, Marianne Ritchie, David Gastfriend.



OFFICERS: PRESIDENT, Ronald D. Springel, V.P. John O'Brien II, SECRETARY, Catherine R. Zuurbier, TREASURER,

OFFICERS: FRESIDENT, Ronald D. Springer, V.T. John O Brief H, Shocker H, Galden C. Tucker.

CLASS OF 1978: Fred Pavlikowski, Duncan Leaping-Salmon, Normal Rosenthal, Robert Benz, Neil Shusterman, (Alternate)
Jean G. Riley.

CLASS OF 1979: Wilfreta Baugh, J.P. Campbell, Jim Lavelle, Jess St. Clair, Mike Snedden.

CLASS OF 1980: Karl Doghramji, Marty Fallor, Gary Flashner, Christine Kuhnle, Sue Packer, (Alternate) Martin Carney.

CLASS OF 1981: Roger Allcroft, Diane Gilium, Stuart Gordon, Seth Paul, Mark Rubin.

SPECIAL THANKS TO: Robert Mackoviak, M.D., and Carla Goepp, M.D.



The 1961 Society

Members from left to right: Marjorie Lynch, Anne Connor, Marty Shenot, Jeanne Olivia Grant (Treasurer), Heather Watts, Barbara Payne, Carol Wheeler (Vice-President), Jean Grem (President), Kheng Lim. Not pictured: Marilee Frazer, Barbara Gold, Sheva Stern, Miryam Liberman, Diana Brown, Jan Leventhal, Natalie Klein, Stephanie Malleus, Diane Metzger, Wanda Raczkowski, Pam Lieb, Gail Greenspan, Violet McKee, Cindy Pronko, Jill Crollick, Mary McClements.





Jefferson Student Wives



Back Row from left to right: Bonnie Davis, Gail Marro, Linda Summersgill, Marsha Yohe, Chris Martin, Martha Herold, Ann Harris, Jayne Frei, Andrea Dzwonczyk, Diane Heald. Middle Row: Rochelle Kramer, Marylove Guillard, Judy Ditto, Maria Martin Del Campo, Lucy Altamirano. Front Row: Jane Dalzell, Beth Zeigler, Jan Wofford, Kathy Williams, Jo McGlaughlin. Not pictured: Maggie Clayton, Noreen Flynn, Chrysa Tulchiero, Urinda Halti, Jean Hough, Maureen Ibrahim, Meryl Illians, Sue Jahnke, Regina Kegel, Melanie Kibellek, Kathy Martin, Alene Muffly, Sue Rosco, Judy Glick. Santa — Rick Zeigler, third year medical student.

The Flying Bull Student Orientation Book for Students by Students

Bruce Dooley '80 Assistant Editor Gary Mohr '79 Assistant Editor Bob Boran '78 Assistant Editor Jose Garcia '78 Associate Editor Dan Flynn '78 Editor



Bike Club

Gary Loh, Chuck Bryner, Stan Peters, Harry Chaiken, Fred Mallard, John Erdman, Da-Shih Hu, David Dickensheets.

Kappa Beta Phi

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ALPHA OMEGA ALPHA



Duncan Salmon, Prime Minister (a legend in his own time); Beverly Breneman, Social Chairperson; Greg Allen, Comptroller (a legend in his spare time); Joe Lombardo, president (a legend in his own mind; Joyce King, Special Assistant to the Secretary; Chang-Hai Lai, Fomenter of Dissidence; Gail Davidson, Director of Food Services; Jack Brillman, Director of Medical Education. Not pictured: Don and Terry Anderson, Larry Brent.

THETA KAPPA PSI

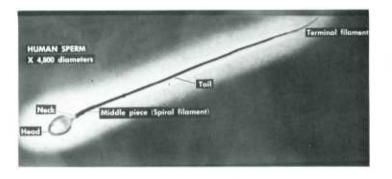
JEWISH MEDICAL SOCIETY

Standing: Ira Freilich, Steve Mendelssohn, Harriet Beller, Albert Scariato, Jerry Rosenstein. Seated: Mark Snyder, Ken Neifeld, Ira Sharp, Sheva Stern, Marc Goldberg, Miryam Lieberman.







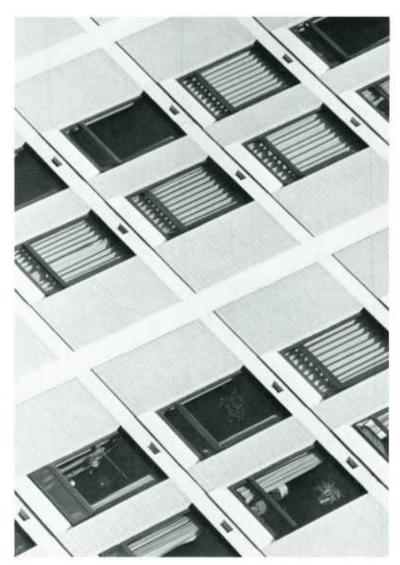


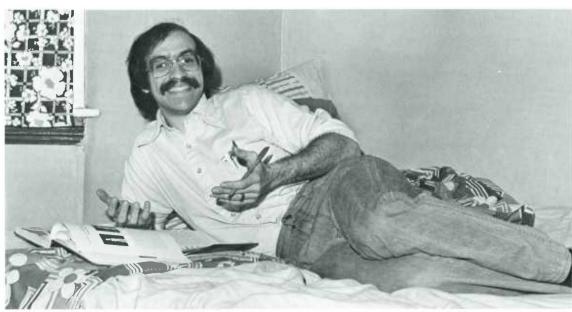












... and they were this big!



Positive 'O' sign.



Photo shot at 1/2,000 sec. to eliminate blur.



Asteroid hyalitis.



220 Autosomes, 7 X and 3 Y.

LUETIC LAMENT

When still a young man, G.E.A.
Thought that syphilis just went away,
And felt that a chancre
Was merely a canker
Acquired in lascivious play.



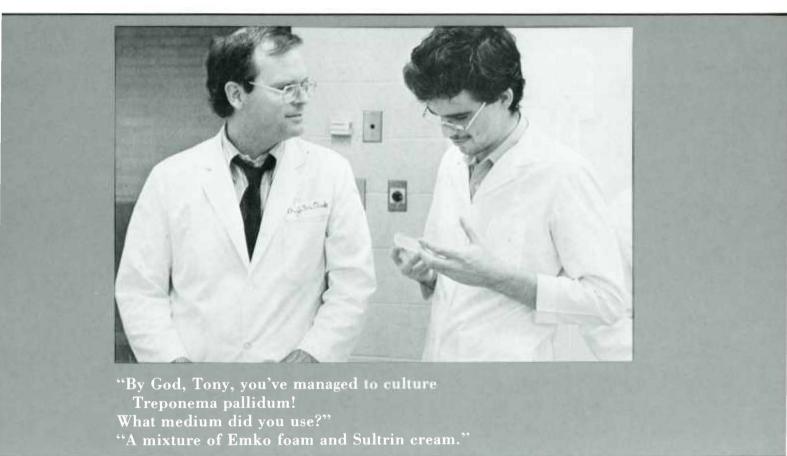
Now first he got acne vulgaris,
The kind that is rampant in Paris,
It covered his skin,
From forehead to shin,
And now people ask where his hair is.

With symptoms increasing in number, His aorta's in need of a plumber, His heart is cavorting, His wife is aborting, And now he's acquired a gumma.

Consider his terrible plight —
His eyes won't react to the light,
His hands are apraxic,
His gait is ataxic,
He's developing gun-barrel sight.

His passions are strong, as before, But his penis is flaccid and sore, His wife now has tabes And sabre-shinned babies; She's really worse off than a whore. There are pains in his belly and knees,
His sphincters have gone by degrees,
Paroxysmal incontinence,
With all its concomitants,
Brings on quite unpredictable pees.

Though treated in every known way,
His spirochetes grow day by day,
He's developed paresis,
Converses with Jesus,
And thinks he's the Queen of the May.



Joe Lombardo's Pruritus (to the tune of John Henry)

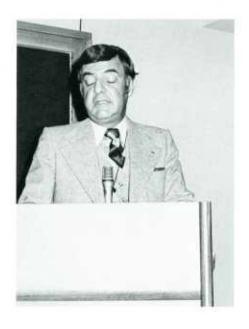
Joe Lombardo, when he was a baby
Sittin' on his daddy's knee,
He picked up an infection from a dirty toilet seat,
Said, "Itchin' gwine be de death ob me, Lawd
Lawd,
Itchin' gwine be de death ob me."

Joe Lombardo he went to the doctor,
Said, "Give me some penicillin please.
When I urinate it stings and I got chancres on my
thing,
And this itchin' gwine be de death ob me, Lawd
Lawd,

Itchin' gwine be de death ob me."

Well, the doctor he said to Joe Lombardo,"Penicillin gonna do you no good.You got a drug-resistant strain and it's headed for your brain,And that itchin' will be the death of you, Lawd Lawd, Itchin' will be the death of you."

ONE DAY IN PATHOLOGY CLASS . . .



You know, ahhh, this disease exclusively attacks the Organ of Zuckerkandle . . .



Excuse me, God . . . you say it also affects the spleen??



I do not wish to seem contrary . . .

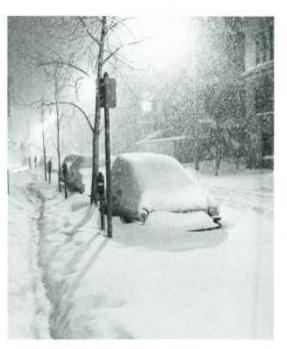


But I am Gonzalo Aponte and in my vast experience have never found the spleen to be involved; and besides . . .



You wouldn't even pass my first examination.

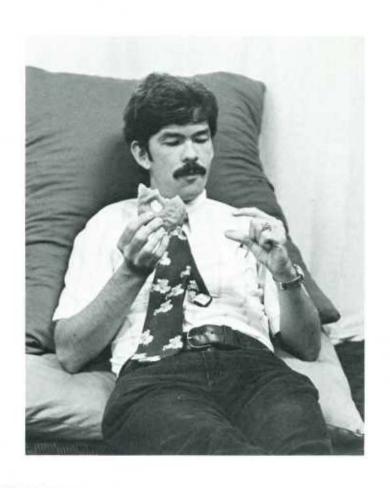


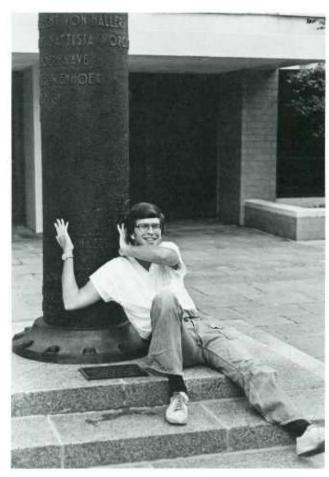












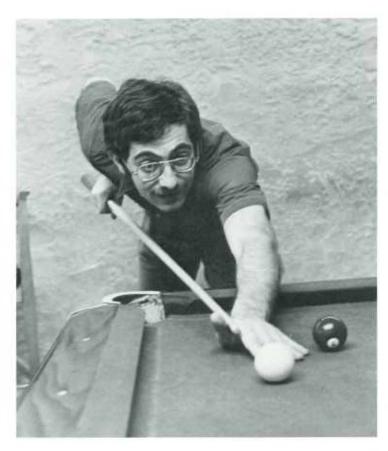








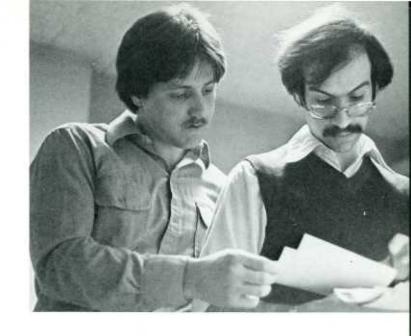






Many Thanks To:

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William Braden
Viola Leszczynski
Nancy S. Groseclose
Lynn Barnes
Barbara Hornig
The Merins
Jean Mink
Robert Mackowiak, M.D.
Kenny, David and Larry, M.D.'s
Vincent Walsh



We hope you have enjoyed reading the 1978 Clinic. This project, which started over one year ago, would not have been possible without the help of many people in the Senior Class who contributed their time, creativity, and advice. There are countless others in the University who performed favors and services without which we would have no yearbook. We thank all of you.

A yearbook can at times be an all-consuming task, but, it never fails, each year a few fool-hardy seniors take on the task. This year was no exception, and we owe a particular debt to Jack (Ishmael) Brillman who, we believe, has authored the best Class History ever. Pat Harper painstakingly typed page after page and Jeff Robin contributed valuable camera-work.

As for the Editors, Marc was responsible for most of the layout, while Ron and Duncan handled the photography and business matters. Putting together the pieces of the book was no easy task for us. We bickered and argued over the most minute details and our criticisms of each other were often more witty than our photographic captions. But, with the wide support and interest of the Jefferson Community our task was made easier.

Using the theme "Four Years of Change", we hoped to depict the metamorphosis of a wide-eyed college graduate into a spanking

new M.D.

The difficult days are behind us. We dedicate this book to you, our classmates. We wish you happiness and success.

Ron Duncan Marc

GOOD LUCK!

Special Thanks:

Sheryl Deana Beverly







H. New Sophomore class officers are Willreta Baugh, J. Campbell, Jim Lavelle, Jess St. Clair, and Mike Snedden. Congratulations to all!

I. Anyone in the Class of 1978 interested in becoming editors of the 1978 Yearbook contact either Ron Springel, Box 77 of the 1978 Yearbook contact either Ron Springel, Box 77 or Cathy Zuurbier, Box 827. An editor will be appointed at the next Student Council meeting, and it was mentione at the 1977 editors would be willing to give the new editors some help getting startes.

J. The Department of Health, Education, and Welfare announce of Health, Education, and Welfare announce of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of Health, Education, and Welfare announce of the Department of the Depar





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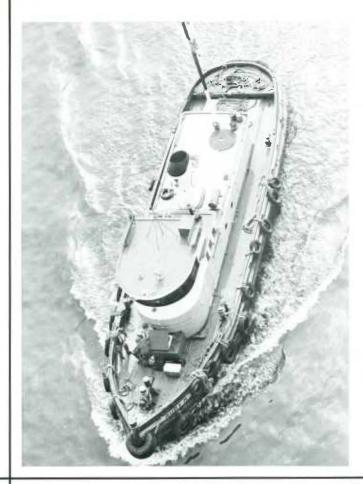


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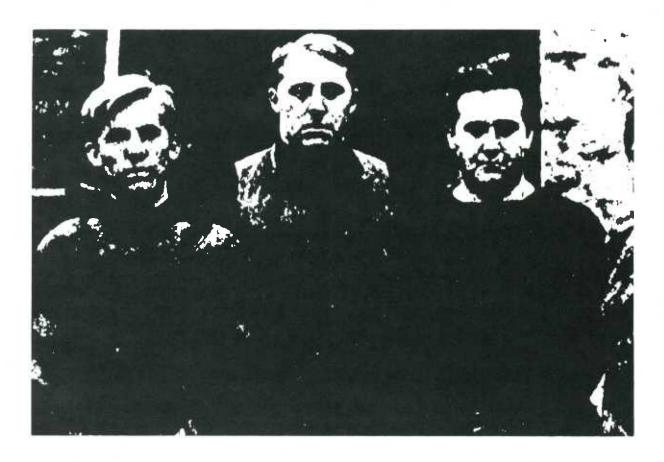
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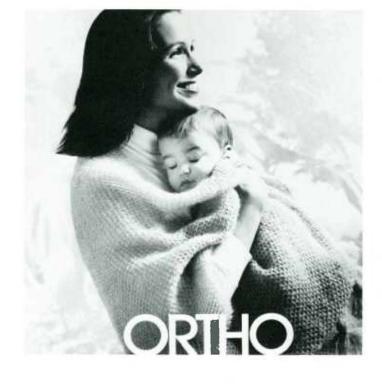
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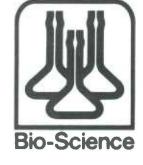
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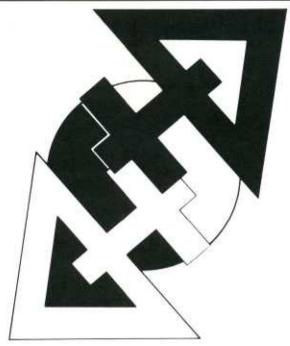
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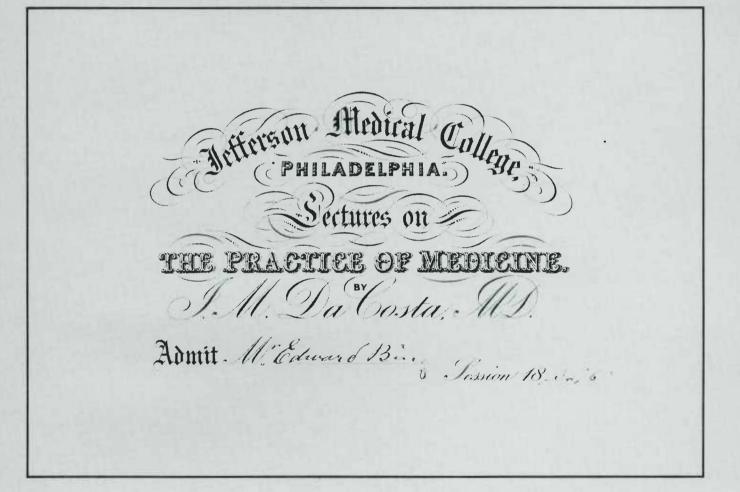
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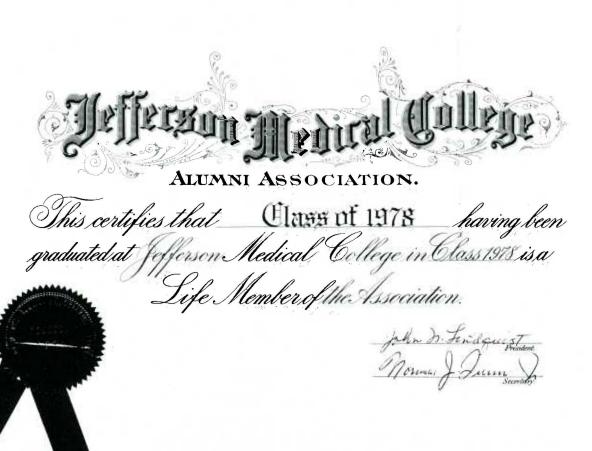
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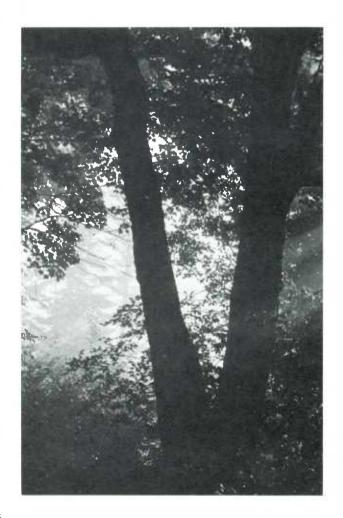
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