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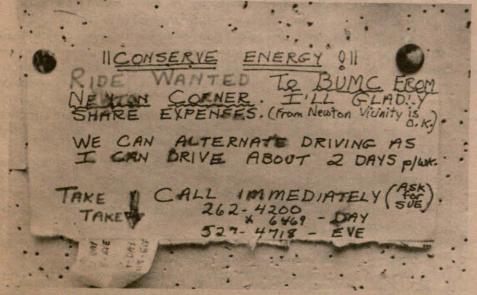
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Front & Center: March-April 1974

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School of Medicine • University Hospital • School of Graduate Dentistry

MARCH-APRIL 1974



POOL POWER — Bulletin board appeal posted in Instructional Building cafeteria conveys the "must-adjust" atmosphere brought on by the current shortage of gasoline. A survey by Front & Center reflects the ways in which Medical Center employees are attempting to adapt their lives to the crisis, at work, at home and, most important, in transit between the two.

PEOPLE TALK: Energy crisis brings stress, hardship — and humor

The universal subdivisions of the present energy crisis — Waiting in Line for Gasoline, Paying Outrageous Prices for Heating Oil, Wearing a Sweater Around the Office — are something like The Great Northeast Blackout or The Day Kennedy was Shot: Everyone has a personal anecdote which illustrates how the situation has affected his life

The Medical Center's population reflects this global phenomenon. As a recent People Talk survey by the Communications Office revealed, it is all here: Wry commentary, insightful observations, angry expletive, humorous asides and even boring repetition of the same sorry tales.

 A medical student says lecture halls are so chilly one has trouble getting to sleep during class.

A pharmacy official sees dangerous new stresses arising from people's concern over such matters as getting enough gasoline to get to work.

— A secretary says this latest crisis has completely disillusioned her about all of our political leaders.

 An information clerk has no problem at all in getting enough gasoline — her fiance owns a gas station.

Here are some BUMC people and what they think. Perhaps one of them will reflect your opinion. If not, get it off your chest in a letter to the editor, care of Office of Communications, Doctors Building, 203.

VICTOR PARK, Maintenance,

"The price of oil bothers me the most. The prices have gone up drastically in recent months; for instance, my oil went from 23 to 38 cents a gallon. I keep my thermostat at 67 degrees. Another thing that really bothers me is Daylight Saving Time—it's too dark when I come to work by MBTA. I worry about that part. I don't own a car—so at least I have one less problem than many other people."

NANCY BERTE, dental assistant student:

"You can't go anywhere these days without worrying about where you're going to find gasoline. You get to a gas station, and wait in line, and then you find out that he has no gas. I missed a good party last weekend because of it."

RICHARD FULD, assistant director of the Hospital Pharmacy:

"The greatest effect of the whole thing, to my mind, is the new stress it has put on people. When you he house in the morning, you have to start worrying about getting gasoline: Is it an odd or even day? Does the station even have gasoline? Is there going to be a long line? Even if it is your day for gasoline, many stations don't have any to sell. So people start worrying about a new form of transportation, trying to get to work by train, subway, bus, car pooling. The anxiety is something terrific. You add these anxieties to the ones we already have,

(Continued on Page Three)

New moves taken to tighten security

Edwin Stedman, director of University Hospital security since December, has taken a number of steps which, with the cooperation of all Medical Center employees, will significantly tighten security and cut down on the number of unpleasant and costly incidents that have plagued the hospital in recent years.

In cooperation with Peter Davis, administrator for Patient Care Services, Stedman has taken the following steps:

— Cut down the number of entrances open to the public and employees:

— Instituted a "hot-line" telephone number — quadruple 6, or 6666 — that goes directly to a 24-hour security post in the Health Services Building;

—Armed the UH security patrol with MACE;

 Launched a training program to increase the competence of the security force;

—Streamlined and formalized the existing administrative reporting system, the logs kept by security men at all stations.

Davis and Stedman, in announcing the changes in entrances, stressed that the step is being taken for the benefit of all patients, employees, students and visitors. The changes, immediately effective, are as follows:

1 - Building F (ECU), main en-

UPFRONT

The number one topic along Harrison avenue is the same as it is everywhere else these days — the gasoline shortage. The Front and Center survey elsewhere in this issue bears out the intense problems and feelings on the subject. Certainly the Sargent administration did not win any friends when it initially announced its adoption of the Oregon Plan with special consideration to salesmen. The system was later loosened up and certain classes of individuals with special license plates like M.D.s now also are

(Continued on Page Nine)

trance: open from 7 a.m. to 9 p.m.;

2 - Acute Diagnostic Referral Center, main entrance: open 24 hours a day (mainly for patients);

3 - Health Services Building entrance, East Newton street: open 24 hours a day;

4 - Main entrance to New Evans, Evans Way: open 5 a.m. to 9 p.m.

All other doors will be closed for access to and from the hospital.

Stedman, in expressing the necessity for all persons leaving the building to avoid using emergency exits, revealed the results of a recent test to show how common—and potentially dangerous—such activity is:

In a single eight-hour period, a security man tallied 274 persons leaving through a single emergency exit. Their use of the door, in turn, allowed 77 persons to enter from the outside. "That means that 77

(Continued on Page Nine)



MORE THAN A 'GAME' — Tensions show from the grandstands and team bench as the Boston Celtics close in on yet another frenzied finish. Team physician Thomas Silva of the Medical Center stands by with Coach Tom Heinsohn, ready to meet the unwelcome eventuality of injury to an athlete. Story, pictures, Pages 6 and 7.



A SPECIAL SEMINAR — Medical students gain valuable insights and expertise dealing with ski injuries in an unusual program at Mount Snow in Vermont. Two students are chosen for each of the winter months to go to the slopes, where they work in the clinic and on the mountain, offering a little extra "security" to skiers. Pictures, Page 5.



STORMY DAY SURPRISE — Delores Long (second left), unit management, had a landmark day recently: 20 years in the employ of the Medical Center and focal point of a surprise party given by co-workers and friends. Fellow employees from Unit Management attending the celebration included, from left, Linda Joseph, Jim Burns, Stephen Oakley and Rose Shay.

Special honors for long service

Friends and co-workers of Delores Long of Unit Management made a recent stormy Friday a warm and special day, with a surprise party to commemorate her 20th anniversary with the Medical Center.

Mrs. Long, manager on the 3 to 11 p.m. shift, had the added pleasure of having two long-time friends heading the festivities: Betty Bell of ECU F-5 and Barbara Anderson of New Evans-8 served as co-hostesses at the affair, which was held in the Evans dining room.

Mrs. Long, who lives in Dorchester, is married to Herbert Long, a construction and rehabilitation contractor.

In addition to her considerable responsibilities here at the Medical Center, Mrs. Long has another "ca-

reer" in progress: She is a student of geriatric social work, and has been studying at Northeastern University for eight years, three days a week.

"My long-range interests, and the program I am presently involved with, revolve around working with the elderly, either in social work or in nursing homes. As a matter of fact, I am also taking courses in management directed to that possibility. I am interested in following all of this up in graduate school."

"Please let me thank through Front and Center, all of those who made my party so nice, especially the Management Department, Mr. John Betjemann and Chaplain Leicester Potter."

Dr. Williams heads BCH surgical service

The Board of Trustees of the Boston Department of Health and Hospitals has announced the appointment of Lester F. Williams, Jr., M.D. as director of Surgical Services at Boston City Hospital.

Dr. Williams, who began his medical career as a student at City Hospital, has replaced Dr. John A. Mannick, who has become surgeon-inchief of University Hospital and chairman of the division of surgery of the Boston University School of Medicine.

Dr. Williams, a professor of sur-



Lester F. Williams, Jr., M.D. Surgery Director

gery at the School of Medicine, has specialized in the treatment of trauma and gastrointestinal problems. Prior to his appointment, he served as chief of the Gastrointestinal Section of the Division of Surgery at University Hospital, and he maintains these responsibilities.

"The new medical center environment" created with the reorganization at City Hospital last year, has eliminated the medical competition and administrative inefficiencies that were common when BU, Harvard and Tufts were running separate services, Dr. Williams points out.

The reorganization, he feels, "lets us address ourselves to the care of patients as our first and most important job."

Dr. Williams, a resident of Shrewsbury, is a graduate of Brown University and BU School of Medicine. He has held teaching appointments at the School of Aerospace Medicine, U.S. Air Force Medical Division, Willford Hall U.S. Air Force Hospital and San Antonio College. He is the author of more than 72 medical articles and publications and is a member of numerous medical societies, while serving as treasurer of the School of Medicine Alumni Association.

Unique collaboration gives invalid new chance

A young man whose entire life has been that of an invalid has a new lease on life through unique medical collaboration between City Hospital and University Hospital.

Twenty-two year-old Josue Gutierrez of Fayston street, Dorchester, went home Saturday, Feb. 23, following successful open-heart surgery at UH.

Physicians at both institutions believe Gutierrez's case is a perfect example of the excellent medical care made available when many BCH-UH services were officially merged last July.

Previously, both institutions maintained highly expensive and specialized open-heart teams and facilities, neither utilized to full capacity.

Since July, BCH has continued to admit and care for patients with heart disease. But if they require open-heart surgery their cardiologists consult with University Hospital specialists and the resources of both institutions are combined. The final determination is made on medical, not economic grounds.

Twice in preparation for the five-hour procedure the patient suffered cardiac arrest and had to be revived by electric current to restore the rhythm.

The slight Puerto-Rican-born resident, the oldest of eight children of Mr. and Mrs. Francisco Gutierrez, is the youngest patient in the annals of either BCH or UH ever to have two of the heart's four valves implanted. The two institutions were among the first in the nation to perform openheart surgery.

Dr. Robert Berger, chief of Cardiothoracic Surgery at UH, and a veteran staff member at Boston City, directed the Gutierrez procedure.

"I am extremely pleased with his recovery," said Dr. Berger. "He was literally living the life of a cripple and now he can live a normal life.

"The Gutierrez case is unusual in several respects since in America we rarely find such severely damaged rheumatic valves at the age of 20 and we have not previously replaced two valves in someone so young.

"I am personally impressed that the consolidation with City Hospital and the new system established months ago have worked so well. We have pooled our facilities and are avoiding a great deal of expensive duplication of services."

Dr. William Hood, BCH chief of cardiology, speaking as a senior staff physician responded, "This was truly an extraordinary case.

"The patient developed rheumatic fever much later than normal and more severe than most people. There is no question his life was threatened but he pulled through because of good treatment and coordination of services."

BCH senior physicians Dr. Hood, Dr. Pantel Vokonas, Dr. Kevin Conboy and Dr. Yuzo Hirota, who are on the staffs of both BCH and University Hospital and are faculty members of BU School of Medicine, have been involved in the care of this unusual case. University cardiologists on the case were Dr. Thomas J. Ryan, chief, and Dr. John F. Keefe, his associate.

The individual who has followed him from his first day at BCH is an energetic house officer, Dr. Elisabeth Simms, a 1972 BU School of Medicine alumna. Gutierrez frequently refers to her care, compassion and interest during his three extended stays at BCH as well as frequent visits to its Primary Care Clinic in the Outpatient Department.

The patient himself is extremely delighted with the improvement of his condition and spent much of his time before discharge walking through the wards.

"I am grateful to all who have helped me and I hope that other people with similar problems will come forth and seek treatment."



RHEUMATIC FEVER SURVIVOR Josue Gutierrez is shown with members of his family prior to his recent discharge following open heart surgery at University Hospital and lengthy hospitalization at City Hospital. The 22-year-old resident of Dorchester had two artificial valves implanted after his heart stopped beating twice. He has lived as a shut-in since birth but now can work and be active at a moderate rate. His mother, Mrs. Francisco Gutierrez, and two of his seven brothers and sisters, David and Margarita, prepare to help him pack.

PEOPLE TALK





PARK BERT (Continued from Page One)

like the high cost of living, and it makes things pretty bad. At the Medical Center, everyone is trying to do a good job, helping people to get well; but with all the hassles about gasoline and everything, there are some days when you get to work, and you just feel like turning around and going home."

ERMA BERKMAN, secretary, School of Graduate Dentistry Clinical Research Center:

"I am most affected in the area of personal mobility. I must drive to work, since I have a lame leg. I stop at gas stations which have a green flag out, but many times even they don't have gasoline. And despite the fact that a lot of people are getting up earlier in order to wait in a gas line, a lot of them are delayed getting to work, so it is affecting their jobs. I think the crisis was brought on by government being short-sighted. After all, they should have known for a long time that this thing was coming along. As much as I dislike Mr. Nixon, I can't blame it all on him; it must have been developing long before he came into office. One concrete result of it is that I feel every single politician is interested first in feathering his own nest and, second, in helping the people."

MIRIAM GUSTAVSON, hematology technician, University Hospital:





GUSTAVSON

MORANT

"I have to get up an hour earlier to take the Trailways Bus in here. I drive from East Bridgewater to West Bridgewater and have to get there a half hour before the bus leaves in order to get a seat. We usually leave about 20 people standing at the curb because there were no seats for them. The bus leaves at about 6:50 a.m. and gets into Park Square anytime between 7:30 and 8 a.m. Then, I walk to the Medical Center. The problem with getting gasoline on the South Shore is that you have to have an appointment for it, and many stations are not open until 10 a.m."



SARAH MORANT, cashier, Acute Diagnostic Referral Center:

"My main problem with this crisis is with Daylight Saving Time: When I get my daughter up for school, she won't get up because she can see it is dark outside, which means to her that it isn't morning yet. Is there really a shortage of gasoline? I don't believe it. Where did it all go overnight?"





O'NEIL

MARZOUK

MARY O'NEIL, nurse clinician, 8th Floor, New Evans:

"I can only get gasoline on my day off, because on working days, I come in here too early and leave too late to have enough time to wait in a line somewhere. So the oddeven plan doesn't work for me. I don't take the MBTA, because it would take me too long to get here from Allston. Here on the floor, we are noticing shortages of things affected by the energy and paper shortages - for instance, plastics (derived from petroleum) for items like catheters, syringes, connecting tubes of all types. And paper utensils and even tongue blades are in short supply."

JOSEPH MARZOUK, medical student:

"I don't have the gasoline problem, because I don't have a car. But where this energy thing is really hitting me hard is in the cost of heating. oil. It's really atrocious, that's all I can say. On the gasoline shortage, I can make one comment: Not as many people are offering rides any more. The crisis hasn't had too great an effect on our medical school work. However, it is pretty cold in the lecture halls these days makes it harder to fall asleep in class." (A fellow student noted at this point that quite a few students are cutting classes so they can go out hunting for gasoline).

MARGARET ANDREOZZI, Assistant Librarian, Medical Center Alumni Library:

"We have a dozen people here, and all but one have stopped driving to work and are now taking

... about how the energy crisis affects their lives and jobs

public transportation. There is much more safety in driving to work and there have been security problems on the MBTA. But, so far, there have not been too many reports of trouble, beyond one purse theft. Others have seen things happen though, so people do have this in mind. The crisis has affected us in our work, at least insofar as supplies are concerned. We have been asked to give a longer lead time on items that we need."

ELAINE BERNIER, information clerk, University Hospital:

"Well, I guess I'm luckier than most people are in this matter of gasoline: My fiance has a gas station. One thing I don't care for is this Daylight Saving Time arrangement. I come to work at 7 a.m. and I don't like arriving in the dark."

MARGUERITE SHAW, secretary to School of Medicine Dean Ephraim Friedman:

"I have a daily round-trip drive of 66 miles to and from here and my home in Acton. If we get into line at 6:30 in the morning, we can usually get gasoline. The only form of public transportation from that area is a train that leaves from West Acton, and that takes two hours, so it is out of the question for me. The fuel crisis has affected Dean Friedman's travel plans as far as airline reservations are concerned. The dean has had difficulty getting gasoline also, but fortunately for him, he lives nearby in Newton."

GLEN TAKEI, medical student:

"Coming to school isn't too bad now, but we are getting assigned to outlying hospitals, and some students are having trouble getting gas





ANDREOZZI

BERNIER

to make those trips. I have been late to class several times because of the wait at gas stations and some students are cutting classes in order to go look for gasoline. The lecture hall is especially cold these days."

DUANE LE DOUX, Medical Center control center:

"I think it is the oil companies, not the government, that deserve the blame for the energy crisis. I commute to work from Salem, N.H., and haven't had any great problem getting gasoline. Salem, since it is so close to the Massachusetts border, is on the odd-even rationing system, but the lines are not as bad there as they are here. Our control center here is attempting to conserve energy. Since this all began, we have cut back considerably on fuel and light. On rooms which are not occupied, we have cut back





SHAW TAKEI between 1/4 and 1/3 from the average. As long as the temperatures outside stay in the 20's or above, we can realize considerable savings."

PAULETTE HOUSTON, community worker, state Department of Mental Health, Consultation and Education office, Psychiatry:

"I had a fuel problem just like everyone else — until my car died. Then the problem was solved. I take the MBTA now, and it isn't too bad, really. The heating at home has not been a great deal worse than usual. I feel this whole energy crisis has been contrived."

DR. MUKUN MUKHERJEE, pediatrics director, Neighborhood Health Center, Columbia Point, and clinical professor of pediatrics, City Hospital:

"Personally, I feel I have been very fortunate in being able to get all of the gasoline I need to get around to my work. However, the fuel shortage has affected one of my favorite weekend activities — travelling around New England."

DIANE BARRY, secretary to Dr. Alan S. Cohen, chief of medicine, Boston City Hospital and director of the Thorndike Memorial Clinic:

"I am still able to drive in to work. We have a car pool going, and that is working out pretty well. I suffer the same anxieties about this fuel crisis that everyone else does. I have no heat problem at home, since we are heated by natural gas. Like Dr. Mukherjee, I have had to cut out weekend trips, which I enjoyed. I do not believe, like some people, that this shortage is going to be over soon."



LEDOUX



HOUSTON



MUKHERJEE



BARRY

Your unloved lamp may be a treasure — to someone else

Do you have an unwanted rug, unloved lamp or neglected quilt that you've been meaning to throw away for years but never have? The Boston Center for Adult Education, a non-profit organization located at 5 Commonwealth Ave. in Boston, is looking for your "treasure."

The Center is sponsoring a major fund raising auction on Saturday, March 30, proceeds from which will hopefully keep the Centeralive and well without a large tuition hike. Student tuition fees presently cover about 90 per cent of the Center's rising operating fees.

"We'll accept virtually any item as long as it's in good condition," says Joel Miller, a pharmacologist at the Medical Center and advisor to the auction chairman. And, for those

people who do not have "collectibles" to donate, the Center will also accept service donations, such as car tune-ups, laundry service or dinnerfortwo.

"The only things which we cannot accept," notes Miller, "are appliances, mattresses, and books. And, we'd prefer not to have clothing unless it is of unusual value, such as a Victorian dress or a fur coat." The Center has also suggested that all items should be "interesting enough to bring at least \$5. at the auction."

Among the more extraordinary items that have been donated so far are several signed lithographs, a collection of antique marbles, a ten by seven foot chandelier and a collection of antique cooking utensils.

Lewis leaves UH post to head N.H. hospital

John B. Lewis, assistant to the administrator of University Hospital, left his post February 15 to become president of the Cheshire Hospital in

For Lewis, the new appointment represents the fulfillment of a longterm personal goal: To become the director of a regional medical center. He is enthusiastic about the possibilities for expanding and improving the programs at the Cheshire Medical Center.

Lewis's seven years at the Medical Center has been a time of surging growth for the Center's physical plant. The New Evans Building, the Extended Care Unit, the Doctors Office Building, the Health Services Building, the School of Graduate Dentistry and the School of Medicine have all been completed since his arrival in 1966.

"My first impression of University Hospital was that it had only one way to go - up," Lewis recalled. "The first hurdle is now overcome," he believes. The current challenge to the Center lies in "developing organizational patterns more fully and developing relationships with the affiliated hospitals to a greater extent.

Lewis feels that "through the efforts of many people we've been able to create a Medical Center with a bright future." He expects the "new organizational structure developed with the leadership of Dr. Egdahl, the three division chiefs, administration and the Board of Trustees "to lead the Cen-

Lewis and his wife, Shirley, have a 21-year-old son and a 16-year-old



GOOD TO THE LAST DROP - Popular Assistant Hospital Administrator Jack Lewis is surrounded by wellwishers at his recent farewell reception. Elaine Podrachik, radiotherapy administrative assistant, and Dr. Scott Abercrombie, chief of clinical laboratories, were among those who greeted Lewis.



MODELING FOR 'MAME' — Lucille Ball shows off two of the splendiferous gowns from the \$300,000 wardrobe she wears in the title role of "Mame". The creations served as the inspiration for Leo Narducci's 'Mame Collection" which will be presented by the Jordan Marsh Fashion Center in a mini fashion show as a feature of the ForSight Foundation sponsorship of the motion picture premiere, Tuesday evening, March 26, at Cinema 57 in Boston.

'Mame' premiere to benefit BUMC Vision Rehab. Clinic

beneficiaries of the New England \$100,000 for the Clinic, will be prepremiere of "Mame," the tech- ceded by a reception and dinner at the showcase of Warner Brother's Foundation's patrons and sponsors. Golden Anniversary.

The premiere, under the sponsorship of the ForSight Foundation, principal source of funds for the Vision Rehabilitation Clinic, will be held on Tuesday night, March 26, at the Cinema 57. According to For-Sight president Richard J. Schoenfeld, Mrs. Edward W. Brooke, wife of the U.S. senator, will serve as are available at Capital Bank, 1 Bullhonorary chairman.

The Medical Center's Vision Re- The theater event, which marks habilitation Clinic and persons with the inauguration of ForSight Founsevere visual disabilities will be the dation's 1974 campaign to raise nicolor musical comedy hailed as the 57 Restaurant for ForSight Medical School Dean Ephraim Friedman, chairman of the ForSight Foundation, will present the organization's first Humanitarian Service Award to Peter Fuller, prominent Boston philanthropist and business executive.

> Tickets to the "Mame" premiere finch Place, Boston, 02114.

Leaders in rehabilitation of visually handicapped due here Apr. 26-27

dividual. The program will be held cial Education. in the Keefer Auditorium.

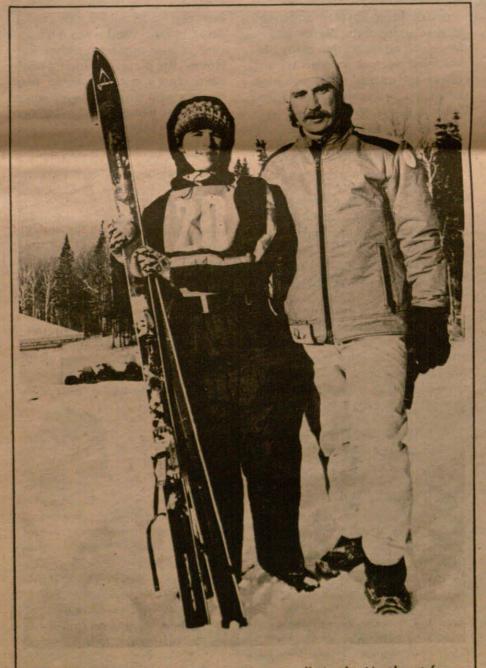
Faculty for the course will consist of staff from the BUMC Vision Rehabilitation Clinic, the Joslin Clinic, Massachusetts Eye and Ear Infirmary, Perkins School for the sachusetts Commission for the Blind.

The Medical Center will be the Blind, Bureau of Special Education, cene of a two-day course in re- Massachusetts Association for the habilitation of the visually handi- Blind, Albert Einstein Medical capped person on Friday and Satur- School, Harvard Medical School, New York Light House, Manhattan The course, sponsored by the Eye, Ear and Throat Hospital, Mas-Vision Rehabilitation Clinic, will sachusetts Commission for the bring together the disciplines Blind, Massachusetts College of needed to socially and physically Optometry, Goddard College and rehabilitate the partially-sighted in- the Massachusetts Division of Spe-

The program will open Friday, April 26 with remarks by Dr. Carter B. Tallman, medical director of the Vision Rehabilitation Clinic, Dagmar B. Friedman, the clinic's administrative director and John Mung-Blind, Carroll Rehabilitation Center ovan, commissioner of the Masfor the Visually Impaired, Mas- sachusetts Commission for the March-April 1974



'JUST A BIT TIGHTER' - Dr. Wolf, left, supervises as ski patrol member John Pollack, right, and medical student Charles Higgins splint leg of ski accident victim for transportation to clinic.



WINTER OLYMPICS — the first held regionally in the Northeast for retarded young people - was successfully staged recently in Rangeley, Me., with more than 300 participating. Dr. William Tosches, a senior resident here in neurology, contributed his weekend as medical coordinator. He had a busy time checking frostbite, falls and seizures but reported the event was a big success with competition in skiing, snowshoeing, skating and tobogganing, plus sled dog, chair lift and snowmobile rides. (Photo by Dave Pratt, Saddleback Mountain)

Medical 'school' on a mountain

Each year, an important "lottery" takes place at the School of Medicine: The names of dozens of medical students go into the hat, and the eight that are finally drawn out are on their way to Mount Snow, Vermont, for an unusual medical-recreational program.

The students are participating — two each month for the months of December, January, February and March — in an elective orthopedic course set up by Dr. Robert E. Leach, chairman of the department of orthopedic surgery. At Mount Snow, they are under the guidance of Dr. Michael (Mickey) Wolf, who operates the clinic there. In the clinic and on the slopes, the students are exposed to instruction and practical experience in dealing with the unique injuries that go along with skiing.

As the photos indicate, there is a pleasurable mixture of work and play involved in the course — and fellow skiers find they feel a bit more secure with these medical students on hand.



CENTRAL CASTING — Medical student Charles Higgins fashions cast for unlucky skier in Mount Snow's clinic, gaining experience in orthopedics while enjoying some time on ski slopes.

Credit union offers 90-day account

The Boston University Employees able to eligible shareholders. Appli-Credit Union has announced establishment of 90-day notice accounts at .5 per cent above the declared dividend rate on no-notice share accounts. The announcement was made at the recent 22nd annual meeting of the BUECU.

At the current dividend rate, the 90-day accounts will earn six and one-eighth per cent. Based on a minimum share balance of \$1,000, with additional multiples of \$500, the new plan is immediately availcations are available at the B.U. Personnel Office on the second floor of Building A and the hospital's employee relations office in Vose 1 or at the Credit Union Office, 718 Commonwealth Ave.

Two Medical Center employees were elected as directors of the Credit Union at the annual meeting. They are Sabra Carl, UH personnel manager, and John Friedberg, School of Medicine Office of Minority Affairs.

Health before victory

Dr. Silva: Celtics' key man..

By Bob Ryan, Boston Globe Special to Front & Center

An army may indeed travel on its stomach, but a professional sports team needs something more than that to accomplish its goals; namely, healthy players.

Next to 7-foot centers who can dribble behind their back, the thing basketball teams need most these days is a competent medical staff, thanks to the rigors of a schedule which can run well over 100 games if a team is fortunate enough to make it to the playoff finals.

Despite all the recent coverage of Capt. John Havlicek's leg injury, you rarely read much about Boston Celtic injuries — which must mean that Red Auerbach isn't interested in finishing last just so he can draft the top med student out of this year's graduating class. Not as long as he has the Medical Center's Dr. Thomas Silva at his side. (Havilcek, incidently, was treated by Dr. Silva at UH, spent some time recuperating and is now back in the lineup.)

For the last six years, Dr. Silva has been the team physician of the Celts, and University Hospital has served as the team's hospital. There haven't been any complaints from either side.

Dr. Silva's background in sports medicine — he was the physician for the Boston University football and hockey teams in the early '60s — made him a natural when the Celtics were searching for a physician in 1968. A mutual friend of Dr. Silva and Auerbach put the two in touch, and Silva has held the job eversince.

A job is what it is, too, and not just a nice seat next to the Celtics' bench. "It's a time-consuming job in which you're dealing with highly publicized athletes," he says, "and, consequently, everything you do is recorded on the TV screen, radio and in the newspapers.

"It's also a job in which they want instantaneous service, much more so than in private life. Whether it's right or wrong, it has to be that way. For example, trainer Frank Challant has called me during a game from the road, most recently from Hershey (Pa.) when Dave Cowens injured his elbow in the first quarter. Five years ago, (then trainer) Joe DeLauri had to consult me when

Jim Barnes was injured in San Diego."

"He's on call 24 hours a day," confirms Challant. "I've called him at 11 o'clock San Francisco time (2 a.m. Boston), and he hasn't complained."

Without question, the central dilemma confronting every athletic physician is the conflict between his responsibility to the team and to the general health of the player. For instance, it is no secret that many harried team doctors on high school, college and professional levels have consented to anesthetizing injured limbs in order to speed a player back into competition. After all, they reason, I'm being paid to keep players in competitive form, aren't

"Dr. Silva," explains Challant, who has a very close professional relationship to him, "always practices defensive medicine. He takes the health of the athlete into consideration before the score of the game or the standings of the series."

The most recent example of both his and the Celtics' enlightened philosophy occurred last spring when superstar John Havlicek injured his right shoulder in the third game of their playoff series against arch-rival New York. As badly as Boston needed their leader, the decision was made not to inject Havlicek with any pain-killers. He was given a mild oral medication and heat treatments. He couldn't recover in time, and the series was lost in seven games. But John is now free from worry, and he's back in top form again, unlike a couple of other stars of recent vintage who were used as human pin cushions and whose careers were jeopardized as a result.

Dr. Silva values the fact that his advice and counsel is appreciated by Auerbach and coach Tom Heinsohn. "There is mutual cooperation and confidence right down the line," he contends. "They have always backed me."

"Dr. Silva," says team business manager Jan Volk, "is one man who is universally respected in this organization."

For one thing, Dr. Silva is truly industrious. "He is always there at least two hours before game time," says Challant, "and is ready to take care of any problems either Red, Heinie, the players or myself might have. That's not like some team doctors who show up two minutes before the game and say, 'Let's go, gang. Here I am.'"

During playoff time, Dr. Silva becomes totally dedicated to the Celtics, traveling to every game. He was instrumental, in fact, in getting the league to make it mandatory for each team to have a physician with them on the road during the playoffs. He had one brush with a potentially explosive situation (whether or not to inject a rival player whose doctor was not there), and he doesn't want another.

If there's one credo he goes by—
aside from placing the player's
health above the winning of one
game—it's his desire to maintain a
(Continued on Page Seven)



STRETCHER CASE - When any

ballplayer comes off the floor on a

stretcher, it is bad news. When that

player is someone like former Cel-

tic superstar Bill Russell, the recol-

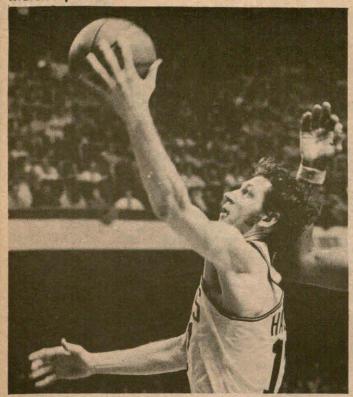
lection is particularly acute. Celtics

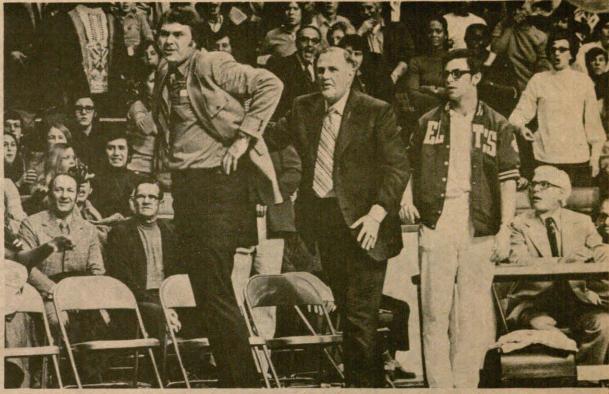
physician Silva recalls this moment

JUST CHECKING — Dr. Silva checks Celtic guard Artie Williams for a minor throat ailment, illustrating that the dramatic injuries are only part of a team physician's job. Dr. Silva's concern for the health of his ballplayers extends to making sure all family members are receiving timely and expert care, for concern over a sick child or wife can affect the athlete himself.



FROM SATCH, WITH APPRECIATION — Dr. Silva and Medical Center Chief of Orthopedics Robert Leach look on with pleasure as longtime Celtics star Tom "Satch" Sanders presents UH staff members with an engraved plaque expressing his appreciation for "excellence in nursing and other services" during an operation on Satch's leg and the subsequent recovery period. The memento today hangs at the Robby 6 nursing station. Receiving the plaque are, from left, Miss Coleman, Mrs. Gray and Mrs. Jackson.





HONDO HANGS ONE — As Celtics Captain John Havlicek soars toward the basket, the tension shows from the sidelines. For fans, it could be an all-important two points. For Coach Tom Heinsohn and Dr. Silva, the anxiety has an extra dimension — the possibility of injury to team's key player.

University Hospital: The team's hospital

Since 1968, when the Boston Celtics and Dr. Thomas Silva got together with team health in mind, University Hospital has been "The Celtics' Hospital." Although most of Dr. Silva's work with the ballplayers takes place wherever the game action is, there has been some important "action" right here in University Hospital city. Dr. Silva recalls a few of the highlights:

America, looking over the shoulder of national television, saw Bill Russell lying on the floor of Boston Garden and wondered why he didn't move. The Celtics captain had leapt for a rebound against Willis Reed of the New York Knicks in this crucial 1969 match. The two superstars had collided, and Reed looked all right. But what was the matter with Russ?

Dr. Silva, sitting at the sidelines when the collision took place, was now running towards the fallen athlete and one thought flashed through his mind: Could it be a cardiac arrest?

While television zoomed in and dozens of newspaper and magazine

cameras recorded the moment's tension, Silva began checking the inert Russell. Then came a hoarse whisper: "I'm allright, Doc."

Well, he wasn't completely all right — Russell's leg was injured, but the whispered words were reassuring.

Then, as fans and members of the press began closing in, Dr. Silva, with his towering patient riding a stretcher, began an emergency rush by police ambulance for University Hospital where the damage could be assessed and — hopefully — repaired.

While the University Hospital switchboard lit up with calls from Celtics fans all over the country, Dr. Silva hunted for and finally found a room for his super-sized patient. A special bed was brought to Robby 7 and University Hospital went to work on basketball's all time star. Then, Dr. Silva and Celtics general manager Red Auerbach went to meet the waiting reporters and, through them, to reassure anxious fans that Russell was all right and in good hands.

"At a time like that, both the athlete and I can feel most appreciative of the facilities and talented people standing ready at the end of the ambulance ride. Russ, you know, isn't the only Celtic who has benefited from the great people and the standards of excellence here," Dr. Silva said

Russell, who was physically exhausted in addition to having the leg injury, stayed at University Hospital for five days on that occasion, then went back to action.

Tom (Satch) Sanders, one of the most durable of the Celts in recent years, exemplifies the gratitude felt by the players. In 1970, Sanders had been injured at a Sunday afternoon game and was brought to University Hospital for X-rays. On the basis of subsequent examination, an operation was recommended. But Sanders opposed it, feeling that it might endanger his basketball career. However, it became apparent later that his career was going to be cut short if he did not have the operation: The leg problem was hampering his usually smooth play. Satch ultimately gave the go-ahead for an operation, and the leg was repaired by Dr. Silva and Dr. Robert E. Leach, chief of Orthopedics.

Sanders was so pleased with the outcome of the operation and the treatment he received from the University Hospital staff at all levels that he had a special plaque designed and hung at the Robby 6 Nursing Station saying thank you to all the staff "for excellence in nursing and other services."

In 1970, Dr. Silva recalls, forward Don Nelson was on his back in Collamore 6, in traction for an upper back and neck condition. As Nelson came out of a deep sleep one afternoon, he saw a young woman sitting by his bed, just staring at him. It was a student nurse, one of Nelson's fans, and she was determined to sit by his side on her free time.

Nelson was flattered, but a bit disconcerted, nonetheless.

On another occasion, Jim Barnes was injured in a freak accident: He was caught in a jet blast from another aircraft while alighting from an airliner. He was treated at University Hospital for the results of this accident, which included ringing ears and headaches among other reactions.

Other members of the Celtics family — including coach and former player Tom Heinsohn and Captain John Havlicek — have been patients here, as has John Waldron, former president of the Celtics and president of Ballentine Beer, which owned the team at one time.

Dr. Silva's work with the individual athletes goes well beyond the men themselves. Celtics families needing medical attention and looking for a doctor are assisted by Dr. Silva, since the families' health is crucial to the outlook and total health of the ballplayers themselves.

With all the professionalism and sophistication at University Hospital, however, the human touch is felt by Dr. Silva to be of paramount importance. The Cetics, being public personalities, must and do respond graciously to their fans, wherever there are. But when a ballplayer is ill, it is important that he be allowed as much privacy and peace as is possible under the circumstances. Staff people who encounter the basketball players and any other "personalities" in their daily work here can do a lot to get the ballplayer back into action simply by thinking of this important factor in health care. Such a thoughtful attitude would demonstrate that one is a true fan, since excellent health care and a quiet recovery can be translated into the return of a star performer to top shape - and that, in turn, is always translated into excellent bas-

Which is what being "The Celtics' Hospital" is all about.

Doctor to the Celtics

(Continued from Page Six

truly professional doctor-patient relationship with the athletes. Thus, if a player is admitted to the hospital, he avoids any hint of the circus atmosphere that could arise due to the presence of a celebrity.

He feels a great advantage of his hospital affiliation is his ability to call on the advice of a wide variety of specialists. It's a common misconception that basketball injuries deal exclusively with the ankle and knee. "We've consulted dermatologists, eye, ear, nose and throat men and internists, and we've handled psychological problems, as well," he points out. "I think it's very important to remember that the players are not robots, but human beings, and that you must treat the whole person, just as you would

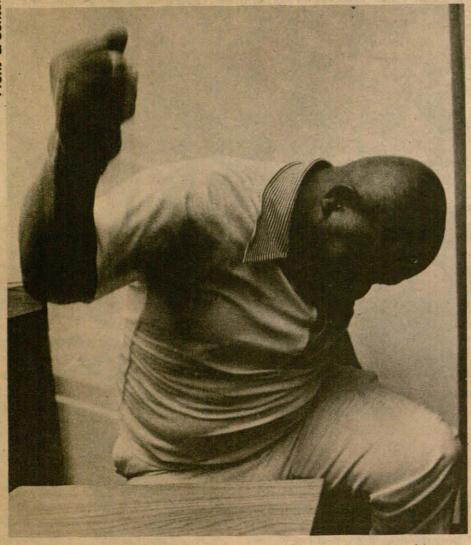
in private life."

If he has a pet peeve, it's the shamefully inaccurate reporting that is done on injuries. "A lot of people have been misled by amateurish reporting after writers and broadcasters were given the correct information," he laments.

Aside from his medical expertise (he is a general surgeon, incidentally), his greatest asset is his easy-going personality. The players are relaxed around him, and this can't fail to aid their confidence in his professional ability.

His enthusiasm for the job shows in his gracious manner. "The big thing," says Challant, "is that he loves his job, even if he often gets exhausted."

Right now, it looks like it's his for as long as he wants it.



THE HAMMER — Louis McKnight, UH orderly by vocation and karate champion by avocation, shows his form for Front & Center's camera. (He stopped short of the table top).

Champion McKnight sees karate as religion, business

By Helen Marvel

Louis McKnight is probably the only Medical Center orderly who is just as adept at breaking the human body as he is at helping it to mend.

McKnight, a familiar figure on the night shift on the fourth and fifth floors of the ECU Building (F), is a member of the U.S. karate team, and ranks fifth in its heavyweight division. He holds a fifth degree Black Belt in karate as well as a first degree Black Belt in judo. Some day he hopes to be one of the few individuals in the world to obtain a karate Red Belt.

McKnight, a veritable champion, has been competing in karate for five years and has accumulated an impressive array of trophies to testify to his mastery of the sport.

In 1973 alone he won the California karate championship, the Philadelphia championship, the Madison Square Garden Invitational, the Southwest championship in Louisiana and came in second in the World Wide Invitational Championship in West Germany.

In 1971 he took the world heavyweight karate title. He became the national heavyweight champion in 1970, 1971 and 1972.

The key to success in karate is to avoid the fear of being hurt. The mental process involved is like "psychology in reverse" according to Lou. You have to be fast, too, in executing your moves and countermoves in order to fake the other person out, he explains.

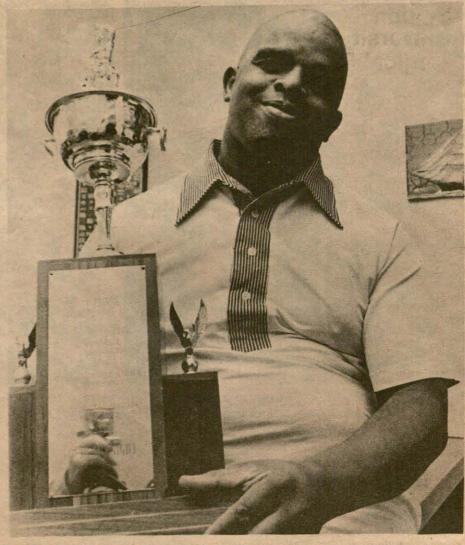
McKnight has been studying karate for about 11 years. In 1964 he traveled to Tokyo to study under the masters at Kodokan, the foremost school of karate in the world. There he devoted ten hours a day to his work, drank a lot of tea and sucked many lemons, which the Japanese say are good for quick energy.

"The Japanese have no fear of death or pain," remarked McKnight, so they are naturals for practicing karate. Their attitude towards the human body is not nearly so preservation-oriented as the prevailing western one, he noted. For the Japanese, the body is merely a means to an honorable life, not an end in itself.

For Louis McKnight, karate is both a religion and a business.

McKnight's dedication to the sport requires a lifestyle which the ordinary person would consider an austerity regime. A brisk three-mile run wakes the champ each morning. No matter what the weather, residents of Creighton street in Cambridge can see a muscular 210-pound figure making the neighborhood circuit accompanied by the no less awesome shadow of his 130-pound dog.

Working out in the gym takes up at least four hours of Lou's day. "The



RECOGNITION — A smiling McKnight holds one of his most treasured trophies: First place cup for his performance in the Second Annual Karate Championship, Heavyweight Division, at Madison Square Garden, 1972.

hardest part of karate is training — you have to keep it up," he reiterates. He watches his diet, too, sticking mainly to steak, liver and salad in addition to downing about three quarts of milk a day. "It's good for the bones," he explains, mentioning that he has suffered broken teeth and ribs on occasion. Smoking and drinking are, naturally, taboo.

When McKnight isn't participating in the religion of the body or working nights at the Medical Center, he rounds out his busy life teaching judo and karate. He teaches children who have been in trouble with the law at the Academy of Self-Defense in Dorchester. "Judo and karate are the only activities that teach self-control without trying to intimidate people," he

The karate expert also teaches at Ventresca School of Karate in Somerville, where many of his pupils are women. Women usually opt for judo rather than karate, he says, because karate is so hard on the hands. His longterm ambition is to open his own self-defense school for the entire family. "There's good money in karate," McKnight believes.

Leaving the Medical Center early one morning last winter, McKnight had an opportunity to put his knowledge of self-defense into practice on his own behalf. When three young men, one armed with a razor, jumped him, his deft karate movements saved him. The police arrived to find his three would-be assailants scattered on the ground around him. They got a good chuckle out of the scene when they learned of McKnight's identity.

People often comment to McKnight on the contrary implications of his interest in karate and hospital work. He doesn't see it that way. Enjoying the personal contact he has with patients he serves, he says, "if you make a sick person smile once a day it's worth it."

Meeting to bridge law and medicine

Current issues bridging law and medicine form the focus of a series of three meetings at the Hospital in upcoming weeks.

"Law and Medicine Today" is open to all Hospital and Medical Center personnel. Sponsored by the Department of Anesthesiology and the Center for Law and Health Sciences of the University the series meets Wednesday afternoons, March 27, April 3 and April 10, from 3:30 to 5 in the Keefer Auditorium.

Organized by Dr. Martin L. Norton, newly appointed associate professor of anesthesiology, the programs will emphasize basic concepts in legal medicine

The March 27 session will give an

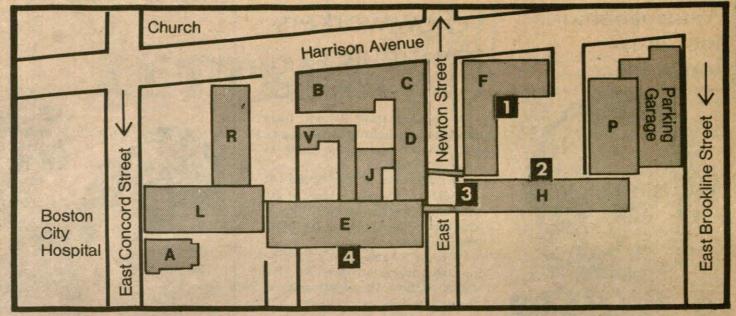
introduction to legal medicine, discuss torts and contracts and deal with criminal law. Jean Rubinow, J.D., a research associate in healthcare research at the Hospital, will lecture.

Dr. Norton will conduct the April 3 session. Topics scheduled to be presented include: The Expert Witness; What To Do When Complications or Catastrophe Intervenes During a Medical Care Situation, and Insurance.

Lecturing at the April 10 session will be George J. Annas, J.D., director of the Center for Law and Health Sciences. His topics include: Consent to Treatment; Patients' Rights; and Human Experimentation.

Boston University **Medical Center**

University Hospital		
Robinson	B	
Collamore	C	
Old Evans	D	
Doctors Building	P	
New Evans	E	
Extended Care Unit	F	
Betatron	J	
Health Service Building	H	
Vose Hall	٧	
Boston University Buildings		
Instructional	L	
Research	R	
Building A	A	



TIGHTER SECURITY — Peter Davis, administrator for Patient Care Services, has announced changes in entrances at University Hospital to provide increased security for patients, visitors and employees. Letters above in black boxes indicate the following open hours: #1 - Building F (ECU) main entrance: 7 a.m. to 9 p.m. #2 - Acute Diagnostic Referral Center main entrance: open 24 hours. #3 - Health Services Building, East Newton street: open 24 hours. #4 - New Evans, main entrance: open 5 a.m. to 9 p.m.

Security steps won't work without cooperation

(Continued from Page One)

persons entered the Hospital in that one period of time without our security people getting a chance to check them out," Stedman notes. He also remarked wryly that this test period was well after all employees had received a letter from UH Administrator John H. Betjemann, specifically warning against the use of emergency exits.

Within a month, all security personnel will be armed with C.I.P. (chemical irritant propellant), better known as "Mace." The chemical is housed in a regular weapon, not just a cannister, and is equipped with safety devices, so that it can not be tripped inadvertently. "This should serve as a valuable deterrent," Stedman said.

"Our aim is to upgrade security in all areas, to protect the possessions and well-being of all patients, employees, students and visitors — but we can't do this without the full cooperation of everyone concerned," Stedman said. "There is a tremendous number of entrances and exits here, because of fire regulations and just the way the complex grew. We hope that all employees will recognize the importance of what we are trying to do, and will help by using the proper

doors and also questioning wandering persons who come into their departments. We are also looking for feedback from all departments and employees that may help us accomplish our job."

Stedman pointed out that everyone who comes into or through the Hospital - whether they are students from the Medical or Dental Schools, employees of Boston University or are merely visiting - can play a part in tightening up security by cooperating with the security force, using the proper doors and reporting unusual happenings to security officers.

The "Quadruple Six" telephone number is that of the 24-hour security post at the elevator lobby of the Health Services Building (Building H) at 75 East Newton Street. The person manning that post will be able to respond quickly to any situation, and can deploy other security people from his central post. If an employee has occasion to call 6666 and does not get an answer, it will only be because the officer is on an emergency call of some sort. In such a case, it is recommended that the person needing the officer's assistance go directly to that East Newton street post.

Upfront: Vandals deface new chapel in ECU

(Continued from Page One) exempt from the odd-even arrangement.

Since then we have heard from many "docs" who admit they gave up their M.D. plates because of widespread auto breaks by individuals seeking drugs. House officers, nurses, therapists, technicians and others with direct patient responsibilities also have been left out. Individuals working the 7 a.m. - 3 p.m. shift have been hardest hit. Few gas stations are open at 6 a.m. and by the time they get off in the afternoon there are few still open. The same story is heard at every Greater Boston medical institution.

The following stations have been found to be fairly reliable though the charges at one are probably the highest in the city. The Gulf, Flying Scot and Arco dealers on Massachusetts avenue heading to Dorchester are used by many Medical Center drivers. The Flying Scot is open 24 hours a day and is a dime higher than the others. Kenmore Square is a little further but some people report good success and short lines on lunch hour.

UNIVERSITY HOSPITAL'S largest employee affair in memory may take on a Medical Center flavor if preliminary negotiations can be worked out. Ted Maddalena, director of the Pharmacy and chairman of the Hospital Employee Relations Committee, reports his committee has decided to stage their spring barbecue again on the Talbot green. They also have extended an invitation to the deans at the School of Medicine and Graduate Dentistry to participate as well but no decisions have been made as yet. Also in the planning stages are the traditional Recognition Day and a dinner dance cruise in Boston Harbor. Arrangements are also in the works to sponsor a Celtics Day next season.

HAVE YOU NOTICED how the Mental Health Center and BCH's new Outpatient complex are moving along? The Center should be completed by the end of the year, barring strikes or shortage of supplies. Representative Doris Bunte, formerly a member of the Medical Health Center Area Board, has filed a bill in the Legislature to name it in memory of Dr. Solomon Carter Fuller. Dr. Fuller was a graduate of the School of Medicine in 1897 and has been honored as America's first black psychiatrist. He lived and practiced for many years in the South End and Roxbury. The BCH Outpatient Building stretches across Massachusetts avenue and also is showing rapid progress.

WELCOME BACK to Ms. Darlene Vance of the UH Administration Office, who was off for sick leave. Incidentally, the Vance family has strong medical ties. Son Stephen is a first year student in the School of Medicine in the six year program. Daughter-in-law Susan is a nurse in the recovery room at Boston City.

If you are unhappy with the new exit procedures for University Hospital, you may think differently after hearing the reasons for the new emergency exit signs and barriers. Unauthorized persons continue to enter the premises at night and nurses have been complaining of the problem. During the day the threat to patients, personal belongings and Medical Center equipment continues. Persons who leave by Emergency Exits are allowing outsiders to enter later. Perhaps the saddest incident of late was the vandalism of the new Chapel. It was de-

faced after hours in a number of ways, with damage to the altar, the beautiful stained glass windows, prayer books, plants, and other objects. As a result the Chapel, formerly open 24 hours, is no longer open evenings. Patients, visitors or staff can still gain admittance evenings by calling for a security guard. Give the patients a break. Do not leave by an Emergency Exit.

Larry Strum

Health care crisis in S. End to be probed

Is there a health crisis in the South end? That is the topic of the South end Interagency Council's Forum uesday, March 19, at the South End Library at noon. Tris Blake, administrator of the South end Health Center, will moderate a panel of expens and consumers.

Dr. Leon White, commissioner of Health and Hospitals, Dr. Gerald Hass, medical director of the South End Clinic and Dr. David French, the Medical Center's ranking comnuoity health person, will partici

Anticipation: the key to food service



Terry Elliott

"To make the eating experience of guests something to look forward to" is the objective of the Medical Center's new Dietary Director, Terry Elliott.

Elliott succeeds Judith Williams as director of the dietary services offered to hospital patients and employees in the Center's three dining areas and patient areas. He comes to Boston from Utica, N.Y., where he was in charge of the food services at General Electric.

"The hardest thing in the food service field is to correctly anticipate guests' needs," according to the new director. He believes that "food service to patients should be a continuation of therapy and should be as pleasurable as pos-

Elliott hopes "to create an atmosphere of greater response to the needs of patients and employees" in supplying their food.

Elliott commutes from Hanover where he lives with his wife, Peggy, and his two-year-old son, Sean, on Old Town Way.

A Stouffer employee for 11 years, Elliott holds a Bachelor of Science degree in Hotel and Institutional Management from Iowa State University.

Guthrie tribute

A musical tribute to folk singer and writer Woody Guthrie will be presented by the Folk Song Society of Greater Boston on Saturday, March 16 for the benefit of the Committee To Combat Huntington's Disease.

The performance, to be sponsored by the Brookline Health Department, will be held at Brookline High School, beginning at 8 p.m.

The Committee to Combat Huntington's Disease is based here at the Medical Center, at 80 East Concord

The show, "Bound for Glory", is based on Guthrie's autobiography. Guthrie was afflicted with Huntington's Disease, a neurological disorder for which there is no known

Featured performers in the "Bound for Glory" show are Michael Cooney and Tony and Irene Saletan.

Fellow workers pay tribute to Gladys Howard

A generous spirit is gone from Lab 1018 in the Housman Research Building with the recent death of Gladys Howard.

Mrs. Howard, whose brother is Daniel Finn, a vice president of the University, had been a lab worker at the School of Medicine for more than 10 years.

"She played a key role in keeping our lab going every day," said Dr. Carl Franzblau. She would arrive at the lab at 6:30 every morning to brew "the best coffee in the department" according to Dr. Marott Sinex, chairman of Biochemistry.

"She treated the whole lab as her family," recalled Barbara Ferris, senior lab technician. "To the medical and graduate students, she was like a mother." Gladys would often fix breakfast for the students. One of them mentioned her in his thesis.

A speech impediment did not interfere with Mrs. Howard's ability to communicate. The sensitive concern that she displayed towards everyone at the lab has become a legend. "She was unconcerned with her own problems, but very receptive to the problems of others," explained Dr. Herbert Kagan. Dr. Helaine Foster remembered the kind words of encouragement that Mrs. Howard had given her as a student before her orals and other exams.

A childless widow, Mrs. Howard maintained an active interest in the families of her fellow lab workers. She carried pictures of Dr. Franzblau's children in her wallet. "The most outstanding quality about Gladys was the way she would amble up to you in the hall and give you a big smile," said medical student Marvin Berman.

She had been hospitalized since September and had suffered several strokes. Gladys Howard lived with her cousin, Hazel Wood, on Westland avenue in Boston.

Helen Marvel

tospital observes Dr. King birth date

The birthday of civil rights leads artin Luther King Jr., was official served by Hospital employed n. 16 A majority of the staff wa ven a holiday while a skeletor www.was kept on to provide esse il patient services and emergenc

Do King graduated from BU chool of Theology in 1955 and wa nown by some members of the ege days. He worked his way brough school washing dishes in a irls' dorm on Bay State Road and ave guest sermons each Sunday at irea churches.

Charles River campus staff and tudents mark his assassination day n April when classes are sus

Mrs. Coretta King, his widow elped dedicate the Dr. King Afro



ASH WEDNESDAY RITES — Assistant Chaplain Frank Gold administers ashes at recent services held in the new chapel to mark the opening of the Lenten season. Father Gold and Chaplain Leicester Potter were joined in the interfaith service by a number of UH employees, medical students and patients. The laymen conducted most of the services on their own, with the two chaplains participating more as members of the congregation than as leaders of the observance.

New employees

Medical Center

Medicine Richard Justice, Francis Russell, Deborah Bernstein, George Bury, Frances Cochios, M. Judy Fan, John Howard, Aaron Lopez, Margaret Smiddy, Stephen Edge, Gail Ra-

Preventive Medicine: Charles M. Deckman III, Helen Hall.

Psychosomatic Medicine: Thomas Hefele, Richard Brown, Robert Reiss, Carol Rowesmitt, Arthur LaFluer, Diane Roomets, Shari Shapiro. Drug Addiction: James Dewitt, Larry Bouyer, Lorna Bowling.

Neurology: Thomasin Berry, Francis Porter, Joan Mul-ler, Donna Bretz, Deborah Copeland Biochemistry:

Kathy Wirthwein, Robert E. Jordan, Lisa

Child Development: Paul Miller, Marjorie Pullman B & G:

Jack Minkin, Williams W. Rodgers, Melford Williamson

Nuclear Medicine: Harold Shore.

Surgery:

Barry Connell. Library:

Psychopharmacology: Peter Kaufman. Behavioral Pharmacology:

Jack Levine Infectious Diseases:

Patricia Perkinson

Lab Animal Science Center: Terrance Smith

Gerontology Program: Maura Jane Griffin.

Anatomy: Mary Alba.

Ophthalmology:

Biocommunications: Fred Delorey

Director's Office: Linda Frew.

Dean's Office: Alison Gilbert.

Development: Terasa Guerin. Roxbury Court Screening Board: Raul Marrero.

Pathology: Linda McGrory

New Careers Program: Lucy Ramirez. **Thoracic Services:**

Chantal Wuillaume.

University Hospital

Nursing: Judith Saykin, Mary Osborne, Lucy Basel, Robert Neuman Mary MacDonald, Susan Zacharias, Cathy Szarnicki, Margaret La-Hage, Wendell Cartwright, Ethel Offley, Bet-ty Luongo, Jacquelyn Olsen, Susan Budassi, Ellen O'Donnell, Marilyn Pires, Mary Glynn. Computer Center - Director: Duncan Glendon.

Inpatient Accounting - Manager:

Theresa Lavigne.
Housekeeping:

George Harris, John Thomas, Carol Rodriquez, Frank Washburn, Osianna Jeune.

Dietary:
Thomasina Johnson, Jo-Ann Toombs,
Charles Bryant, Margett Holmes, Rosalind
Kenney, Stephanie Cruz.

Surgery Joseph Kambe, Frederick Heller, Mark

Nursing O.R.: Beth Aronowitz, Kevin Sullivan. Nuclear Medicine:

Hoda Shore, Sing Pang. Social Service-Social Worker:

Margaret Mast, Socorro Santiago. Neurology: Russell Butler, Donna Kelley.

Maintenance: Robert Mini, Michael Paradiso.

Accounting: Surenna Orford, Kathleen Alanout. Otolaryngology:

Boutros Payek. Computer Center - Secty.:

Patricia McLloyd. Anesthesia:

Adolph Carreiro, Ashok Shah. Radiotherapy - Tech.:

Veronica Tabb. **OPD** Accounting: Herman Bouchard. Medical Records - Ass't. Adm:

Cynthia Smith. Inhalation Therapy:

Shelley Shulman. Lab Service:

Julia Preuoe.

Purchas. g: Renee Offley.

Hyper & Athero: George Garuccio.

Psychiatry: Lucy Ramirez.

Radiology: Quality Assurance:

Barbara Pietila Communication:

Jean Smith.

Medical Records: Joan Foley.

Tel & Tel: Rose Lewis, Robin Frierson. EKG:

Kerry Bryant, Child Psychiatry: Amarilys Ribera.

Hematology:

Robert Jackson. Unit Management: Susan Pratt.

A hundred thanks

To the Editor:

I wish to extend my thanks to Dr. Murray Freed and the Centennial Committee for their untiring efforts in planning and executing the entire Centennial Convocation program. I am aware that the people were faced with many obstacles in the course of their tenure, but be assured that the end production was of the highest order. I consider the Convocation the most impressive program that we have presented at the School of Medicine.

I have received so many favorable comments from faculty and friends of BUSM that all concerned should consider the entire affair a good job, well done.

Sincerely, Ephraim Friedman, M.D. Dean of School of Medicine

The following were members of Centennial Committee: Murray M. Freed, M.D. Chairperson, Thomas F. Boyd, M.D., Irene Christopher, Andrew D. Elia, M.D., Robert Fox, Donald R. Giller, Phyllis Kornguth, Ph.D., Milton Kosen, Mary Kraft, Constance MacDonald, Elizabeth K. Moyer, Ph.D.,* John F. O'Connor, M.D., Arnold Oppenheim, Edward W. Pelikan, M.D., James W. Rosenberg, M.D., Daniel Ross, Francis J. Staro, M.D., Lawrence M. Strum, Frederick F. Yonkman, M.D.

* Deceased

Word choice 'poor'

To the Editor:

I happened to be reading the December, 1973 Front and Center with keen interest. I find it a most interesting communication mechanism and one that deserves many plaudits.

However, in that issue, I came across an article about William Armstrong who recovered from a bullet wound in the heart. One paragraph in this article disturbed me greatly, a quote to the effect that Mr. Armstrong praised the Medical Staff lavishly but his complaint about the hospital was the food. I understand Mr. Armstrong is a former chef. It might not have occurred to anyone that his bland diet was a medical necessity. Your publication's poor choice of words in this paragraph arouses my ire for the fine work being done by the hospital's Dietary Department to meet the needs of patients at University Hospital. (If this is to be an employee publication and employees read it, how would you feel if you were a Dietary employee reading that paragraph?)

Thank you for your concern in this matter.

Sincerely, Peter Davis Administrator for Patient Support Care Services

LETTERS[®]



Three simple steps could ease the 'temper crisis'

To the Editor:

We can not immediately solve "the energy crisis." I believe, however, that we can alleviate the "temper crisis."

I proposed that each gasoline station have a sign clearly legible to passing motorists which would indicate:

1— The hour they start pumping gas;

2— The approximate time they stop pumping gas (since most stations limit the number of gallons sold per day);

3— How much gas they will sell to each customer.

This will curtail needless driving in search of an open gas station. In addition, it would be most helpful if stations would stagger the hours they are open, rather than all opening at 8 a.m. and closing at 10 a.m. All stations could be listed according to town and hours of operation in the daily newspapers.

Sincerely, Jeffrey C. Rudikoff, M.D. Dept. of Diagnostic Radiology

Two positive years

To the Editor:

As I take my departure from University Hospital, I want to thank all of the directors of nursing, supervisors, coordinators, head nurses, nurse clinicians, instructors, unit managers and administrators for the support they have given me as assistant director of nursing for continuing education and as director of nursing for operative and postoperative services.

These past two years at University Hospital have been two of the most positive of my career, as I have learned so much from all of you and have had the opportunity to share experiences and knowledge in our common goal of providing quality patient care.

Again, my sincere thanks. I shall miss all of you and think of you often.

Judith A. Kiernan

Meaningful memories

To the Editor:

I address this message to all my friends and associates at BUMC:

In the past seven years, I have seen and been a part of the evolution of BUMC into a great Medical Center. My fondest memories, however, will be of the employees and staff who have made this period of time so meaningful to me.

As I leave University Hospital I wish to extend to all employees and staff my sincere appreciation for your counsel, advice and friendship.

Good luck in your future endeavors,

Jack Lewis (Mr. Lewis, assistant to UH Administrator John H. Betjetmann, recently took a post as president of the Cheshire Medical Center in Keene, N.H.-Editor)

Impressive quality

To the Editor:

On Sunday evening, October 14, 1973, I was brought in as a patient to Boston City Hospital emergency room suffering with what apparently was a cardiac emergency. I was greatly impressed with the efficiency and competency of the emergency room staff and the medical officers who were given responsibility for examining me. Since my medical problems are well known to me, and I am involved in continuing treatment by a cardiologist, I elected to leave the emergency room following the cessation of my immediate distress. This decision was taken by me in spite of the advice and strenuous protestations by the medical residents. I hope that they continue to practice the kind of conscientious medicine which was made available to me that evening in spite of my decision to override their judgment in my own case. Clearly, had I been in their position with any other patient whose presenting symptoms were comparable to mine, I would have attempted to admit that

The quality of medical care and the swiftness and efficiency from the time the ambulance reached the door through the examining period was most impressive. As a District of Columbia official in the field of medicine, I would hope that more of our hospitals could emulate the system which you operate so effectively.

Most sincerely,
Jefferson R. McAlpine, M.D.
Administrator, Dept. of
Human Resources
Mental Health Admin.
Government of the District
of Columbia
Washington, D.C.

'Dedication' felt

'To the Editor:

I wish to express my appreciation to the nursing staff on the seventh floor of the New Evans Building for the care that was given to my mother, Bella Jacobs, during the time she was there.

She was very confused mentally and stubbornly insistent on not eating or drinking, yet I watched the nurses and aides coax her for an hour until they got her to drink a few ounces of ginger ale. They nursed her with such perseverance that infected sores started to heal, she was eating a bit without having the food forced through a tube and the nurses even managed to chat with me and be sympathetic to my problems.

On observing the difficulty an aide had in cleaning her up after one particular ordeal, I was so impressed that I begged her to take a little money from me as a sign of my appreciation. She absolutely refused and told me she wasn't allowed to take tips — it might mean the end of her job. All the nursing staff I have had contact with impress me with the same sense of dedication to their profession as this young woman has, and I am very grateful.

Sincerely yours, Elaine Lesco Sharon, Mass.

Rhetoric vs. action

To the Editor:

On Wednesday, October 31, I spent a stimulating day at the Solomon Fuller dedication. I left feeling hopeful about the future for minority group involvement in the medical professions. Later in the evening when I had a chance to read the front page of the "Boston Post" (a centennial publication - editor), I was again encouraged about the future for minority groups in medicine. However, when I reached the back cover and saw that the picture representing "responsive medical education" did not even include a minority member, I had second thoughts about the high sounding rhetoric I had heard all day.

Is this an example of what Dr. Leon Eisenberg labeled unconscious racism or an example of gross insensitivity and lack of understanding of community relations?

The question is rhetorical since I only want to express my reactions to the dichotomy of the rhetoric vs. the action.

Sincerely, Mrs. Takako Salvi

Editor's Note:

The photo in question was taken one noontime when the pictured students happened to be taking a breather. Since the editor and photographer are both representatives of minority nationalities themselves, it would be difficult to call them by any of Dr. Eisenberg's labels.

Christian appointed to Trustee Corp. position at BCH

John L. Christian of Dorchester has been appointed general manager of the Trustees Corporation of the Boston Department of Health and Hospitals, the Board of Trustees has announced.

As chief administrator of the Corporation, which provides administrative support for Boston City Hospital and other health department projects funded by grants, trusts and contracts, Christian will be responsible for all financial, personnel and supply services.

B.C.H. welcome

A belated welcome to Boston City Hospital's experienced new public relations officer, Ferne Arfin. Ms. Arfin has written for the old Boston Record American and the Quincy Patriot Ledger and had been working in corporate public relations before her new assign-

Actually she is director of PR for the City of Boston's Department of Health and Hospitals but a large portion of her job revolves around

Attends conclave

Ms. Belle H. Cruikshank, medical staff coordinator, attended the American Medical Association's Council on Medical Education meeting in Chicago, Ill.

Lookfornew Health Forum

Information that's of vital concern to all who are associated with the Medical Center.

In shorthand, that's called "needto-know" information, and it's the subject matter of Boston University Health Forum, the monthly newsletter beginning publication the first of April.

Watch for it . . . wherever Front & Center is distributed.

Consider yourself on the staff . . .

Front & Center is all new this month, with new makeup, a new format and a new editor. His name is Owen J. McNamara and he is available in the Office of Communications, Room 204, Doctors Building, telephone extension 6147.

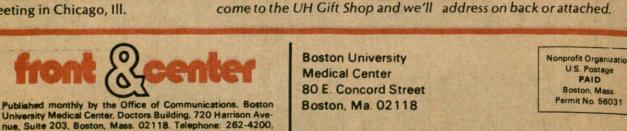
Front & Center wants to reflect what is happening in all parts of the Medical Center - but that can only be done if people in every department share their news in a phone call or a note to Room 204.

Center Entrance Colonial, L.R. with fresh flowers daily. Located in the fireplace; large D.R., Beautiful lobby of the ECU/F Building. Large Kitchen, Panelled Den, Rear stock of gifts, pocketbooks, magascreened porch. Gas Heat. 3 large zines and candy. bedrooms, 2 1/2 baths, large closets CANDID PHOTOS and color slides and excellent storage space. Fire- of Medical Center personnel are place family room. 2 car attached being sought for new brochures for garage. Beautifully maintained. University Hospital, Graduate Den-Convenient to all transportation, tistry, School of Medicine and the Mass. Pike, schools and shopping. Many extras. Takeover 5 1/4% mortgage. Price in low 60s. 969-1119 after white. Photos selected will be pub-3:00 P.M. Owner.

35 MM CAMERA — Two-year-old in print and reimbursed \$10 for Petrie with 1.18/55 mm lens with black and white, \$25 for color and speeds to 1,000 and built-in light \$50 for cover shots accepted. Must meter. Perfect for young camera be previously unpublished and takbuff. Cost \$200 new. Price \$75 firm. en here. Send to Office of Commu-Call 267-3611.

NEWTON - West Newton Hill - give you a ... large assortment of

Medical Center. Contact sheets are preferred for 35 mm black and lished and photographers credited nications, Room 203, Doctors Build-ROSES ARE RED, violets are bluing, ing (DOB) with return name and





Mariago

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Owen J. McNamara

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