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1971 Clinic Yearbook

Terrence S. Carden Jr

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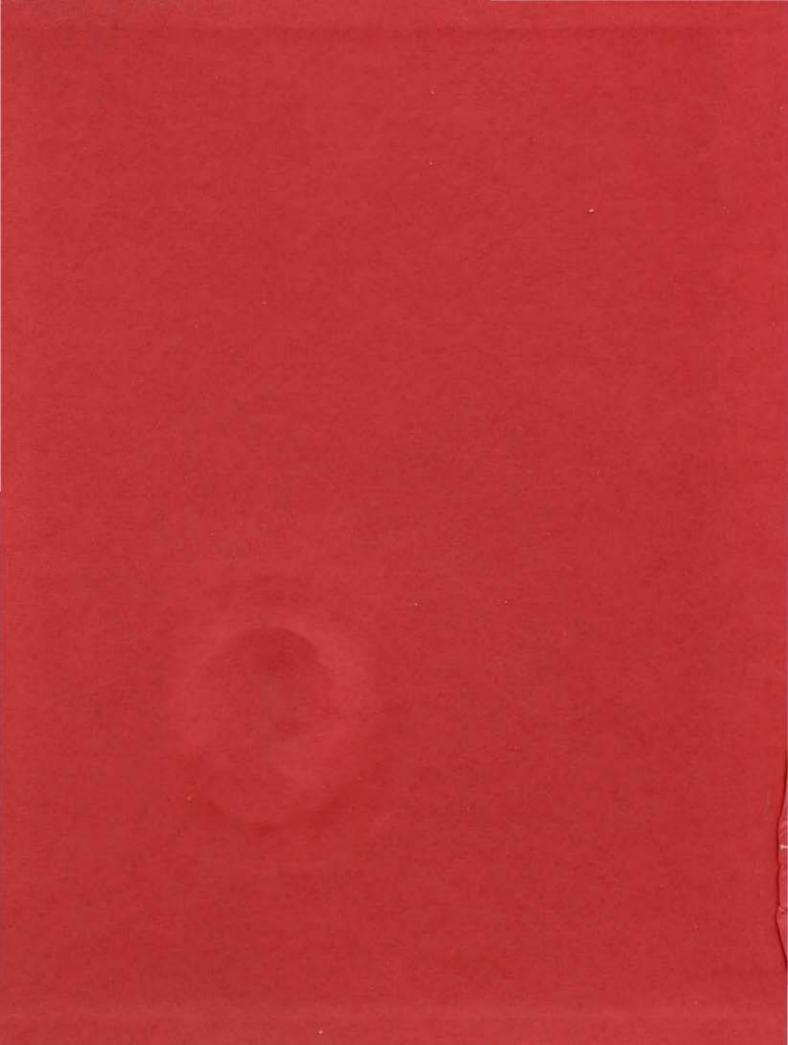
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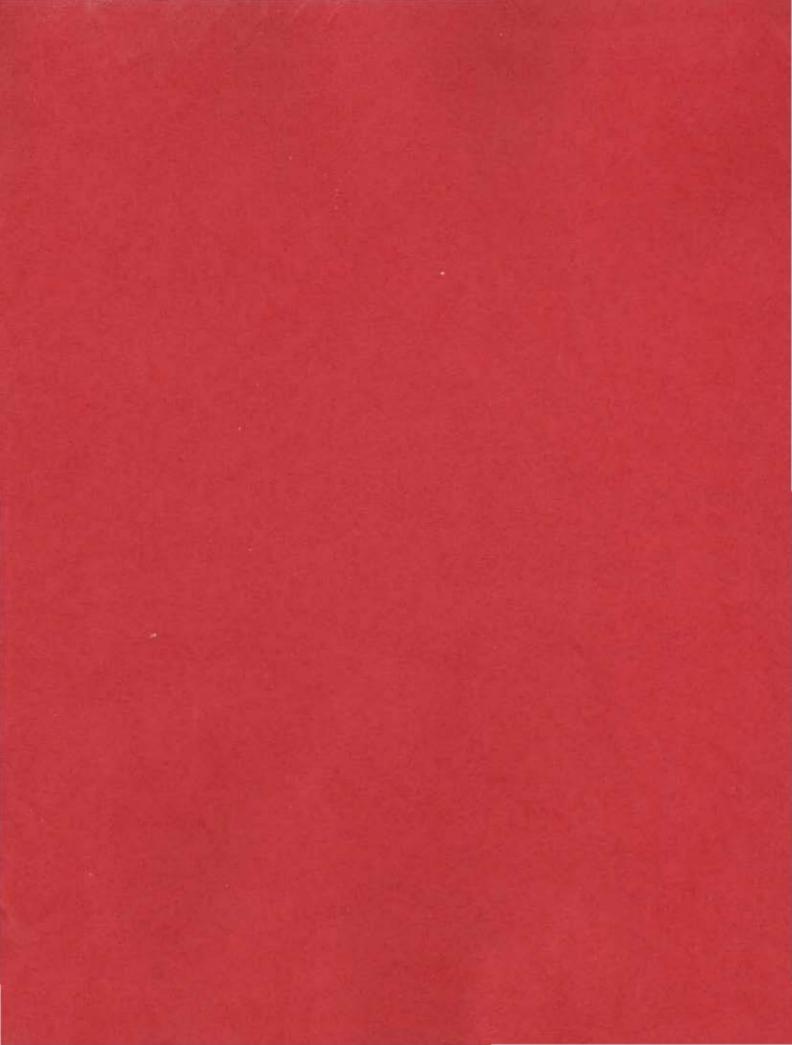
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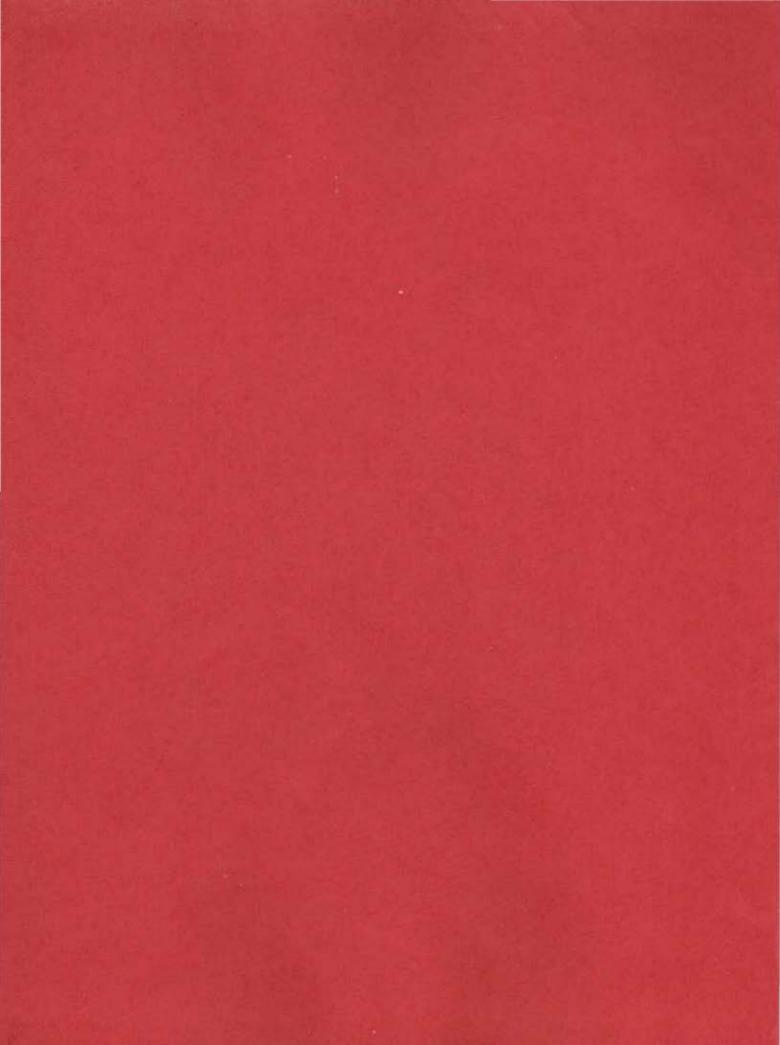
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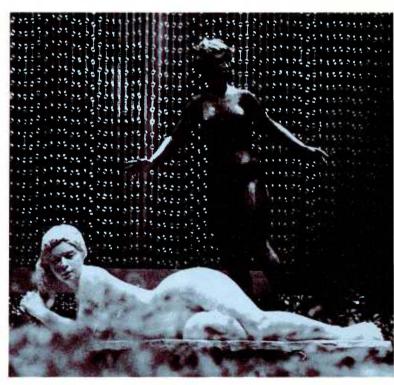


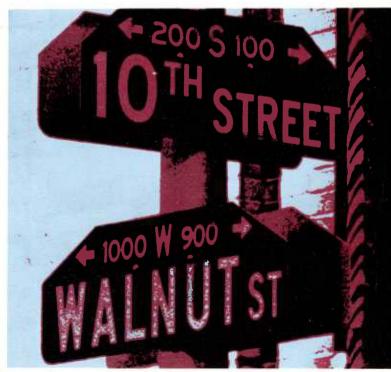


JEFFERSON MEDICAL COLLEGE PHILADELPHIA • PENNSYLVANIA

What peaceful hours I once enjoy'd





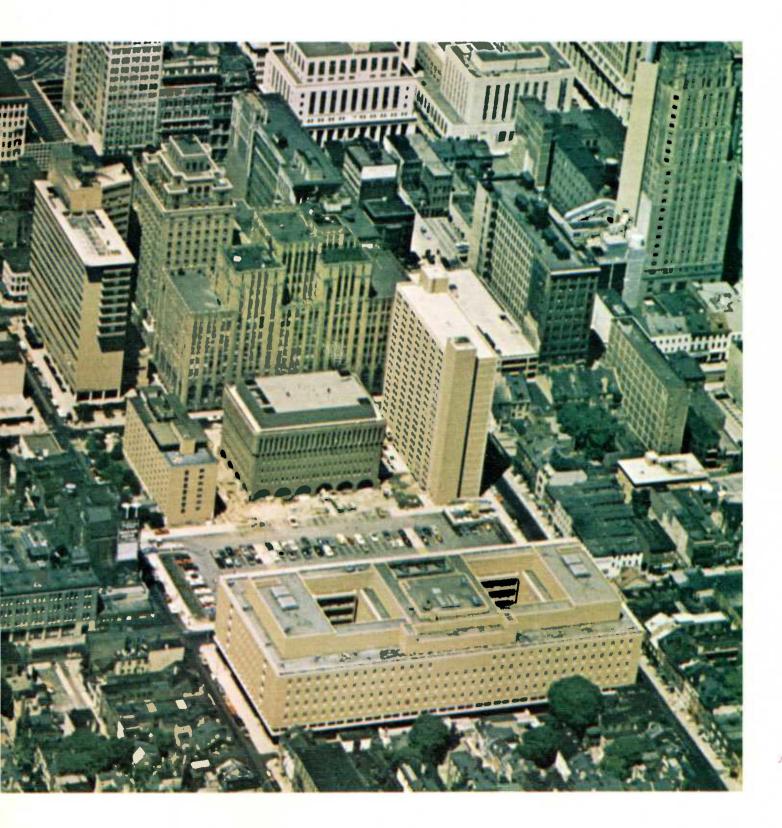


How sweet their mem'ry still

William Cowper

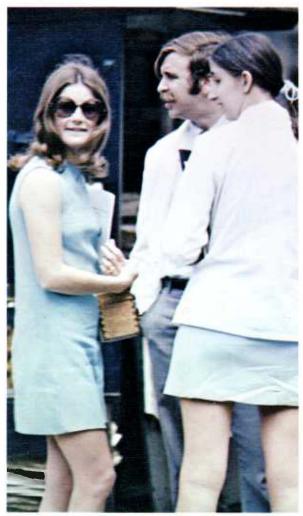
A moment here . . .a moment there remembered. Soon that is all that's left of the four-year ordeal of medical school. It blends into a single memory with a few bright spots recalled during moments of reflection. Characteristically, the bitter moments fade and only peaceful, contented memories remain. Perhaps this blessing is behind the universal and uniquely human tendency to revel in the past.





He healeth those that are broken in heart And giveth medicine to heal Book of Common Prayer





Students are enthralled with the drama of healing when they enter medical school. They can't learn enough in preparation for the initial clinical experience—the culmination of years of preparation. There is both anxiety and eagerness over participation in life-and-death struggles. So great is the preoccupation with the task at hand that many forget the countless hours spent in other pursuits. These moments join with the scores of clinical memories to make up the total four-year experience.

Skill comes so slow, and life so fast doth fly

Sir John Davis



As one begins to attack it, the body of medical knowledge seems overwhelming. Then there is the necessity of combining that knowledge with sound clinical skills—a formidable task. Soon, however, there are breakthroughs and one gains confidence. Then when someone calls you, "doctor," it no longer sounds strange.















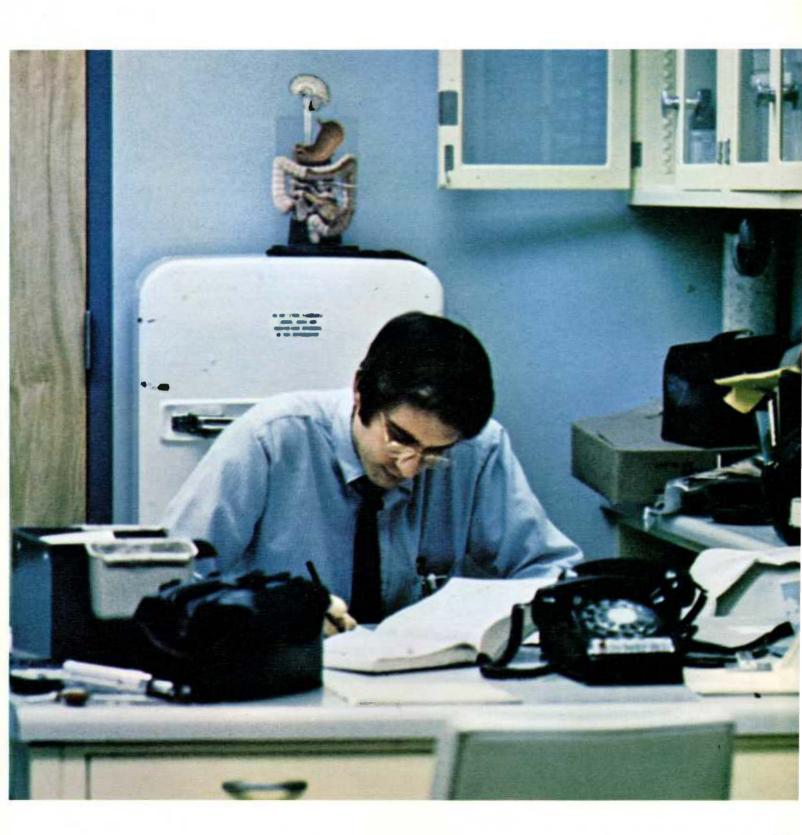




At the heart of any educational institution is its faculty. Many have lamented the passing of the skilled teacher in these days of "publish or perish" as researchers have gained academic ascendency. At Jefferson now—as at the time of her origins—there is a cadre of skilled clinical teachers who are willing and anxious to pass on the benefits of their experience. Our contacts with them will be among our most cherished recollections.

Pleased to teach, and yet not proud to know their sickness

Alexander Pope



Physicians of all men...





are most happy... Francis Quarels



Completing the triangle embracing the physician and his teacher is the patient—the one who makes it all worthwhile. Satisfaction to the physician is the health of his patients, and the knowledge that his skills contributed to that state. Even as students at Jefferson, we had the opportunity to taste of this satisfaction.



Beautiful city! so venerable, so lovely sir Edwin Arnold



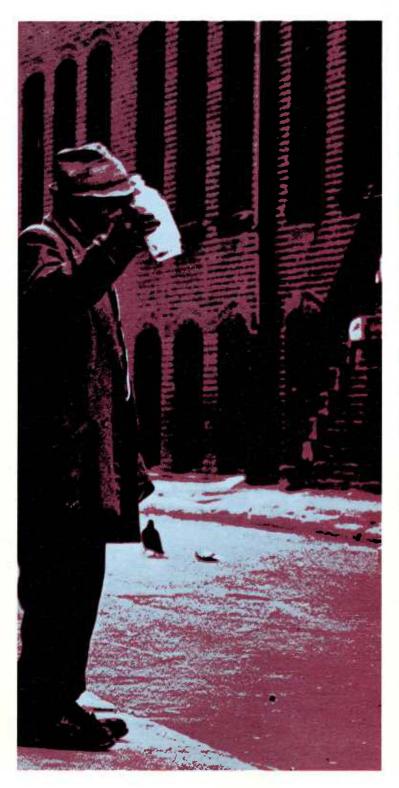
Our memories of Jefferson, of course, are inexorably intertwined with those of Philadelphia. For many of us, life in the Quaker City was a new experience. The city is historic—the "cradle of liberty"—and at the same time maintains its neighborhoods and close family life. Though she lacks the glamour of San Francisco and the excitement of New York, Philadelphia harbors many happy memories for us all.







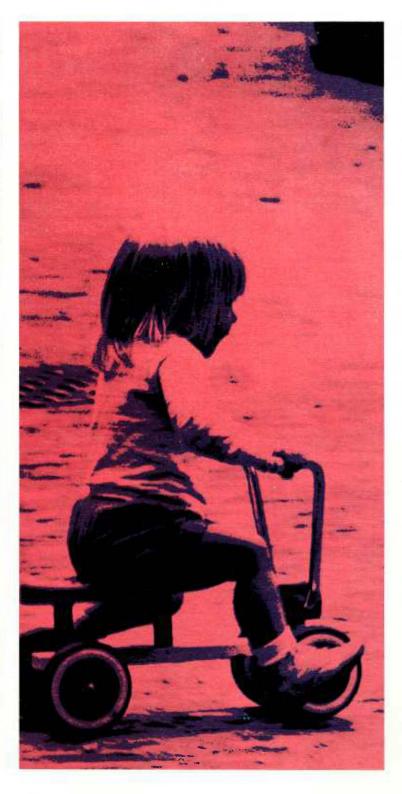
Good people all ...

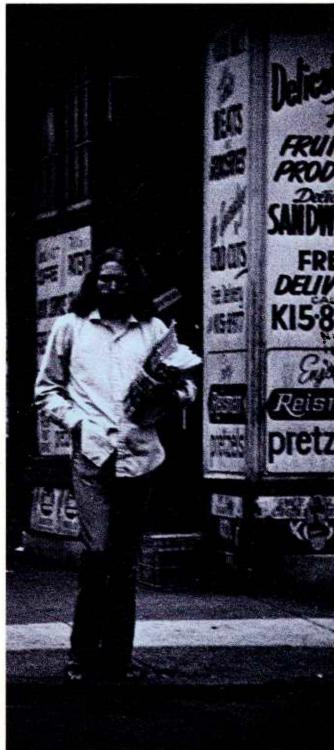




of every sort oliver Goldsmith

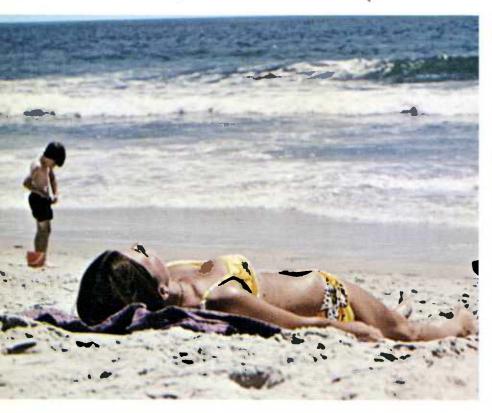
The city, of course, means people, those of every sort—black and white, young and old, rich and poor, lucky and unlucky. And since the business of medicine is people and their problems, what better setting for learning this art than one of America's great cities?





A little work, a little play du Maurier

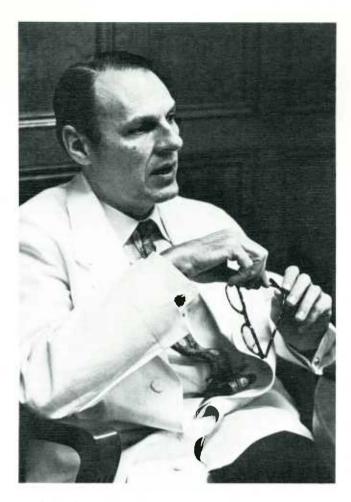
Some of our fondest memories will be of those moments away from the books—of lounging or walking through Jefferson's new campus or those cherished times at the shore or in the nearby mountains. These were the times for "recharging the batteries" and wiping the cobwebs off our minds. We remember them well.







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DEAN WILLIAM F. KELLOW, M.D.

A Dedication...

I t seems such a little while since we began.

Now our days here are through.

And in just another little while, we will be but a memory. The Class of 1971-our members scattered far and wide. For most of us, the ties to Jefferson will be our fond (and not so fond) remembrances of these four years. These are the experiences that bind us. But some of us will stay and, hopefully, will help to continue the progress started during our time. One who is to stay is not one of us, strictly speaking, but he started at Jefferson with us and shared many of our experiences. His work has affected us all, and will affect Jefferson for years to come. He is Dean William F. Kellow, M.D., whose main concern is charting the course Jefferson must take-now and in the future. The Clinic asked Dr. Kellow to reflect on his four years at Jefferson-and how his experiences and responsibilities coincided with our own. His message appears on the opposite page.

Fittingly, we have selected Dr. Kellow as a symbol—of Jefferson's present and her future. In an interview on page 173, Dr. Gordon F. Schwartz, director of the surgical training program here, credits the dean's office for making Jefferson what he termed "the most forward-looking medical school in Philadelphia." This, obviously, isn't due to one man, but it's administrative team-

work under the leadership of the dean that allows progressive policies to be formulated and effected. Policies established now will have their effect for years, and will be responsible for the kind of institution Jefferson ultimately will be. These are years of tumultuous change for all types of institutions. Many may not survive. We are confident not only that Jefferson will survive, but that she will be a leading center of medical education.

I ast year, The Clinic was dedicated to Jefferson's past. We selected 10 of our greatest alumni and chronicled their accomplishments. This year-with virtually the same staff-we have decided to dedicate our efforts to both the present and the future. The present because we are a part of it, and students have made a significant contribution to the progress at Jefferson over these four years. The future because of our expectations for excellence and continued reform in the years ahead. We have attempted to make the 1971 Clinic reflect this year while commenting constructively on the entire experience of the Class of 1971. Unfortunately, we cannot chronicle the future. If we could, Dr. Kellow would certainly play a large role, just as he has in the present. And so, the editors and staff of The Clinic make this dedication, asking Dr. Kellow to accept for us, for all of Jefferson and for himself.

And a Message

To the Class of 1971-As You Prepare to Go:

Your graduation closes a personal chapter for me as well as for you because we started at Jefferson together. These four years have been a difficult time for anybody engaged in education, whether as a student, a teacher or an administrator. Your student years at Jefferson have been harder, I am sure, than for most who have preceded or will follow you. This is not necessarily bad, however. If the turmoil of challenged traditions, broken images and reordered priorities has made you think about important public issues and has helped you acquire discriminating judgment, then you probably have gained much more than you would have otherwise.

The same is true for Jefferson, for medical education nationally, and for the whole profession of medicine in this country. During the past fifty years, American medicine has accomplished modern miracles. Yet it is evident that new knowledge and better techniques mean little unless there exists a means to use these accomplishments for the betterment of our fellow human beings. So the task before us is to devise a better plan to bring health services to all people at a reasonable cost. This is a big job.

Jefferson has educated physicians for almost a century and a half, and it has done it well. More physicians from Jefferson are practicing medicine today than from any other medical school, and men of great achievement have come from here. James A. Meigs, Samuel D. Gross, William W. Keen, Carlos J. Finlay, William H. Pancoast, John Chalmers DaCosta and John H. Gibbon, Jr. are but a few. Thus our heritage requires that we share in the task before our country today. Much of the deliberation, planning and change that you have witnessed during your time here has been undertaken to fulfill this obligation.

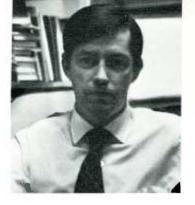
Many reports on the nation's health crisis have appeared recently. Most of them have emphasized the need for more physicians and other health personnel, as well as a health plan capable of bringing preventive medicine, emergency service and medical care to the people more uniformly and for less cost. These recommendations have caused Jefferson during the past four years to take several significant steps. We have increased the entering class from 176 to 212. We now seek students with more diverse backgrounds and interests than heretofore. We have restructured the faculty organization to provide for a broader expression of ideas. We have sought the attitudes of faculty, students and alumni in the design of our policies and programs. We have established or planned community programs in child care, mental health, and comprehensive medicine with the hope that these can serve as models for education and for trying out new methods of medical service. We are working with undergraduate colleges on accelerated programs that will decrease the time from high school to medical degree, and we are planning further curricular changes that will provide an educational base for all students while preserving diversity, since we recognize the differences in the interests and talents of our students.

You are leaving Jefferson. Admittedly, your recollections of these four years will vary—some happy, some satisfying, some embarrassing and probably some bitter. Little matter, for time will mold these together. Let me urge you, however, not to dwell on the shortcomings you have observed, but to try to recognize the tremendous effort being made by so many here to meet our responsibilities. Now you are alumni. Your share of these responsibilities has increased. Be good alumni. First, be outstanding physicians. Place the needs of your patients above personal considerations. But also remain interested in Jefferson and her endeavors. Support progress, recognizing that the role of any academic medical center reaches far beyond the interests of any small group to those of the whole community, even this entire nation, and sometimes the world!

Many warm wishes for a happy and successful life in medicine.

William F. Kellow, M.D. Dean and Vice President

William F. Lelland



Thomas R. Murray is the chief financial advisor to Dean William F. Kellow, M.D. As director of business administration for the medical college, he's a man concerned with dollars and cents in a world where most of his colleagues are more at home with pure or applied science. In that capacity, he reviews all proposed expenditures by the college, and since some are turned down, he's not always the most popular man on campus. He's also the man closest to the financial problems that have forced a \$1,000 increase in tuition over the past five years. In a recent interview with The Clinic, he reviewed some of these problems and commented on his expectations for the future.

Some of these problems are self-evident. Iefferson's dependence on state aid was highlighted dramatically when former Governor Raymond P. Shafer proposed that the state cut its appropriation to the medical school. There was talk then of tuition rates as high as \$5,000 a year and some panic among the students. Not so evident are the high costs built into the educational system, and medical education in particular. "Education is a manoriented industry," Mr. Murray explains. The bulk of the money goes "strictly for people, with very little for supplies and equipment." He adds that the "limited mechanization" taking place in the field-in the form of audio-visual and self-instruction devices-may prove to be "the equivalent of Henry Ford's production line," making the product available to a great many people at reasonable cost. He doubts, however, that this day will dawn for some time. Medical education is particularly expensive, Mr. Murray points out, for two reasons. First, a high percentage of those involved are physicians "who are worth more in our present economy" than PhD's or skilled laborers. While medical schools can't match private practice income dollar-for-dollar, "that's our competition," Mr. Murray notes. Secondly, he points out, the ancillary help who "have traditionally been underpaid are now receiving a more equitable wage." Since "80 percent of the medical school budget goes for salaries," according to Mr. Murray, the impact of these two factors is obvious.

One might point out that there are other man-oriented organizations—particularly the services industries—that seem able to operate profitably. That is precisely the difference, Mr. Murray notes. "Education uses its resources to the fullest," he points out. "There is no profit to be set aside for hard times. Every dollar you get is used to take the next step possible. This is the philosophy of all educational institutions." Doesn't this preordain continuing financial crises? It does, Mr. Murray admits, but he points out that until recently there seemed to be enough government and public support (in the form of research and other grants) to meet the need.

INTERVIEW:

Thomas R. Murray he knows where the bucks go

The scarcity of government grants is a result of a reordering of priorities in Washington recently, with more emphasis going to housing, delivery of health care and other social concerns than to scientific research. "Society wanted a research orientation in its medical schools over the past three decades," Mr. Murray stresses, "and that's what society got. Now society doesn't want this, and the products of this systemscientific and research-oriented people-are our only resources. We can't lose them." The alternative, he explains is to return to the traditional voluntary faculty system that dominated American medical schools before World War II. This is unacceptable, he contends, even though it would be infinitely less expensive. "I hope the system we have survives," Mr. Murray says, "because it has been the contributions of our full-time, research-oriented physicians that have produced such dramatic medical advances in the past 30 years.'

The only solution to the problem, Mr. Murray contends, is "direct federal support to medical schools." Medical deans have been asking Congress for such help for more than 20 years, he says, but direct aid has never been approved.

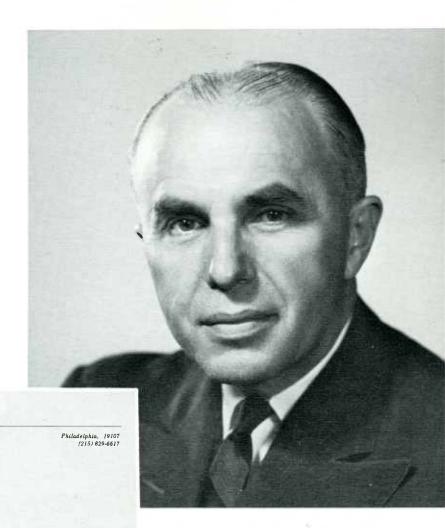
Is Jefferson alone in the financial doldrums? Hardly. "We're all in some danger, some more than others," Mr. Murray contends. He includes even the large, big-name schools. "I believe Kingman Brewster (president of Yale University) when he talks about financial difficulties. A medical school is the largest financial operation in any university, and if the medical school is in trouble the university is in trouble."

Can or will society allow any of its medical schools to close? Mr. Murray confesses that he can't answer that question, but he views the future as "pure hell," particularly if direct federal support is not forthcoming. State support is not expected to grow. "Legislators say they've had it with education," he points out. The only other major source of support is tuition, which has climbed at a barely tolerable rate.

Well, then, is Jefferson in any danger of closing? This is not the immediate question, Mr. Murray points out. Many cost-cutting steps could be taken before the institution would be forced to shut down. All of these would reverse progress, he contends, and would "dilute the quality of education here." Among the possible steps: a decrease in paid faculty, closing of Jefferson Hall Commons, Orlowitz Hall or Scott Library, or in attention to normal maintenance. "All of these would save money, but who wants them?" Mr. Murray asks. "Our goal is progress—and progress costs money."

As financial advisor to the dean, Mr. Murray is concerned about how Jefferson gets and spends money. Since coming here from Hahnemann three years ago, he has revised the budgeting practices and helped with the formation of applications for various grants. Since the college was able to decrease its annual deficit from \$400,000 to \$14,000 last year, he believes his efforts have been worthwhile.

From the Office of the President:



THOMAS JEFFERSON UNIVERSITY

Office of the President



To the Class of 1971:

This yearbook marks both the end and the beginning--the end of one era of your lives and the beginning of another.

The first phase started long before you could remember. It encompassed the guidance, the direction, and the moulding by your parents. It also encompassed the innumerable tangible and intangible forces, objects, and things that steered you down the path you have been heading for these many years. It was not short. It was not easy. But you accepted the challenge and you did emerge triumphant!

The second phase begins with this graduation. It will be equally long, difficult, and tortuous. It will also be as pleasant, as satisfying, and as rewarding as you choose to make it. Never has the world been in greater turbulence, greater confusion, and greater uncertainty. Never has it needed more wisdom, deeper understanding, and better leadership than it does today. And never has a group of young men and young women been better trained to meet and to shape the events that confront all mankind than have you of the Class of 1971.

Congratulations on your accomplishment. Godspeed to all of you. Remember your Alma Mater. Come home often.

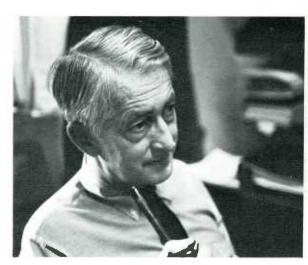
Sincerely yours,

Peter A. Herbut

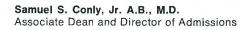
administrative staff

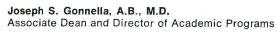


John H. Killough, B.S., Ph. D., M.D. Associate Dean and Director of Continuing Education



Robert P. Gilbert, A.B., M.D. Associate Dean and Director of Extramural Programs











Carl L. Hansen, Jr., B.S., M.D., Ph.D Associate Dean and Director of Regional Medical Program



Hyman Menduke, A.B., M.A., Ph.D Director of Sponsored Programs



Robert T. Lentz, B.S., M.S. Librarian

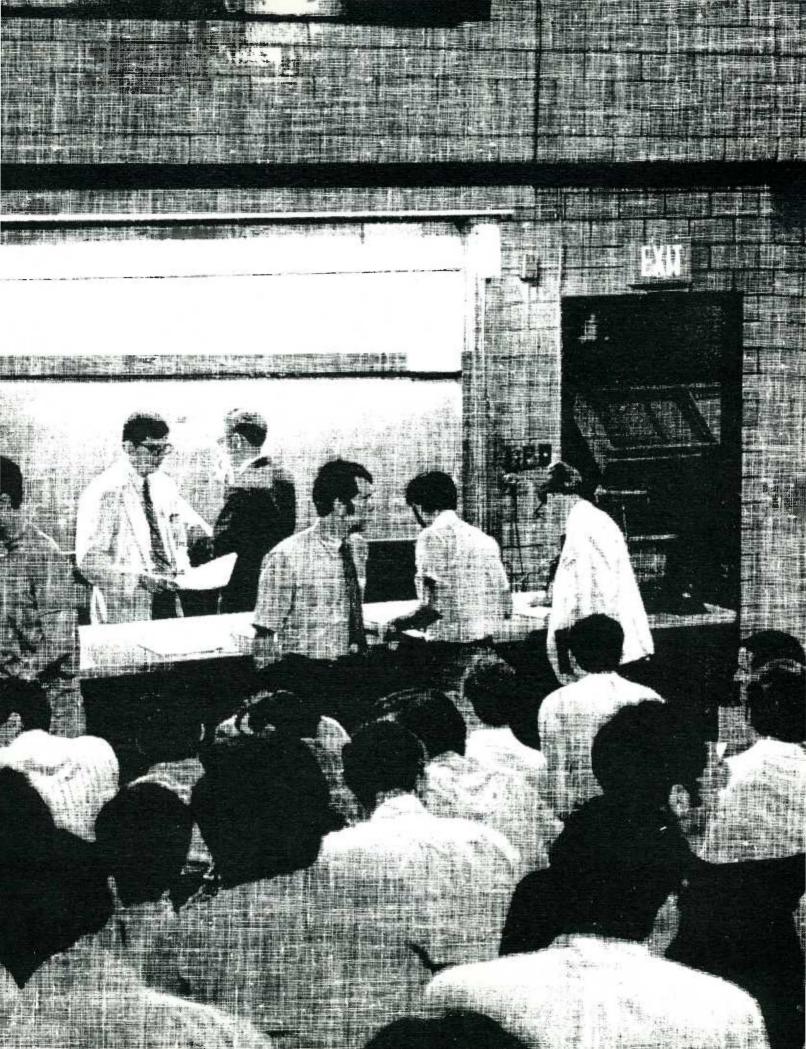


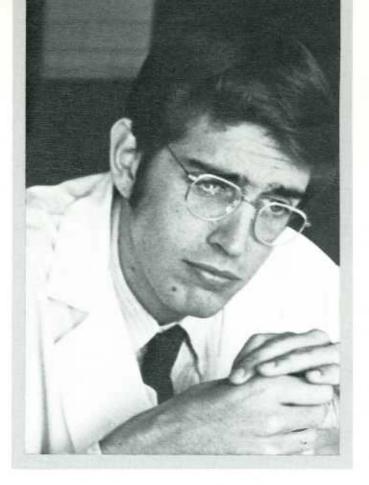
Arthur R. Owens, B.A. Registrar











F. X. McBrearty

This examination was compiled by the editorial staff of the 1971 Clinic under the direction of Contributing Editor Frank X. McBrearty, who screened each question personally for aptness, clarity, purpose and relevance. Security requires that the key to the correct answers be locked in a safe deposit vault in Nome, Alaska, until graduation. Following the ceremonies, it will be posted on the pathology bulletin board.

'IT MAKES THE GRASS GROW GREENER'

All right, pipe down! The test is simple and straightforward. The directions are clear and need no further explanation. You should have no difficulty answering all the questions in the time provided. Make sure your name and class number appear at the top of each page of the answer and question sheets. Make all erasures completely. Any stray marks on your answer sheets will be counted as incorrect.

You've had almost four years to prepare for this examination, so let's not have any arguments about not having enough time to study or about the amount or type of material covered. All the questions are taken directly from your experiences as a class here at Jefferson, so you can't complain that the subjects weren't covered. Any question not involving a personal experience is part of the class experience. Such questions can be answered easily by applying either the first or second general theorem of Jeffersonian interprofessional social interaction. And let's not hear any beefs about the questions' not being relevant. Some of these very questions were asked at the class reunion of 1970.

You've got one hour. At the end of the examination, each of you is to turn in his No. 2 pencil and both the question and the answer sheets. Only correct answers will be counted. So if you don't know an answer, guess. You won't be penalized. Good luck.

SECTION I

Directions: Each of the questions below consists of a statement of a real and/or hypothetical situation that has happened, is happening or will happen at the Thomas Jefferson University. The statement is followed by a question, which is, in turn, followed by a number of hypothetical and/or real answers. You will mark on your answer sheet those answers that you consider to be most plausible, probable and/or correct. 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.

The dean of the Medical College is delivering his annual freshman welcoming address. During the speech he talks of many things. He closes with the following stirring words of encouragement and admonition: "Ladies and gentlemen, you are now adults. Your undergraduate days are behind you. This is no longer the time or the place for beards or blue jeans. We will expect you to conduct and to dress yourselves at every moment in a 'professional' manner. We expect you to act as adults, and you may expect to be treated as such."

1. At this point, half of the class, acting as adults;

- A. Starts a war in Indochina
- B. Lynches a "nigger"
- C. Seduces the dean's wife
- D. Does nothing
- E. Applauds loudly with the other half of the class

In terms of its general tenor, the dean's message may be classified as:

- A. Typical (of Jefferson and/or adults in general)
- B. Surreal
- C. Irrelevant
- D. Irreverent
- E. Absurd
- F. Frightening
- G. Waste of time

Following the dean's salutation, a professional-looking adult assumes the podium. He is a well-developed, well-nourished, alert, oriented and seemingly cooperative middle-aged Puerto Rican male who appears to be his stated age and who does not appear to be in any grave distress. His hairline is receding and his head appears unduly large because his hair is slicked back. His eyes and skin appear unusually dark. His voice is deep and sounds strangely foreign. This man talks of many things.

3. What he talks most about is:

- A. Jefferson's past
- B. Jefferson's present
- C. Jefferson's future

4. What the man talks least about is:

- A. Jefferson's past
- B. Jefferson's present
- C. Jefferson's future

5. What he says least about is:

- A. Jefferson's past
- B. Jefferson's present
- C. Jefferson's future
- D. Any of the above
- E. All of the above

6. According to the dark, professional-appearing, well-nourished Puerto Rican male with the Mephistopholean voice, the following were Jeffersonians:

- A. Jesus Christ
- B. Nicholaus Copernicus
- C. Joe Namath
- D. Albert Einstein
- E. Frank Lachman
- F. All of the above
- G. None of the above

7. People (or institutions) that worship their past:

- A. Have no present (real or imagined) to worship
- B. Fear the real and/or imagined future
- C. Fear the real and/or imagined present
- D. Are in present danger of fossilization
- E. Any of the above

8. Wise's First General Postulate (WFGP) states that hair length is inversely proportional to:

- A. Intelligence
- B. Competence
- C. Circulating estrogen level
- D. Income
- E. Love of country
- F. The square of the hypotenuse

9. The only striated muscle known to be innervated by the tractus ano orbicularis is:

- A. Spiro Agnew
- B. Tensor scroti
- C. Abductor secretarii longus
- D. Suppressor stercus
- E. Richard Nixon

10. Edinger-Westphal is (are);

- A. A treaty signed by Napoleon
- B. Probably a mistake
- C. Right next to Bedford-Stuyvesant
- D. Warren Gamaliel Harding's treasury secretary
- E. A former German anatomist currently living in Argentina
- F. All of the above

11. Given the size of the universe, the age of the universe, the size of man (individual and collective) and the scope of man's experience (which depends on all of the preceding), what is the statistical probability of anything's being statistically probable?

- A. 25 percent (during the vernal equinox—as corrected for temperature, atmospheric pressure, wind velocity, annual rainfall and Greenwich mean time)
- B. The sum of the square of the two sides
- C. πr^2
- D. 2.02651∞ ± Standard International Menduke Units (i.e. RBLQs)
- E. The same as the statistical probability that anything is improbable

A 22-year-old medical student previously in excellent health is brought to the Student Health Service minutes after being run down by a tractor-trailer. He is comatose, reactive only to deep pain. There are several deep gashes over the left temporal and occipital regions and the student is bleeding profusely. His left pupil is fixed and markedly dilated. This is a left lateral gaze palsy on cold-caloric testing of the left ear. Venous pulsations are absent from the optic discs bilaterally. Breathing is regular, but rapid, deep and labored. The pulse is 50 and regular with a blood pressure of 140/100.

12. The diagnosis most likely made by the attending physician in the Student Health Service is:

- A. Streptococcal pharyngitis
- B. Anxiety reaction
- C. Anxiety reaction secondary to Strep throat
- D. Strep Throat secondary to anxiety reaction
- E. Infectious mononucleosis secondary to any or all of the above
- F. Tinea pedis

13. The most likely therapy prescribed by the abovementioned physician is:

- A. Darvon 65 q4h prn for pain
- B. Darvon 65 q4h prn for pain and penicillin G, 600,000 u p.o. q12h
- C. Darvon 65 q6h prn for pain plus ppd, intermediate strength
- D. Darvon 65 q6h prn for pain plus warm soaks
- E. Pathology consultation

A five-week-old white male infant, who weighed 7 pounds, 3 ounces at birth was admitted to the Pediatrics Division of the Thomas Jefferson University Hospital 10 days after he began to vomit. Initially, there was non-projectile vomitting shortly after feedings of small amounts of formula. The vomitting became progressively more forceful and more productive. It is currently projectile and may occur at any time. The vomitus is a clear, mucoid liquid that occasionally gives a benzidene-positive reaction.

Three days prior to admission, the child became irritable and progressively lethargic. All attempts at feeding ended in failure. Over the five days preceding admission, the child's urine and stool production diminished to virtual non-existence.

Physical examination revealed an 8 pound, 2 ounce, lethargic, gravely ill five-week-old white male infant. The child had noticeable bilateral enophthalmos, markedly decreased skin turgor and dry mucous membranes. Peristalsis was occasionally visible across a soft, somewhat distended abdomen. Bowel sounds were hyperactive, and neither masses nor megaly was detected. The remainder of the physical examination was essentially noncontributory.

During his first five hours in the hospital, the infant produced no stool, and only 20cc of clear yellow urine. Urine specific gravity was 1.016, and the urine contained no protein, casts or red blood cells. The urine gave a +2 reaction for ketones. Serum electrolytes included a CO₂ of 30, Na of 120, Cl of 89, and a K of 2.6.

14. With the above data, the diagnosis most probably made by the attending pediatrician was:

- A. No wee-wee
- B. No poo-poo
- C. No num-num
- D. Smith-Lemli-Oplitz Syndrome
- E. All of the above

15. The regimen most likely prescribed by the attending pediatrician:

- A. D5/W, 1600ml/M²/day X3
- B. D5/W, 1600 ml/M²/day, plus 40 mEq KC1/ liter X3
- C. D5/W, 1600 ml/M²/day X3 plus Ampicillin, Kanamycin & Polymyxin
- D. One St. Joseph's Aspirin and call him in the morning
- E. None of the above

16. The most likely result of the above therapy:

- A. Full recovery of wee-wee, poo-poo and numnum
- B. Anaphylactic shock
- C. Renal failure
- D. Goo-goo
- E. Litigation

17. The absolute indication(s) for a total abdominal hysterectomy is (are):

- A. Blue Cross
- B. Blue Shield
- C. A and B
- D. A uterus
- E. Fireballs of the uticus

18. The absolute indication(s) for a therapeutic D and E is (are):

- A. Pregnancy
- B. Patient thinks she's pregnant
- C. Good of mankind
- D. Good of the fetus
- E. Blue Cross and Blue Shield
- F. Any of the above

19. Justification(s) for a pelvic exam is (are):

- A. Instruction of medical students
- B. Curvaceous young patient
- C. Keeping your hand in
- D. Preserving the legacy of J. Marion Sims
- E. None of the above

A 23-year-old medical student is told by his "superiors" that he will not be allowed to see patients until he gets his long hair cut to a more "professional" length (or, if you wish, until he exchanges his bell-bottoms for more "professional" trousers, his boots for more "professional" shoes, etc. . . . ad nauseam or ad infinitum, whichever comes first). The student's "superiors" justify their prohibition by explaining that each patient has a specific, archetypical notion of what a "professional" person looks like. Further, in strict Aristotelian fashion, each patient bases his expectations for a successful cure of his ailment on the degree of correspondence he can establish in his own mind between his archetype and the "professional" appearance of his physician. As efficacy of therapy is often based more on patient-physician rapport than on the methodical application of scientific principles, the physician should do all in his power to conform to the patient's "professional" archetype. Thus, it was explained, short doctors do not treat patients whose "professional" archetype is tall. Black doctors do not treat patients whose archetype is white, and so on. . . The principle is so simple, the "superiors" could not understand why it was not self-evident.

20. The foregoing, which can be classified as the first corollary to Wise's First General Principle (WFGP), best exemplifies which of the following:

- A. Bull shit
- B. Horse shit
- C. deja vu
- D. fecal impaction
- E. All of the above

An apparently WD/WN 72 y.o. NF c a P.M.H. of P.A. and CHF 2 ASVD come to E.R. in A.D. complaining of DOE (3 step), PND, n,v & d X 2 days after acute onset. PE is essentially N.C., except for PMI in 5th ICS at LAAL, an intermittent S₃ (r/o split S₁) and occ. PVC but no m, h, t, or 1. Fine, moist rales are head at RLL and LLL post. Hepar is 3 FB below RCM in MCL and tender but nonpulsatile. TPR are WNL and DTRs are ++ and equal bilat. CBC, CPK, LDH, SGOT, SGPT, BUN & U/A are WNL.

21. The most likely DX in this case:

- A. ppd 2 ADA
- B. RIP
- C. DPA
- D. LSMFT
- E. TGIF

pt. was kept NPO \acute{c} strict I&O and a k/o IV of 1000 D5/W started while her physicians took an EKG and gave O₂ at 5L/min.

22. The most likely result(s) of the above regimen is (are):

- A. Unrecognized P.I.D.
- B. Blue Cross ran out
- C. Continued A.D.
- D. RIP
- E. All of the above

R.D., (TJUH XYZ 7658923), a 17-year-old unwed black mother of two, was admitted to the hospital as a failure of psychiatric therapy.

Four months prior to admission, R.D. was brought by police to the acute psychiatric care unit of an "outlying hospital." She had been apprehended several days earlier as she ran shouting through the streets. At the time of her apprehension, the patient was virtually naked, a somewhat odd circumstance, it was thought, for the outof-doors on a mid-February night. Nevertheless, the patient was taken to the Women's House of Correction where she was detained on charges of disturbing the peace, alcoholic intoxication and resisting arrest. After three days of institutionalization, it became apparent that her inebriated state and bizarre behavior had not improved, so she was taken to the hospital for psychiatric evaluation. After the initial interview, she was given the diagnosis of "acute paranoid schizophrenia," following which she was tranquilized in the usual manner, fed, clothed, bathed and placed in a conflict-free environment in preparation for more active therapy later. Every effort was made by hospital personnel to make the patient feel secure, wanted and cared for. In this manner, the patient's trust was soon gained and the following historical data were obtained.

R.D. lives in a two-room public housing authority apartment with her invalid mother, two younger brothers, a youngster sister, an alcoholic "stepfather" and her own two children. About one hour before her apprehension by police she had been raped by the "stepfather," who had forced himself on the patient several times before this incident. The patient was afraid to inform her mother of these advances for fear of worsening the already precarious state of the mother's health. She also felt she could not inform the police since she knew any consequent investigation would disclose the presence of the "stepfather" (an unauthorized, unemployed male) in the household and would, thereby, jeopardize her dependent status in the eyes of the Department of Public Assistance. The patient states that she would like to leave home, but that her mother depends on her for the care of her younger brothers and sisters. Also, if she were to leave home, her own DPA income would be insufficient to provide adequate food and shelter for her children. The patient dropped out of school in the eleventh grade when she became pregnant for the first time. Her current W.B. full-scale I.Q. corrects to 80.

After two weeks in the hospital, R.D. had improved to the point at which corrective therapy could be pursued aggressively. So great was the patient's progress toward psychologic reconstitution that she was told yesterday she would be going home soon. This morning, she was found cowering beneath her bed and when approached by an attendant she refused to move, began to scream, swear and, in general, to act terrified.

She was given parenteral tranquilization and transferred to this hospital for further evaluation and therapy.

23. From the preceding, identify the crazy person(s):

- A. R.D.
- B. R.D.'s psychiatrist
- C. R.D. Laing
- D. All of us
- E. All of the above
- 24. According to Ehrlich, Commoner, Davis, et al. the greatest present threat to the continued survival of the human species is:
 - A. The rising cost of French truffles
 - B. Yersinia pseudotuberculosis
 - C. Woman's lib
 - D. The population explosion
 - E. All of the above
- F.X., a 25-year-old white male fourth-year medical student, retires to the TJUH interns' quarters at 11:45 P.M. after a long workday. He is tired and hungry, since he hadn't been able to stop to eat all day. The hospital cafeteria is closed, as are the local sandwich shops. F.X., therefore, asks the steward in the quarters for a sandwich from the refrigerator, which is kept appropriately locked. The request initiated the following dialogue:
 - STEWARD: Son, ya know these sandwiches is only for interns and residents. The cafeteria don't send 'em here for medical students. They ain't for students.
 - F.X.: But there are lots of sandwiches left. It's nearly midnight and apparently no one is going to eat them. The people who ordinarily would eat them are in bed. They're going to go to waste if somebody doesn't eat them and I'm hungry. I haven't eaten anything since last night at supper.
 - STEWARD: Sorry, those is the rules.
 - F.X.: You mean to tell me that after working 16 hours doing intern's work without pay . . . after paying 23 hundred bucks a year for the privilege of busting my proverbial balls, you can't even spare a lousy sandwich. Christ almighty!
 - STEWARD: Sorry . . . I got my orders. If you want a sandwich you got to call Dr. Sweeney.
 - F.X.: But it's midnight. Who the hell would call Dr. Sweeney at this hour over a sandwich.
 - STEWARD: Sorry . . .

25. The preceding is an example of:

- A. Food, fingers, flies and feces
- B. Diarrhea, dementia and death
- C. More bull shit
- C. deja vu
- E. All of the above

26. Jefferson students wear white coats because:

- A. The army got to olive drab first
- B. Puce clashes with lavender-topped tubes
- C. White is wonderful, but most of all, it's crisp, clean, pure and professional
- D. It's the only way to distinguish students from patients
- E. One of the above

29. Paid \$10.00 to get his name in the yearbook:

- A. Gus Schwartz
- B. Al Ehrlich
- C. B.
- D. All of the above
- E. C.

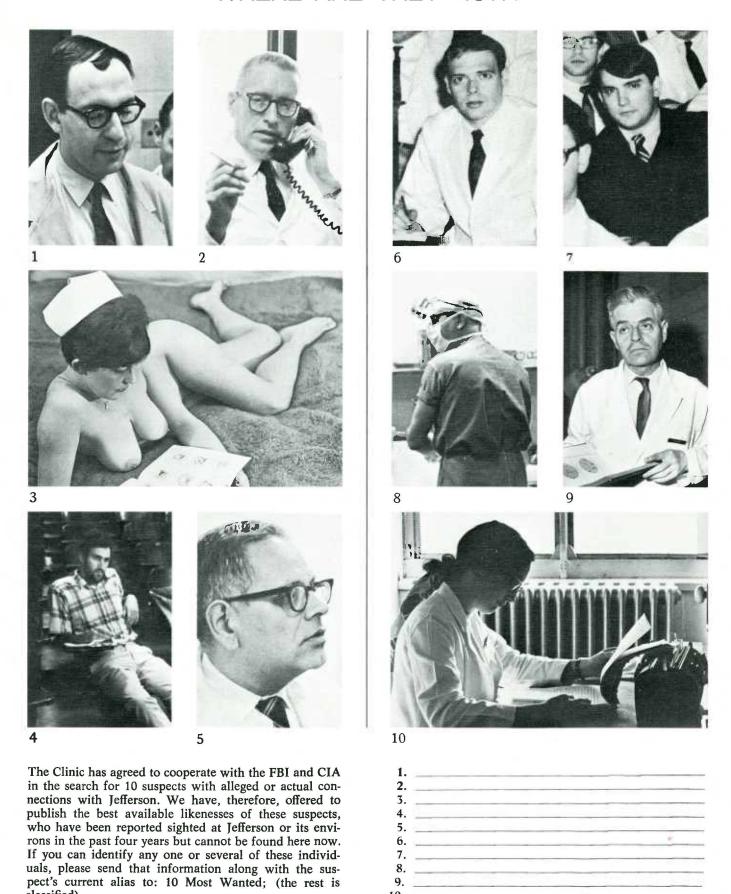
28. The professional group most responsible for the population explosion is:

- A. Butchers
- B. Bakers
- C. Candlestick makers
- D. Plumbers
- E. Doctors
- 29. Medical students are reminded frequently during their school years of the many opportunities and rewards that await them after they are graduated from medical school. Of the professions listed below, which has the highest divorce rate, drug addiction rate, alcoholism rate, suicide rate and the lowest statistical age of death?
 - A. Butchers
 - B. Bakers
 - C. Candlestick makers
 - D. Plumbers
 - E. Doctors

30. Now, identify the crazy person(s):

- A. R.D.
- B. R.D.'s psychiatrist
- C. R.D. Laing
- D. All of us
- E. All of the above

WHERE ARE THEY NOW?



classified).

SECTION II

Directions: Listed below on the left are descriptions, words and/or phrases associated with the names on the right. Match the items on the left with the names in the column to the right. Each name may be used once, more than once or not at all.

- A. Beautiful person
- B. Alive and well in Argentina
- C. Most potent systemic anesthetic
- D. Fecal impaction
- E. Not infrequently and commonly rare
- F. "Bull shit which can be spoken is not eternal"
- G. White man's burden
- H. Dirty old man
- I. Dirty young man
- 1. Chymotrypsin
- K. Rear admiral
- L. Inspiring lecturer
- M. Known to "take a nip"
- N. Jack the "ripper"
- O. All-round nice guy
- P. Mad at the world
- Q. High school elocution champ
- R. Reincarnated Roman chimney sweep
- S. Nice guy but he kisses funny
- T. Cries all the way to the bank
- U. Got out while he could
- V. The odd couple
- W. Gave us a break
- X. Grubby complainer
- Y. Pompous ass
- Z. Nonpompous ass
- AA. Does his best to make rotations at Jeff pleasant
- BB. Started all those damned traditions
- CC. Has a pretty secretary
- DD. Has a friendly secretary
- EE. Keeps tabs on everybody else's secretary
- FF. Loves to cut
- GG. Likes the Beatles
- HH. A real mensch
- II. Shoulda stood in bed
- II. A nasty temper
- KK. Lives in the past
- LL. Jefferson's champion chiseler
- MM. Looks like he's asleep
- NN. Usually is asleep
- OO. Puts everybody else to sleep
- PP. Keeps on top of the problem
- QQ. Way ahead of the rest
- RR. Knows his own mind
- SS. Likes to talk
- TT. Undercover man for the CIA
- UU. Never know what he's thinking
- VV. A sadist at heart
- WW. Keeps his hand in
- XX. Personality plus
- YY. Import model
- ZZ. Throws a good party

- 1. Pete Theodos
- 2. Mike Simenoff
- 3. Herbie Mansmann
- 4. Fred Friedmann
- 5. S. A. D'Angelo
- 6. Jay Jacoby
- 7. Abe Rakoff
- 8. Chuck Rosa
- 9. Ioe Gonnella
- 10. Irwin Hassenfeld
- 11. Hyman Menduke 12. Marion Siegman
- 13. Julius Coon
- 14. Ioe Rupp
- 15. Tom Duane
- 16. Dick Chambers
- 17. Roy Holly
- 18. Shelly Schlaff
- 19. Pete Herbut
- 20. Art Patchefsky
- 21. Gary Carpenter
- 22. Wolfgang Vogel
- 23. Sam Conly
- 24. Jeffrey Mattes
- 25. Joe McCloskey
- 26. Romano H. DeMeio
- 27. Franz Hausberger
- 28. Richard Field
- 29. Irwin Stoloff
- 30. Bob Wise
- 31. Gerry Marks
- 32. Jules Bogaev
- 33. Dick Berry
- 34. Arthur First
- 35. Jack Dowling
- 36. Pete Baltzell
- 37. Irv Olshin
- 38. Charles Kraatz
- 39. Bill Kellow
- 40. Floyd Cornelison
- 41. Simon Kramer
- 42. Chuck Fineberg
- 43. Paul Zimskind
- 44. Gonzalo E. Aponte
- 45. Russ Schaedler
- 46. Wesley W. Parke
- 47. Phil Hodes
- 48. Joe Medoff
- 49. Sander Shapiro
- 50. Phil Gordy

- 51. George Andros
- 52. Louis Clerf
- 53. Jasper Chen-See
- 54. Bill Manthei
- 55. Franz Goldstein
- 56. Norm Lasker
- 57. Bob Mandle
- 58. Bob Mackowiack
- 59. J. Y. Templeton, III
- 60. Warren Goldburgh
- 61. Joe Rodgers
- 62. Len Packman
- 63. J. Raymond Shea, Jr.
- 64. Serge Duckett
- 65. Pete Liebert
- 66. Isobel Rigg
- 67. Ed O'Hara
- 68. Gordy Schwartz
- 69. Jack Capelli
- 70. Bob Johnson
- 71. O. D. Kowlessar 72. Irwin Freudlich
- 73. Richard T. Catheart
- 74. Bos Manges
- 75. Paul Havens
- 76. Ed Masters
- 77. Tom Gabuzda
- 78. Dick Padula
- 79. Joe Keiserman
- 80. Bob Brent
- 81. Harry Smith
- 82. Paul Maurer
- 83. James O. Brown, Ph.D.
- 84. Ed Burka
- 85. Gene Azerinski
- 86. Jack Reddy
- 87. John Hodges
- 88. Len Graziani
- 89. Joe Long
- 90. Laird Jackson
- 91. Warren Lang
- 92. Andrew Ramsay
- 93. Frank Sweeney
- 94. Frank Lachman 95. Len Reisman
- 96. Samuel D. Gross
- 97. Mary Lou Soentgen
- 98. Don Doemling
- 99. Gus Schwartz

Late in the Fall of 1967 a plot was hatched at DBI to kidnap a high official of the Institute and ransom him for cancellation of the Anatomy final. Acting on information provided by an informer, department officials were able to smash the plot and banish the conspirators in disgrace. The ringleader, however, remains at large and reportedly is planning a comeback.

Based on the above information, identify:

- 1. The ringeleader
 - A. B. C. D. E.
- 2. The intended victim
 - A. B. C. D. E.
- 3. The informer
 - A. B. C. D. E.
- 4. Diagram of DBI heating system
 - A. B. C. D. E.
- 5. Disappointed co-conspirators
 - A. B. C. D. E.







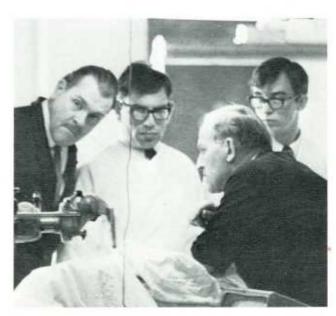
B.



C.



D.

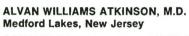


E.

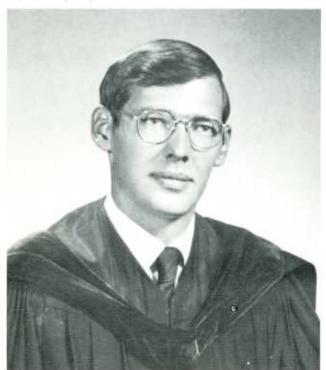


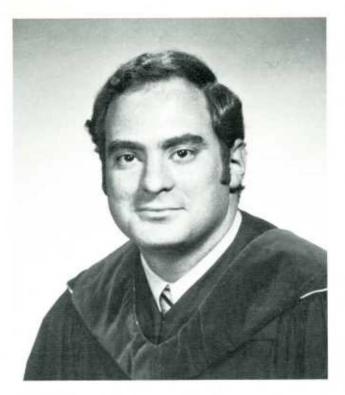
RICHARD WILLIAM ALTREUTER, M.D. Fair Haven, New Jersey

DUKE UNIVERSITY, B.S. Phi Alpha Sigma Student Council, 1969-70 Married Carol Glaser, 1968



COLLEGE OF WILLIAM AND MARY, B.S. Nu Sigma Nu Alpha Omega Alpha



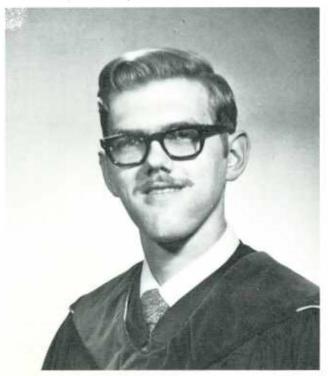


WARREN APPLEMAN, M.D. Neponsit, New York

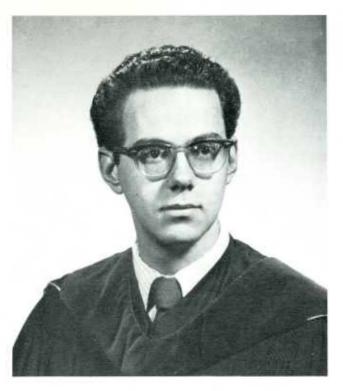
JOHNS HOPKINS UNIVERSITY, B.A. Kappa Beta Phi Married Sue Ellen Matorin, 1967

RICHARD WAYNE BAGGÉ, M.D. Collingswood, New Jersey

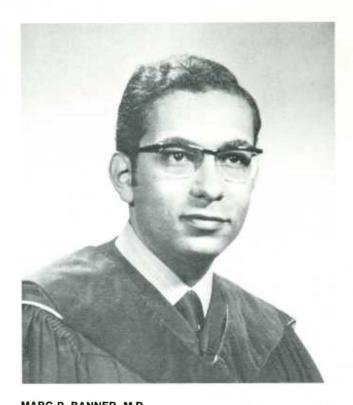
EASTERN BAPTIST COLLEGE Alpha Omega Alpha Phi Alpha Sigma Christian Medical Society





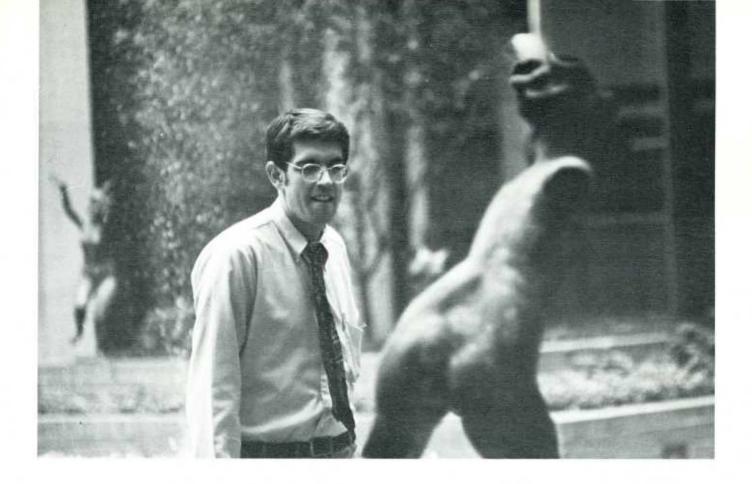


CHRISTOPHER K. BALKANY, M.D. Harrisburg, Pennsylvania PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Chi Hare Society Internal Medicine



MARC P. BANNER, M.D. Philadelphia MUHLENBERG COLLEGE, B.S. Sims Society Internal Medicine or Radiology



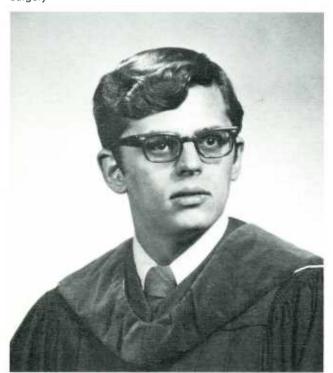


JAMES E. BARONE, M.D. Weirton, West Virginia

WEST VIRGINIA UNIVERSITY, A.B. Nu Sigma Nu

Freshman, Sophomore, Junior and Senior Class President; Kappa Beta Phi; Student Council; Commons Board, president (1969-70), social director (1968-69); President's Student-Faculty Committee; Senior Portrait Committee; 1971 Clinic

Alpha Omega Alpha
Physiology Prize (honorable mention)
Surgery



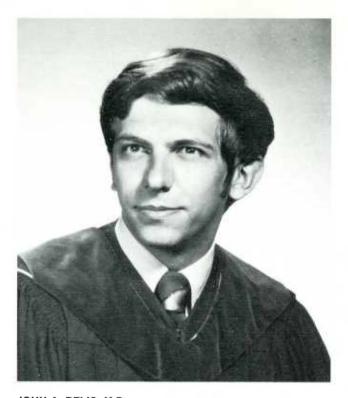
ALEXANDER THOMAS BASKOUS, M.D. Schnectady, New York

UNION COLLEGE, B.S. Phi Delta Epsilon Rugby



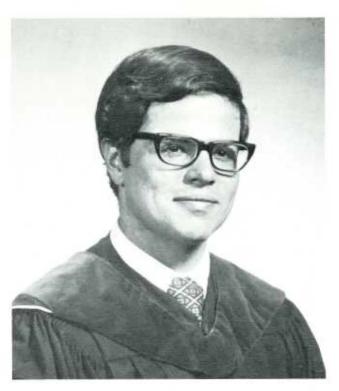


GARY L. BECKER, M.D. Allentown, Pennsylvania LAFAYETTE COLLEGE, A.B. Phi Alpha Sigma Internal Medicine



JOHN A. BELIS, M.D. Smokerun, Pennsylvania PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Chi Surgical Society





DONALD ATHUR BERGMAN, M.D. Eiberon, New Jersey

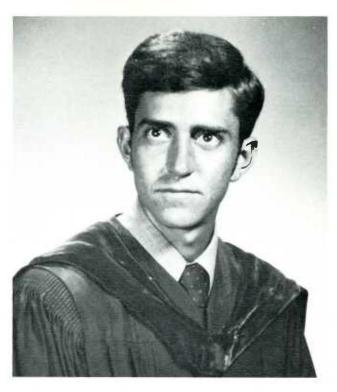
DARTMOUTH COLLEGE, A.B.

Phi Alpha Sigma

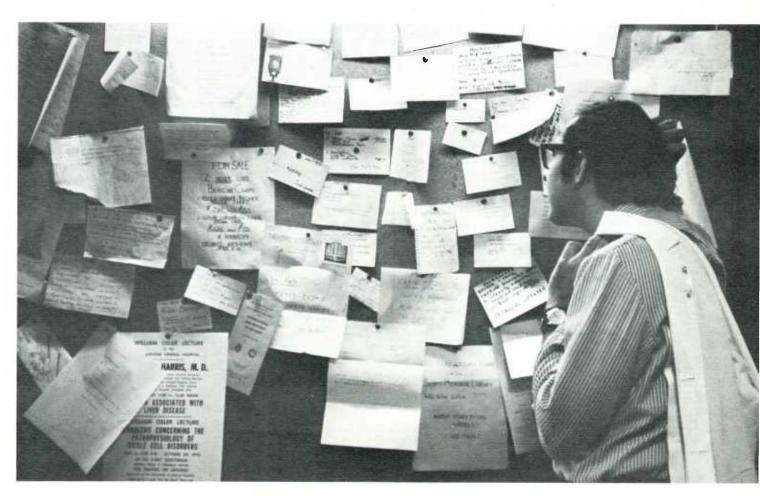
Student Curriculum Committee, 1968-70; Ariel, feature editor (1968-69); 1971 Clinic, contributing editor

Married Susan Menin, 1970

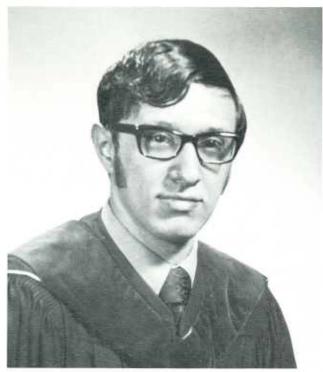
Ob/Gyn



R. ANTHONY BESCHER, M.D. Pittsburgh, Pennsylvania UNIVERSITY OF NOTRE DAME, B.S. Nu Sigma Nu Dons Program





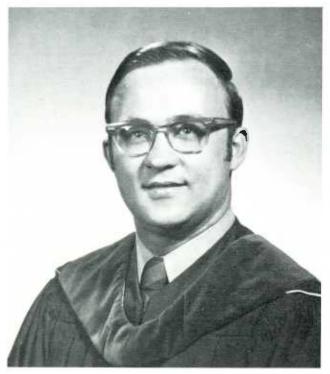


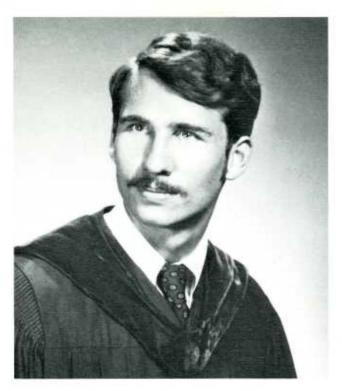
MICHAEL JAY BLECKER, M.D. Bayonne, New Jersey

RUTGERS UNIVERSITY, B.A.
Ariel, associate editor, 1969; contributing editor, 1968-1971;
Academic Protocol Committee, 1969-71
Married Nan Barbara Marcus, 1970

GREGORY PETER BORKOWSKI, M.D. Jenkintown, Pennsylvania

VILLANOVA UNIVERSITY, B.S. Alpha Kappa Kappa Internal Medicine (Cardiology)





JOHN WILLIAM BLOOM, M.D. Saint Joseph, Missouri

WILLIAMS COLLEGE, B.A. Alpha Kappa Kappa, Social Chairman 1969-70 Internal Medicine

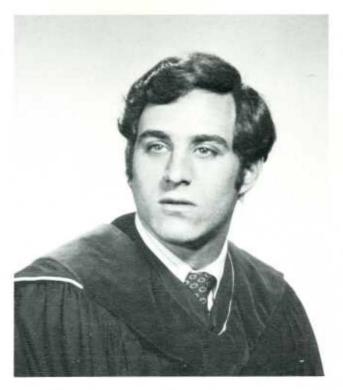


PENNSYLVANIA STATE UNIVERSITY, B.S.

Hare Society
Physiology Prize (honorable mention), Lange Prize (First year),

Alpha Omega Alpha
Married Virginia Louise Ritzel, 1967



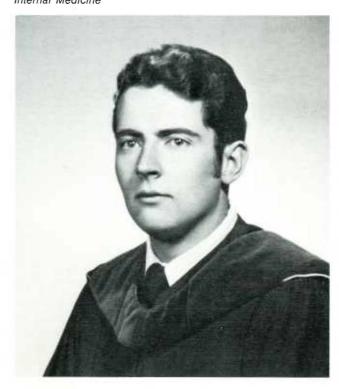


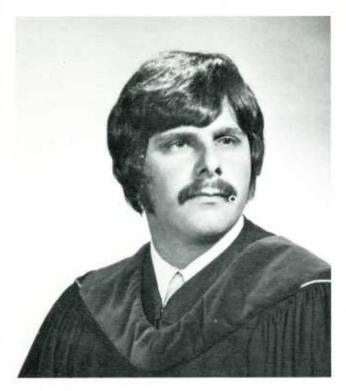
MICHAEL ZANGWILL BLUMBERG, M.D. Wyncote, Pennsylvania

BRANDEIS UNIVERSITY, A.B.
Student Affairs Committee, (1970-71), Sims Society, Hare Society
Academic Pediatrics

LOUIS JOHN BORUCKI, M.D. Moorestown, New Jersey

ST. JOSEPH'S COLLEGE, B.S. Alpha Kappa Kappa Hare Society Alpha Omega Alpha Married Nancy A. Golchen, 1968 Internal Medicine





BYRON S. BRAID, M.D. Philadelphia
TEMPLE UNIVERSITY, A

TEMPLE UNIVERSITY, A.B. Married Marcy Schwartz, 1967 Psychiatry



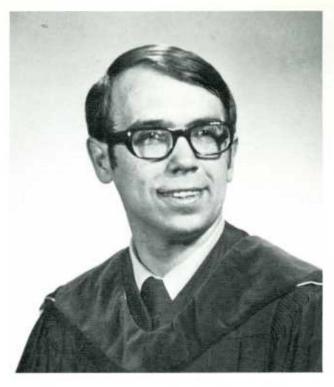
BRYN MAWR COLLEGE, A.B.

Alpha Omega Alpha, Pathology Prize (honorable mention)

Hare Society

Surgery



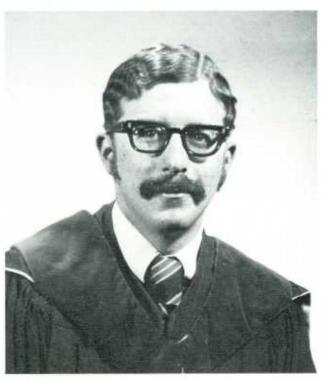


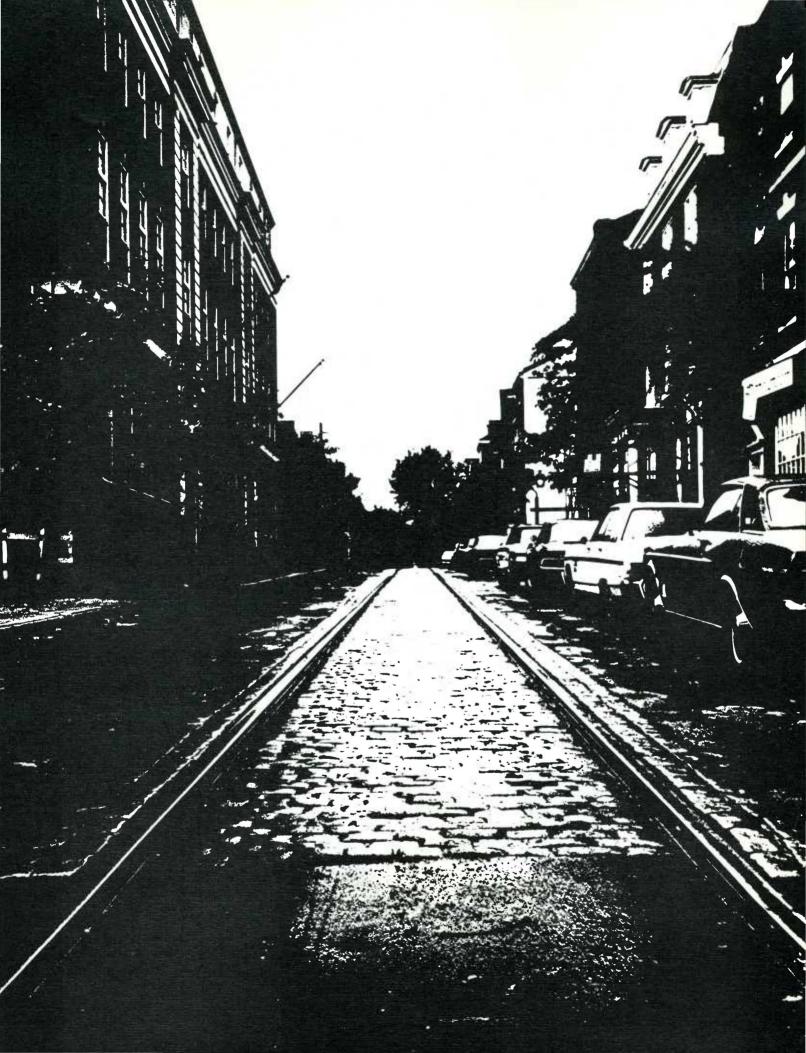
THOMAS ALBERT BRASITUS, M.D. Milford, Connecticut

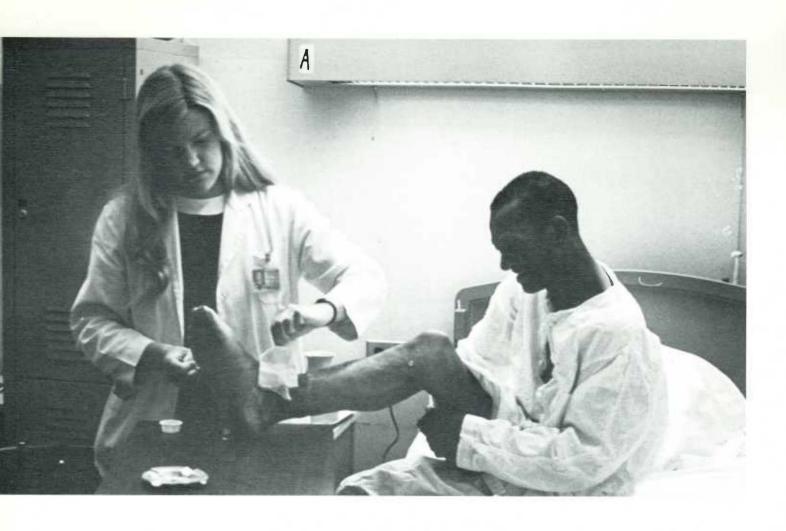
UNIVERSITY OF CONNECTICUT, B.A. Alpha Kappa Kappa Hare Society
Alpha Omega Alpha
Married Christine Legace, 1967
Internal Medicine

ARTHUR EDWARD BROWN, M.D. Trenton, New Jersey

BUCKNELL UNIVERSITY, B.S. Phi Alpha Sigma, social chairman (1968) Kappa Beta Phi, Sims society, secretary (1970-71) Internal Medicine or Pediatrics

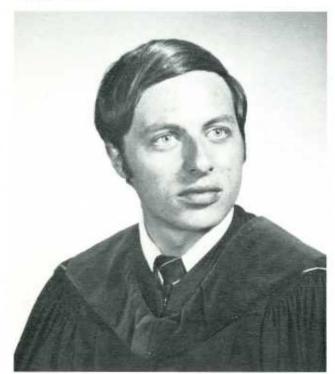






SYLVAN BROWN, M.D. Philadelphia

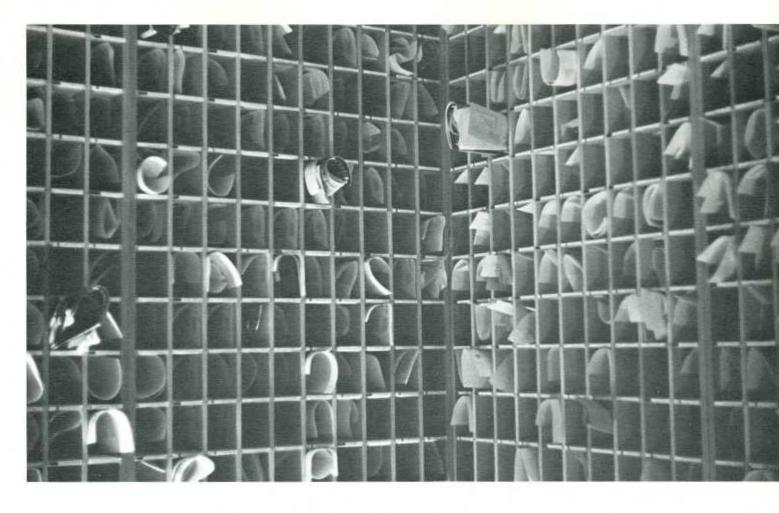
FRANKLIN & MARSHALL COLLEGE, A.B. Married Sharon Linker, 1969 Internal Medicine



GERTRUDE BARNES BRUNDAGE, M.D. West Caldwell, New Jersey

MARIETTA COLLEGE, B.S.
Christian Medical Society, secretary-treasurer (Junior and Senior years); Pediatrics Society, cochairman (Junior year), Sims Society, Hare Society Pediatrics





THOMAS MICHAEL BRYAN, M.D. South Williamsport, Pennsylvania

JUNIATA COLLEGE, B.S.

Phi Alpha Sigma, co-steward (1968-69), rush chairman (1969), president (1970-71)

Kappa Beta Phi

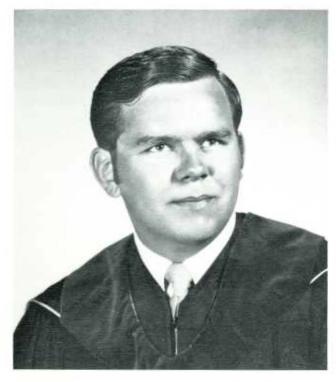
Married Josie Gudolonis, 1970

Family Practice



GARY K. BUFFINGTON, M.D. Punxsutawney, Pa.

PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Alpha Sigma Hare Society Married Millie Kerr Internal Medicine





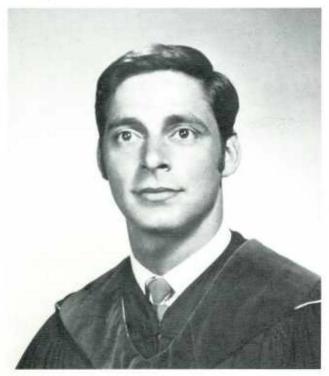
DANIEL J. CALLAHAN, M.D. Oreland, Pennsylvania

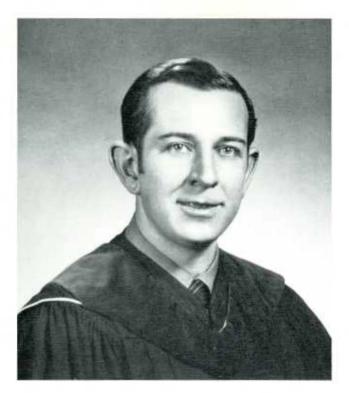
LaSALLE COLLEGE, A.B. Alpha Kappa Kappa



PETER M. CARAVELLO, M.D. Philadelphia

ST. JOSEPH'S COLLEGE, B.S. Phi Alpha Sigma Married Eileen Taylor, 1968 Medicine



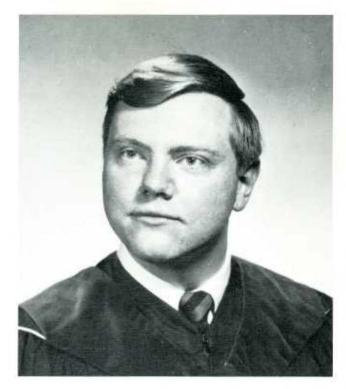


TERRENCE S. CARDEN, JR., M.D. Scranton, Pennsylvania

UNIVERSITY OF SCRANTON, B.S. COLUMBIA UNIVERSITY, M.S.

Editor, 1970 and 1971 Clinic; Student Council, secretary (1970-71); Student Microscope Committee, cochairman (1969-70); Senior Portrait Committee, chairman; Gibbon Society; Hare Society

Alpha Omega Alpha, Lange Prize (second year) Married Marion Elisabeth Whitney, 1962 Radiology



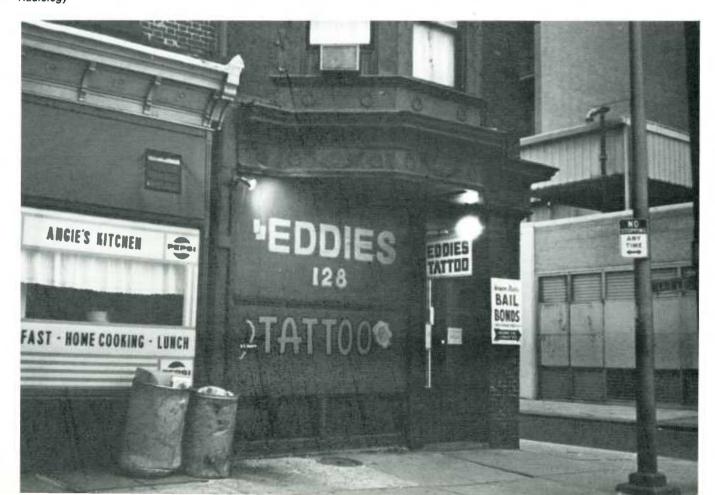
FLOYD M. CASADAY, III, M.D. Indiana, Pennsylvania

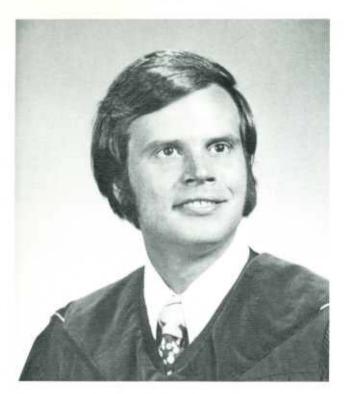
PENNSYLVANIA STATE UNIVERSITY, B.S.

Phi Chi, president (1970)

Kappa Beta Phi, treasurer (1969-70); president (1970-71); Class Treasurer (1966-71); Admissions Committee (1970-71); Interfraternity Council; chairman of Black and Blue Ball (1970); Senior Portrait Committee; 1971 Clinic, contributing editor

Surgery





DELVYN CAEDREN CASE, JR., M.D. **Newington, Connecticut**

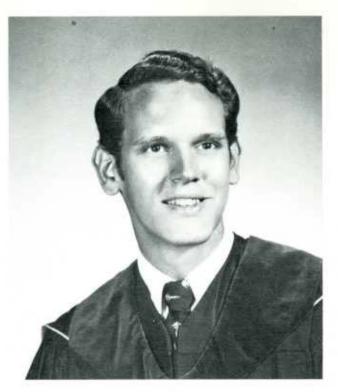
BROWN UNIVERSITY, A.B. Ariel, founder and editor; Grays Ferry Health Center, founder and chairman; Student Medical Forum, chairman; Student Mobilization Committee; Student Constitution Committee, cochairman; Committee to Save Mental Health Services, chairman; North Philadelphia Sex Education Program; Dons Program; MCHR; SHO

Married Carole Anne Herhilan, 1970 Internal Medicine

MILAN DANIEL CHEPKO, M.D. Pittsburgh, Pennsylvania

UNIVERSITY OF PITTSBURGH, B.S. Nu Sigma Nu Married Karen D. Roach, 1968



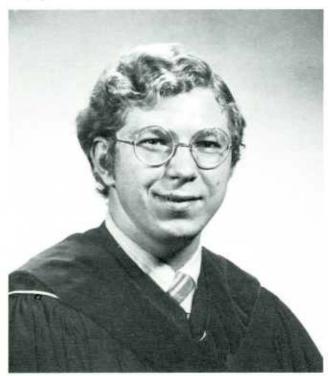


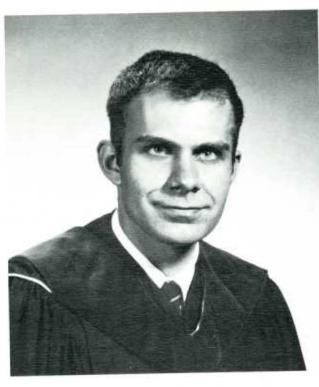
ROBERT EVAN CHANDLEE, M.D. Pittsburgh, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Chi, vice president, rush chairman, social chairman Kappa Beta Phi Married Barbara Gartland, 1969

WILLIAM L. CHOLLAK, M.D. Philadelphia

VILLANOVA UNIVERSITY, B.S. Alpha Kappa Kappa Hare Society, Gibbon Society Married Martha M. Durkin, 1969 Surgery





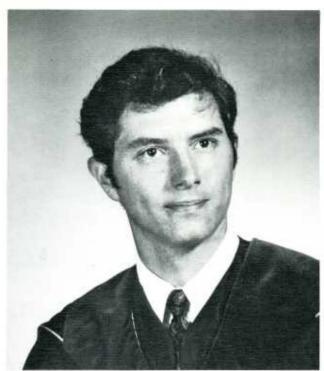
LAWRENCE JOSEPH CHASE, M.D.
Yeadon, Pennsylvania
PHILADELPHIA COLLEGE OF PHARMACY & SCIENCE, B.Sc.
Gibbon Society
Married Maureen E. Ims, 1967
Surgery

CORA LE ETHEL CHRISTIAN, M.D. St. Thomas, Virgin Islands
MARQUETTE UNIVERSITY, B.S. Dons Program, coordinator



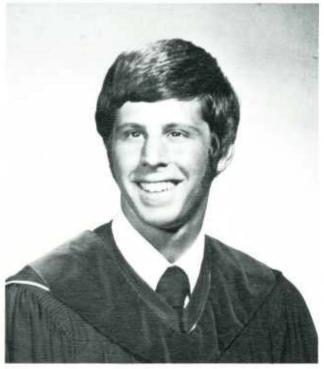






RICHARD I. CLEMMER, JR., M.D. Glenmoore, Pennsylvania WESLEYAN UNIVERSITY, A.B. Alpha Kappa Kappa

DAVID R. COOPER, M.D. Westbury, New York HARPUR COLLEGE, B.A. Nu Sigma Nu Orthopedic Surgery





The seniors know. So do many underclassmen. If they have a problem . . . a suggestion . . . a conflict . . . a complaint . . . a question. Who's the man to see? Jim Barone, of course. He's the senior class president. If anybody speaks for the class, Jim does. And everybody knows he tells it like it is. Jim's been listening to questions and complaints, giving advice and carrying student grievances to the administration for four years—and he's good at his job. The class has responded by re-electing him overwhelmingly every year—the last two times without opposition. And if all this isn't enough to keep him busy, Jim has been involved in just about every important activity at Jefferson for the past four years.

What motivates him to devote so much time and effort to tasks many medical students consider thankless and pass off as unnecessary? "It makes life interesting," Jim reponded when asked that question in an interview with The Clinic. "Those who don't participate miss a lot," he commented, adding: "Besides, it's good training for academic medicine," which is where he expects to wind up. That's a far cry from where he started—in Weirton, W. Va., where he spent his entire life before entering Jefferson in 1967 from West Virginia University

"By the time we are ready to graduate," he said, "I think most of us will look back and be able to say we had fun and learned a lot." And things are looking up. "The place is going to be better in 10 years, I'm sure," Jim says. Almost every department has made major changes since the class of 1971 matriculated, he points out, and many more changes are in the works. The upheaval has had a greater impact on the seniors than any other class. Jim listed just a few of the major ones. "We were the last class to use DBI (Daniel Baugh Institute of Anatomy); we had two new professors of surgery and a new professor of microbiology; we were the last class to have lectures during the junior year and the first class to institute a note-taking service."

Of all the changes, Jim believes the one with the most impact on the class was the opening of Jefferson Hall in the summer of 1968. "Of course, they promised me it would be open in September of 1967 when I applied here," he says. "I wonder what we did before the Commons . . . no lectures . . . no concerts . . . no plays . . . no TGIF parties." The Commons "still isn't used to full advantage," Jim contends, but its impact on the recreation and social life has been profound. Despite the welcomeness of the new facilities, Jim has considerable nostalgia for the old days. "It might have been awful, but I think we had more fun at DBI," he contends. The current freshmen "aren't the same as we were. They have shiny new dissection tables . . . clean, well-lighted labs . . . air conditioning. But it's not the same."

INTERVIEW:

James E. Barone he gets things done

Jim helps out at dissection table

Student government has also been profoundly affected by change over the past four years. The most significant achievement, according to Jim, has been the appointment of students with voting rights to all major college policy committees except the Executive Council. This step was taken largely at the instigation of the administration, "despite its conservative reputation," he adds. During the same period, Student Council, which selects students to sit on the administration committees, has undergone its own reform, making the membership more representative of the student body at large. Jim, who has been a council member since he was a freshman, likens the organization to the United Nations. "Neither of them really does very much. But think of the alternative." He believes the most important function of the council is to open and maintain avenues of communication between the students and administration.

While most of the recent changes resulted in improvements, Jim believes there is one area where Jefferson may have changed too much. He cites the policy on promotions generally referred to among students and much of the faculty as "no flunk." While Jim agrees that all students should be encouraged when they have academic difficulties and that none whose work is adequate should be flunked as part of a "quota," he contends there should be more strict accountability for the material taught. Hand-in-hand with this problem, he contends, is a lack of uniformity of instruction and evaluation in the clinical years, when the supervision is also less adequate. "If someone gets by the first two years, there's practically no way to stop him from graduating," Jim notes. The formula for success in the clinical blocks is simple, he says. "All you have to do is show up, be a nice guy and agree with the guy in charge. That's worth an 80 at least." At some places it's worth even more than that, Jim notes, since there is no uniformity of standards. Probably the greatest example of variability he says, is the medicine practical examination. "If it counts for even 10 percent of the grade, it's too much," he contends. The answer, he believes, is implementation of a more stringent policy on promotions in the preclinical vears so students won't develop bad habits and "more quality control" in the clinical blocks to insure uniform standards and instruction, as well as adequate evaluation of performance. Probably the worst step that could be taken, Jim contends, is approval of a pass-fail system. "That would remove all motivation to study, since the most you could get would be a pass, anyway."

Jim may get a chance to test some of his ideas on medical education if he heads into academic medicine as planned. He has all the credentials needed. Besides his experience in administrative matters at Jefferson, he's compiled a fine academic record and was selected as a junior for membership in Alpha Omega Alpha.

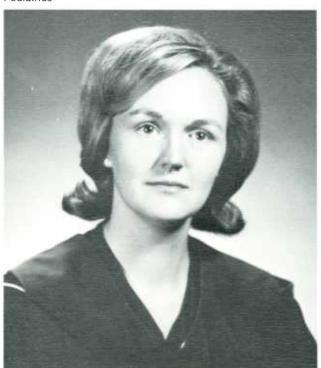


MARY KING CRADDOCK, M.D. New Orleans, Louisiana

SWEET BRIAR COLLEGE, A.B. Married George B. Craddock, Jr., M.D., 1968 Pathology

CAROLYN S. CRAWFORD, M.D. Reading, Pennsylvania

DICKENSON COLLEGE, B.S.
ST. JOSEPH'S COLLEGE, M.S.
Sims Society, Hare Society, Senior Portrait Committee, Faculty
Committee on Supporting Facilities, Pediatrics Society
Alpha Omega Alpha
Married Ralph W. Crawford, Jr., M.D., 1962
Pediatrics



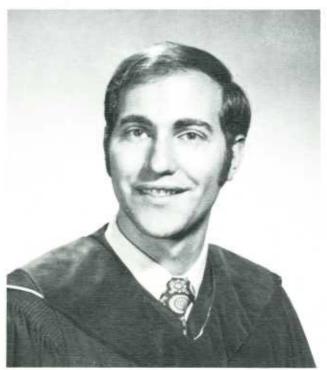


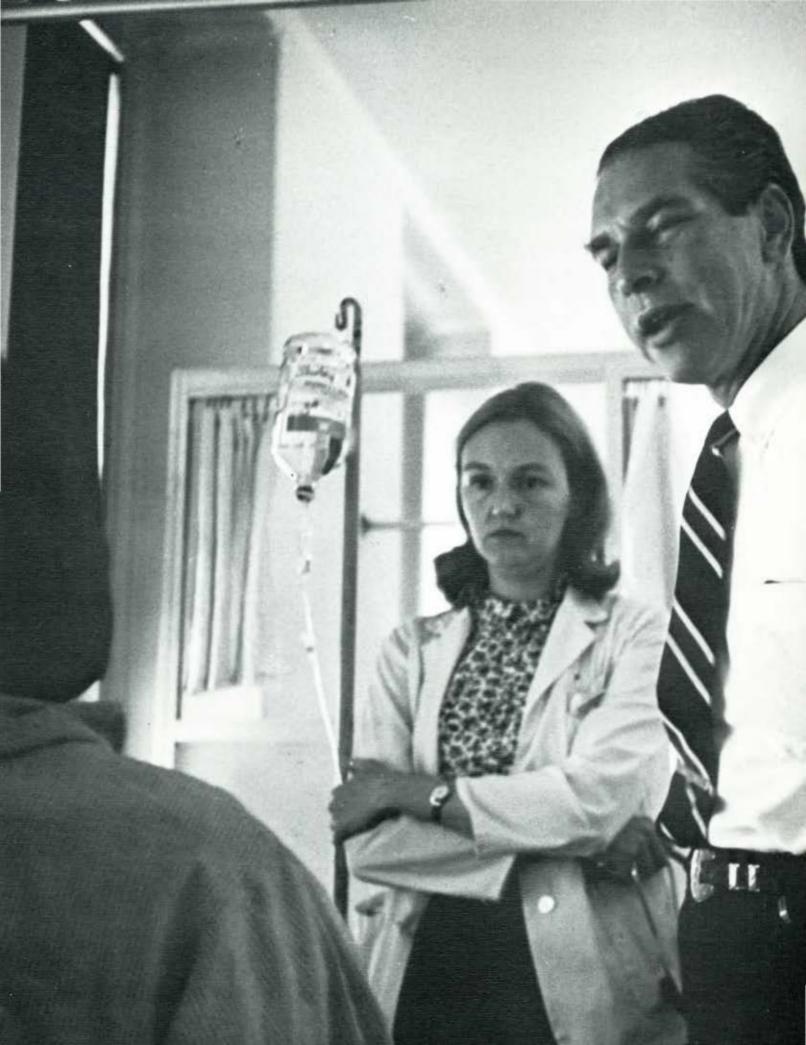
HARRY RALPH CRAMER, JR., M.D. Allentown, Pennsylvania

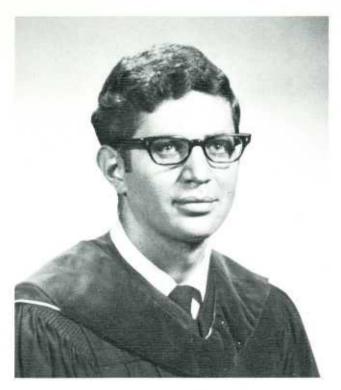
DARTMOUTH COLLEGE, A.B. Alpha Kappa Kappa Hare Society Alpha Omega Alpha

DAVID M. DANOFF, M.D. Bayside, New York

UNIVERSITY OF MICHIGAN, B.S. Phi Alpha Sigma Married Barbara Fowble, 1969 Internal Medicine







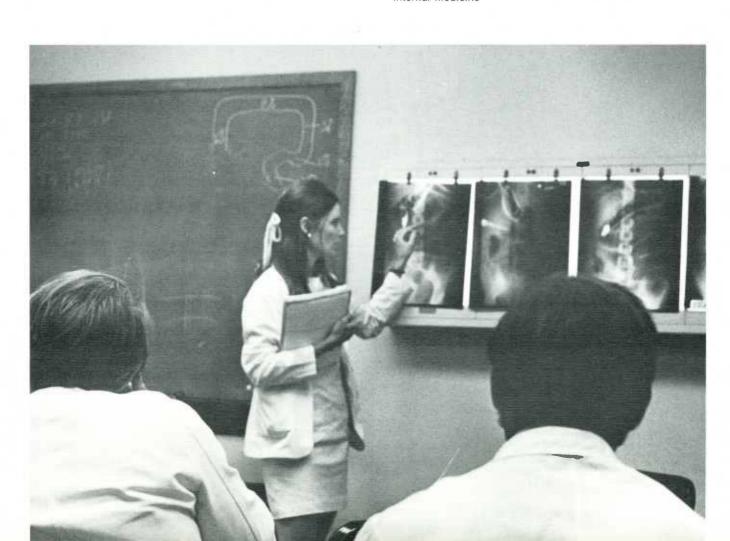
ROBERT DAVIDSON, M.D. Philadelphia
TEMPLE UNIVERSITY, A.B. Phi Chi, treasurer (1969-70) Internal Medicine

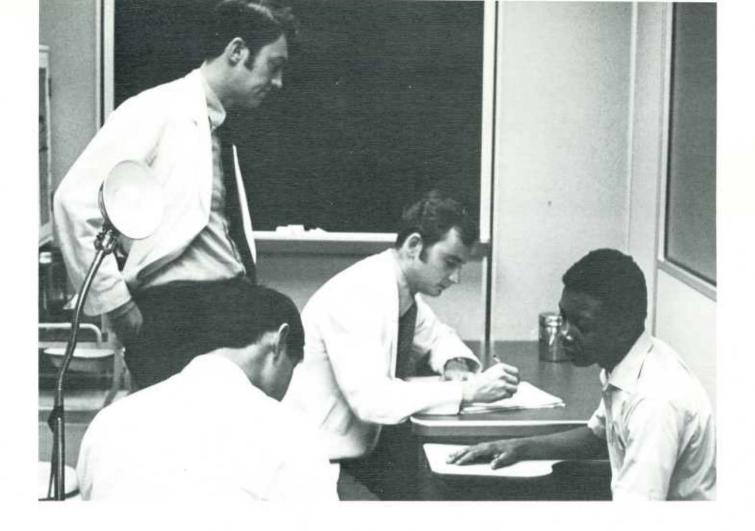


WASHINGTON & LEE UNIVERSITY, B.S.

Nu Sigma Nu
Student Council (1968-70), treasurer (1970-71); Admissions
Committee (1969)

Internal Medicine





GEORGE WILLIAM DENNISH, III, M.D. Bordentown, New Jersey

SETON HALL UNIVERSITY, A.B.

Phi Alpha Sigma, rush chairman (1968-69)

Hare Society

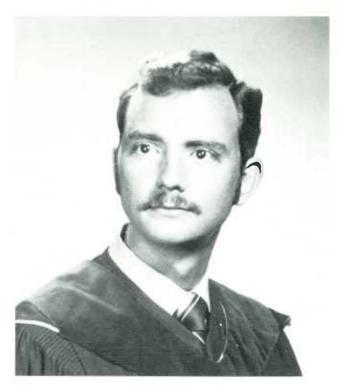
Married Kathleen Macchi, 1969

Internal Medicine



JUDITH RHODA DERASSE, M.D. Easton, Pennsylvania BUCKNELL UNIVERSITY, B.S. Married Alain Derasse, 1969 Medicine





T. JEFFREY DMOCHOWSKI, M.D. Moorestown, New Jersey

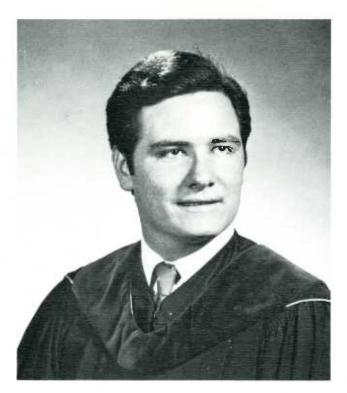
ST. JOSEPH'S COLLEGE, B.S. Nu Sigma Nu Kappa Beta Phi, president Family Medicine or Surgery



CAROL ANNE DOLINSKAS, M.D. Maplewood, New Jersey

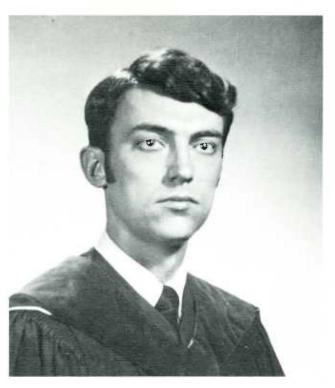
ST. BONAVENTURE UNIVERSITY, B.S.
Ariel, layout editor (sophomore and junior year); 1971 Clinic, contributing editor
Alpha Omega Alpha, vice president
Surgery





BRIAN DONNELLY, M.D. Lyndhurst, New Jersey

ST. PETER'S COLLEGE, B.S.
Alpha Kappa Kappa
Hare Society, Rugby Club
Alpha Omega Alpha
Married Kathleen Ferguson, 1968
Radiology

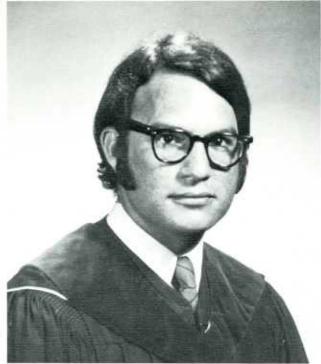


JAMES R. DOOLEY, M.D. Point Pleasant Beach, New Jersey

LaSALLE COLLEGE, B.A.
Nu Sigma Nu, president (1969-70)
Kappa Beta Phi; Recreation Chairman, Jefferson Hall Commons
Urology





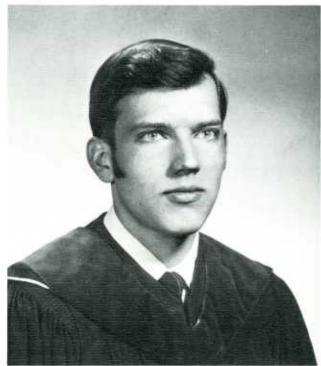


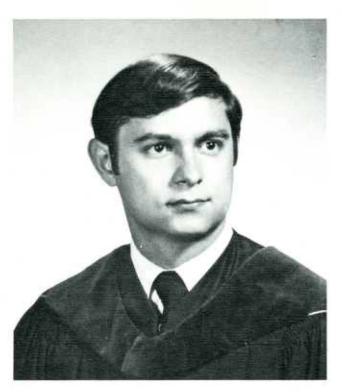
HARRY A. DOYLE, JR., M.D. Philadelphia

LaSALLE COLLEGE, B.A.
Nu Sigma Nu
Rugby
Married Dorothy Byrne, 1968
Psychiatry

EDWIN PAUL EWING, JR., M.D. Beaver, Pennsylvania

WESTMINSTER COLLEGE, B.S. CARNEGIE-MELLON UNIVERSITY Phi Chi Kappa Beta Phi, Intramural Sports Internal Medicine



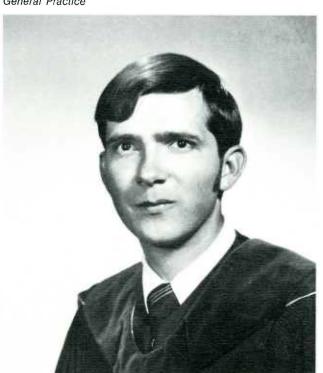


SCOTT S. DUFFY, M.D. Minersville, Pennsylvania

BUCKNELL UNIVERSITY, B.S. Phi Alpha Sigma, rush chairman (1968) Kappa Beta Phi Married Sandra Oswald, 1968 Family Practice



FRANKLIN & MARSHALL COLLEGE, B.A. Phi Chi, assistant steward (1968), bookkeeper (1970) Kappa Beta Phi, treasurer Married Carol Anne Gundel, 1970 General Practice



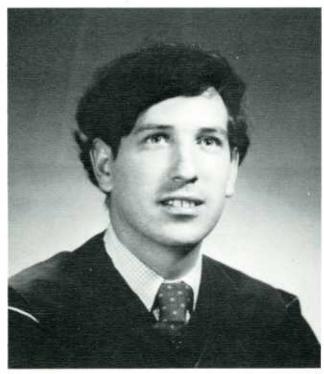


NANCY LINSEY WANG EDWARDS, M.D. Philadelphia

PENNSYLVANIA STATE UNIVERSITY, B.S. COLUMBIA UNIVERSITY, M.S. Married Gary Edwards, M.D.

HENRY MORTON FEDER, JR., M.D. York, Pennsylvania

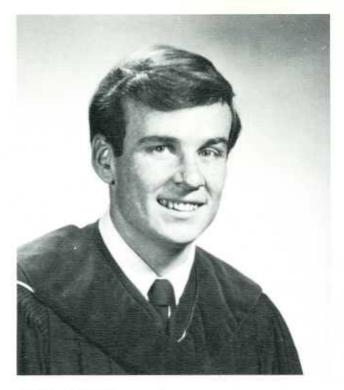
UNIVERSITY OF PENNSYLVANIA, B.A.





WILLIAM FRANCIS FELL, JR., M.D. Merchantville, New Jersey DARTMOUTH COLLEGE, A.B. Alpha Kappa Kappa Kappa Beta Phi, Hare Society

Medicine



JOHN B. FERGUSON, III, M.D. Meadowbrook, Pennsylvania DICKINSON COLLEGE, B.S. Married Virginia Zobel, 1969 Ophthalmology

PAUL MARTIN FERNHOFF, M.D. Ridgefield, New Jersy

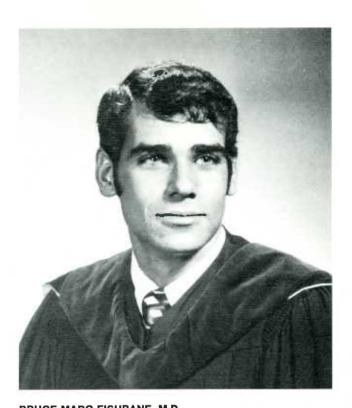
RUTGERS UNIVERSITY, A.B.
Ariel, Coeditor-in-chief (1969-70); Student Medical Forum;
Grays Ferry Community Project; SAMA
Alpha Omega Alpha
Married Deborah Finkelstein
Community Medicine



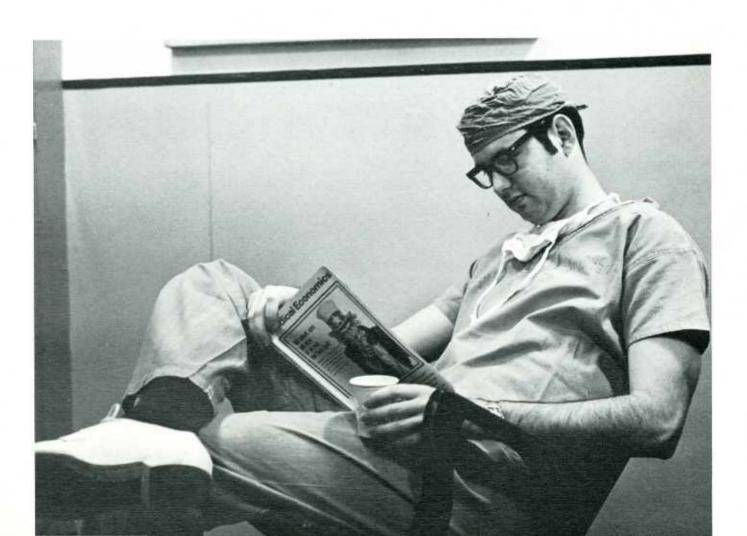


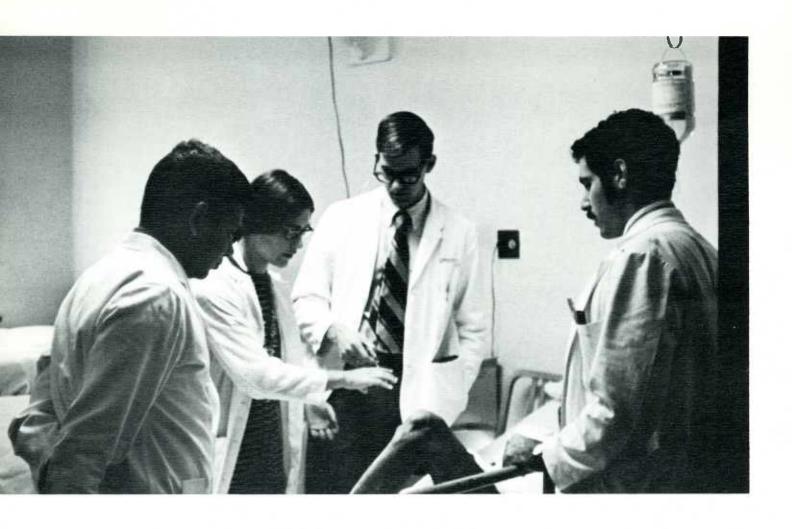
THEODORE W. FETTER, M.D. Villanova, Pennsylvania

UNITED STATES NAVAL ACADEMY UNIVERSITY OF ROCHESTER, A.B. Alpha Kappa Kappa Gibbon Society



BRUCE MARC FISHBANE, M.D. East Meadow, New York PENNSYLVANIA STATE UNIVERSITY, B.S. Sims Society, Gibbon Society, Hare Society Married Marsha Joy Meyers, 1970 Surgery

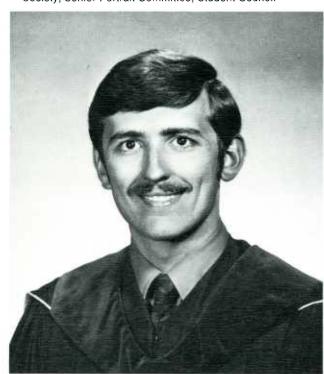




THOMAS WILLIAM FISS, JR., M.D. Philadelphia

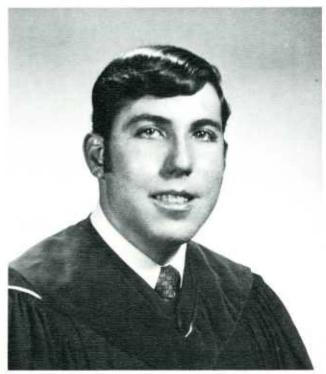
ST. JOSEPH'S COLLEGE, B.S.

Alpha Kappa Kappa
Hare Society; 1970 Clinic, 1971 Clinic, business manager;
Student Microscope Committee, cochairman (1969); Gibbon Society; Senior Portrait Committee; Student Council



ERVIN S. FLEISHMAN, M.D. Huntingdon Valley, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Hare Society Internal Medicine

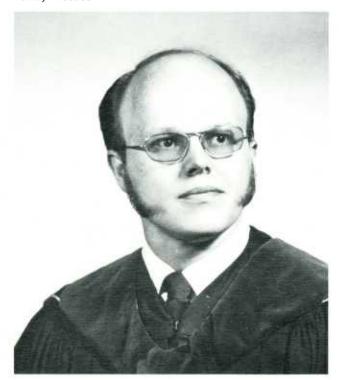




BRUCE A. FORREST, M.D. Paramus, New Jersey

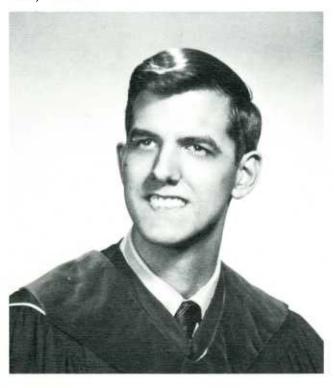
COLUMBIA COLLEGE, A.B.

Phi Delta Epsilon
Sims Society, vice president; Hare Society
Ob/Gyn prize (honorable mention)
Married Gerrie Lynn Sokoloff, 1968
Family Practice



GEORGE R. FREELAND, M.D. Scotch Plains, New Jersey

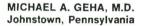
URSINUS COLLEGE, B.S. Married Rita E. Johanson, 1967 Family Practice



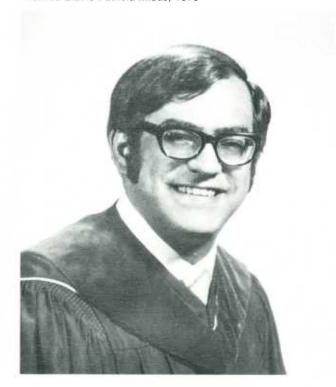


STEPHEN SANDER FROST, M.D. Philadelphia

TEMPLE UNIVERSITY, B.A. *Phi Chi, Alumni Chairman (1969)* Married Ann Devorah, 1970



UNIVERSITY OF PITTSBURGH, B.S. Phi Chi Kappa Beta Phi Married Elaine Patricia Midas, 1970



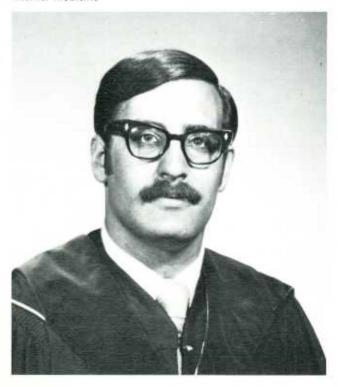


FRANCISCO J. GARCIA-TORRES, M.D. San Juan, Puerto Rico

LOYOLA UNIVERSITY OF THE SOUTH, B.S.
Phi Chi, steward (1968-69), secretary (1969-70)
Kappa Beta Phi, secretary (1970-71); Student Council Curriculum Committee (1967-68); Sims Society
Alpha Omega Alpha
Pediatrics—Internal Medicine

ARTHUR HOWARD GLASER, M.D. Havertown, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Hare Society Married Linda Ellen Markowitz, 1969 Internal Medicine





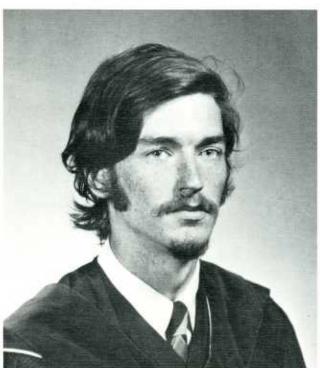


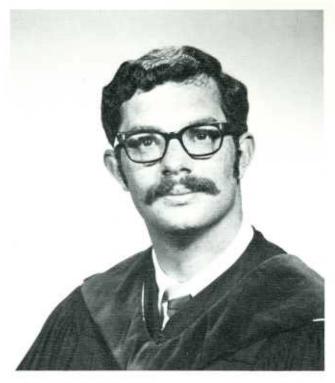
PHILLIP GLASS, M.D. Margate, New Jersey MUHLENBERG COLLEGE, B.S. Gibbon Society, Sims Society Married JoAnne Rosenberg, 1970

Ophthalmology

ERIC P. GORMALLY, M.D. Wallingford, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. *Phi Chi General Practice*



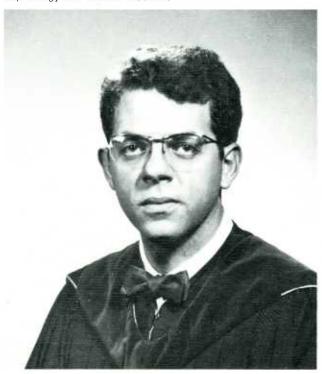


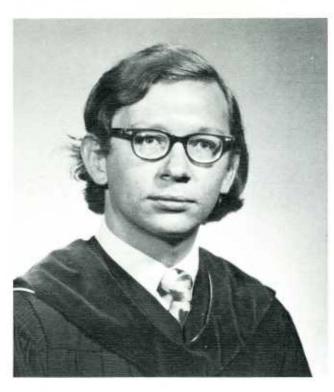
ROBERT WHITNEY GOLDSTEIN, M.D. Havertown, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Delta Epsilon Hare Society, treasurer Alpha Omega Alpha Internal Medicine

DANIEL BENNETT GOULD, M.D. Clifton, New Jersey

DARTMOUTH COLLEGE, A.B. Phi Alpha Sigma, (1967-68) Ariel, founding associate editor Married Frances Ostrum, 1970 Nephrology and Internal Medicine





WALTER FRANK GOODWILLIE, M.D. Narberth, Pennsylvania

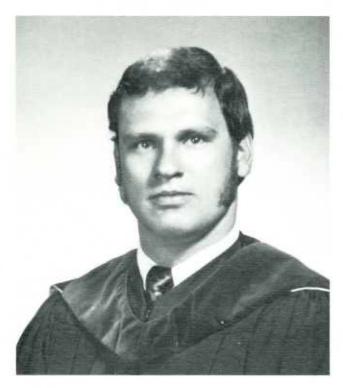
PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Chi Student Medical Forum Internal Medicine

STEPHEN RAY GRAY, M.D. Bayside, New York

YALE UNIVERSITY, B.A. Alpha Omega Alpha Pathology





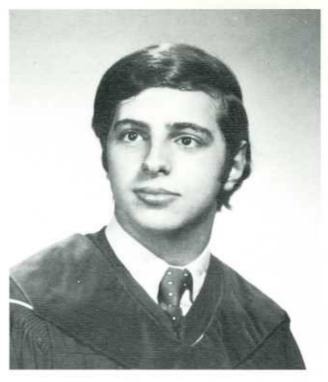


RONALD D. GROSSMAN, M.D. Mount Carmel, Pennsylvania

PRINCETON UNIVERSITY, A.B.

Phi Chi
Student Council (1967-68), vice president (1969-70), president (1970-71); Kappa Beta Phi
Pathology Prize
Married Anne Boyd Patterson, 1969

Family Practice



JACK MICHAEL GURALNIK, M.D. Broomall, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Hare Society, president Physiology Research Award (1969); *Alpha Omega Alpha* Married Anne Lieberman, 1969

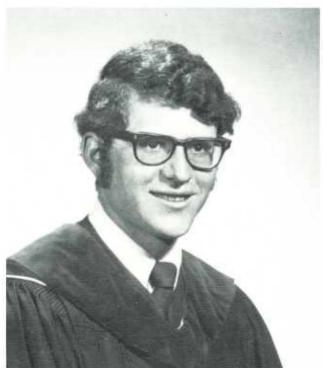




LAWRENCE JOSEPH GUZZARDI, M.D. Philadelphia

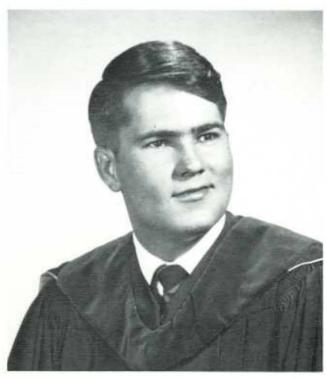
BOSTON COLLEGE, B.S.

Phi Delta Epsilon, rush chairman (1968)
Student Council
Family Practice



WILLIAM C. HAMILTON, M.D. Wyndmoor, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Chi Kappa Beta Phi Alpha Omega Alpha Married Carole A. Schafer, 1969 Internal Medicine





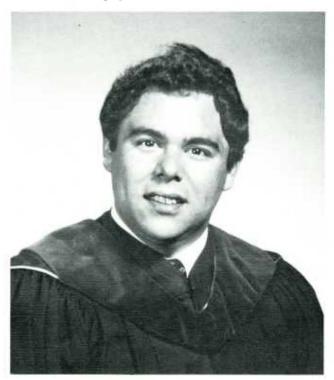
ALVIN GORDON HELLER, M.D. Ridgewood, New York

JOHNS HOPKINS UNIVERSITY, B.A. Kappa Beta Phi, Library Services Committee, SAMA Married Priscilla Berrios, 1961 Cardiology



ROBERT HELLMAN, M.D. Trenton, New Jersey

FRANKLIN & MARSHALL COLLEGE, A.B. Gibbon Society Cardiovascular Surgery





One of the biggest problems at Jefferson is that the student body has often proved less interested in moving ahead than the administration. This is the view of Delvyn Case, a senior who has involved himself in scores of projects and activities that he feels are important to Jefferson or society in general. Delvyn is one of the most visible activists at Jefferson, probably because of his key role in the founding of Ariel, the student newspaper, during his second year here. Ariel has discussed many controversial topics in an attempt to dispell the apathy that Delvyn describes as "the thing I like least" about Jefferson. The newspaper has stirred a lot of comment, but Delvyn revealed in an interview with The Clinic that he is disappointed it has not developed into a true Jefferson forum. "The only reason we founded the paper," he says, "was so people would have a way to discuss issues." He admits that some of the articles in Ariel stirred antagonism among the faculty and a large segment of the student body. These articles "may have reflected our ignorance," he speculates, but hastens to add that few of those who objected were willing to comment publicly in a letter to the editor.

The lack of an effective university forum is part of Jefferson's overall communications deficiency, which Delvyn classifies as "one of our biggest problems." Students, he contends, are interested not only in decisions and policies that affect them directly, but are concerned with planning for the future and could offer helpful suggestions for improvement. He complains that there has been no real consultation of students and he believes that the prime prerequisite to the formation of a master plan for the future should be an "analysis of Jefferson's goals." The institution, he contends, "doesn't appear to be run like a university." He concedes that many of Jefferson's problems are rooted in deficient financing (over which it has little control), but he insists that despite these shortcomings "it's possible to become a lot better."

Part of the solution, he believes, is a strong commitment to community medicine. "Everyone complains that we don't have enough patients," he points out. "The Curtis Clinic is losing patients and losing money . . . A teaching hospital can't teach without patients. . . . If we had enough patients there wouldn't be need for 'gang rectals' and other humiliating experiences for patients. . . . That's one of the reasons why I want Jefferson to move into the community." Just as he pushed for the establishment of a student newspaper in an attempt to improve communications, Delvvn has taken an active part in attempting to get Jefferson involved in community medicine. This has resulted in the founding of the Grays Ferry Health Center, which is staffed by volunteer medical students whose efforts are overseen by a physician from St. Agnes Hospital. When

INTERVIEW:

Delvyn Caedren Case, Jr. a most visible activist

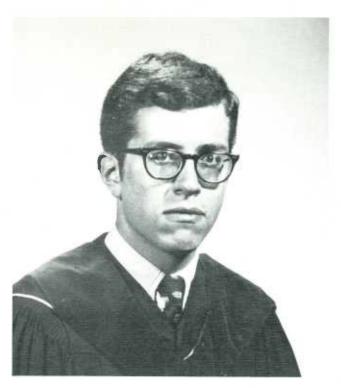
the center started, Delvyn explains, most of the patients who sought its services were already being seen by a private physician or followed in a clinic. Somehow, the group raised enough money to hire community workers to go door-to-door "to get people who aren't being seen by any doctor to come in." The group attempted to get Jefferson interested in helping the center, but Delvyn reports no help was forthcoming. The administration wanted to be involved, he says, but it was unwilling to come to grips with the costs involved.

Though community resentment of medical students, interns and residents has been reported at other neighborhood health centers, Delvyn says none of the students who work at the Grays Ferry center has experienced this. "It all depends on how you approach a patient," he says. "If you try to use him or abuse him, of

course he will resent it."

Ariel and the Grays Ferry center are but two of the causes that have taken Delvyn's time and energy. Much of his effort has been aimed at improving the level of medical care for the disadvantaged segments of society. "We have to be grateful to the preceding generation," he says, "for the tremendous advances in medical knowledge. Our problem is how to get the benefits of this knowledge to the public in general." Accomplishment of this goal, he is convinced, will require a total reorganization of medical care. Doctors can approach the problem in three ways, he says. They can forestall any change, which is becoming increasingly difficult; they can have change forced upon them, or they can cooperate in the development of a new health-care system. Despite fears in many quarters that physicians will opose any significant change, Delvyn says, "I like to remain optimistic." He believes that the new generation of medical students will be instrumental in the profession's acceptance of necessary recvisions. He contends that while few students are willing to actively work for reforms, an increasing percentage is "sympathetic". He cites the senior class as an example, claiming that there are about 20 students who have shown themselves willing to donate their time to such causes. What about the other 166 seniors? "There are at least 60 more whose sympathy I can count on," Delvyn estimates, adding: "I think the sentiment among many of the others is changing." Though he feels the nucleus of 20 seniors has been effective, Delvvn is concerned that the number of "involved" students is declining at Jefferson. "When we were freshmen," he relates, "we had more people who were interested in what was going on than any class. The seniors then had the least and there were progressively more in each class." Now, he contends, the senior class has the largest group of involved students. This lack of concern, he feels, is responsible for allowing many of Jefferson's problems to continue. "It's too easy to blame the administration," he says.

Though he is committed to helping bring about reform and reorganization of the medical system, Delvyn plans to devote most of his energy to patient care. His goal, he says, is "to become an outstanding internist" while continuing to "work to make our medical care in America the best."



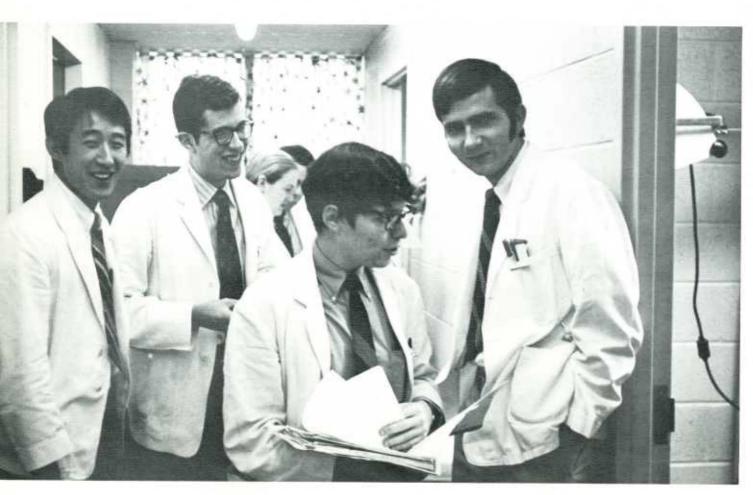
DAVID HUBER HENNESSEY, M.D. Philadelphia

HOBART COLLEGE, B.S.

Phi Chi
Sims Society
Married Anne Kesting Smith, 1969
Family Practice



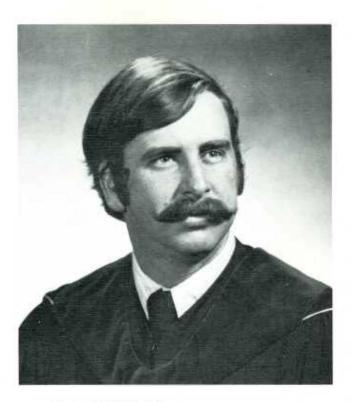
WILLIAM ROBERT HENRICK, M.D. Pittsburgh, Pennsylvania WASHINGTON & JEFFERSON COLLEGE, B.A. Married Linda Watson, 1967 Anesthesiology





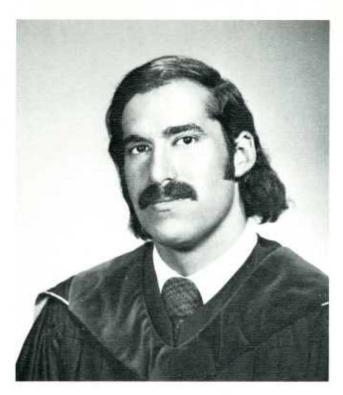
RONALD HISAO HIROKAWA, M.D. North Wales, Pennsylvania

URSINUS COLLEGE, B.S. Phi Chi Student Council Married Billie Jean Dickerson, 1968 General Practice



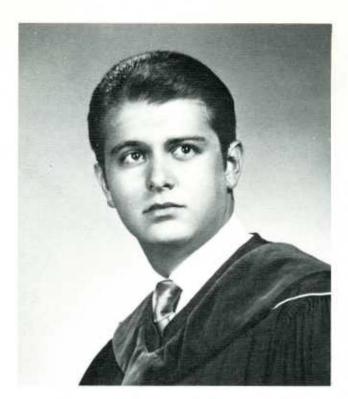
RONALD A. HOFFMAN, M.D. West Orange, New Jersey RUTGERS UNIVERSITY, B.A. Ariel (1969) Married Alice J. Weiss, 1970





DAVID JONAS HOLZSAGER, M.D. Great Neck, New York

CORNELL UNIVERSITY, A.B. Student Medical Forum, treasurer; Hare Society Community Pediatrics

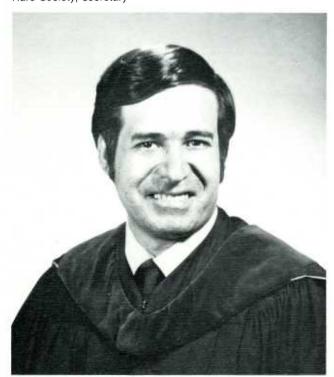


JOHN CHARLES IACUZZO, M.D. Paterson, New Jersey

ST. PETER'S COLLEGE, B.S. Alpha Kappa Kappa Gibbon Society Alpha Omega Alpha Married Mary Plowman, 1968 Surgery

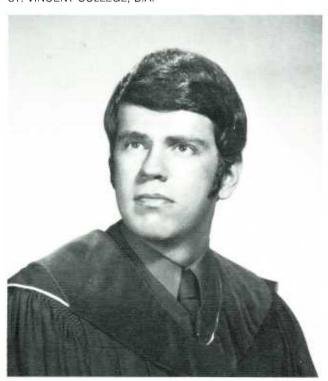
STANLEY ROBERT JACOBS, M.D. Philadelphia

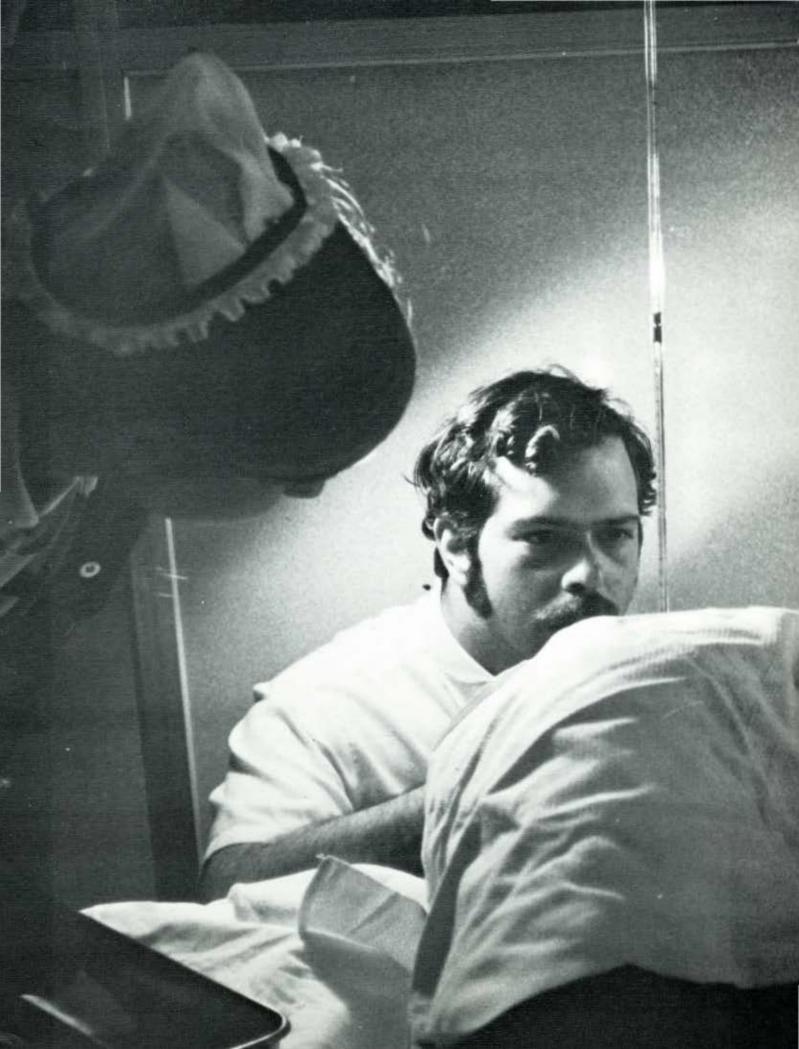
TEMPLE UNIVERSITY Hare Society, secretary



ROBERT D. JAMBRO, M.D. St. Mary's, Pennsylvania

ST. VINCENT COLLEGE, B.A.





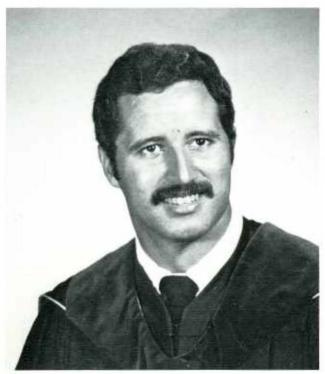


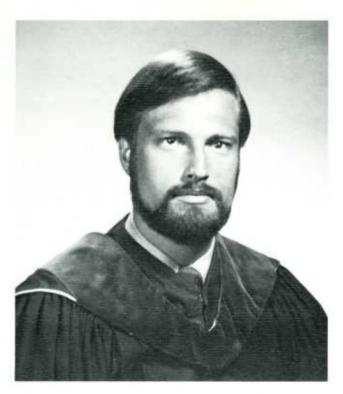


RUSSELL G. JOHNSTON, M.D. Sunbury, Pennsylvania PRINCETON UNIVERSITY, A.B. Nu Sigma Nu, social chairman (1969-70) Internal Medicine

JOSEPH JULIAN, JR., M.D. Reading, Pennsylvania

PENN STATE UNIVERSITY, B.S. Nu Sigma Nu Kappa Beta Phi Alpha Omega Alpha Surgery





DAVID WRIGHTON JONES, M.D. Gettysburg, Pennsylvania

GETTYSBURG COLLEGE, B.A.

Phi Chi

Kappa Beta Phi, Hare Society, Intramural Athletics

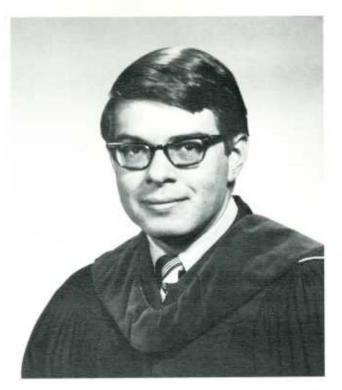
Microbiology Prize; Lange Prize (third year); Alpha Omega

Alpha, vice president

MILTON P. KALE, M.D. Roslyn, Pa.

URSINUS COLLEGE, B.S. Married Catherine Egloff, 1967 Pediatrics





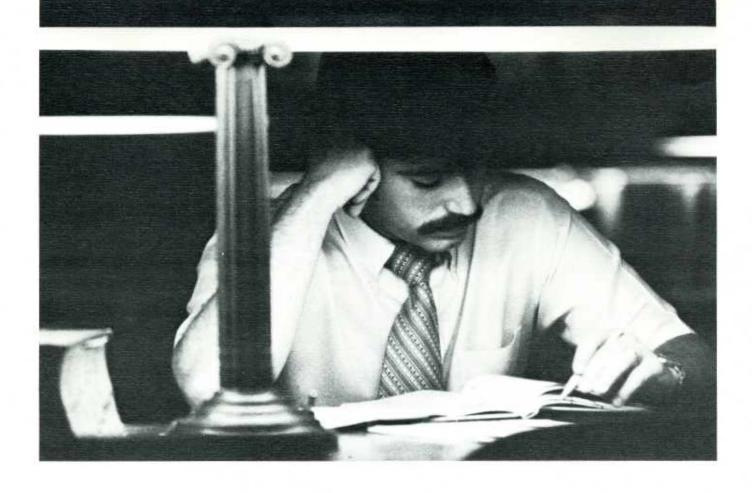
JEROME W. JORDAN, M.D. Scranton, Pennsylvania

UNIVERSITY OF SCRANTON, B.S. Married Marlene E. Gibbons, 1969 Ophthalmology

RICHARD R. KEENE, M.D. Ventnor, New Jersey

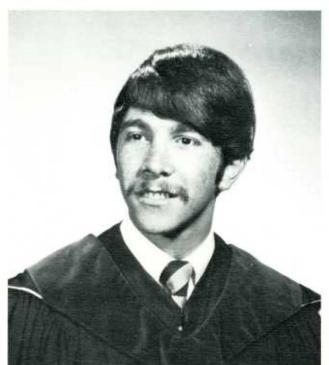
HOUGHTON COLLEGE, B.S. Phi Delta Epsilon Christian Medical Society Married Barbara Hempel, 1970 Missionary Medicine





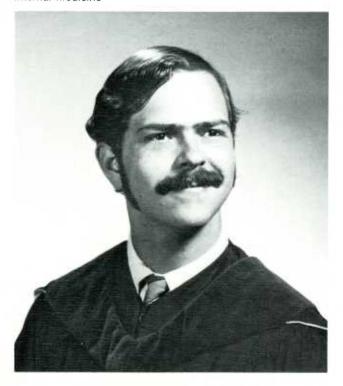
BARRY ROY KLEIN, M.D. Philadelphia

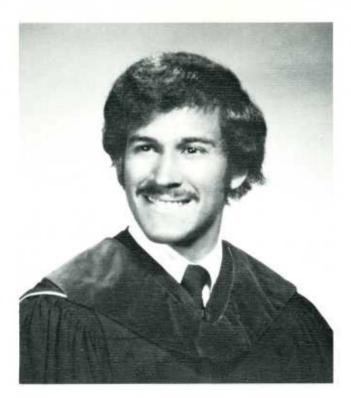
UNIVERSITY OF PENNSYLVANIA, B.A.
Phi Chi, interfraternity championship softball team (1968, '69, '70)
Kappa Beta Phi
Internal Medicine



GERALD MARK KLEIN , M.D. Philadelphia

PENNSYLVANIA STATE UNIVERSITY, B.S. Alpha Kappa Kappa Hare Society, Sims Society, treasurer (1970-71) Internal Medicine





STEVEN W. KLINMAN , M.D. Philadelphia PENN STATE UNIVERSITY, B.S.

PENN STATE UNIVERSITY, B.S.

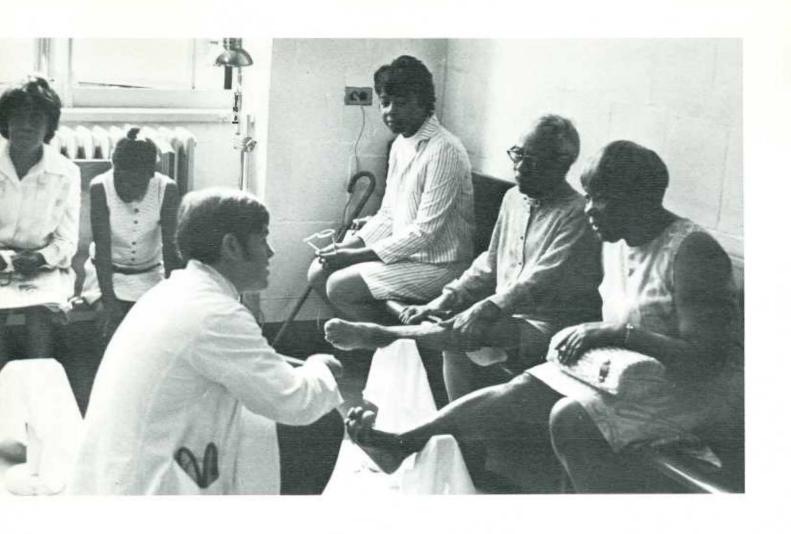
Phi Delta Epsilon, president (1969-70); student award (1970)
Sims Society, Hare Society



LOWELL EDMUND KOBRIN, M.D. Reading, Pennsylvania

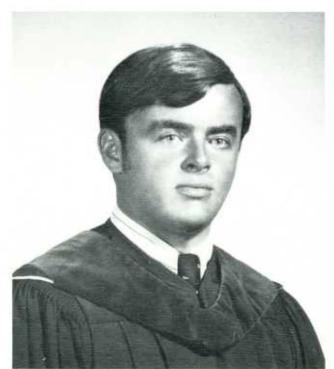
ALBRIGHT COLLEGE, B.S.
THOMAS JEFFERSON UNIVERSITY, Ph.D.
Phi Delta Epsilon, house manager (1966-67)
Student Research Society, president (1968-69), Pediatrics Society
Ob/Gyn





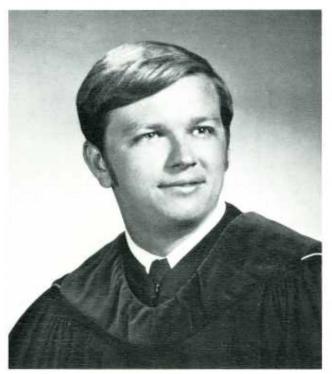
ANDREW JOHN KONTRICK, M.D. Erie, Pennsylvania

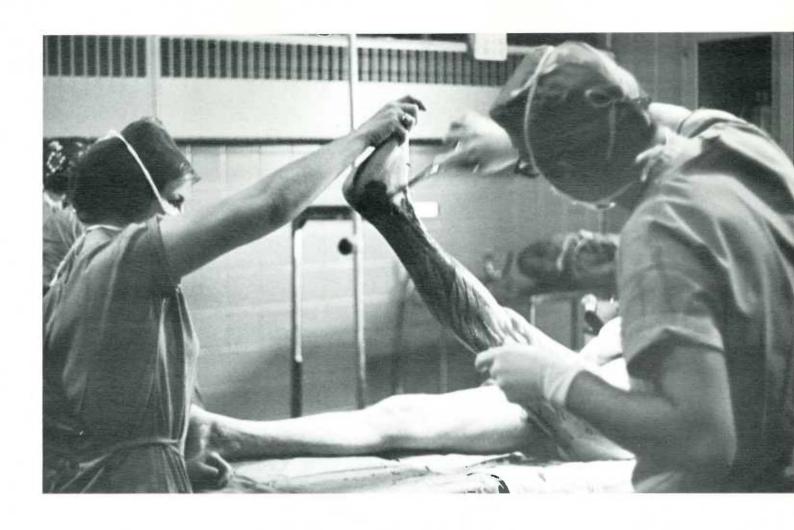
UNIVERSITY OF WYOMING, B.S. Married Carolyn Munson, 1964



JOSEPH WALTER KOZIELSK!, M.D. Philadelphia

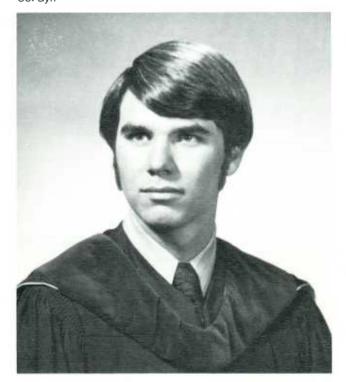
ST. JOSEPH'S COLLEGE, B.S. Married Dolores Cirillo, 1969





EDWARD LAWRENCE LANGAN, III, M.D. Philadelphia

PENNSYLVANIA STATE UNIVERSITY, B.S. Nu Sigma Nu Sims Society Married Marianne Scott, 1969 Ob/Gyn



MICHAEL JOHN LECHMAN, M.D. Latrobe, Pennsylvania

FORDHAM UNIVERSITY, B.S. Phi Delta Epsilon Sims Society



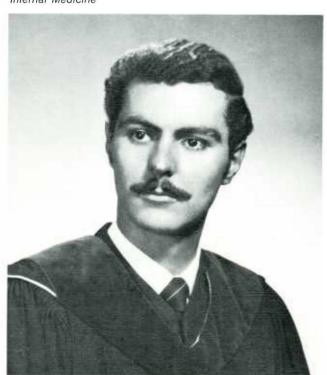


CYNTHIA DOLORES LEHR, M.D. Brooklyn, New York

NEW YORK UNIVERSITY, B.A. Gibbon Society, Hare Society



UNIVERSITY OF DELAWARE, B.A. Sims Society *Internal Medicine*





WILMA C. LIGHT, M.D. Lansdowne, Pa.

BUCKNELL UNIVERSITY, B.S. Ariel (1969), Student Curriculum Committee (1970-71), Sims Society Pediatrics

ELIZABETH ANN LONDON, M.D. Miami Beach, Florida

MOUNT HOLYOKE COLLEGE, B.A.

Phi Alpha Sigma
Sophomore Class Secretary, Student Council Secretary (1969-70), Student Curriculum Committee (1968-70), Hare Society





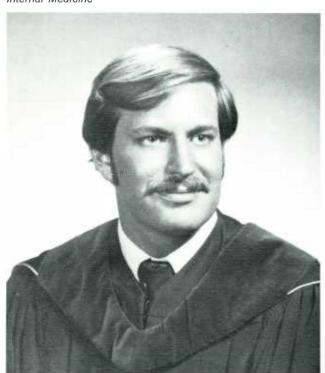


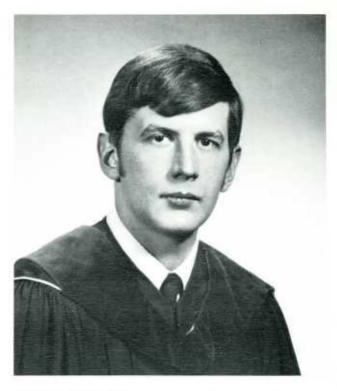
CLIFFORD W. LYND, JR., M.D. Philadelphia

PENN STATE UNIVERSITY, B.S. Phi Chi Hare Society, Sims Society, Gibbon Society Married Barbara Craggs, 1964 Surgery



UNIVERSITY OF PENNSYLVANIA, B.A. Married Janis Morganstern, 1969 Internal Medicine





JAMES C. MAAS, M.D. Susquehanna, Pennsylvania

PENN STATE UNIVERSITY, B.S. Phi Alpha Sigma, house manager (1968) Kappa Beta Phi Married Billie L. Lotz, 1969

STEPHEN H. MARGOLIS, M.D. Elkins Park, Pennsylvania

UNIVERSITY OF ROCHESTER, A.B. Phi Delta Epsilon Child Psychiatry

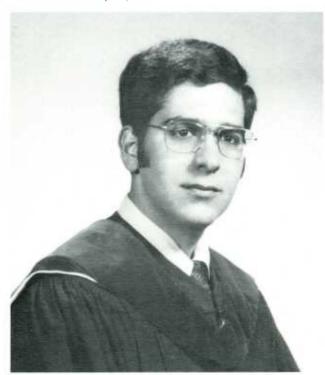




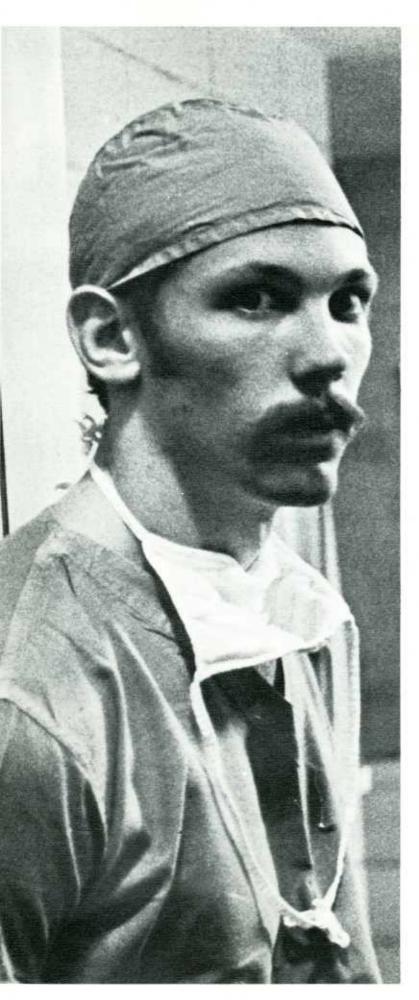
PHILIP A. MACY, III, M.D.
Bryn Mawr, Pennsylvania
INDIANA UNIVERSITY, A.B.
STATE UNIVERSITY OF NEW YORK AT BUFFALO
Internal Medicine

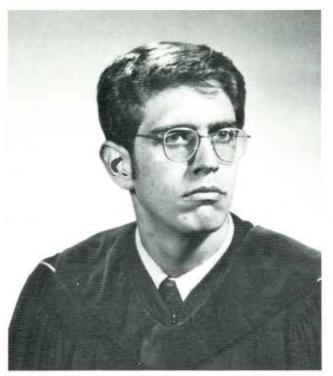
MICHAEL C. MARGULIES, M.D. Philadelphia

UNIVERSITY OF MICHIGAN, B.A. Married Marsha Kaplan, 1969







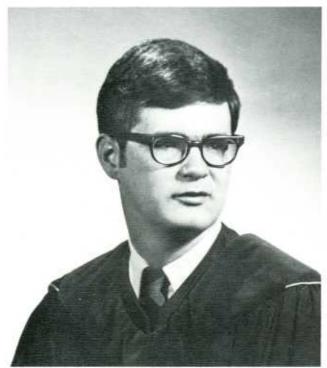


FRANCIS X. McBREARTY, M.D. Philadelphia

ST. JOSEPH'S COLLEGE, B.S. Alpha Kappa Kappa 1971 Clinic, contributing editor Alpha Omega Alpha Internal Medicine

JAMES G. McBRIDE, M.D. Phillipsburg, New Jersey

MORAVIAN COLLEGE, B.A.
Phi Chi, historian
Kappa Beta Phi, vice president; Sims Society, vice president
General Medicine





Brent Spears is going to devote his entire medical career to the treatment of a single patient. It's a patient traditionally shunned by most doctors. The disease has been diagnosed for generations and the patient's condition steadily worsening. Literally thousands of therapeutic regimens have been proposed but few have been implemented and few of these have been successful. Many now consider the patient moribund, and suggestions for therapy are getting increasingly radical. The patient is America's ailing health system, which hasn't been able to deliver adequate care to large segments of the populace, despite expenditures of some \$65 billion annually.

It's unusual for a student to plan for a career in administrative medicine, particularly at Jefferson, where the emphasis has been on medical practice. Administrators tends to be "converts" from clinical medicine. After exposure to the many problems confronting the health system, they may opt for an administrative career if the opportunity arises and they feel they have some solutions. Brent is an exception in this regard. He wanted to be an administrator before he decided to study medicine. While an undergraduate at Harvard, Brent explained in an interview with The Clinic, he became convinced "rational systems of health care must be developed." The need is particularly acute, he notes, for the demands for health care are burgeoning. "All people are becoming aware that good health is possible, and are beginning to consider it a right rather than a

Much of the increased demand comes from the poor, who have benefitted the least from the significant advances in medical knowledge over the past few decades. "Health care is not perceived as a primary need in the poor community," Brent explains. Studies have shown that the poor are more concerned about jobs, housing, food and education than they are about medical care. This is one of the reasons they are less likely to consult a physician for significant medical symptoms than people in the middle and upper socioeconomic groups.

And so, Brent points out, all segments of society are becoming more aware of the desirability of good health at a time when the government is moving toward removal of the financial barriers to medical care. This combination of circumstances could create such great demand that "the entire system could collapse." To prevent this, Brent feels "limited, rigorous experimentation in practical medicine is needed." Methods proved successful through these programs can be adopted generally to equip the system to deal with the increased demand.

One such proposed experiment, Brent notes, is called South Philadelphia Health Action (SPHA), through which a large group representing wide and diverse

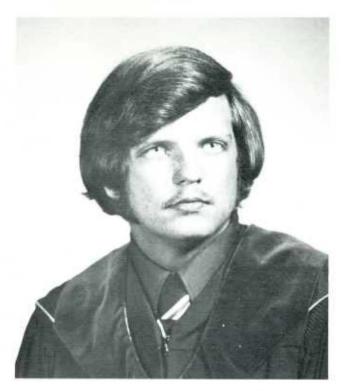
INTERVIEW:

Brent Wood Spears his patient is the system

interests is attempting to develop a practical system for delivery of comprehensive health care to a large section of South Philadelphia. SPHA is also an opportunity, Brent notes, to test the practicality of the controversial concept of "community control." While those two words are sure to stir the wrath of a majority of people in medicine, there is a growing belief in administrative circles that some form of "community control" of healthcare delivery is a certainty. "We are moving toward a more participatory way of life," Brent contends. "The poor and working-class people want to have more control over their lives, too." The vehicle for bringing this power to the community, Brent believes, will be the distribution of federal funds. Institutions like Jefferson, which is participating in SPHA, will have to be responsive to the needs of the community to gain approval for federally funded projects. For example, Brent speculates the community might be called on in the next few years to pass on the need for Jefferson's proposed 500-bed Clinical Teaching Center. If a harmonious relationship exists between the institution and community-and there is an understanding of the genuine need for such a facility-approval would be assured. What this means, Brent explains, is that institutions "won't be in the driver's seat anymore; they can't just do as they please."

When he talks about these problems and others confronting the nation's health system, Brent speaks with the authority of experience. While certainly not an "expert", he has had the benefit of spending an entire year in a sensitive, responsible administrative post here in Philadelphia. Originally scheduled to graduate last year, Brent took a leave of absence in September of 1969 to head up the newly formed Center for Medical Careers. The center recruited "disadvantaged" applicants for the five medical schools and the college of osteopathy. While on the firing line, Brent learned why most doctors shun the frustrations of administration. He had to cope with petty bureaucratic politics as well as some animosity from black medical students. "Ideally," he says, "the job should have been done by a black person." He lists his disadvantages as being a white, middle-class novice, but felt that his enthusiasm and knowledge of the local medical community more than made up for this. The center provided 400 applicants to the six city schools. Of these, 200 were blacks, Puerto Ricans, Mexican Americans and American Indians-members of the minority groups the center was especially hoping to help. The others were mostly Orientals and disadvantaged whites. Brent feels that his year as project director at the center was successful-and it confirmed his desire for administrative medicine. It is here that he feels he can make the most significant contribution to society.

One facet of administration that saddens Brent is its ability to "intimidate" many of "the most idealistic medical students." Time and again, he says, students with strong motivation are "turned off" after their initial brush with health care in a community or administrative setting. As a career administrator, Brent wants to help transform the system so that young people, in particular, will want to participate on a lifetime basis.



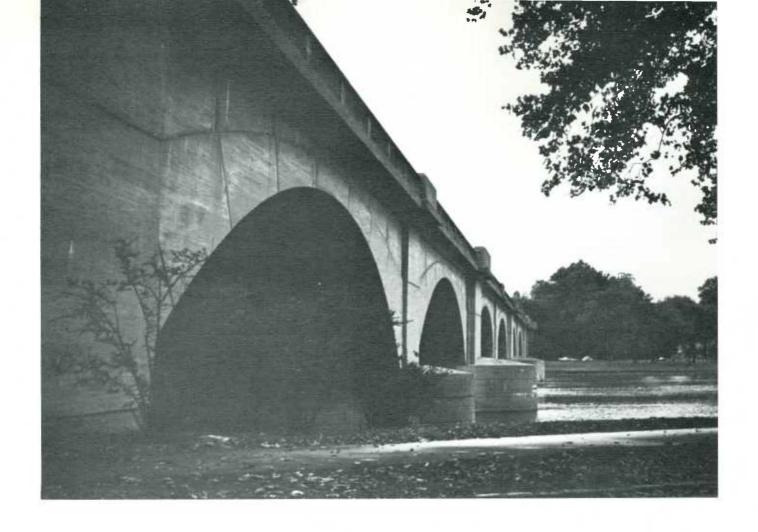
TOM SPERRING MEBANE, III, M.D. State College, Pennsylvania

PENN STATE UNIVERSITY, B.S. Alpha Kappa Kappa Married Lynn Alexander, 1970 Public Health-Community Mental Health



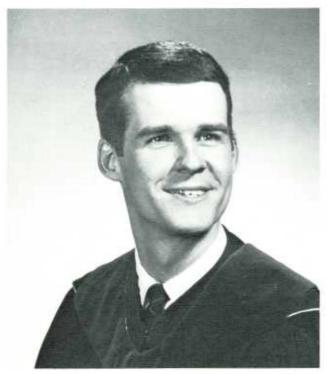
SUSAN M. MONK, M.D. York, Pennsylvania COLBY COLLEGE, A.B. Hare Society Pediatrics





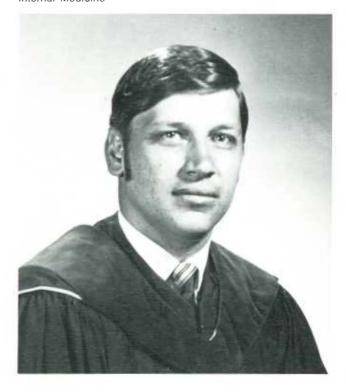
JOHN F. MOTLEY, M.D. Philadelphia

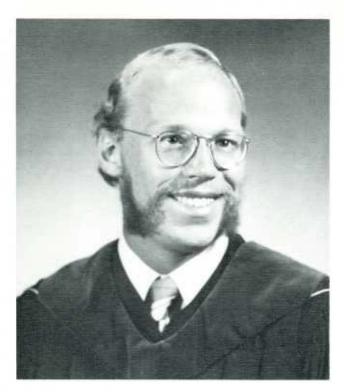
LaSALLE COLLEGE, A.B. Married Mary C. Grailey, 1970 Pediatrics



THOMAS F. MULLINS, III, M.D. Worcester, Massachusetts

HOLY CROSS COLLEGE, A.B. Phi Chi Kappa Beta Phi, Pasteur Society Married Wanda Kormanski, 1968 Internal Medicine





JAMES JEFFREY NOCON, M.D. Philadelphia

LaSALLE COLLEGE, B.A.

Alpha Kappa Kappa

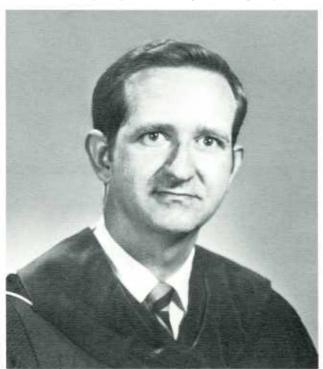
Kappa Beta Phi; Rugby Team, captain (1968); Ariel, contributing editor; Commons Art Committee, chairman (1969-70)

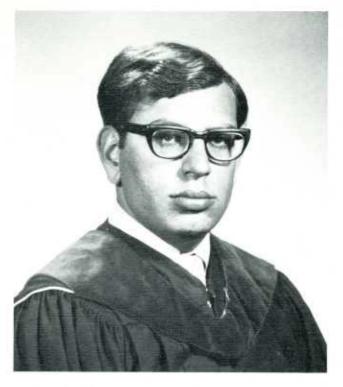
Married Barbara Muratore, 1966

Ob/Gyn

JAMES PATRICK NOONE, M.D. Scranton, Pennsylvania

UNIVERSITY OF SCRANTON, B.S.
UNIVERSITY OF TEXAS, Ph.D.
Theta Kappa Psi
Student Council (1969), Interfraternity Council (1970)

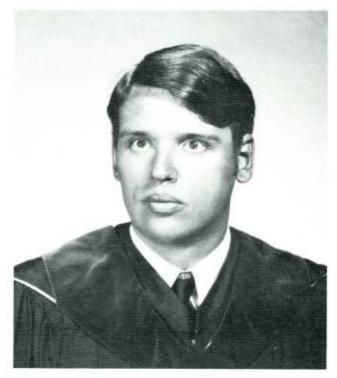


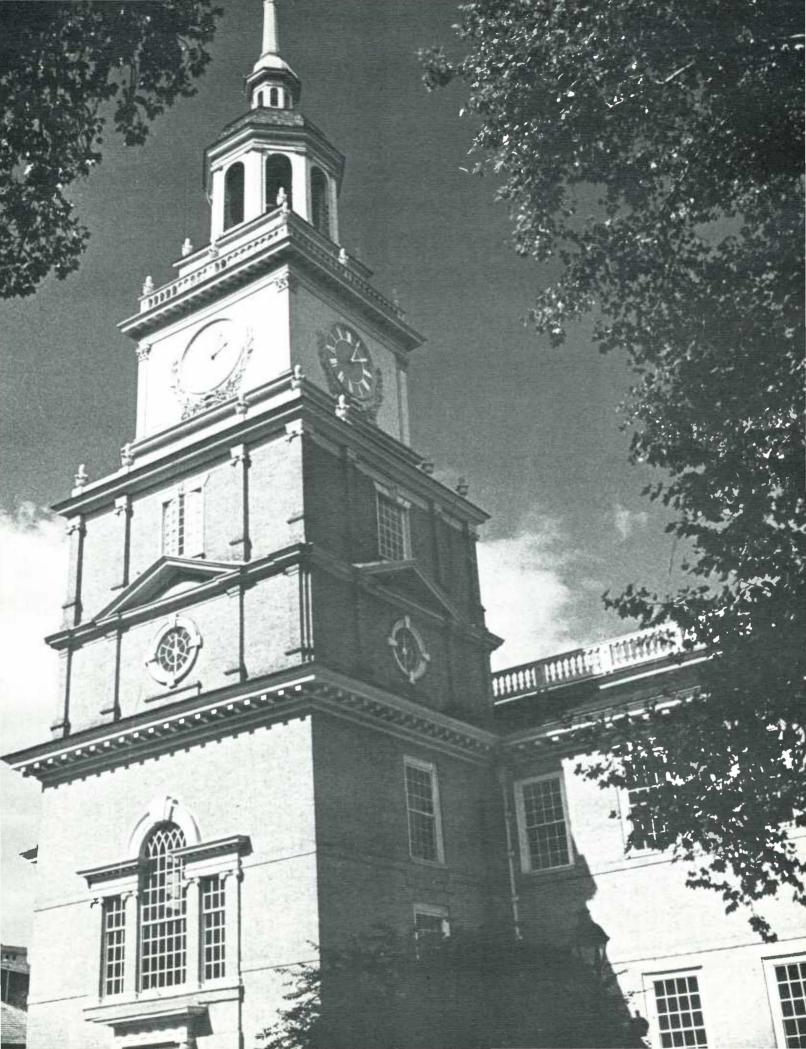


JAY NOGI, M.D. Scranton, Pennsylvania UNIVERSITY OF ROCHESTER, A.B. Hare Society, Gibbon Society Married Sandra Dolinger

JAMES L. NOSHER, M.D. South Orange, New Jersey

ST. JOSEPH'S COLLEGE, B.S. Nu Sigma Nu Hare Society Alpha Omega Alpha Married Marjorie Dolan, 1969 Internal Medicine

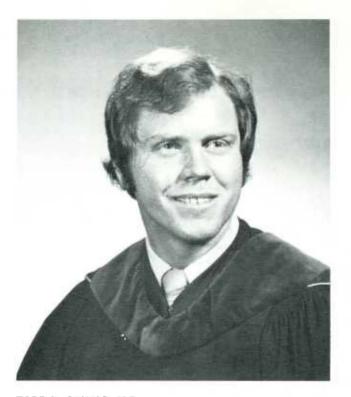






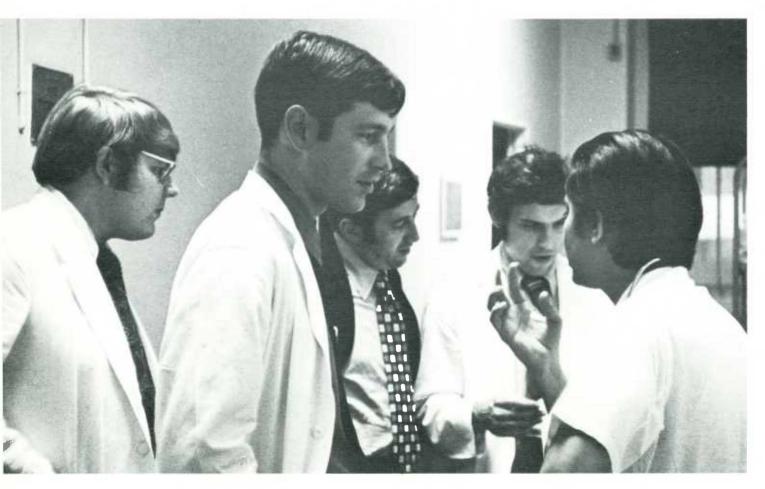
NANCY KATHLEEN O'CONNOR, M.D. Philadelphia

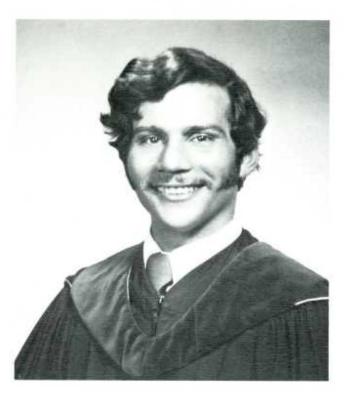
PENNSYLVANIA STATE UNIVERSITY, B.S. Gibbon Society
Ob/Gyn



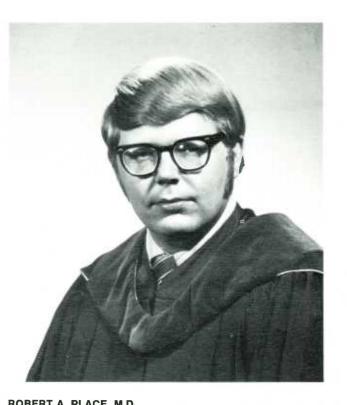
TODD B. ORVALD, M.D. Wyncote, Pennsylvania

DUKE UNIVERSITY, A.B. Nu Sigma Nu
Kappa Beta Phi, Dons Program Married Jill Edwards, 1968

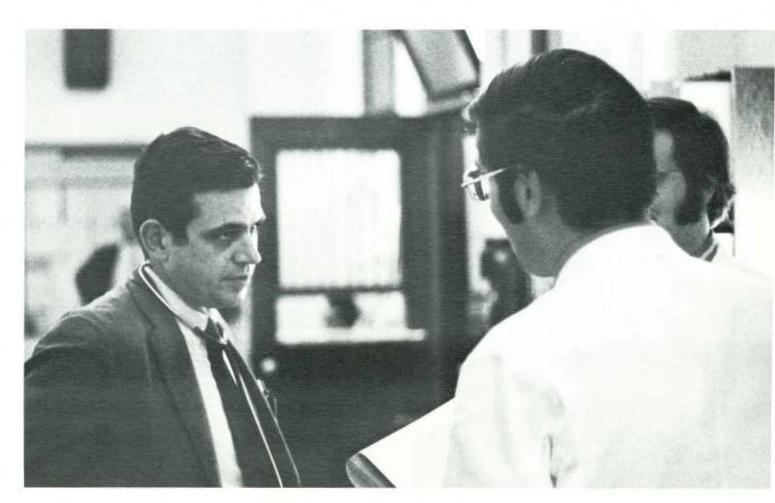


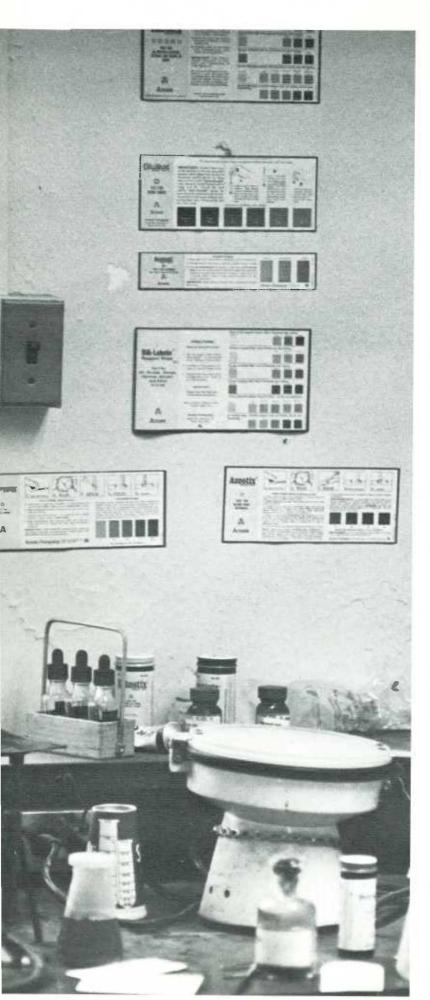


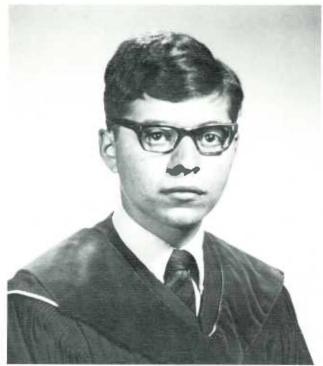
BARRY HOWARD PENCHANSKY, M.D. Bayonne, New Jersey RUTGERS UNIVERSITY, A.B. Clinic Photographer (1970-71) Alpha Omega Alpha Family Practice



ROBERT A. PLACE, M.D. Clifton, New Jersey RUTGERS UNIVERSITY, B.A. Phi Chi, rush chairman (1968) Gibbon Society, president Cardiovascular Surgery





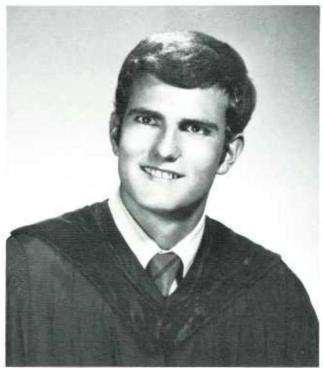


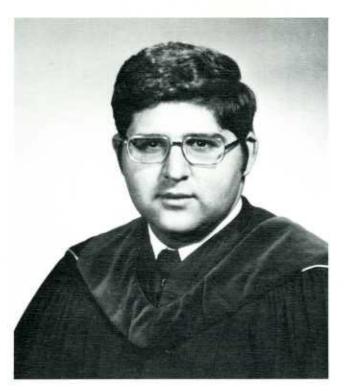
PHILIP A. POMERANTZ, M.D. Philadelphia

PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Alpha Sigma, secretary (1968)

W. MICHAEL PRYOR, M.D. Denver, Colorado

DARTMOUTH COLLEGE, A.B. Alpha Kappa Kappa, secretary-treasurer Kappa Beta Phi



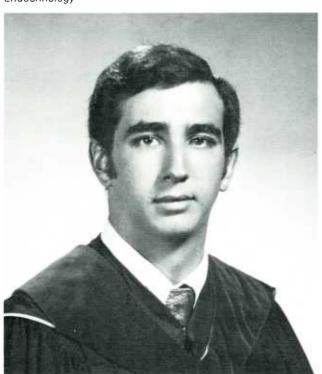


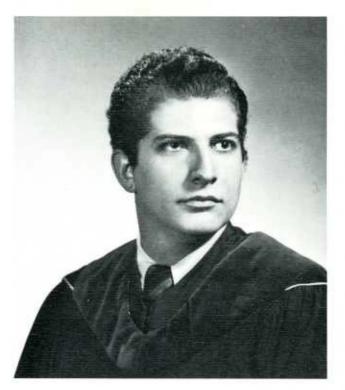
MARK A. POSNER, M.D. Cherry Hill, New Jersey TEMPLE UNIVERSITY, A.B.

Phi Delta Epsilon Gibbon Society Anesthesiology

JEFFREY S. RAKOFF, M.D. Bala-Cynwyd, Pennsylvania

MUHLENBERG COLLEGE, B.S. *Phi Chi*Sims Society, president *Endocrinology*





THEODORE GEORGE PROBST, M.D. Fair Lawn, New Jersey

RUTGERS UNIVERSITY, B.A.

Phi Alpha Sigma

Student Rights and Regulations Committee (1969); Hare Society; Gibbon Society; Orlowitz Residents Association, president (1969-70)

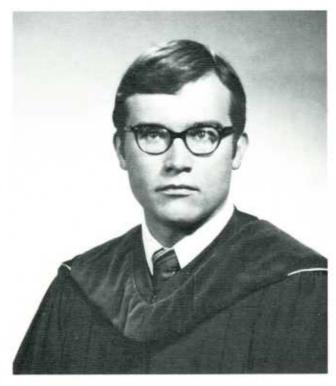
Alpha Omega Alpha

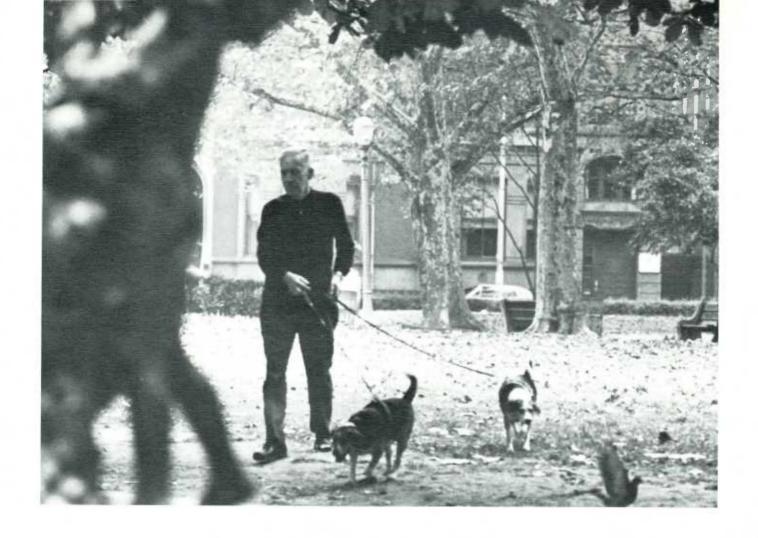
Married Belle Kurlantzick, 1969

Surgery or Neurosurgery

W. BUCKLEY RATCHFORD, M.D. Philadelphia

LaSALLE COLLEGE, A.B. Alpha Kappa Kappa Married Alice Horan, 1969 Pediatrics





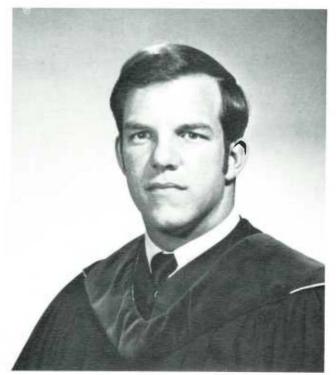
PAUL ANTHONY RAYMOND, M.D. Gallitzin, Pennsylvania

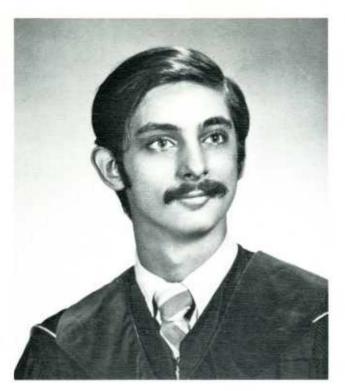
ST. FRANCIS COLLEGE, B.S. Phi Chi Gibbon Society, Intramural Athletics Married Constance M. Feighner, 1969 Medicine or Ophthalmology



J. HARLESTON READ, M.D. Gladwyne, Pennsylvania

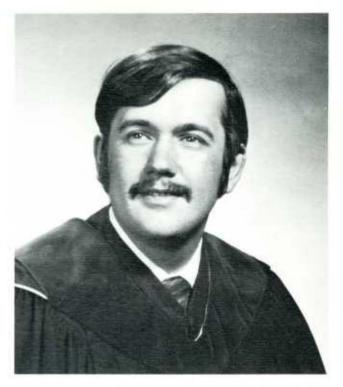
PRINCETON UNIVERSITY, B.A. Phi Chi Hare Society Surgery





RANDOLPH ALEXANDER READ, M.D. Clifton Heights, Pennsylvania

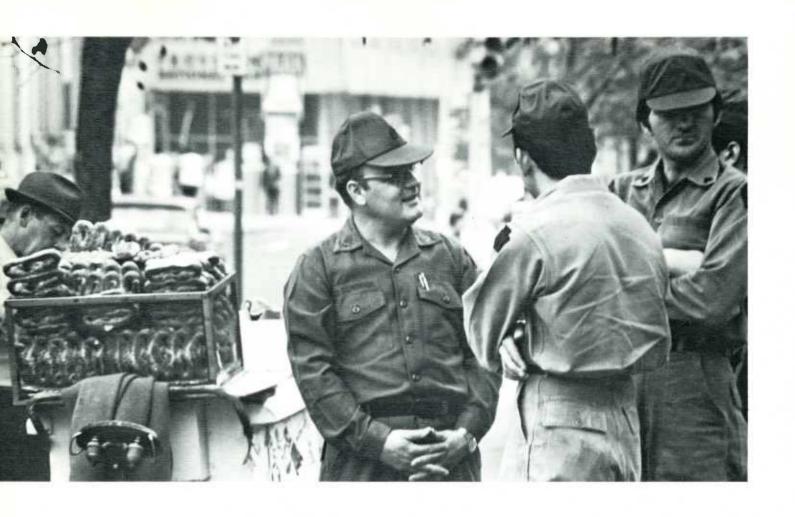
PENNSYLVANIA STATE UNIVERSITY, B.S. Theta Kappa Psi Married Artemis Linda Cuminti, 1967 Psychiatry



FRANK R. REALE, M.D. Plainfield, New Jersey

UNIVERSITY OF PENNSYLVANIA, B.A. Phi Chi Gibbon Society Married Laura Boehm, 1967 Pathology





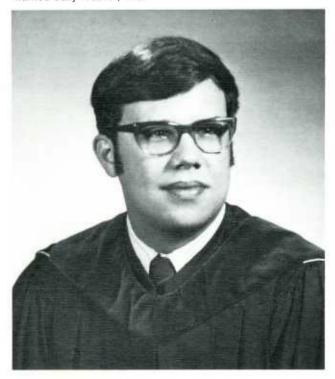
DENNIS S. RIFF, M.D. Bala-Cynwyd, Pennsylvania

FRANKLIN & MARSHALL COLLEGE, B.A. *Phi Chi*SAMA, Commons Social Committee *Internal Medicine*



WILLIAM S. RITTER, M.D. Allentown, Pennsylvania

LEHIGH UNIVERSITY, B.A. Phi Alpha Sigma Married Sally Weaver, 1968





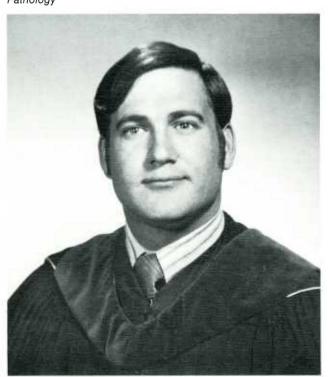
HOWARD STEVEN ROBIN, M.D. Philadelphia

PENNSYLVANIA STATE UNIVERSITY, B.S.

Phi Chi
Hare Society, Student Microscope Committee, cochairman (1969)

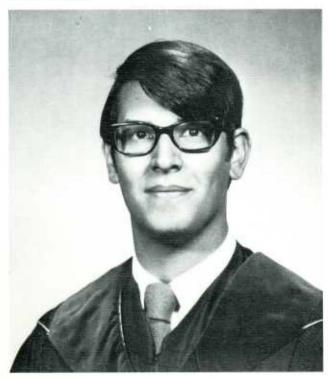
Alpha Omega Alpha
Married Carole Berman

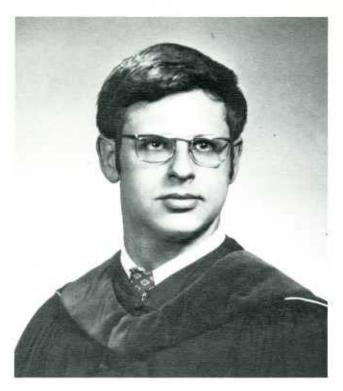
Pathology



RONALD JAY ROSENBERG, M.D. Philadelphia

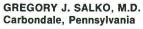
PENNSYLVANIA STATE UNIVERSITY, B.S. Phi Delta Epsilon Internal Medicine





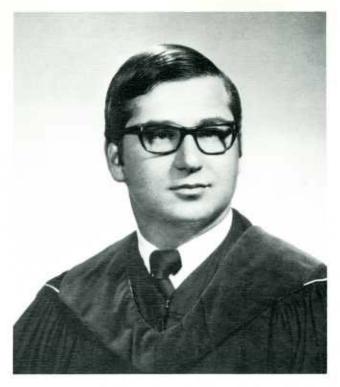
EDWARD ROSOF, M.D. Flushing, New York

LAFAYETTE COLLEGE, A.B. Gibbon Society Married Carol Niedelman, 1967 Pediatrics



UNIVERSITY OF SCRANTON, B.S. Gibbon Society
Alpha Omega Alpha
General Surgery



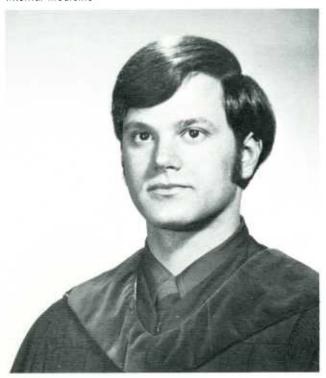


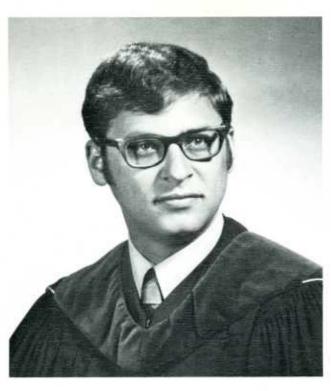
JEFFREY FREDRIC RUBIN, M.D. Bala-Cynwyd, Pennsylvania

TEMPLE UNIVERSITY, B.A. Phi Chi Gibbon Society, Hare Society Surgery

HARVEY FRANKLIN SASKEN, M.D. The Bronx, New York

RUTGERS UNIVERSITY, A.B. Student Research Married Susan Sommers, 1968 Internal Medicine





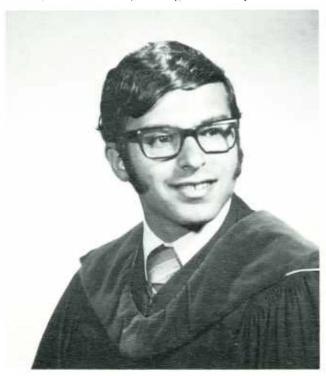
EDWARD BERNARD RUBY, M.D. Atlantic City, New Jersey

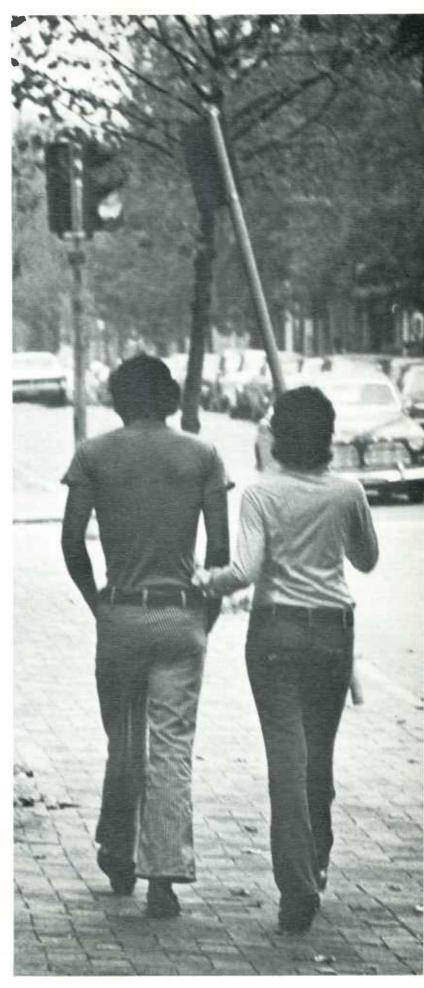
MARIETTA COLLEGE, B.S.

Phi Chi, assistant steward (1968-69)
Vice President of sophomore, junior and senior class; Student
Council (1969-71), Kappa Beta Phi, Judicial Council (197071), Intramural Sports
Married Michelle Kamner, 1970
Internal Medicine

STUART ALLEN SCHERR, M.D. Pittsburgh, Pennsylvania

UNIVERSITY OF PITTSBURGH, B.S. Phi Chi, social chairman (1970-71); Sims Society

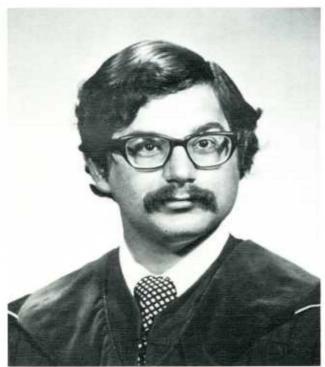






MYLES SCHNEIDER, M.D. Long Beach, New York

BROOKLYN COLLEGE, B.A. Phi Delta Epsilon Psychiatry



AUGUSTIN J. SCHWARTZ, III, M.D. Philadelphia

LaSALLE COLLEGE, B.A.

Nu Sigma Nu, treasurer (1968), historian, (1969)

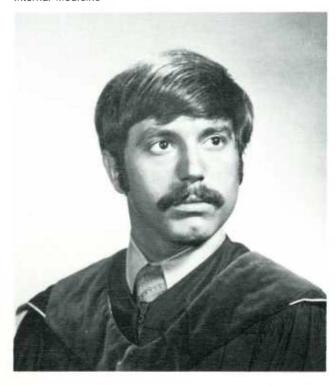
Hare Society, Senior Portrait Committee, Kappa Beta Phi

Alpha Omega Alpha, president; Anatomy Prize, Physiology

Prize, Lange Prize (first, second and third year), Hoffman
LaRoche Award Pathology Prize (honorable mention)

Married Marilyn Uzelmeier, 1969

Internal Medicine





Gus Schwartz (nobody calls him Augustin) is—as everybody knows—Jefferson's best for 1971. He's been first in his class since entering Jeff as a maxima cum laude graduate of LaSalle. What makes him stand out particularly is that he's combined his academic prowess with active participation in fraternity affairs and has served as president of Alpha Omega Alpha here as well as in a number of student organizations. Though he's garnered just-about every academic prize he's been eligible for, it's hard to find a student who is more popular or admired.

It's interesting, then, what Gus thinks of his four years at Jefferson. Reflecting on his career here during an interview with The Clinic, Gus summed up: "The education we've received has been good . . . I wouldn't say excellent; it could have been better." There may be room for improvement, but Gus is quick to point out that Jefferson introduced him to "many fantastic people . . . people I'd want to use as models for my own professional life." Of course, as at any institution, he was exposed to his share of the mediocre and even worse. Of the entire educational experience, Gus found the clinical years to be the most gratifying, despite his feeling that the fourth year was largely a "waste of time."

Why are the clinical years better? "The teaching is

Why are the clinical years better? "The teaching is better," Gus believes. He contends the preclinical departments conducted undistinquished courses, by and large, except for pathology, which "everyone agrees was outstanding." There were bright spots in the other departments, he admits, but these were overshadowed by the deficiencies. His greatest criticism of the first two years—aside from poor lectures and meaningless labs—is that "too much time was wasted; it could have been

put to better use."

While the clinical teaching generally was of "better quality," according to Gus, some of this advantage was erased by the variability of experience. "You take 'pot luck' when you're assigned to a clinical rotation," he explains. "I suppose it evens itself out eventually, but right now there seeems to be too much variability." If the clinical teaching here is superior, Gus believes that is exactly where the emphasis should lie. "This is when you are learning the 'art' as well as the science of medicine," he says. "So much depends on the people you're exposed to and what they can give you," It's different in the preclinical years, he says, when the information is available to everyone in texts and reference books. So, if the presentation of material is not satisfactory the student can make up for on his own.

If Gus had the power to effect specific changes at Jefferson, he would concentrate on two reforms—improvement of the senior curriculum and elimination of grades and class rank. "So much more could be done

INTERVIEW:

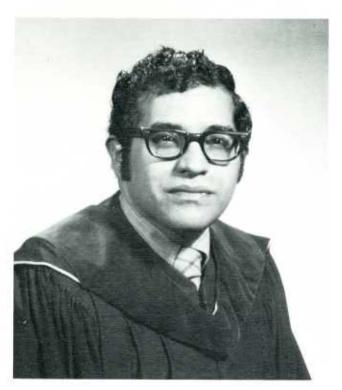
Augustin J. Schwartz, III he's Jefferson's best for 1971

with the senior year," he contends. "Ideally, it should all be elective." At the least, he contends, seniors should not be required to spend two- and three-week rotations in the medical and surgical subspecialties. There isn't enough time to learn the material, he says, and the departments are weary under the strain of presenting the same material every few weeks to a different group. A better alternative, he believes, would be to allow the students to choose the subspecialties they are interested in and spend at least six weeks in meaningful rotations. Elimination of grades, he believes, is an equally important and necessary reform. Medical students are naturally competitive, he points out, and the current system "feeds" this part of their personality. Many students rely on the "extrinsic motivation" of the need for academic achievement and Gus wonders whether it will be difficult to "shift gears" after graduation when the pressure of constant evaluation is removed. As one who has been emminently successful under the present system, Gus is more qualified to speak of its deficiencies than the average student. He admits he has benefitted, but says, "by no means do I feel I'm any better for having gone through it." The great value to him has been in widening his choices of postgraduate training programs but he feels the benefits of relying solely on "instrinsic motivation" would have outweighed this advantage.

Of course, Gus is not the first to recommend changes in the senior curriculum or the climination of grades. These are among many reforms that have been proposed over the past few years, and Gus believes that Jefferson has a good record in implementing such suggestions for improvement. "It's a slow process," he says, "and sometimes Jefferson doesn't seem to move as fast as the rest of the world, but I don't know if it could be done any faster." One encouraging note, he says, is the number of new, voung department heads appointed in the past few years. "They seem like they're more open to suggestions," he commented. Gus also knows that there are many improvements the school would like to implement but cannot because of its severe financial limitations. "A new, large funding source has to be developed," he contends, but he insists that many things could be done without the need for large expenditures. "At one time Jefferson had a great name-greater than it is now, certainly," he says. That name was achieved without massive spending of funds from outside sources and was based on outstanding clinical teaching. Jefferson still has the resources it had then, Gus savs, and it should work harder to develop them.

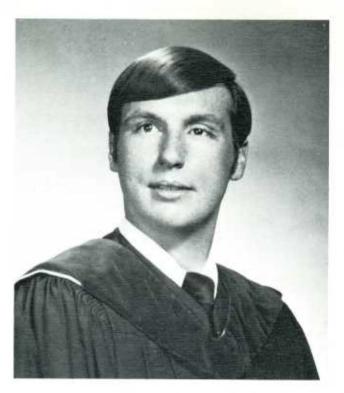
During the next few years, Gus will be working hard to develop his personal resources in praparation for a career in academic medicine. He's planning a medical internship and residency followed by subspecialty training (he hasn't chosen the field yet) and then hopes to get an academic appointment. "I really think I'll enjoy teaching," he says. Medical practice has its rewards, he

says, but teaching is its fulfillment.



RICHARD PAUL SCHWIMMER, M.D. Garfield, New Jersey

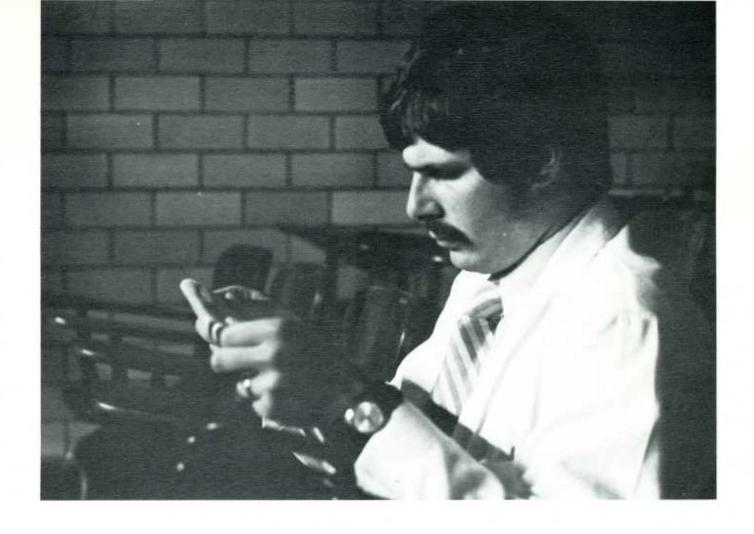
RUTGERS UNIVERSITY, B.A. Phi Alpha Sigma SAMA, Sims Society, Hare Society Married Helen Zegerman, 1967 Pediatrics



JOSEPH L. SELTZER, M.D. South Orange, New Jersey

ST. JOSEPH'S COLLEGE, B.S. Nu Sigma Nu Kappa Beta Phi Gibbon Society Married Suzanne Frankhouser, 1970



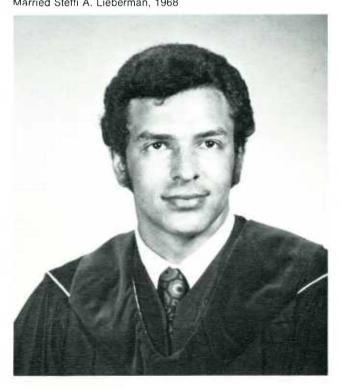


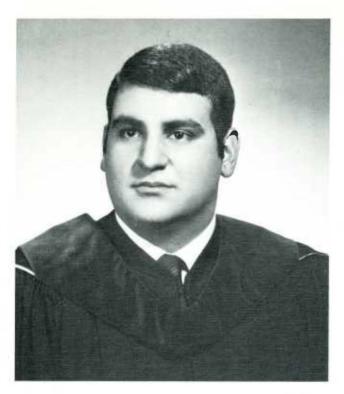
MARGARET ALICE SHEPP, M.D. Trenton, New Jersey

RADCLIFFE COLLEGE, B.A. Alpha Omega Alpha, Bodine Research Award Internal Medicine



PAUL JASON SILBERT, M.D. Pompton Lakes, New Jersey COLGATE UNIVERSITY, B.A. Married Steffi A. Lieberman, 1968





STEPHEN CHAITT SILVER, M.D. Harrisburg, Pennsylvania

DICKINSON COLLEGE, B.S.

Phi Delta Epsilon

Gibbon Society, president; Hare Society, Sims Society

Surgery

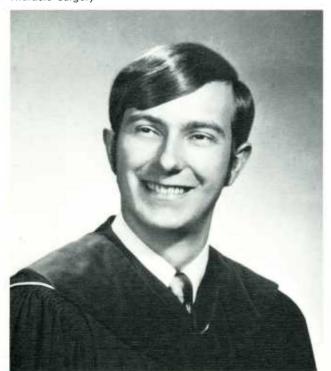


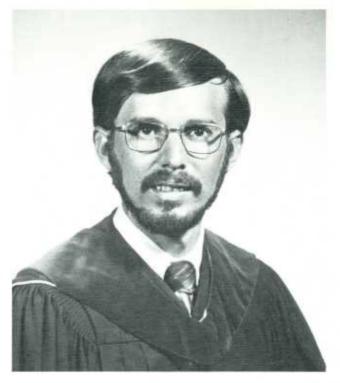
PENN STATE UNIVERSITY, B.S.

Alpha Kappa Kappa
Hare Society, Sims Society, Gibbon Society, president

Alpha Omega Alpha
Married Charlene Smith, 1968

Thoracic Surgery





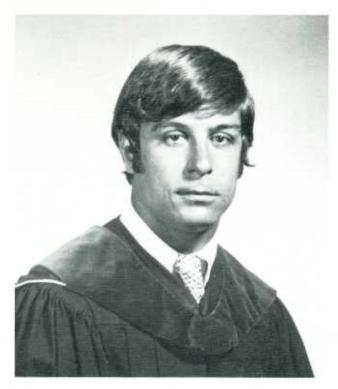
ARTHUR K. SMITH, M.D. Wallingford, Pennsylvania MUHLENBERG COLLEGE, B.S.

ROBERT CHARLES SNYDER, M.D. East Greenville, Pennsylvania

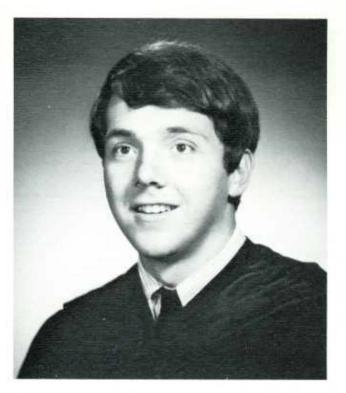
SUSQUEHANNA UNIVERSITY, A.B. *Medicine or Pathology*





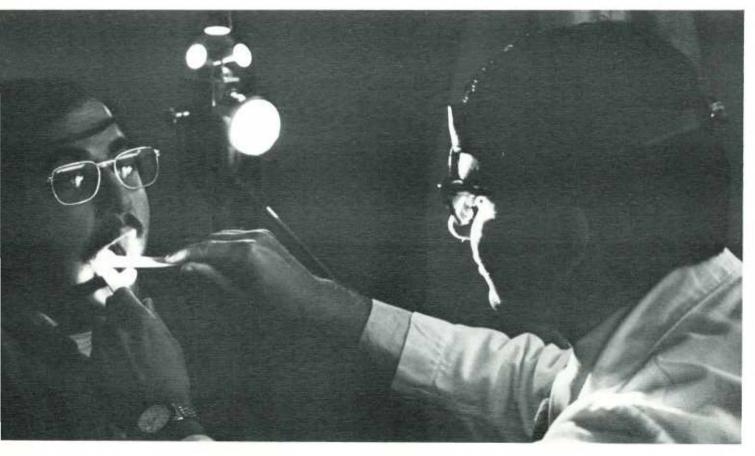


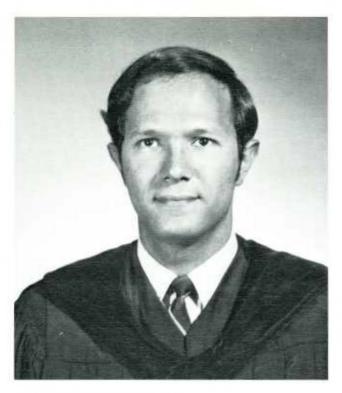
DANIEL GREW SOMMER, M.D.
Cornwall, New York
WITTENBERG UNIVERSITY, A.B.
Nu Sigma Nu
Rugby Club, Intramural Athletics, Hare Society



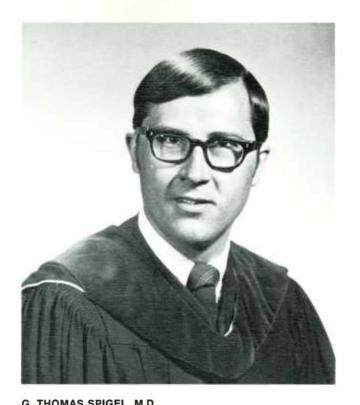
BRENT WOOD SPEARS, M.D.
Springtown, Pennsylvania

HARVARD COLLEGE, B.A.
Alpha Kappa Kappa
Student Council (1968-69); Philadelphia Pool for Medicine, chairman (1969); Center for Medical Careers, project director (1969-70); Philadelphia Commission on Higher Education, staff associate (1970-71), Rugby (1966-67)
Married Marie Dye, 1968
Health Care Administration and Policy Planning





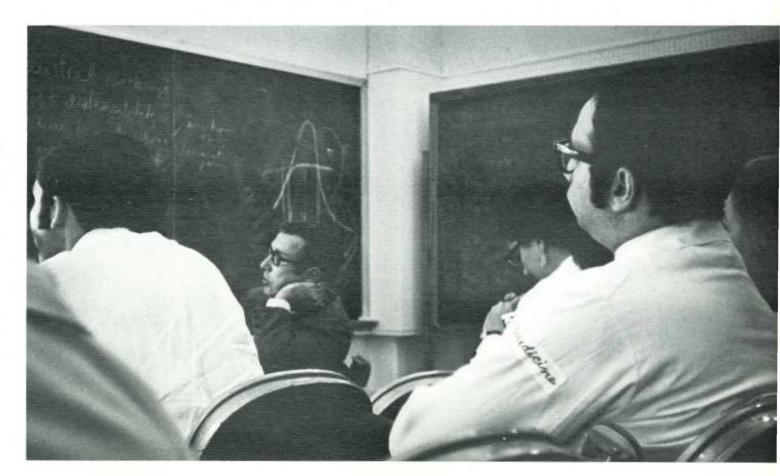
FLOYD FABIEN SPECHLER, M.D. Cherry Hill, New Jersey UNIVERSITY OF PITTSBURGH, B.S. Internal Medicine

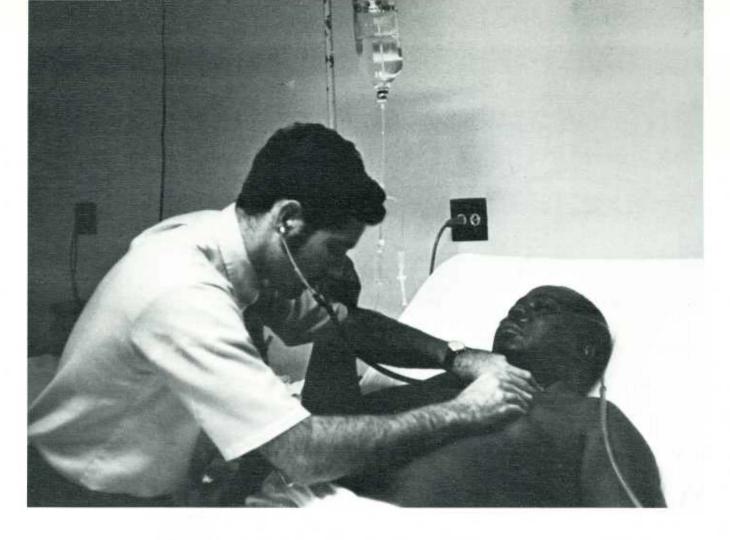


G. THOMAS SPIGEL, M.D.
Berkeley Heights, New Jersey

RUTGERS UNIVERSITY, B.A.
Phi Chi, president (1969-70); bookkeeper (1969); steward (1967-1968); Rush Cochairman (1969); Carey Anatomy Prize

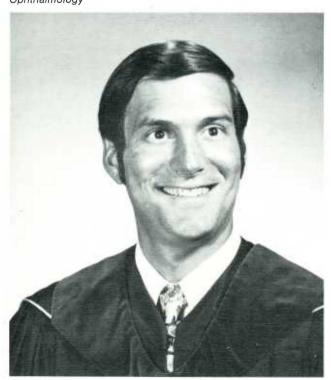
Sims Society, Kappa Beta Phi, Gibbon Society, Interfraternity Council (1969-70)
Alpha Omega Alpha
Otolaryngology





MICHAEL EDWARD STARRELS, M.D. Elkins Park, Pennsylvania

UNIVERSITY OF CHICAGO, B.A.
Student Council Curriculum Committee, cochairman (1969-71);
Faculty Curriculum Committee (1969-71); Student Council (1969-71); Hare Society; Sims Society
Married Carol Silver, 1967
Ophthalmology



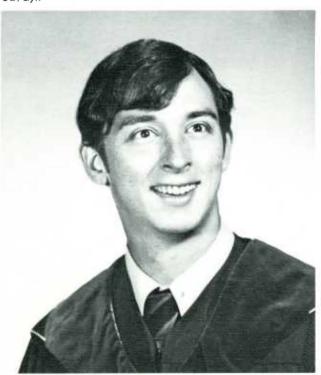
TERENCE W. STARZ, M.D. Pittsburgh, Pennsylvania

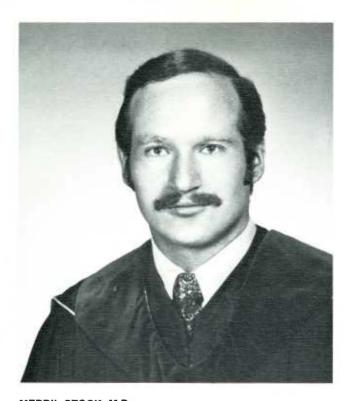
PENN STATE UNIVERSITY, B.A.

Alpha Kappa Kappa, chairman of executive council, vice president; Student Council (1969-70), Interfraternity Council, president (1970)

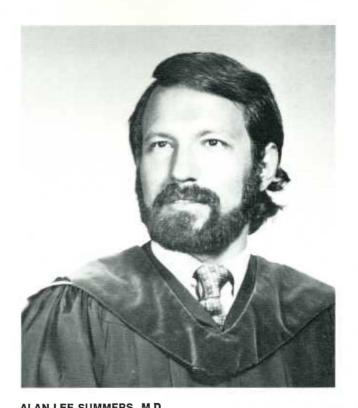
Married Jody Henderson, 1968

OB/Gyn



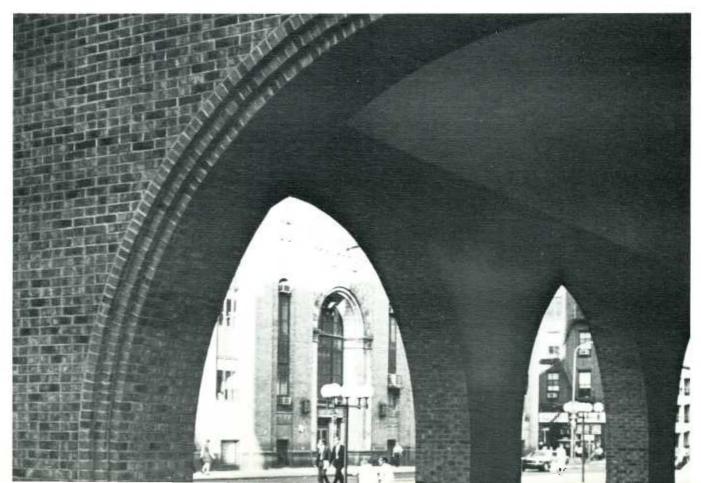


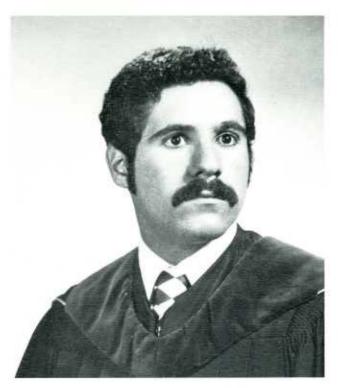
MERRIL STOCK, M.D. Philadelphia ALBRIGHT COLLEGE, B.S. Sims Society Married Dianne Wexler, 1967 Psychiatry



ALAN LEE SUMMERS, M.D.
Philadelphia

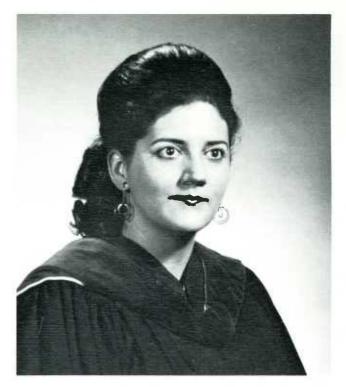
UNIVERSITY OF PENNSYLVANIA, B.S.E.E.
UNIVERSITY OF PENNSYLVANIA, M.S.E.E.
THOMAS JEFFERSON UNIVERSITY, Ph.D.
American Physiology Society
American College of Chest Physicians Essay Contest 1967
(First prize), American College of Chest Physicians Essay
Contest 1969 (Second prize)
Married Judith Pinhak, 1965
Psychiatry





ROBERT LOUIS SUSSMAN, M.D. Camp Hill, Pennsylvania

FRANKLIN & MARSHALL COLLEGE, B.A.



BARBARA LEA TENNEY, M.D. Osterville, Massachusetts

WILSON COLLEGE, A.B.

Phi Alpha Sigma

Freshman and Junior Class Secretary, Student Council, (1970-71), Student Curriculum Committee (1968-71)

Pediatrics

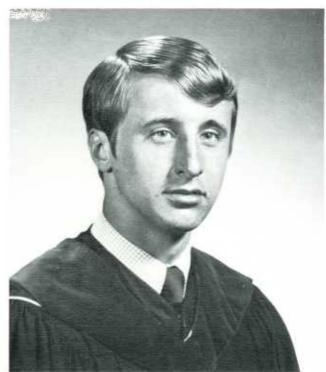
ARTHUR S. TISCHLER, M.D. New York City

PENNSYLVANIA STATE UNIVERSITY, B.S.
UNIVERSITY OF PENNSYLVANIA
Hare Society; The New Physician, associate editor; Student
Medical Forum; SAMA; ITIS, senior editor



WILLIAM H. TOPPER, M.D. Drexel Hill, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Married Elizabeth A. Curran, 1968 Pediatrics

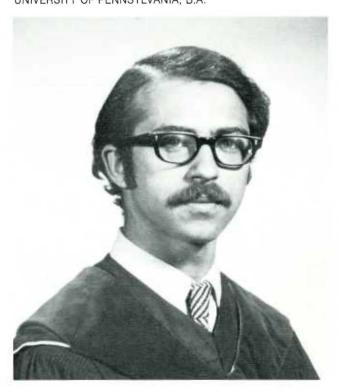




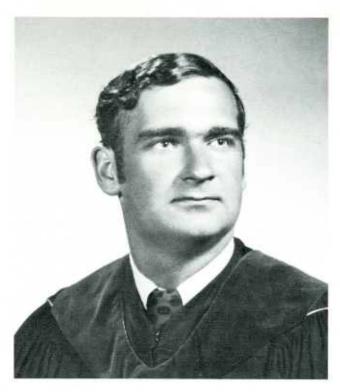
JULIE ELLEN KELTER TIMINS, M.D. Brooklyn, New York

PENN STATE UNIVERSITY, B.S. Married Eugene Timins, M.D., 1969 Internal Medicine

JACOB TRACHTENBERG, M.D. Elmhurst, New York UNIVERSITY OF PENNSYLVANIA, B.A.







TIMOTHY EDWARD URBANSKI, M.D. Abington, Pennsylvania

LaSALLE COLLEGE, A.B. *Phi Chi* Student Council (1968-69) Married Joan M. Hickey, 1968



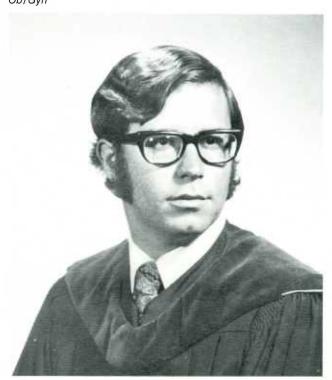
PENNSYLVANIA STATE UNIVERSITY, B.S.

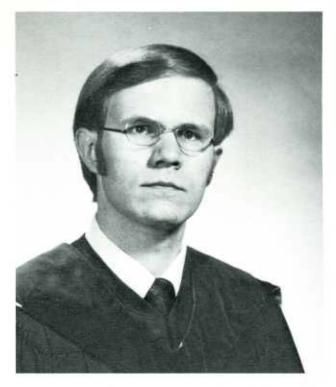
Phi Delta Epsilon, scribe (1967), treasurer (1968), delegate
to National Convention (1967)

SAMA, Sims Society

Married Susan Glucroft, 1969

Ob/Gyn





JAMES OLAF VAN BAVEL, M.D. Wyckoff, New Jersey HAMILTON COLLEGE, B.A.

Psychiatry

ROBERT B. WATERHOUSE, M.D. Philadelphia

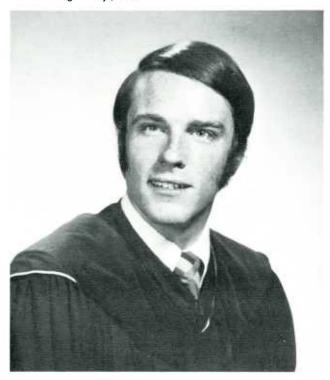
MIDDLEBURY COLLEGE, B.A.

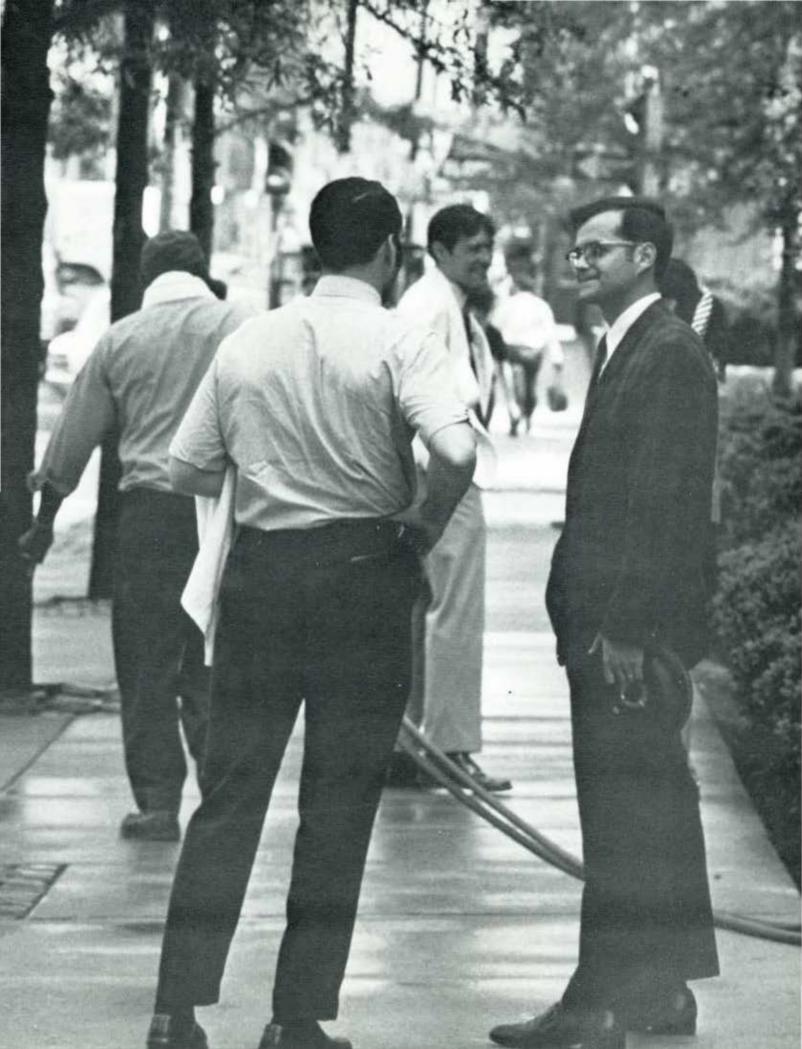
Nu Sigma Nu, president (1968-69); alumni secretary (1969-70)

Gibbon Society

Ob/Gyn Prize (third year)

Married Megan Heyl, 1969







DAVID JOEL WEBER, M.D. Fair Lawn, New Jersey
RUTGERS UNIVERSITY



JEFFREY CHARLES WEISS, M.D. Philadelphia
MUHLENBERG COLLEGE, B.S.

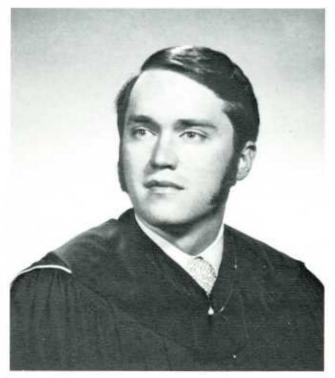
LEWIS EDWARD WINANS, M.D. West Wyoming, Pennsylvania

TEMPLE UNIVERSITY, A.B.

Phi Delta Epsilon, recording secretary (1967)

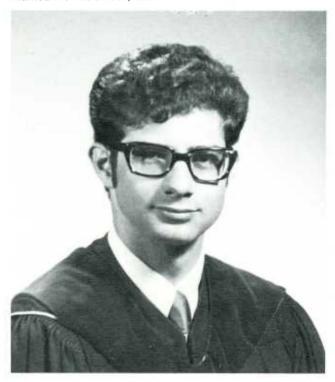
Married Mary C. McDonough, 1969

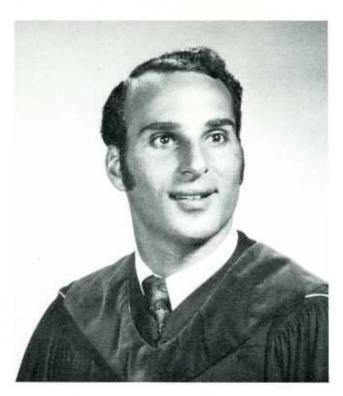
Internal Medicine



GEORGE S. WINEBURGH Silver Spring, Maryland

UNIVERSITY OF SCRANTON, B.S. Nu Sigma Nu Sims Sociey, Kappa Beta Phi Married Iris Pasternack, 1969

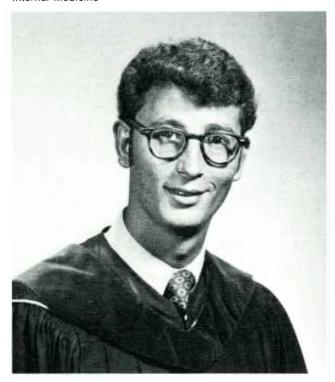


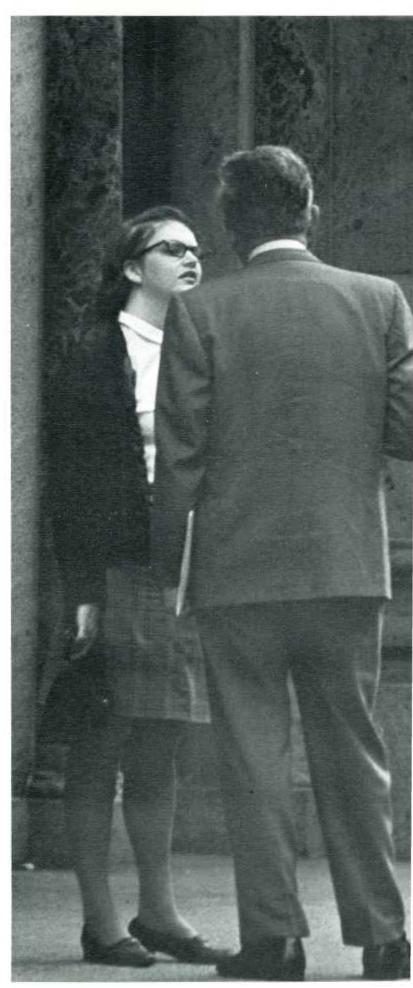


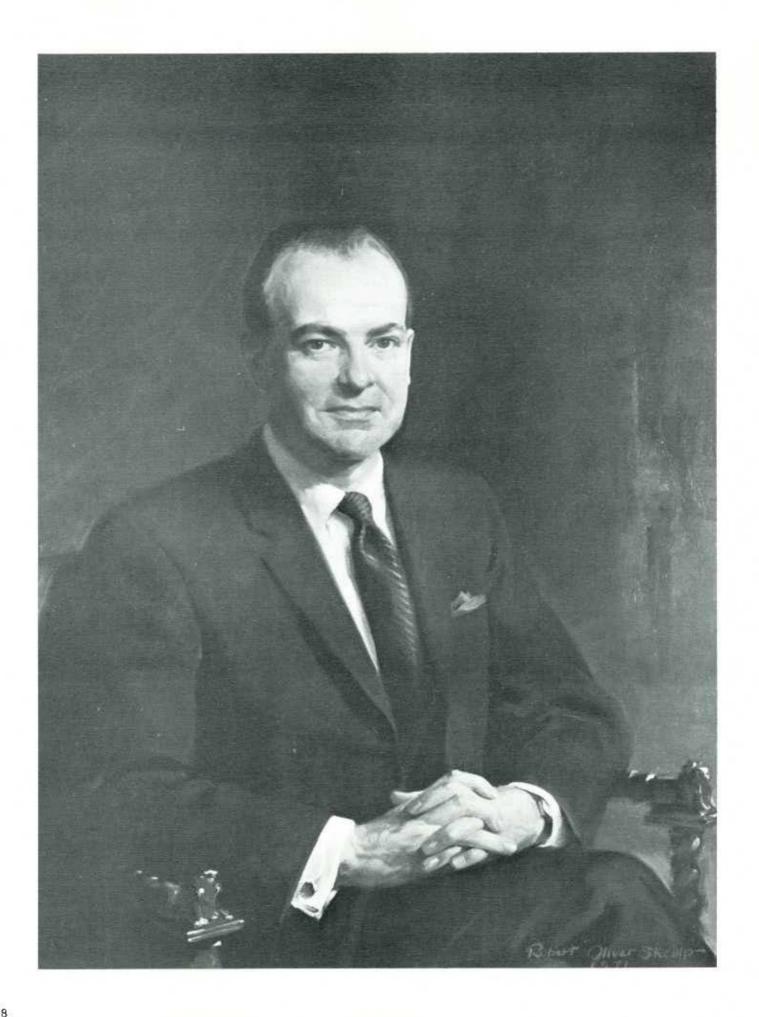
NORMAN E. WILSON, M.D. West Newton, Massachusetts BRANDEIS UNIVERSITY, B.A. Married Judy Worth, 1968 Anesthesiology

HARVEY ZELIGMAN Huntingdon, Pennsylvania

PENNSYLVANIA STATE UNIVERSITY, B.S. Dons Program Kappa Beta Phi Alpha Omega Alpha Internal Medicine







senior portrait

With Dr. Gonzalo E. Aponte it's difficult to pinpoint where the man ends and the legend begins. Certainly, his boundless energy, his accomplishments and his eccentricities are legendary among his students. He is Jefferson's current Renaissance man, and now his portrait hangs with Jefferson's other Renaissance figures, men like I. Chalmers Da Costa, S. Weir Mitchell and Samuel D. Gross-physicians whose interests and achievements outside of medicine were as impressive as their professional accomplishments. The portrait, commissioned by the Class of 1971 and painted by Robert Oliver Skemp of New York, was presented to the College on May 5. Dr. Aponte was the nearly unanimous choice of the senior class as subject of the traditional painting. At 41, he is the youngest professor so honored. Nevertheless, the selection came as no surprise; it merely confirmed what everyone knew—that Dr. Aponte is the class' favorite.

It also helps to add to the Aponte legend, a phenomenon that investigation reveals to have more basis in fact than myth. As head of the Pathology Department, Dr. Aponte runs an organization responsible for the pathology teaching program for second-year students, the training of residents and the clinical pathology facilities and program in the hospital. Of them all, "teaching is my main interest," Dr. Aponte says. His students have appreciated his efforts and in 1962 he received the Lindback Award for distinguished teaching. "I like to look at slides, too, and I like to meet with my residents," he adds, but he puts so much energy into teaching students many wonder how he has any left for other pursuits. Despite this, he finds the time to serve on or chair most of Jefferson's major committees and to contribute to the medical literature. He currently spends much of his spare time in the preparation of a new text on the complications of diagnosis and therapy-an expansion of the voluminous notes on the subject that he has prepared for distribution to sophomores. The book will be dedicated to "B&B," a fact that occasions a classic Aponte comment: "They will think I am an alcoholic." Actually the dedication is to his wife, Barbara, and Bomba, his German shepherd.

With all of these activities, there should be little time for anything else, but Dr. Aponte points out, "I get very little sleep." Most of his "spare time" is spent reading-subjects as diverse as sports, medicine, poetry and history. He's a baseball fan and has rooted for the St. Louis Cardinals since his youth. He also subscribes to about 20 medical journals, scanning the articles and filing their abstracts. Shakespeare is probably Dr. Aponte's favorite poet. "What kind of man was he? He knew so much about everything." His interest in Shakespeare and drama began after college when he became fascinated with the use of words. "It's not so much what he (Shakespeare) said but how beautifully." It is perhaps typical of Dr. Aponte that he has developed a vast file of references and papers on Shakespeare and his work. As a Latin American, born in Puerto Rico, Dr. Aponte feels a special kinship to lyrical poets, whom he describes as "very Spanish." He has little time for fiction, but occasionally will make an exception. The Andromeda Strain is the latest work to gain that distinction.

There is, then, little to the legend that is not borne out in fact—except the general belief among students that Dr. Aponte never rests. Periodically, he takes a vacation "and then I don't do a damn thing," he confides, "except lie on the beach." Who would deny him this right?

Dr. Aponte's portrait is the third Mr. Skemp has painted for the Jefferson collection. His first was of Dr. William A. Sodeman, emeritus dean, and he was selected by the Class of 1969 to paint the portrait of Dr. Joseph J. Rupp. When the painting was completed and Dr. Aponte saw it in final form for the first time, he commented that his selection by the senior class ranked with his being named in 1960 as a Markle scholar in medical science as the biggest honor of his career. The Class of 1971 feels priviliged that it was able to confer this honor.

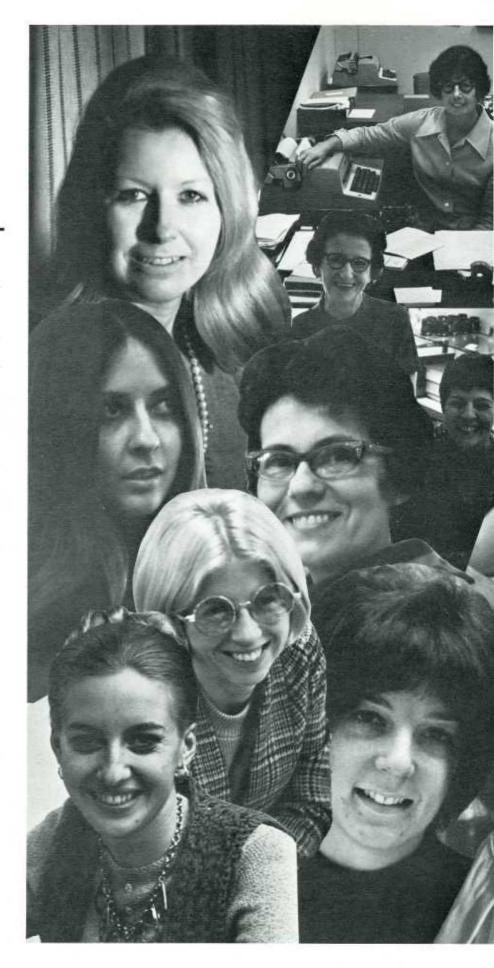
SENIOR PORTRAIT COMMITTEE

Terrence S. Carden, Jr., chairman James E. Barone Floyd M. Casaday, III Carolyn S. Crawford Thomas W. Fiss, Jr. Augustin J. Schwartz, III

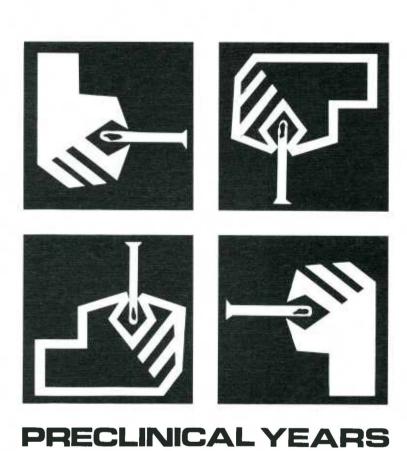
She is Venus when she smiles ...

Ben Jonson

If it seems sometimes that The Clinic is always asking for something—money, information or help—that's probably because we usually are. Many of the people we turn to in the course of the year are the unsung, the girls who keep the various offices and departments at Jefferson functioning smoothly. We're always met by a smile, it seems, and a true willingness to help. This makes our job easier and we appreciate it. Sometimes all we get is a smile—and sometimes that's enough. We can't portray all of our friends, but here are some of them.











"Whatta you mean the Furcal nerve isn't in Dr. Noback's book?"

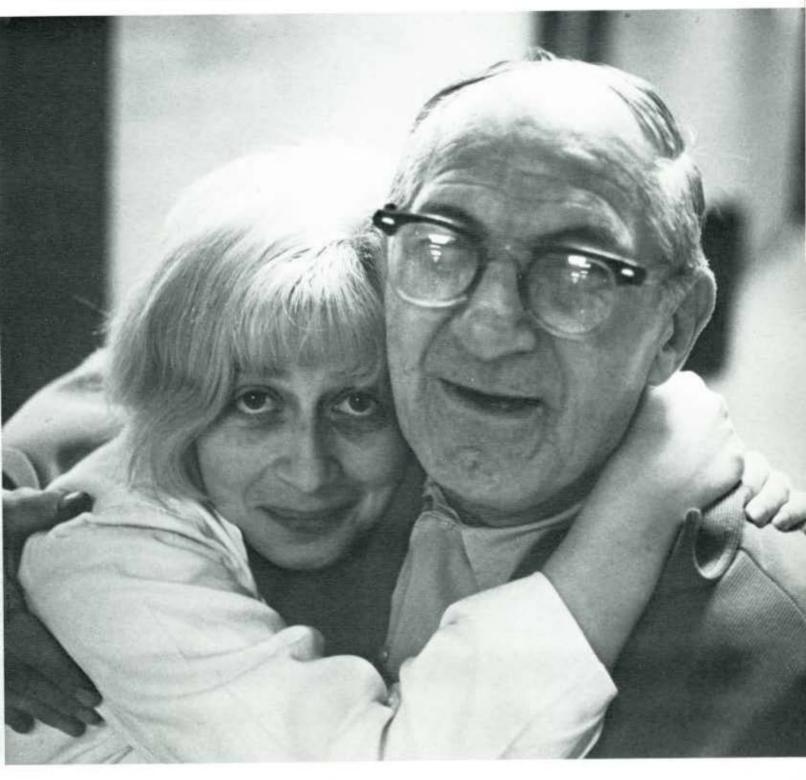
"I keep forgetting what I'm supposed to look up!"







"Ovral takes the worry out of being close."



"OK, Myrtle, you can come down now. I'll relieve you for lunch."



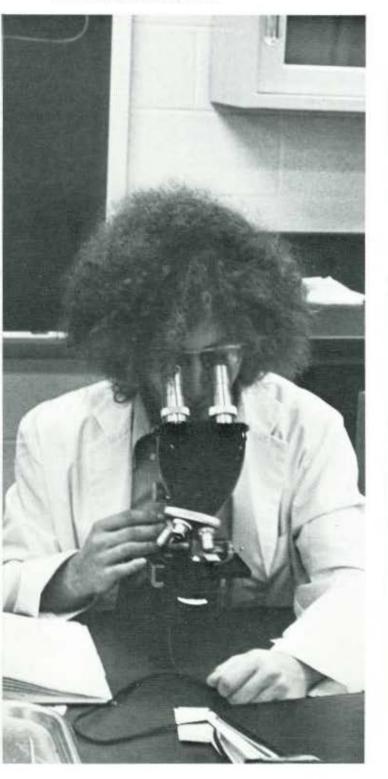


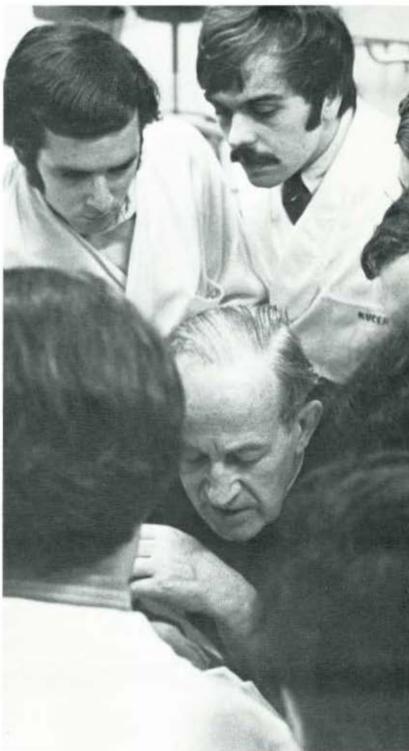


GROSS ANATOMY DISSECTING LAB. 533

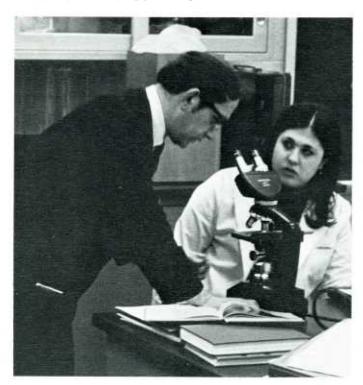
"All these cells look hairy to me."

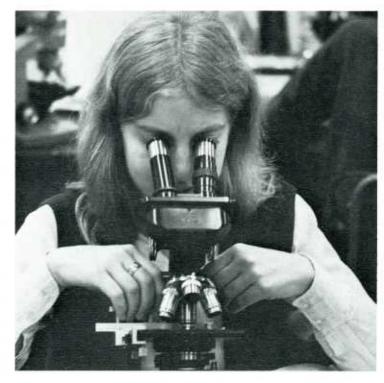






"What do you mean, 'my place or yours'?"





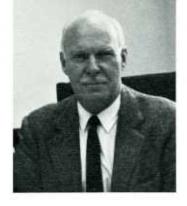


"Hey, man, how do I get to Krass Bros."



"Psst meet me at the Locust in five minutes."

INTERVIEW:



Every senior can recall that Friday in the fall of 1967 when he sat on the cramped benches at the Daniel Baugh Institute and heard the advice of Dr. Andrew J. Ramsay on the behavior and dress appropriate for medical students. Dr. Ramsay gave the same advice to this year's entering freshmen—but there were many differences. Most striking, of course, was the contrast in surroundings. The new, plush seats in Jefferson Hall's lecture rooms are much more comfortable than the wooden benches at DBI. And the audience is different—at least in appearance. Modern clothes and grooming styles set off the new freshmen from those of four years ago.

More than this separates the two classes, however, according to Dr. Ramsay, who reflected on the changes in medical students over the years during an interview with The Clinic. "There is a good deal more variation in background each year," he explains. While premedical education in past years had been a stereotype, Dr. Ramsay points out there is little uniformity in the preparation of today's entering freshmen. "Only in chemistry do we find any degree of uniformity," he says, adding that "in biology it is discouragingly varied." Another major difference, according to the professor of anatomy, is that today's medical students "don't seem as comfortable or happy in their studentship" as their forebears. He believes these two conditions are related. The variation in preparation is most easily explained as a result of the major shakeups of undergraduate curricula in recent years. This has allowed students to be "attracted to the educational experience he finds interesting," according to Dr. Ramsay. This, of course, leads to questioning by the student whether the courses he is taking are "relevant" to him. This questioning carries over to medical school, Dr. Ramsay points out, and many students wonder whether the material they are required to learn in the preclinical sciences is necessary for their success in clinical medicine. Therein, he explains, is the genesis of unhappiness.

These changes haven't arisen overnight—or even in the past four years—Dr. Ramsay explains. They are directly related to the tendency toward increased specialization in medicine. When Dr. Ramsay came to Jefferson in 1936, "practically everybody was going into general practice," and students did not question the curriculum since they knew they could not limit their services. At that time, the anatomy chairman recalls, "Jefferson had the reputation of being the best clinical school around." Over the years, however, students began to consider specialization and eventually "it came to be not very respectable to be a general practicioner," Dr. Ramsay notes, adding: "Now, of course that is one of the most respectable things you can do."

Dr. Andrew J. Ramsay his advice is unchanged

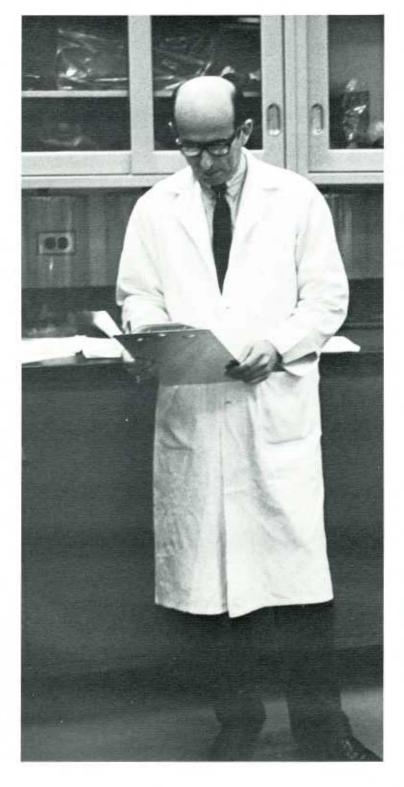
At any rate, the swing to specialization over the preceding two decades brought Jefferson a steadily growing need to motivate students in the preclinical sciences. Dr. Ramsay was one of the first to see the need, since his department is exposed to entering students and is the first to detect deficiences or challenges. Gradually clinical correlations were introduced by the preclinical departments in an effort to prove the applicability of basic sciences to clinical medicine. The Anatomy Department became a pioneer in revising the oppressive curriculum that required student attendance all day Monday through Friday and a half-day Saturday. Dr. Ramsay introduced the notion that a few hours of free time were required each week by students to "catch up on whatever they were behind in."

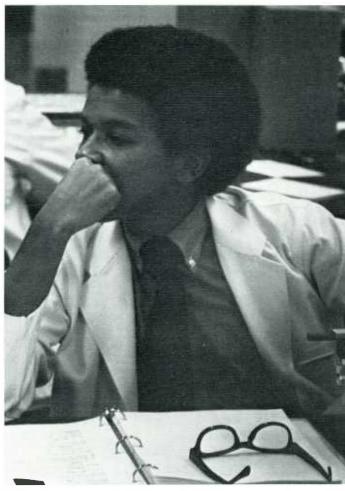
How does a veteran professor who has spent countless hours in shaping reforms and improvements in the Jefferson program feel about criticism from today's students? Dr. Ramsay believes it is unfortunate that young people "feel they must reject everything we have now because they didn't have a hand in forging it." The rejection includes reforms implemented by the youngest and most sympathetic faculty members, Dr. Ramsay points out, "because, unfortunately, the 'Establishment' starts when you get your degree." This philosophy makes it most difficult to teach, Dr. Ramsay explains, "because the teacher must draw on knowledge gained in the past . . . there must be a belief in what we have now-subject to change, of course." Coupled with rejection of contemporary programs, according to Dr. Ramsay, is the feeling by young people that they must "get involved." Few take the trouble to define "involvement," he says, but they believe that it in some way qualifies them as members of the new culture. Casting an experienced eye on this phenomenon, Dr. Ramsay characterizes much of it as a "spinning of wheels," which he believes detracts measurably from the performance of some medical students. "Everyone must be concerned," he points out, "but he must also exercise judgment.

While many observers point to the growing number of bearded and unkempt medical students as evidence that Dr. Ramsay's worst fears are coming true, the anatomy chief himself disagrees. "I'm proud of our kids," he says without hesitation, "especially when I hear from my colleagues what's going on at other institutions." Most of Jefferson's students are seriously concerned with the task of becoming physicians, he believes, and many are misunderstood merely because they are subscribing to current fashions in grooming and dress. Many students adopt these fashions, Dr.

says, "as a badge . . . 'in case you don't know my orientation'." The sad part, he contends, is that they don't realize this makes them unacceptable in the minds of the person they are trying to help—the patient.

With this in mind, has kept his advice to entering freshmen essentially unchanged. Despite their changes in backgrounds, orientation, interests and dress, he points out, all are preparing for the day when they will be worthy of selection by patients to oversee their health care.





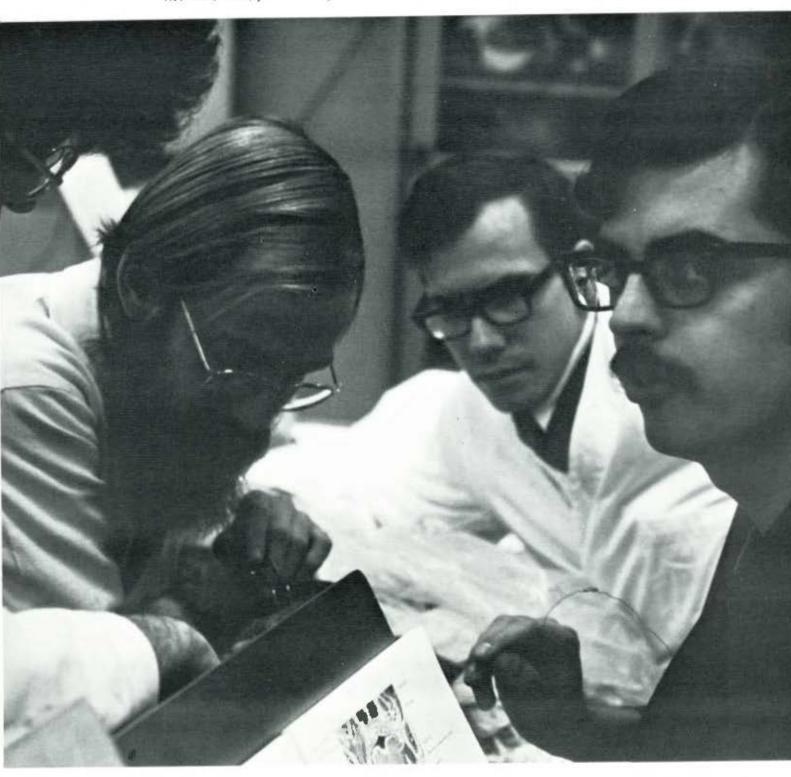
"Now, where did I put my glasses?"



"I don't care what he says, it still looks like a wad of $\operatorname{\mathsf{gum}}.$ "

"Everybody's here, but we're short one brain."

"Now look, fellas, you can always tell the Celiac plexus if you just remember it tooks like a wad of gum,"



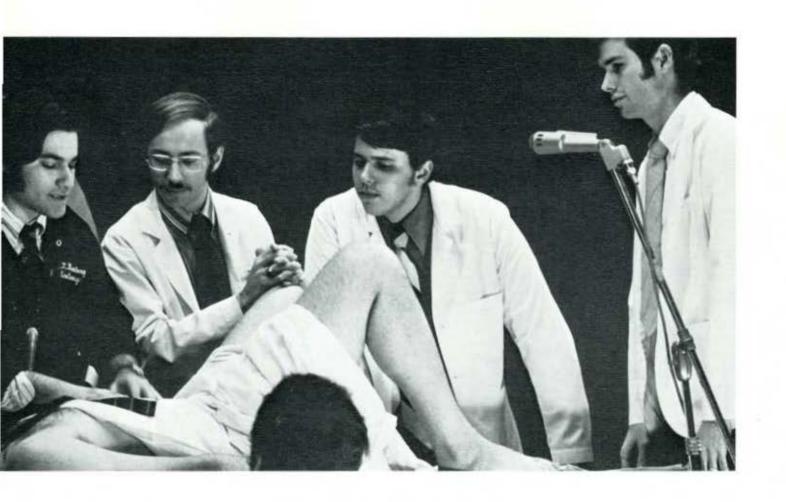
freshman play



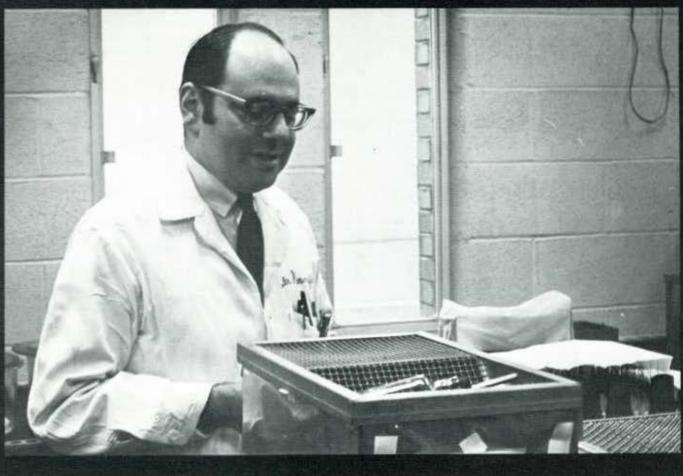




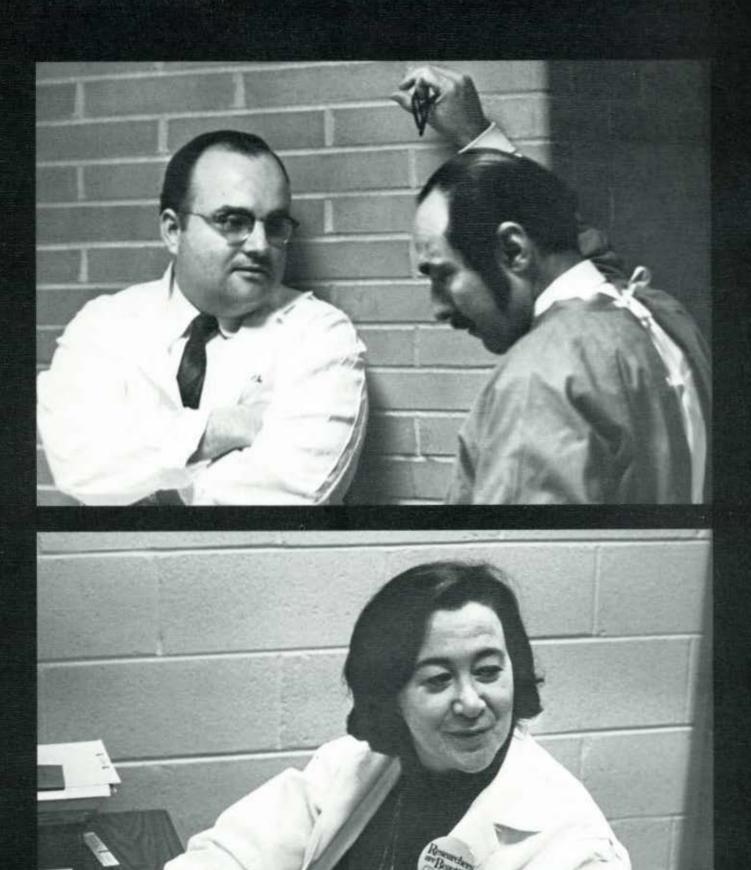






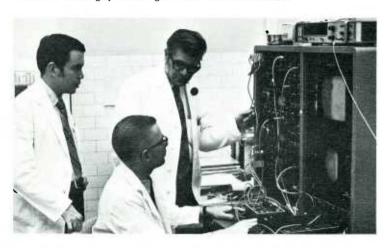


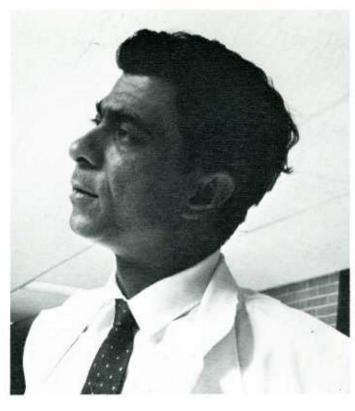




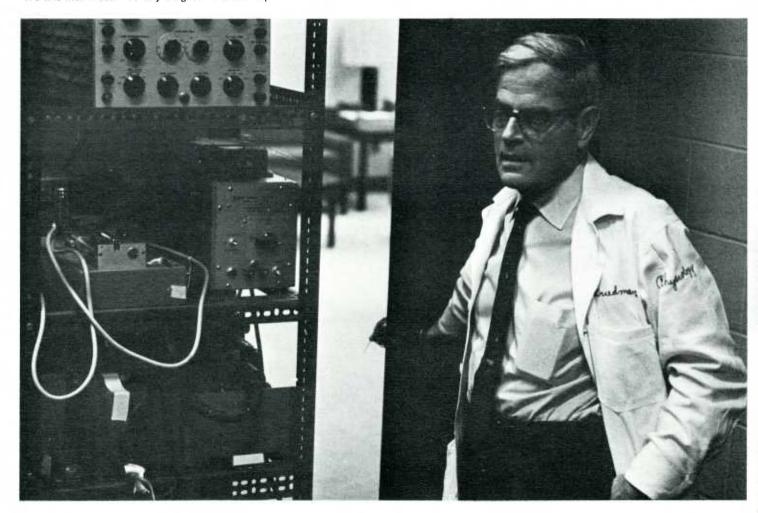
Physicingy,

"Some of these guys never get it the first time around."





"It's like me. It can't do anything but it looks important."

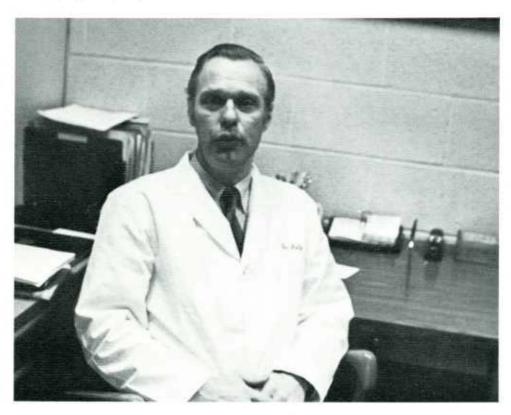


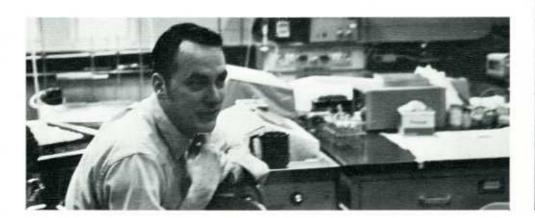
"If you don"; understand IgG now, wait 'til next year."



"I don't understand it. We got the Lone Ranger on this frequency last week."

"And then he kicked me."







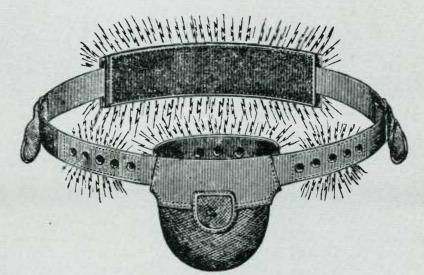


13

DISEASES OF MEN.

Although Electricity, properly applied, is a wonderful remedy in nearly all classes of ailments, still it is in diseases of men that it is most employed by the medical profession. For this purpose we manufacture an article which we call

The German Electric Suspensory Belt.

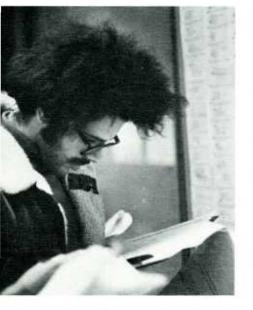


Price reduced to \$5.00.

A positive and unfailing cure for Nervous Debility, Weakness, Loss of Vigor, Varicocele, etc., etc.

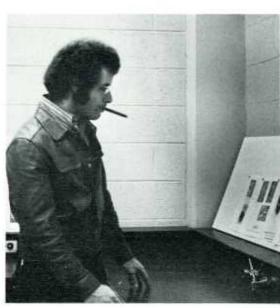
Remember we give a written guarantee that the Appliance will cure the diseases mentioned, and, if it does not, we will return the full amount paid.

Here's one for the Pat Petti award

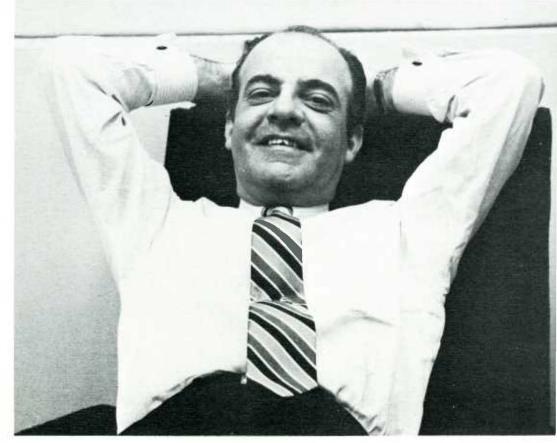




Would a gentleman offer a lady . . .?







"So, after you sat on her and did a urine on her she threw an embolus. At whom I do not know."

POOM 235

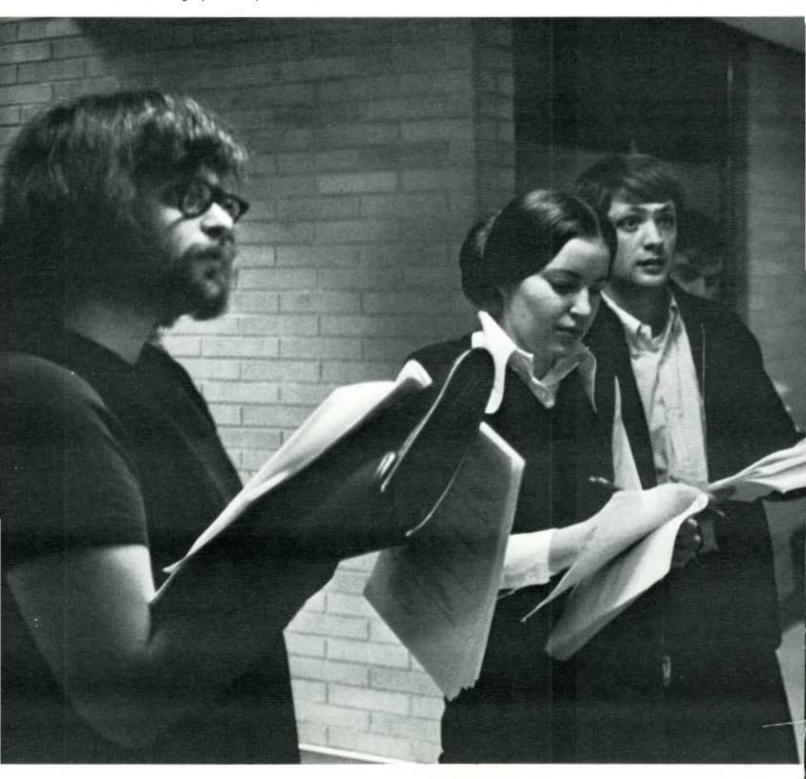
60 PHOTOS

CREE CAVITY
SALIVARY GEARDS
ESOPHEOUS



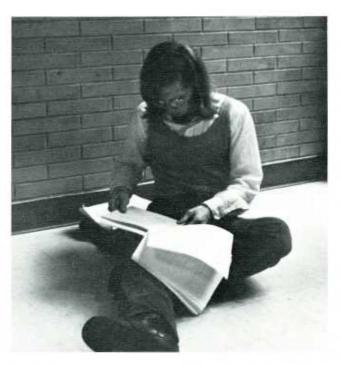


Will the real Hell's Angel please step forward.

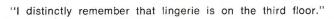


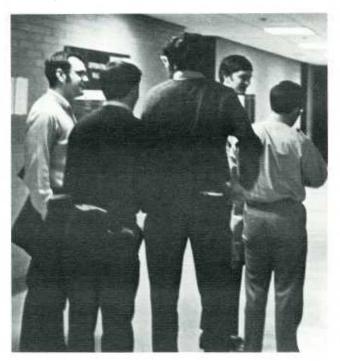
"Are they all THAT long?"





"\$26 million for this building, and no chairs."

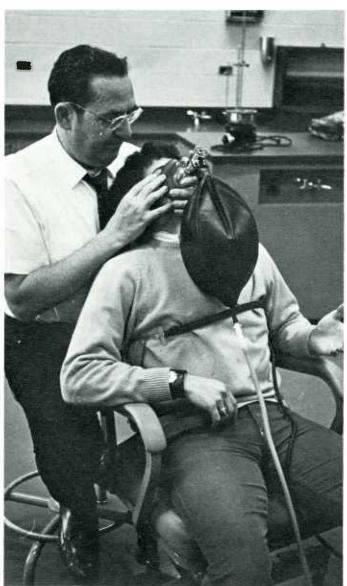




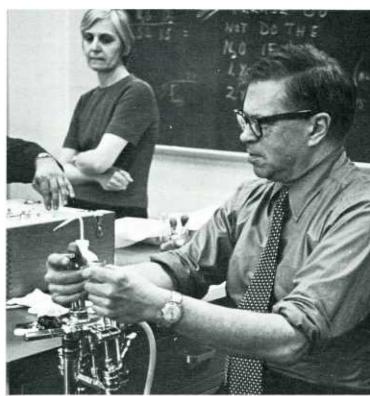


"Fetch!"

"It would be most helpful if you were to continue to breathe, $\operatorname{Mr.}$ Smith."

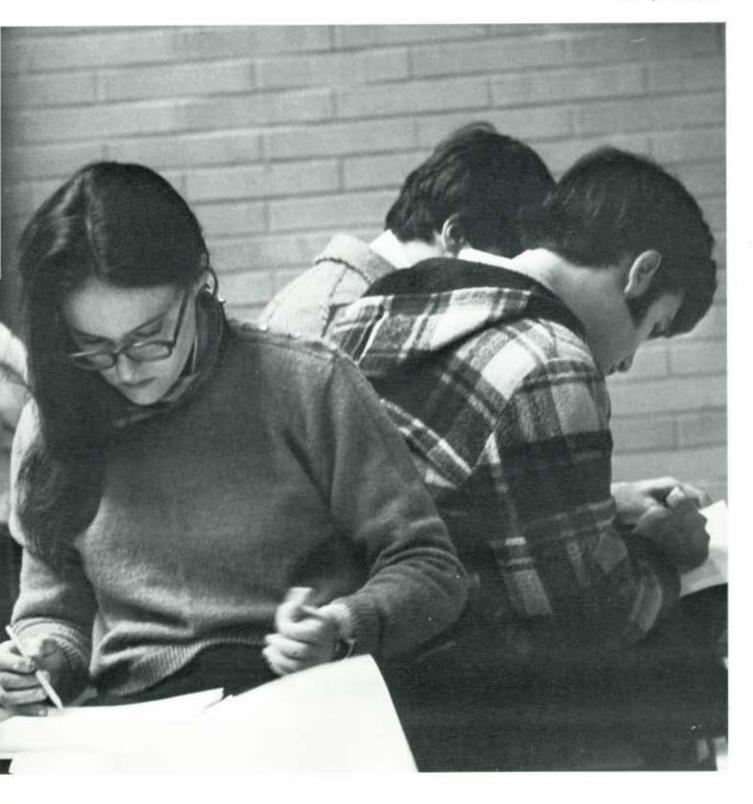


"Straight or with water?"





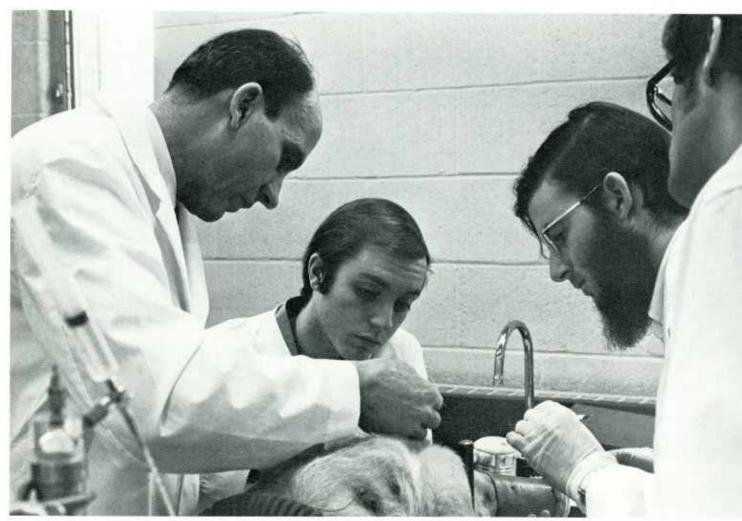
"This is pure bullshit."



"is this pharmacology or occupational therapy?"



"Are you sure Christiaan Barnard started this way?"

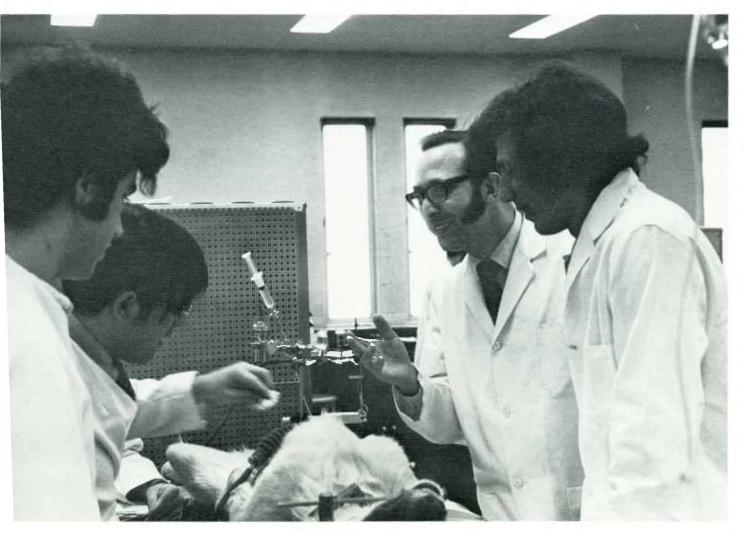


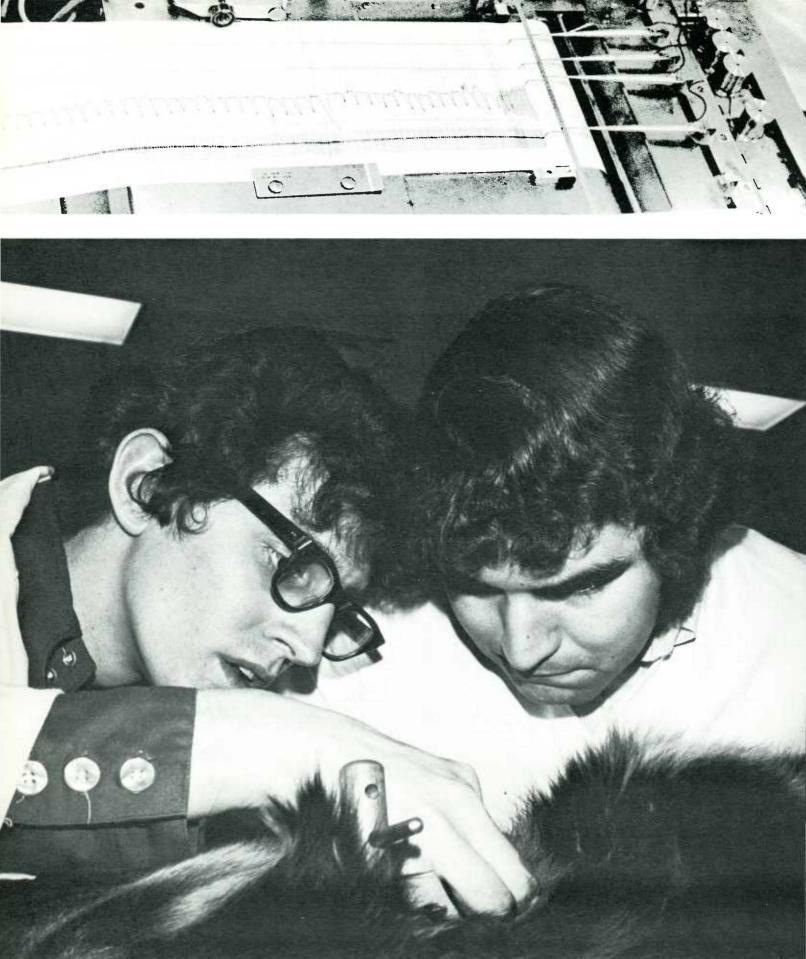


"Well, I'll think about it."

"Yes, I do hear a diastolic rumble."





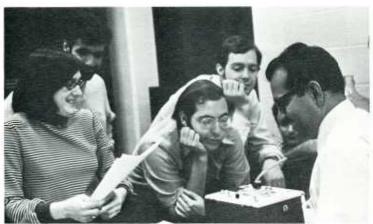


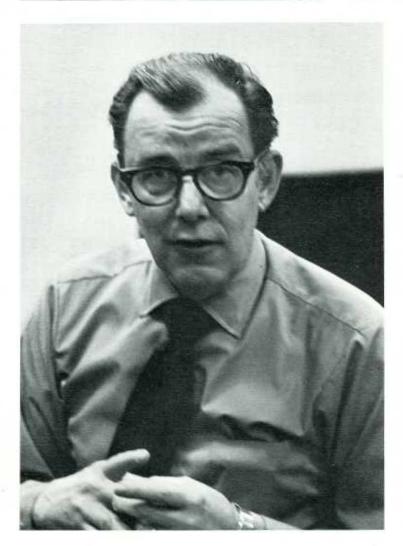
"Bruce, we just can't go on meeting like this.

"Haven't had this much fun since I smoked a khymograph." $\mbox{\sc I}$

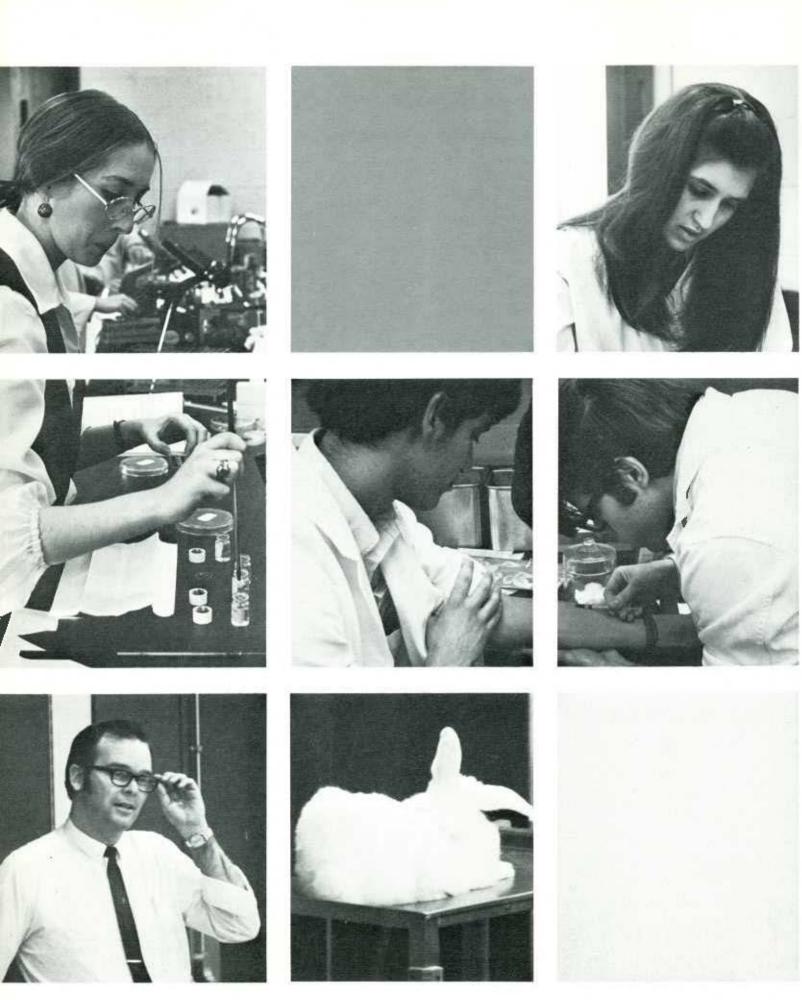


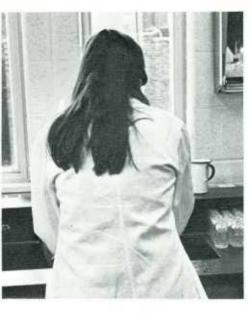
"But you had the placebo. How could your blood alcohol be 200 mg percent?" $\,$

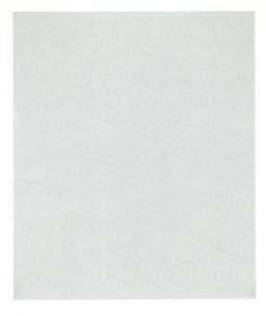




"Who says I can't make my finger disappear?"

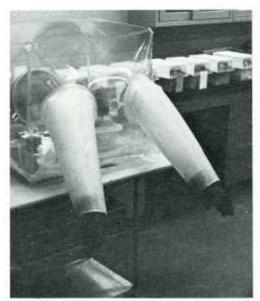


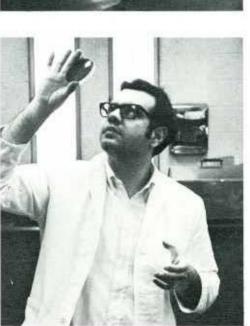


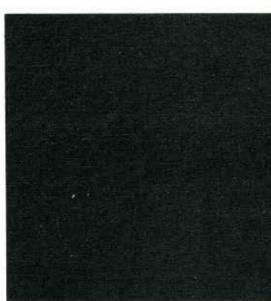


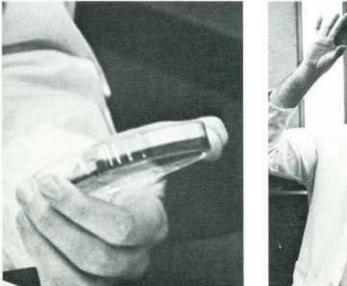


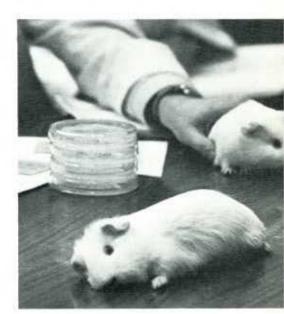










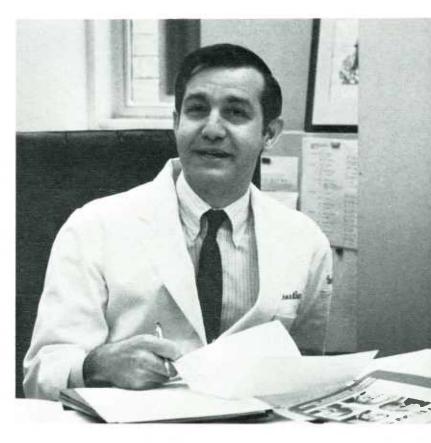




"Buzz off, male chauvinist pig."

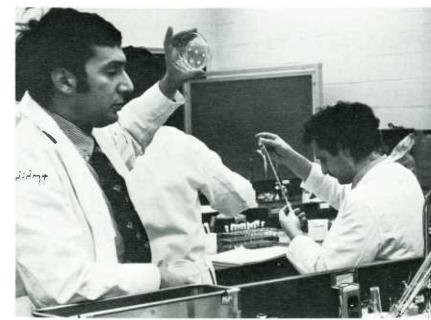


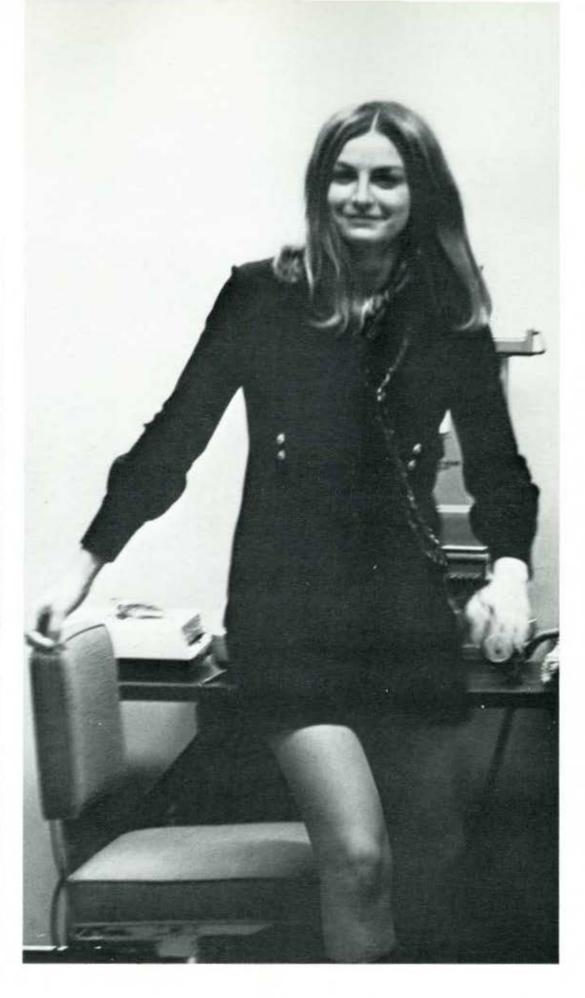
"Sylvia, come in here and close the door."





"Mr. Dickman, just how virulent is this strain of WEE?"

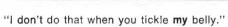




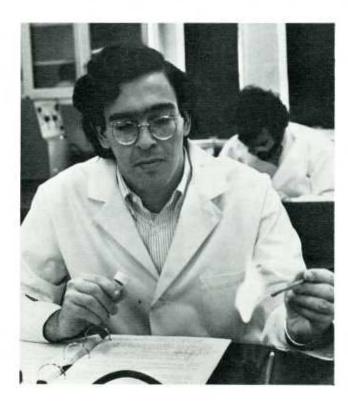








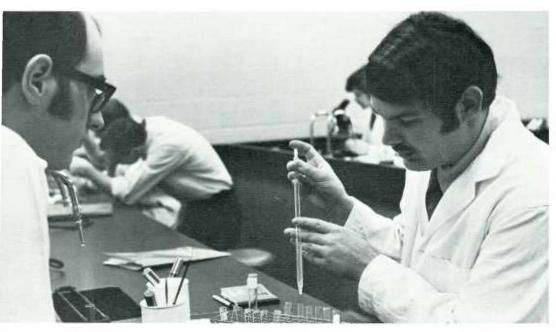




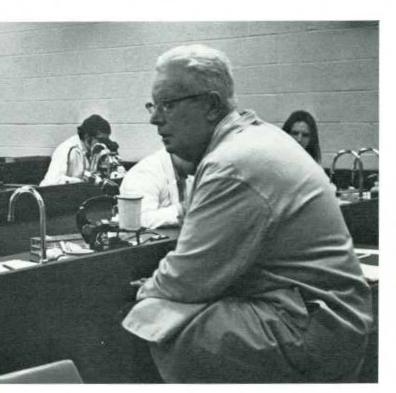




"Why is the door to Dr. Schaedler's office locked?"

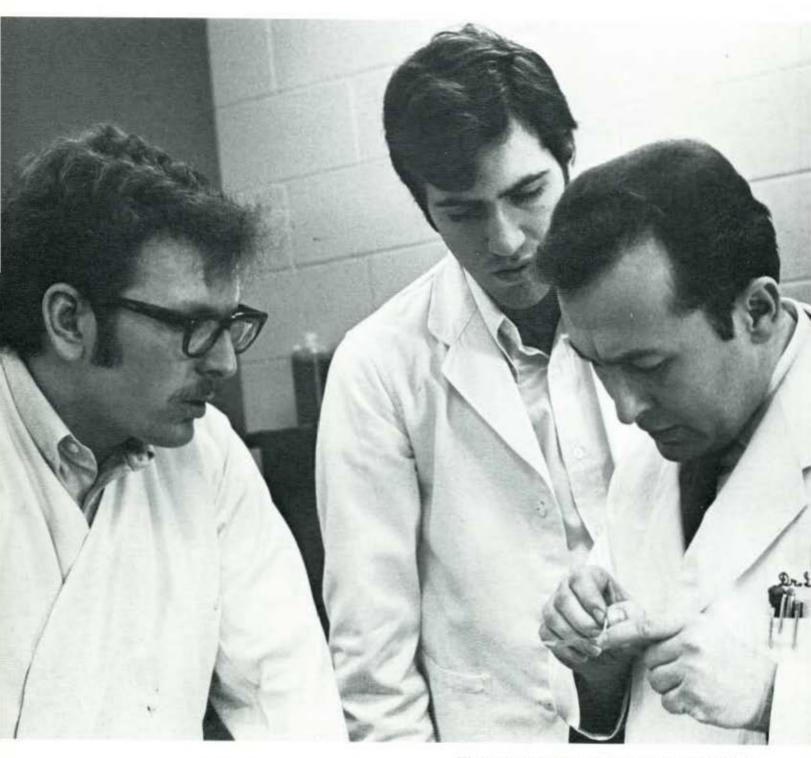


"You sure it's two parts gin to one of vermouth?"



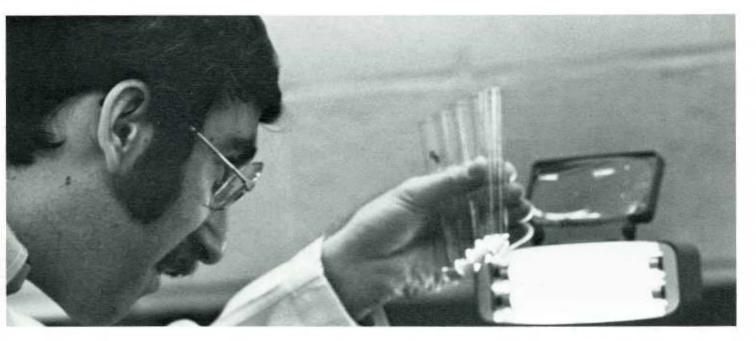
"You're not going to believe what they're doing under there."

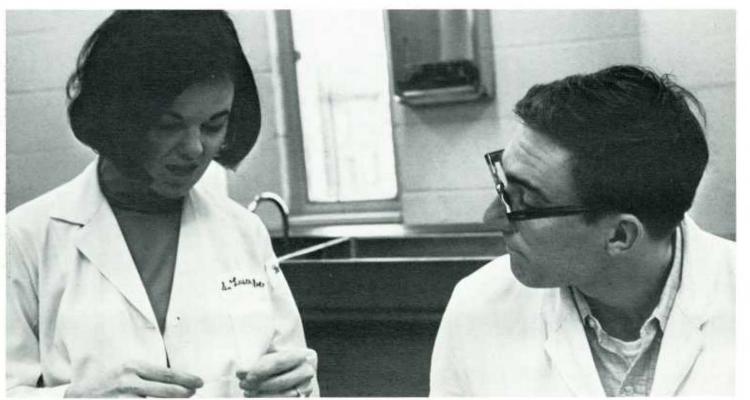




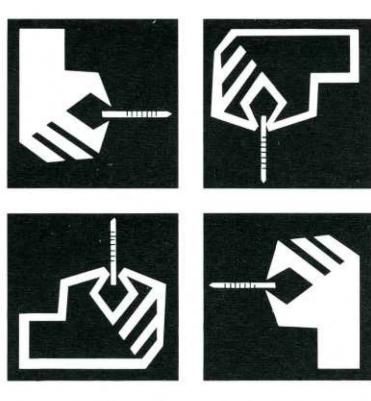
"If we can believe this slide, I'm afraid you're pregnant."







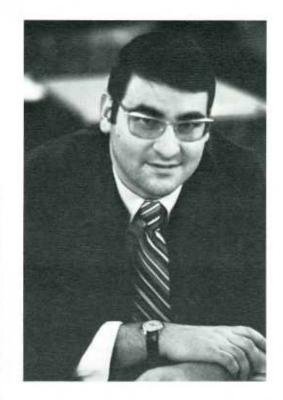
"OK, so what if it is a three-inch spermatozoon?"



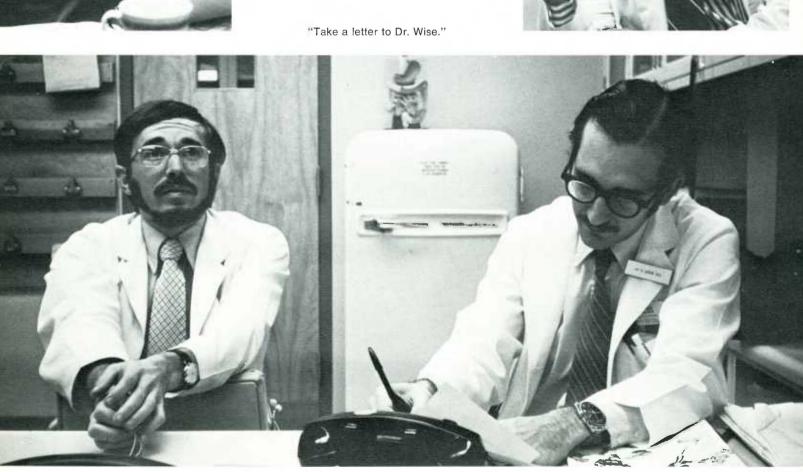
CLINICAL YEARS

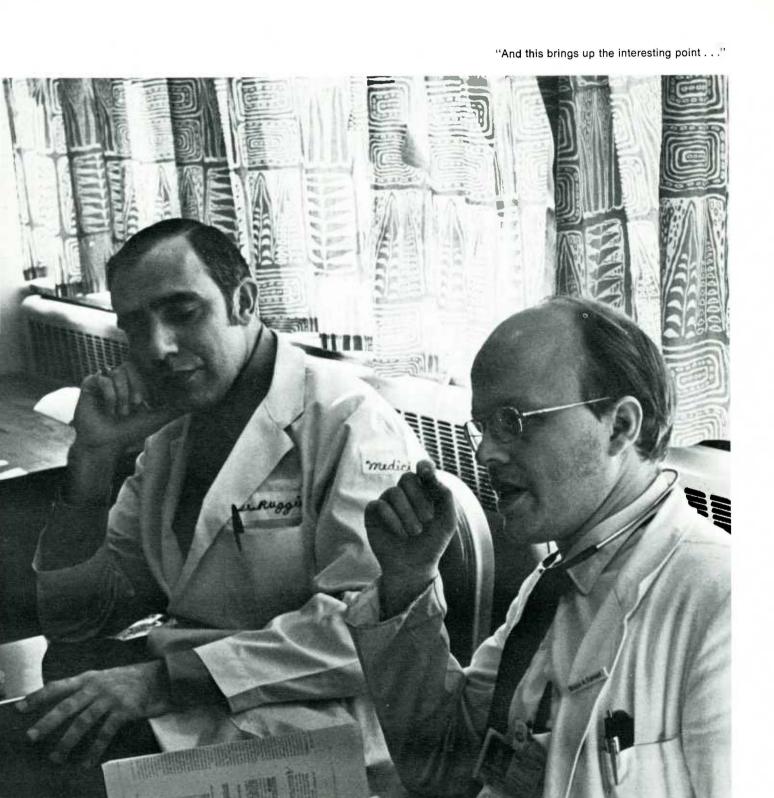








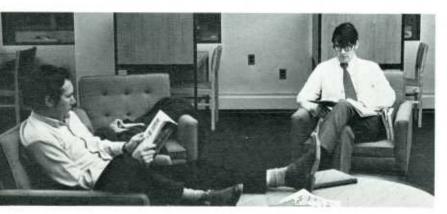






"Paul, Goldstein thinks he felt a hemostat in the right lower quadrant." $% \label{eq:continuous} % \$

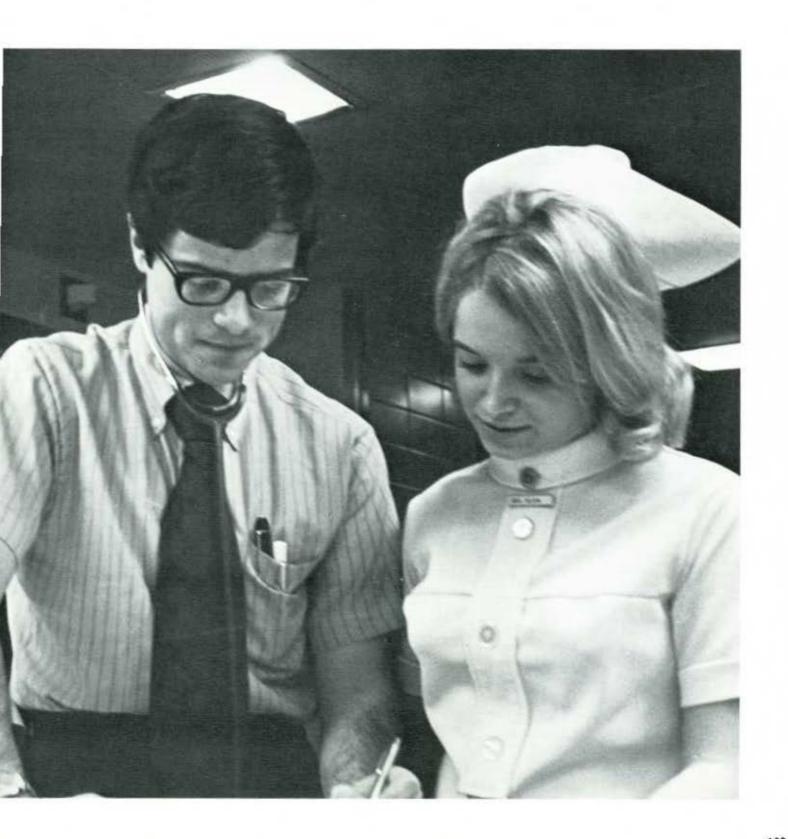






"Bob, I've got somebody here who wants to meet you."







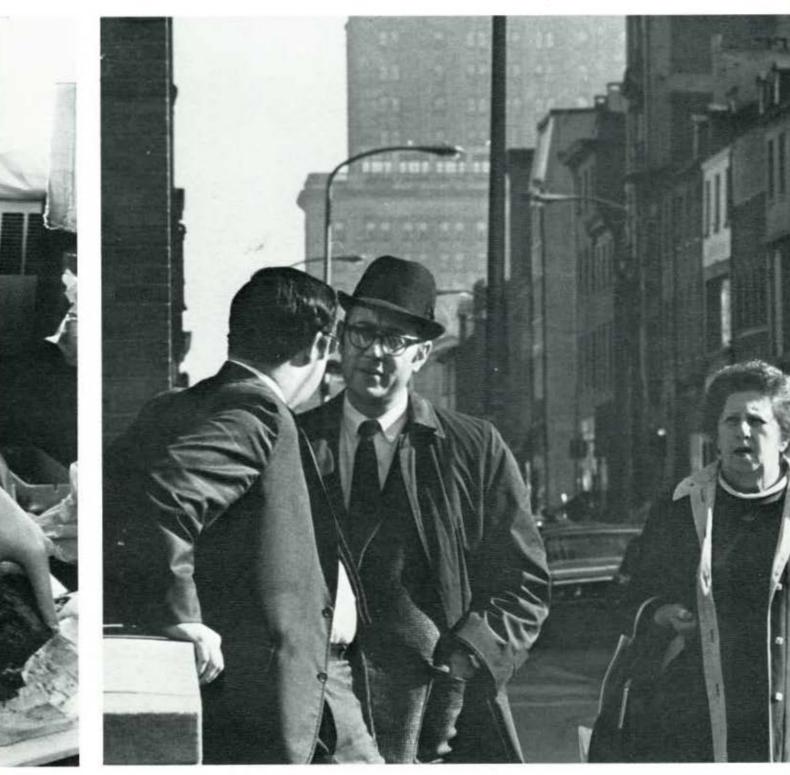
"That's funny, my husband says he's on tonight, too."

"Tell Dr. Marks I'll have that frozen section report in an hour."

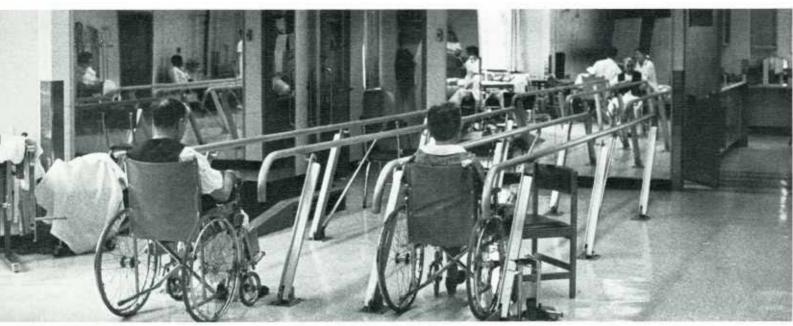


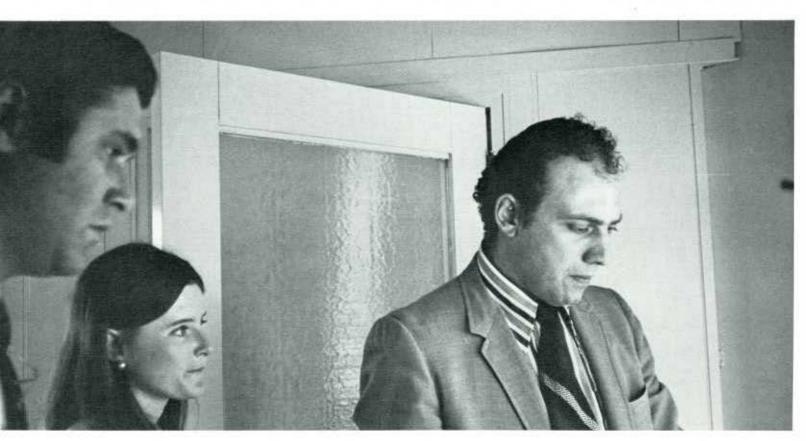


"Bill, I think I can speak frankly. Haven't you hoard about Scope?"



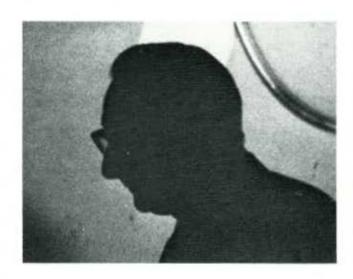








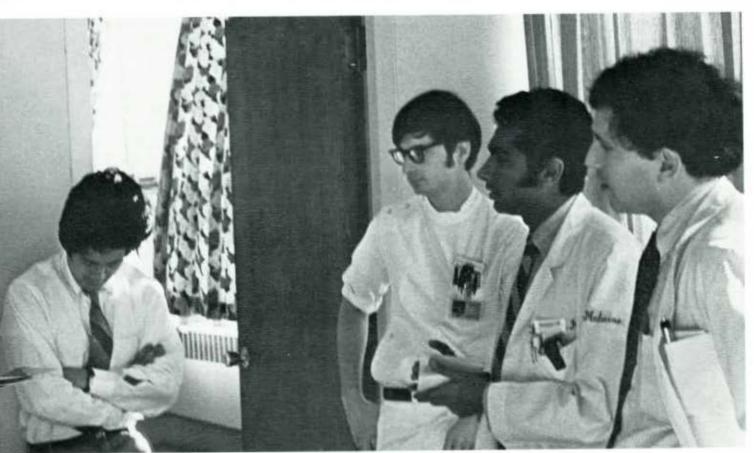




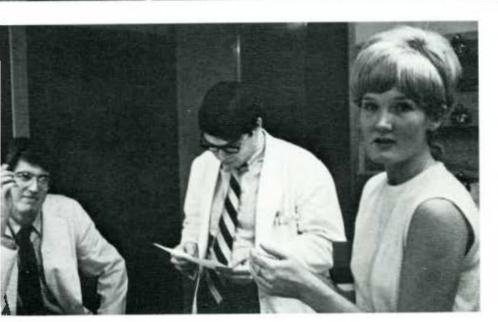






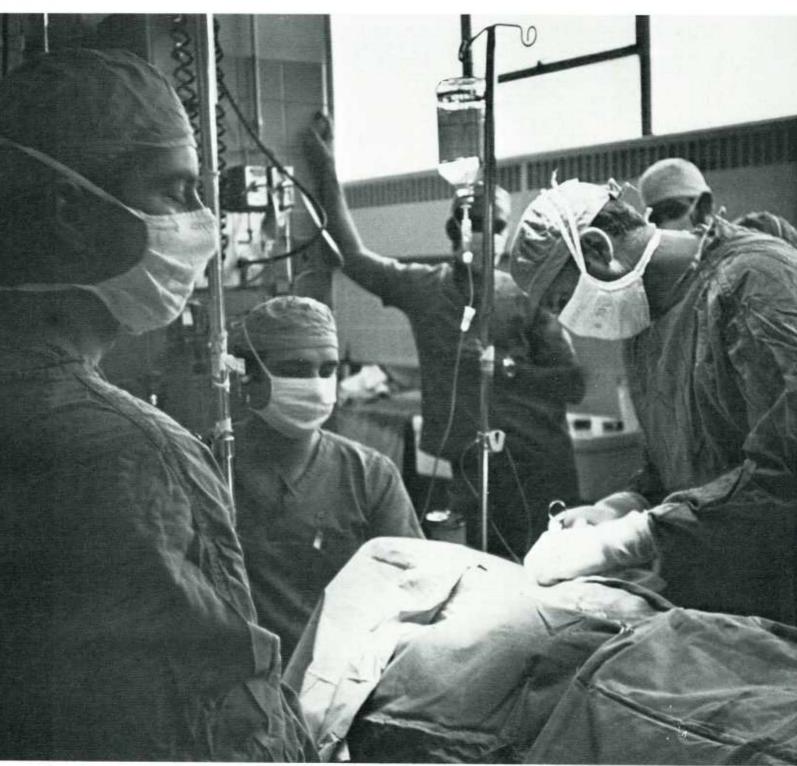


"Joe. you forgot to do a rectal."





"I don't know what's taking you so long, Herb. I could do this one with my eyes closed."





"Haven't you ever been to Tijuana?"













O wad some Pow'r the giftie gie us To see oursels as others see us —ROBERT BURNS

In those words, the Scottish poet merely codified the age-old observation that "outsiders"—those with no vested interest in the judgement—make the most objective assessments. One who meets those qualifications at Jefferson is Dr. Gordon F. Schwartz, newly appointed assistant professor of surgery and director of the surgical training program. Dr. Schwartz had no connection with Jefferson prior to his appointment last year and comes to his new post with experience and training at four of the nation's top medical centers—Harvard, Cornell, Columbia and Penn. His experience, coupled with his objectivity as an "outsider," make him uniquely qualified to see Jefferson's strengths and weaknesses. In a recent interview with The Clinic, Dr. Schwartz discussed some of these observations.

Mostly, Dr. Schwartz noted, he's been "impressed . . . more than I thought I'd be when I came." What impressed him? The quality of Jefferson's students, her physicians and the high level of medical care rendered to patients in her hospital. "Jefferson," he says flatly, "is the most forward-looking medical school in Philadelphia." Before accepting his present post, he says he became convinced that Jefferson had "as great a potential as any medical school in the country." For this, admittedly "unbiased by knowledge or experience," he gives most of the credit to the dean's office, where he says forward-thinking policies have been formulated to prepare the institution for the future demands of both society and the profession.

Jefferson's clinicians and the quality of medical care here are "as good as anywhere," according to Dr. Schwartz. And our students "don't have to take a back seat" to their colleagues anywhere, he contends, including Harvard, where he was a student; Cornell, where he interned; Columbia, where he did his surgery residency, and Penn, where he taught prior to coming to Jefferson. While Dr. Schwartz is enthusiastic about Jefferson and is quick to list the aforementioned strengths, he also insists that "this doesn't mean we can't do things a lot better." One place where he feels there is room for improvement is in the training of teachers of medicineacademicians. At the turn of the century, he notes, Jefferson ranked with Harvard, Johns Hopkins and Columbia among the top medical schools in the nation. In the ensuing years, Jefferson put most of her effort into the training of much-needed medical practitioners, which Dr. Schwartz believes is a worthy goal-but not enough. "We have an obligation to provide future teachers," he insists, adding that I "now feel we are going to meet that obligation."

INTERVIEW:

Dr. Gordon F. Schwartz an 'outsider' who's impressed

One factor stands partially in the way of this goal, according to Dr. Schwartz. "Our students apparently undersell themselves" in the pursuit of postgraduate training. Good students, he says, accept internship and residency programs that are less competitive than they may be capable of getting. Part of the reason for this, he maintains, is that students often are unaware of the opportunities open to them in the various specialties. A solution to this problem, he believes, would be the establishment of an elaborate counselling program in which knowledgeable physicians representing all of the medical disciplines would participate. This is particularly important now, according to Dr. Schwartz, since specialty training begins immediately after medical school. "The rotating internship is an anachronism," he contends. Students currently may get the same clinical experience during medical school that formerly was gained in an internship. Also, he points out, "the internship can no longer be considered a separate year in the training of a physician, but is part of a coordinated, integrated program in a particular discipline." Therefore, one must be prepared in his senior year to select a specialty.

Does this mean Dr. Schwartz favors the trend to earlier specialization? Emphatically no. "Medical schools must continue to train 'compleat' physicians," he insists. "At graduation, there should be no great gaps in one's medical knowledge. One is obligated to have a 'casual familiarity' with all of medicine." How does Jefferson fare in this regard? "We're better off than many places."

Dr. Schwartz is equally conservative in his insistence that the teacher has the right-and the duty-to decide what should be taught. "Students have the responsibility of telling me how well or how poorly I am teaching them. I want to know if I'm doing a lousy job. But I maintain that one must go through the educational process before one can accurately comment upon its content. I am enough of the Establishment to believe that students are not necessarily capable of telling us what they are to be taught." Considering his views, which he describes as "conservative in every respect," how does Dr. Schwartz enjoy his confrontations with modern medical students. "I enjoy teaching more than anything besides operating," he says, pointing out that this was the reason he came to Jefferson. "I spend most of my day with either house staff or medical studentsand this is what I like best." Though he enjoys the students, he is annoyed by some of the modern conventions of dress and grooming. "Students should dress appropriately," he insists, and though he feels most students do appear presentable on their clinical rotations, many of the students in the preclinical years do not. Some of these, he says, "don't change enough" when they make the transition to clinical years. While he would prefer to have students appropriately barbered and attired, he admits that "I do believe what's between a man's ears is much more important than what's on top of them."



Thyroid storm



"Ed I've never seen a chancre there before."



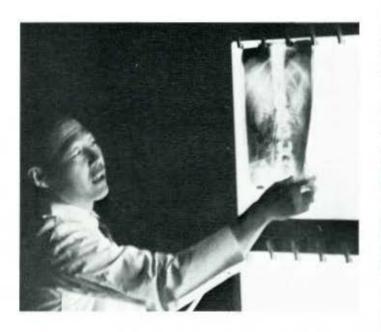


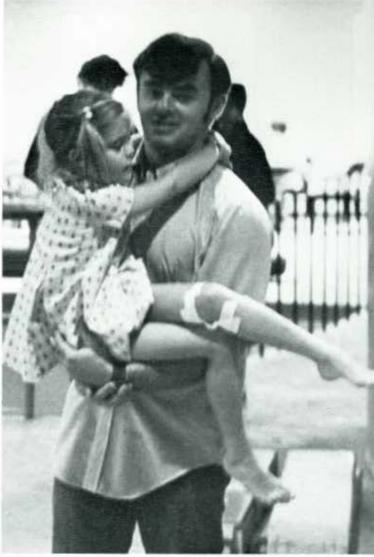


Eager students participate in care of surgical patient—just as described in the catalogue.

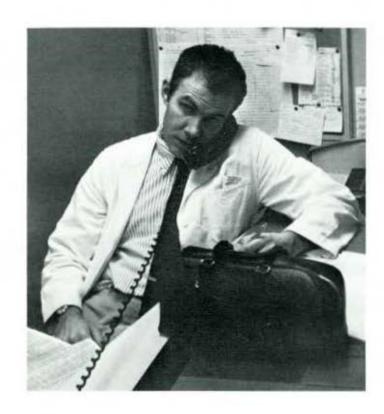


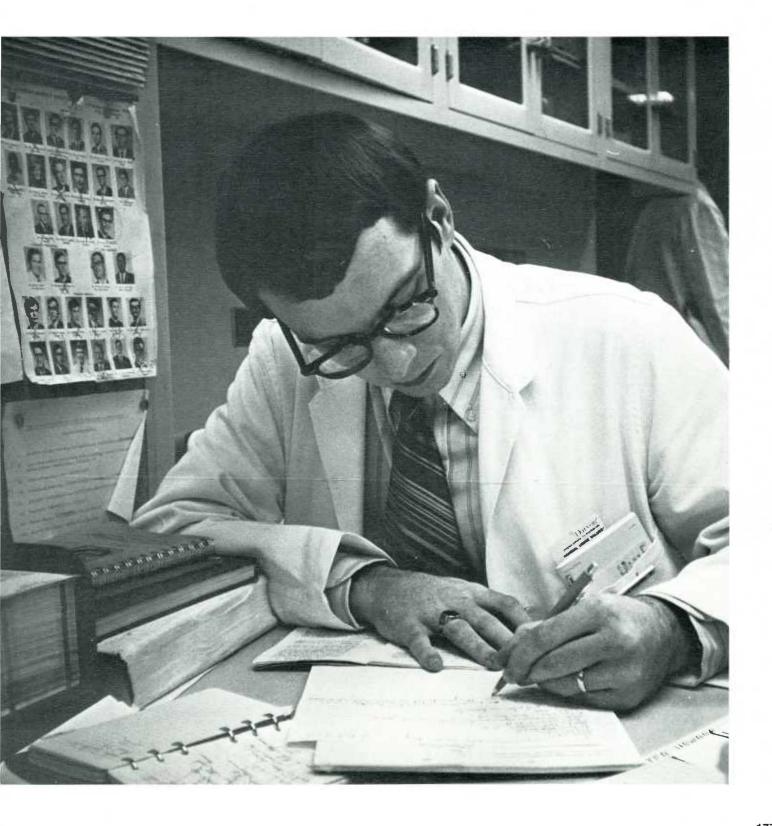








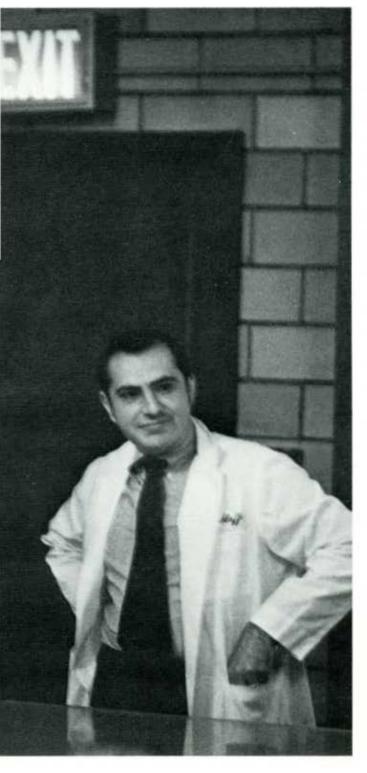


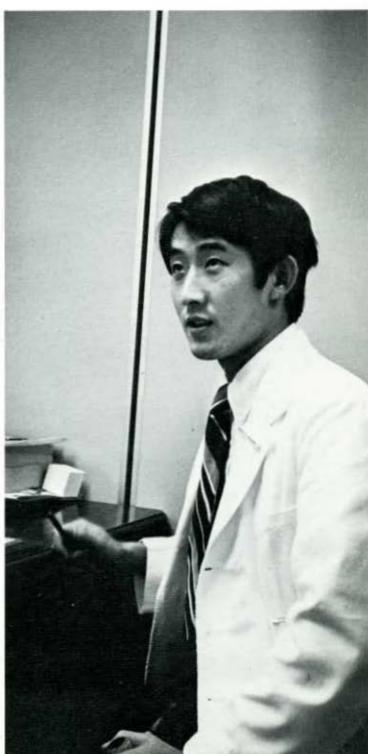






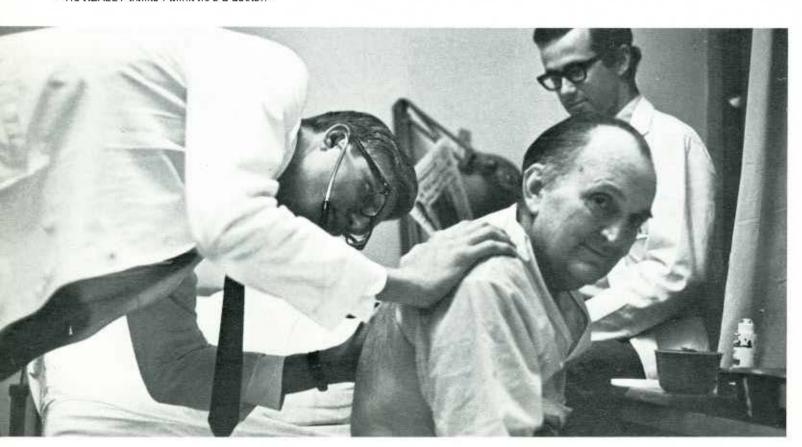








"He REALLY thinks I think he's a doctor."

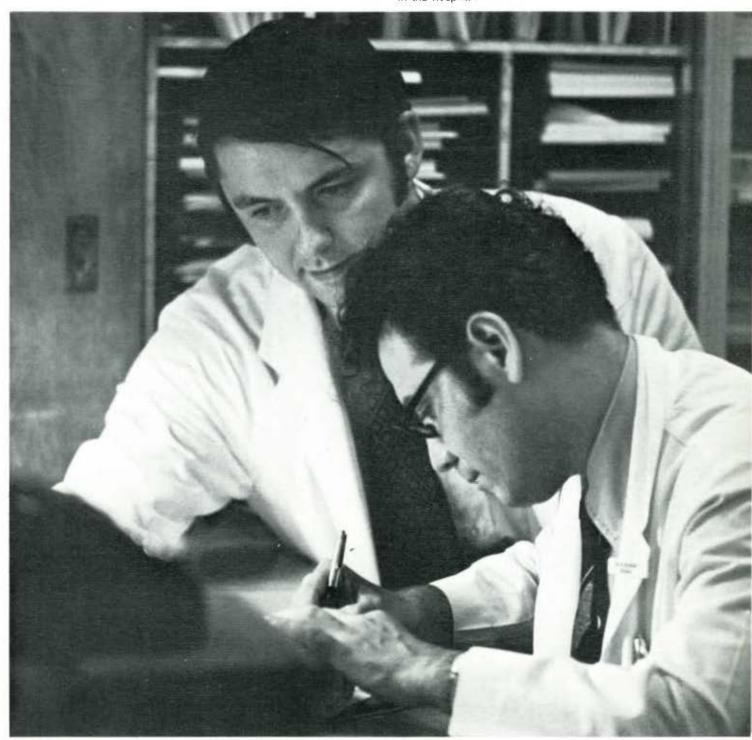




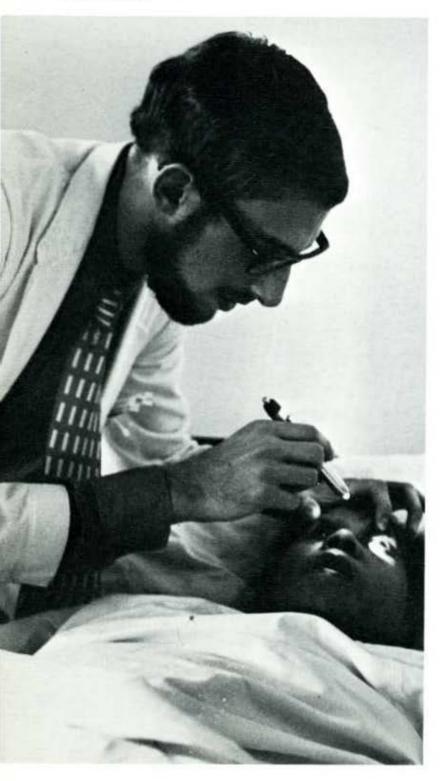
"My VDRL is what?"



"Would you treat this in the home, from the office or in the hospital?" $\,$

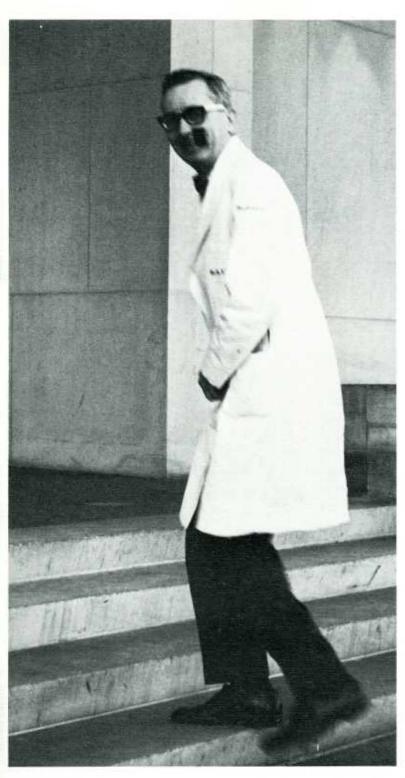


HEENT---present



"If another one of those guys in short white coats bugs me I'll puke on him."





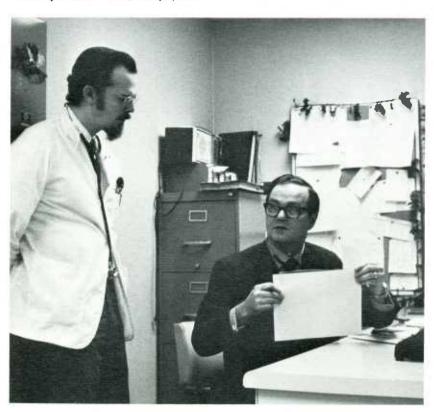
"Sorry, but I have to run."

"Yes, Dr. Wise, I did include Brucellosis in my differential."





"When you aren't sure, Wally, punt."













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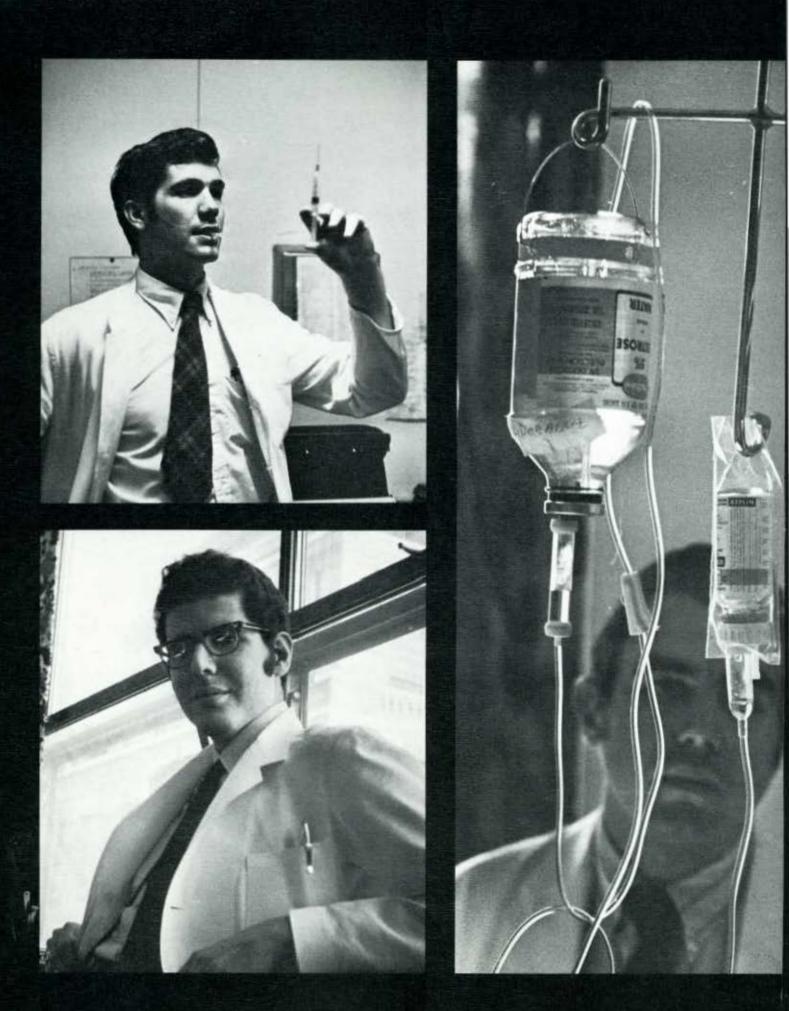
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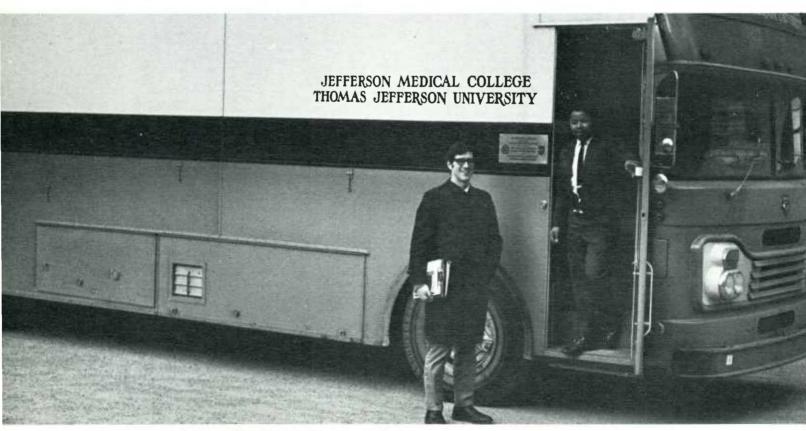


"When you said \$35 an hour I misunderstood."



"Don't be afraid, Mr. Jones. We're all your friends."

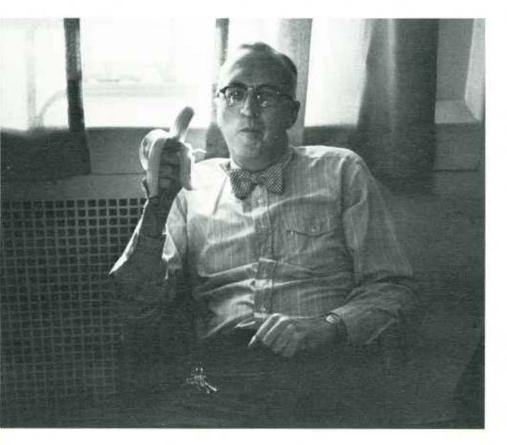
"Floyd's folly-1970-71."







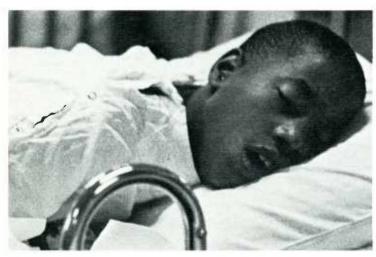
"And then we shocked the hell out of her."

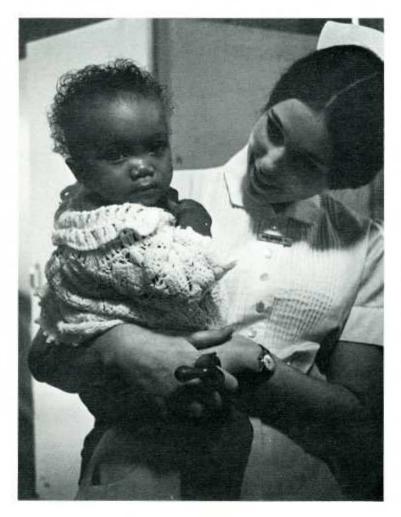


"Yes, but may I remind you it is also a banana."



"Don't worry, these quizzes won't count."

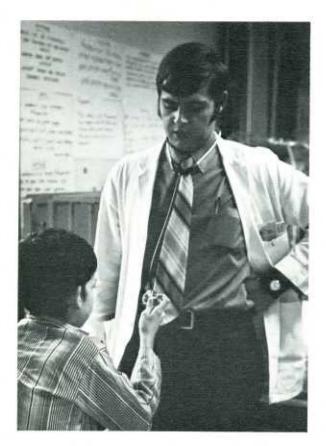


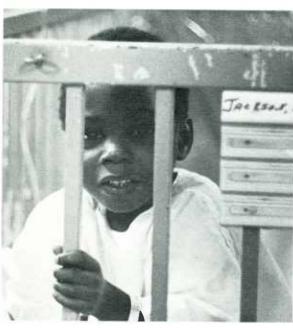












"When're you gonna let me out, man?"

"The accommodations are passable, but the food is intolerable."

"THE BEST" NIPPLE CANNOT COLLAPSE. POSITIVELY

.30 doz.

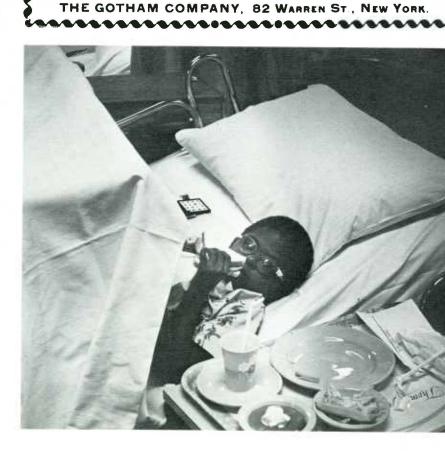
.30 "

PREVENTS WIND COLIC and BOWEL TROUBLE.

PRICE, "the Best," PER Doz., \$2.00 (compl'e)

"Cling-fast Nipple,"

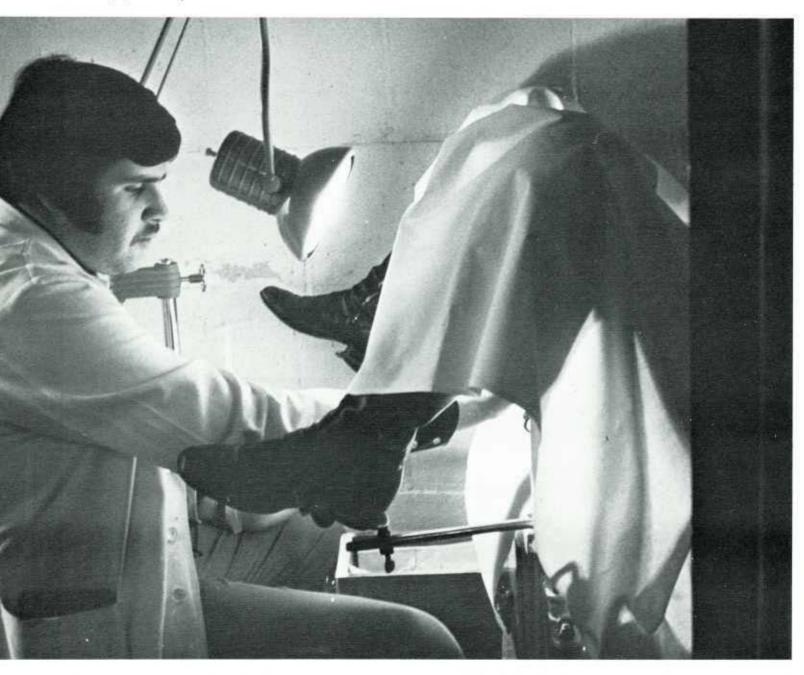
VALVES (extra),



"And when you fall asleep, the tool! fairy will leave a gift under your pillow."



"You may put the whip down now. Miss Jones."





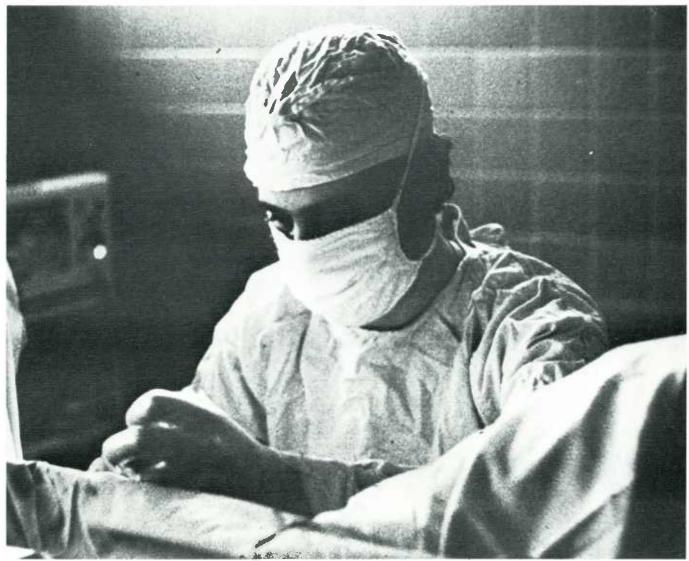
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the pains and burdens of childbearing, insures healthy, vigorous off spring, and promotes an abundant secretion of nourishment on the part of the mother. It is an invigorating tonic made especially for women, perfectly harmless in any condition of the female system, as it regulates and promotes all the natural functions and never conflicts with them.

with them.

The "Prescription" builds up, strengthens, and cures. In all the chronic weaknesses and disorders that afflict women, it is guaranteed to benefit or cure, or the money is refunded.





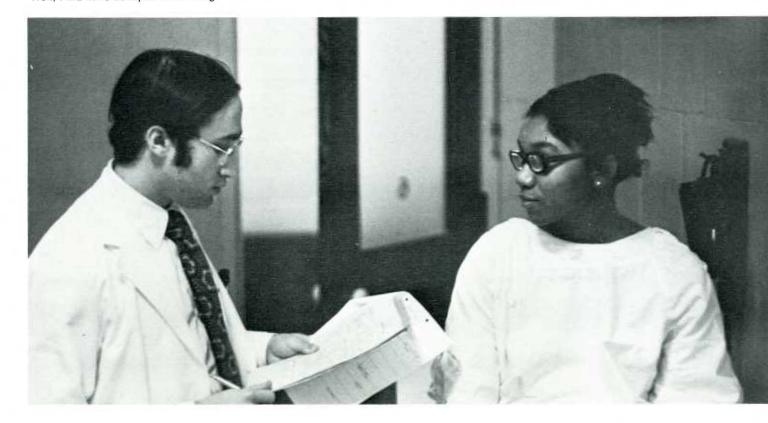
The patient's view



"Whatta you mean I'M pregnant?"



"Well, I did have collapse of the lung."



"This way you can examine all four quadrants of the breast at once."

Caught in the act.













0N

HEALTH



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A GUIDE TO PURITY AND PHYSICAL MANHOOD. Advice to Maiden, Wife, and Mother.

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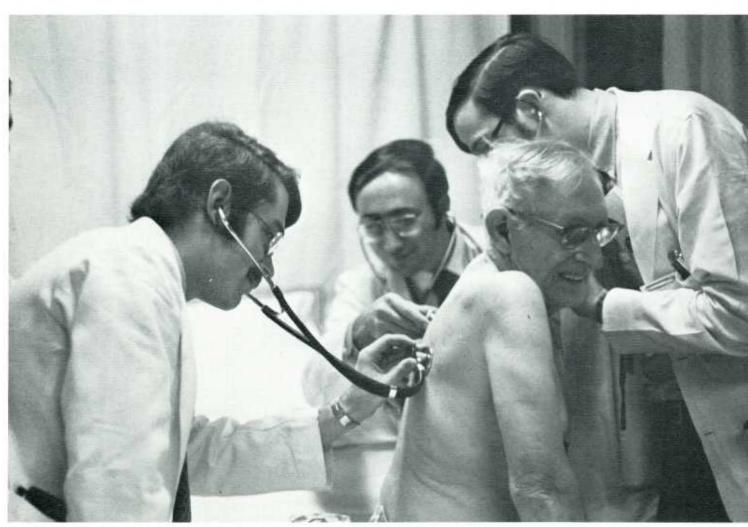
1897.



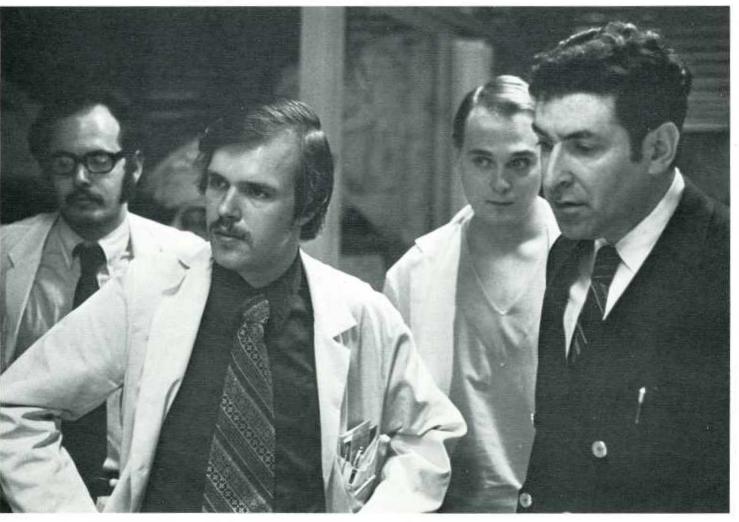


"Yes I did buy a yearbook."

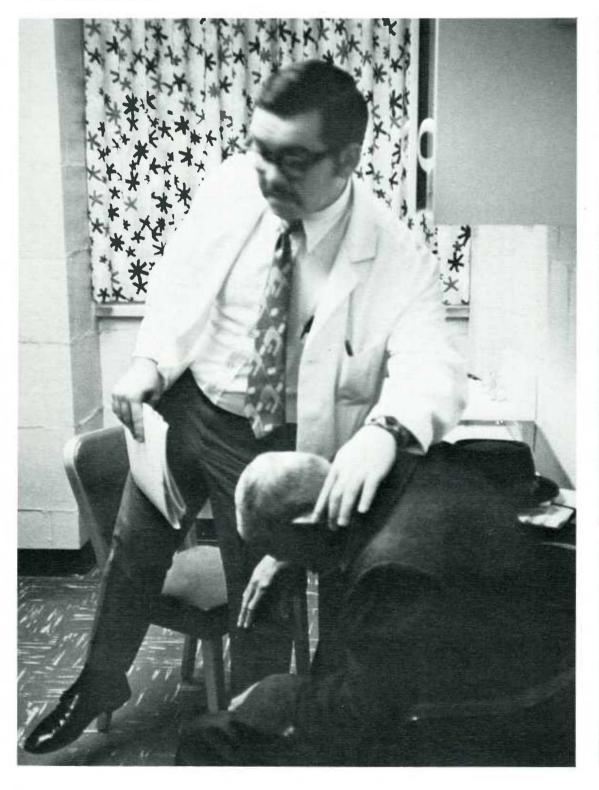
Gang auscultation







"It sure doesn't feel loose."







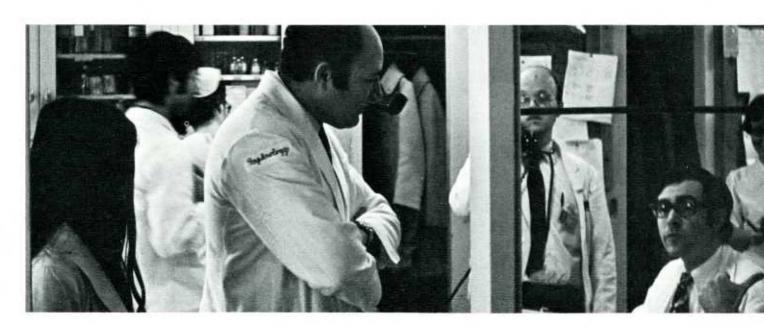






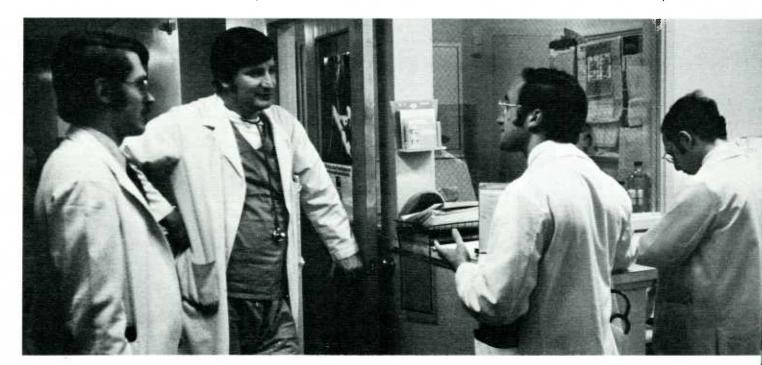






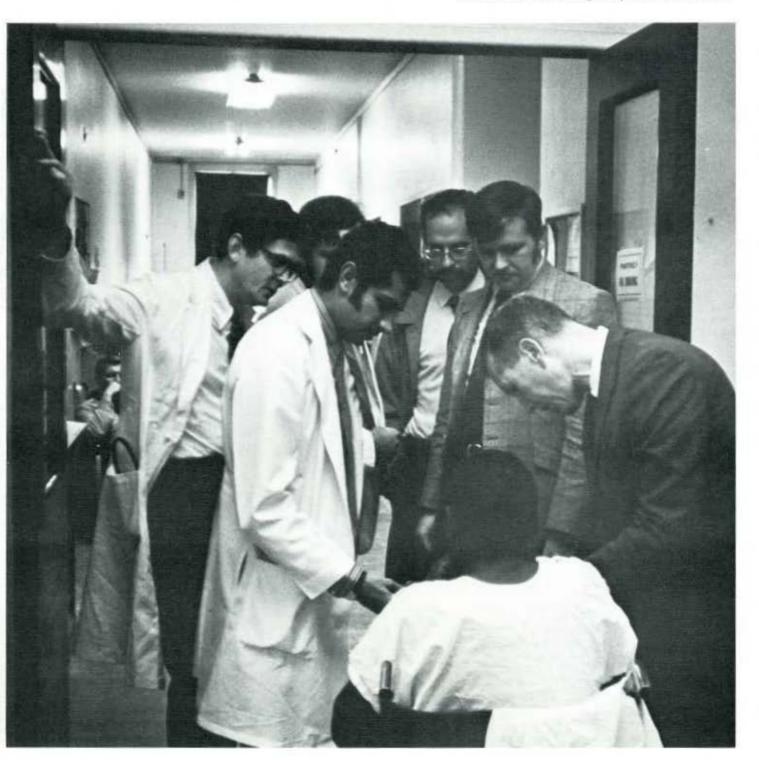
"I don't care who you are, buddy, get lost."

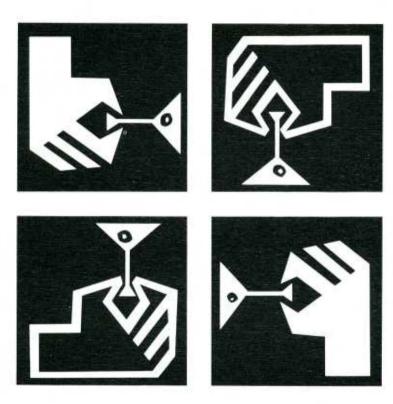
"Which one of you fellas read the latest article in ACTA MEDICA POPOLSKI on hernia transplants?"



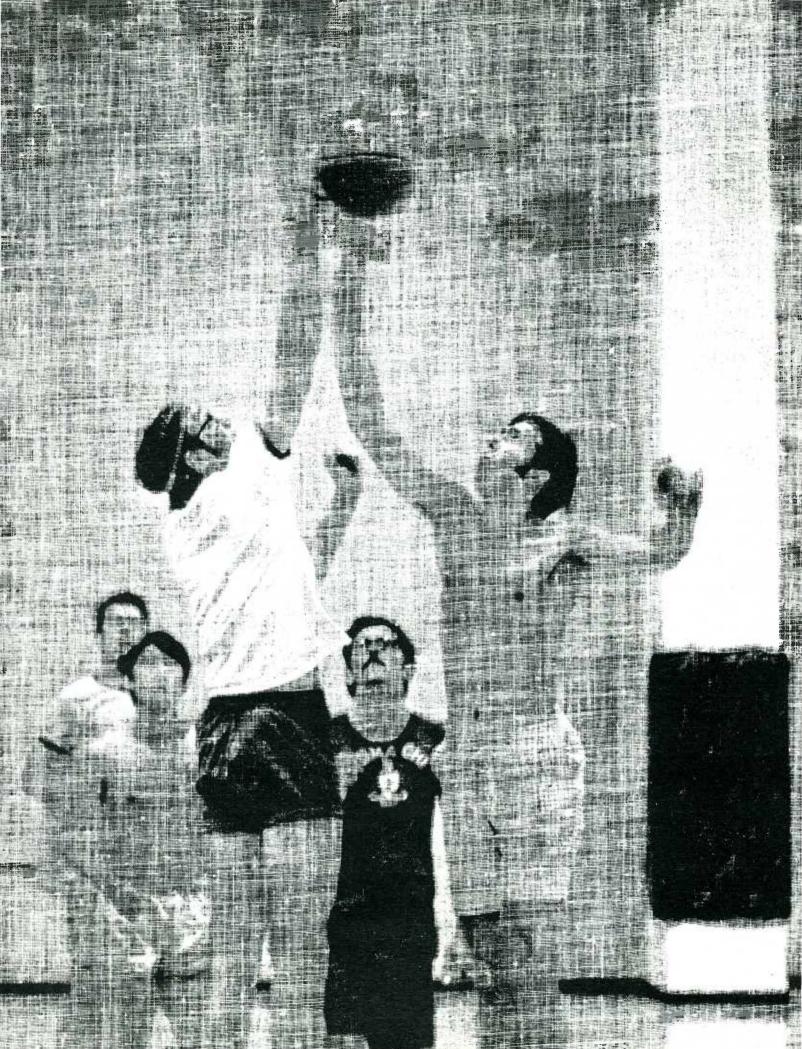


"That's the weirdes!-looking saxaphone I've ever soon."





ACTIVITIES





STUDENT ACTIVITIES

a continuing appraisal by Floyd M. Casaday

Year book activities sections are usually a drag. They rarely show any imagination and have little if anything to say. We are trying to change that. The following essay by Contributing Editor Floyd Casaday is a serious attempt to assess the entire activities program at Jefferson. We don't expect everybody to agree with our judgments and we trust it is understood any criticism is offered in good faith.







Jefferson has changed profoundly and dramatically in the past five years. The change was in substance as well as style, including revised thinking about the very basics of medical education as well as striking improvements in physical plant. At the crux of the transition has been the birth and early development of Thomas Jefferson University. The fledgling university stands on Jefferson's many venerable traditions but aims to satisfy the needs of the future. Students have shared in and contributed to the many changes. They are different from their predecessors in many respects, but perhaps most strikingly in their keen awareness of the problems facing medicine and society in general. These attitudes have been reflected in student activities.

Many of the changes in student organizations can be traced to the opening of Jefferson Hall Commons three years ago. This offered a central facility for the conduct of activities and made broader participation possible. Widespread use of the commons led to a revamping of the structure, aims and programs of several student organizations. New activities were formed and some old ones ceased to function.

One of the first major organizations to undergo reform was Student Council, which responded to demands for broader representation. Early in 1969, the council voted to disband itself and reorganize as a more representative group. The new council consisted of elected representatives from each of the four classes, elected officers, and two members from the Interfraternity Council. The result was a less cumbersome and more effective council. Under active leadership, the new council has assumed new responsibilities. In addition to organizing an orientation program for freshmen, council supervises the note services for freshmen, sophomores and juniors and appoints student representatives to faculty committees. Student grievances are channeled through council, which has become an open forum for discussion with the faculty and administration. To fulfill this responsibility, the minutes of each council meeting are distributed to the student body. The new council has firmly established itself as one of the primary student organizations. Through effective utilization of forum discussion and the continued control of committee appointments, it undoubtedly will retain this status.

Another significant innovation in student affairs was the introduction of student representatives to numerous faculty committees. Any Jefferson student is eligible. Applicants are interviewed individually and selection is determined by a Student Council committee. Student representatives have forged a successful relationship with their faculty colleagues, who now have frequent opportunities to elicit student sentiment directly. Similarly, student representatives can observe the actual process of decision-making in areas pertinent to their education and can convey such details to the entire student body through council, eliminating much confusion regarding administrative procedures.

Perhaps the most significant fact is that on many of these committees student representatives are granted full voting privileges. This unprecedented student contribution to administrative decisions has been well received by both students and faculty and significant changes have been accomplished. For example, the admission procedure for minority and accelerated students has been improved. The Curriculum Committee, with an active

student subcommittee, has implemented new programs in the areas of preclinical courses and clinical elective rotations. Lamentably, this committee has been unable to make final disposition on the controversial pass-fail system. However, numerous evaluation sessions have been organized to determine the effectiveness of teaching methods and testing procedures in the preclinical subjects.

An organization that developed as council was restructured is the Interfraternity Council. It met a recognized need for an organization to represent the fraternities collectively. IFC has been effective in coordinating rush activities and social events, in conducting a microscope sale for incoming freshmen and in planning athletic tournaments for the entire student body. IFC is still a young and growing organization and its limitations have not been defined. The fraternities have remained strong and independent but it is probable that IFC will remain their collective representative in the planning of social and athletic events, in addition to becoming a valuable forum for discussion of interfraternity problems and policies.

Meanwhile, the medical fraternities, old Jefferson institutions, have continued to thrive. Indeed, a significant majority of male Jefferson students continue to pledge one of the six houses each year. These provide their members with economical housing and board, friendships engendered in a brotherhood and the most active and varied social schedule on campus. The commons facilities and events, not adequate to replace the fraternity social schedule, have served instead as a valuable adjunct to them. In addition, fraternity members have continued to remain active in other student organizations. For example, fraternity representation in student government has not diminished appreciably in that many members of the Student Council, Commons Board, and other organizations, are also members of fraternities. This indicates that active students usually do not limit their involvement to one specific group.

The health of the fraternities at Jefferson is remarkable when one considers that fraternities at other medical schools have degenerated and, in some cases, disappeared. The answer seems to lie in the fact that Jefferson fraternities do not function primarily as institutions per se, but as groups of individual students with similar goals, bonded together for mutual benefit. As the needs and desires of the students have changed, the fraternities here have responded correspondingly. While it would be imprudent to deny that Jefferson fraternities will experience numerous problems in the future, it is fair to assume that by maintaining a willingness to change when required these organizations will continue to exist as long as they continue to provide educational, economical and social benefits.

Several new organizations have grown up around Jefferson Hall Commons. These include the Commons Board and its newly established Social Committee, which have conducted a fine program, including movies, concerts, lecture series, and TGIF parties. Perhaps the most recent addition to commons activities has been the TJU Choir, which had its first concert this year.

Another organization of recent origin and subsequent development is Ariel, the student newspaper. While attempting to maintain an open forum for controversial discussion, Ariel has suffered from a narrow editorial policy. This is most unfortunate, since astute criticism and constructive suggestions have appeared in certain columns. With the addition of new writers, it is hoped Ariel will adopt a broader editorial policy and become a useful forum for change.

The various Jefferson societies have demonstrated variable modifications resulting from this era of transition. Alpha Omega Alpha, the honor medical society, and the Hare Society have continued to provide program series of academic interest to their members. This year Jefferson was one of five medical schools selected by the national AOA to host for one week a widely known clinician. The Gibbon surgical society, a relatively new organization, has attracted a large membership in its first two years of existence and has an active program. The Sims obstetric and gynecologic society, in addition to providing a general lecture and discussion series, has introduced two new programs of note this year. Members can gain office practice experience in one program. Under another, members act as primary physicians for an expectant family.

Other more specialized societies have experienced lagging interest. The Student Research Society, the Orthopedics Society, and the Pediatrics Society temporarily have ceased to function. Nonetheless, should a sudden surge of interest in one of these organizations become evident, there probably would be little problem in re-establishing them.

In contrast, several new organizations have sprung up in the past three years under the banner of social involvement and have gradually collapsed under the burden of ineffectual organization and poor long-term planning. Indeed, much has been accomplished through the singular efforts of individuals in many areas of student involvement. Nevertheless, with the large number of active organizations now functioning at Jefferson, the opportunity exists for every student to contribute effectively in his own area of personal concern, and he should realize this individual responsibility.

Another organization deserving of mention is Kappa Beta Phi. This society, with some 70 members from the sophomore, junior, and senior classes, is Jefferson's only honorary social fraternity. In addition to holding monthly meetings, Kappa Beta Phi organizes the annual Black and Blue Ball, the only formal social event of the year. Proceeds from the ball are deposited in the Jefferson Student Rotating Loan Fund.

The Student American Medical Association must be mentioned only to cite its inactivity. This general lack of student interest in SAMA suggests a weak bond between the majority of Jefferson students and the national SAMA.

Overall, student activities at Jefferson complement academic pursuits, broaden perspectives, provide necessary recreation, and establish a much-needed forum for the exchange of ideas. In the past few years, Jefferson has changed significantly as an institution, and student activities have followed a similar pattern. Certainly this process will never be complete, as continued improvement will always be desirable.

The current year has been characterized by an improved activities program and by widespread student involvement. Unfortunately a number of students still remain isolated from these activities, depriving their colleagues of a valuable source of communication and themselves of a personal opportunity for social maturation.

gibbon surgical society

OFFICERS
Robert Place
Stephen Silver
J. Stanley Smith

Presidents (ex aequo)

George Speace, Vice President Karen Lichtenfeld, Secretary Sandy Fitzig, Treasurer Dr. Charles Fineberg, Faculty Adviser





alpha omega alpha

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Carol A. Dolinskas, vice president
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hare society

OFFICERS
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Harry S. Cooper, vice president
Stanley Jacobs, secretary
Robert Goldstein, treasurer





Junior Members—Michael B. Baron, Francis J. Braconaro, Gerald L. Braverman, William L. Bressler, Christopher L. Brown, Anthony J. Calabrese, Harry S. Cooper, Joel I. Cossrow, Gregory J. Edinger, Michael L. Eisemann, Marsha J. Fishbane, D. Preston Flanigan, Craig T. Haytmanek, Irwin J. Hollander, Karen M. Lichtenfeld, Fred D. Lublin, Howard D. Pitchon, Jeffrey M. Rosch, Lawrence R. Schiller, Allen Sonstein, Cheryl R. Zaret

student council

1970 OFFICERS

Ronald Grossman, president Glenn Nye, vice president Terrence Carden, secretary William Davison, treasurer

1971 OFFICERS

Glenn Nye, president Michael Feinstein, vice president Joseph Agnello, secretary David Hughes, treasurer



faculty committee representatives



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Academic Protocol: Michael J. Blecker, Beverly C. Borlandoe, Kenneth R. Landow.

Alumni and Public Affairs: David P. Hughes, Ivan H. Jacobs.

Alumni Subcommittee on Student Affairs: Barbara Tenney, Glenn C. Nye, Daniel Brown, Joseph S. Agnello, Jr.

OFFICERS Jeffrey Rakoff, president Bruce Forrest, vice president James McBride, vice president Jerry Klein, treasurer Arthur Brown, secretary

sims society





OFFICERS
Ernest W. Wynne, president
Robin Edwards, vice president
Robert McCorvey, secretary-treasurer

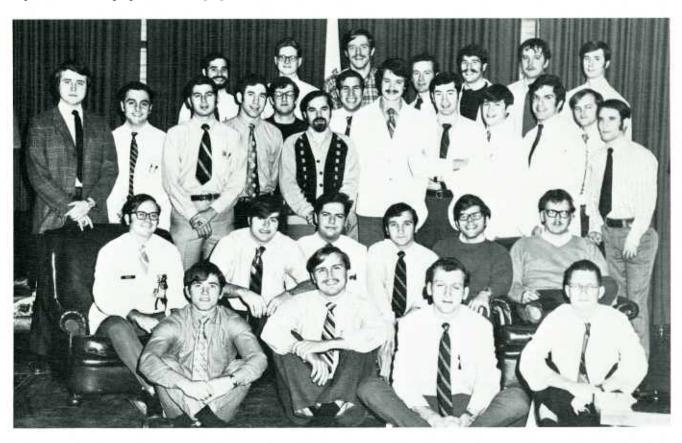
S.A.M.A.

interfraternity council





alpha kappa kappa



Brothers—Gary Altman, Edwin M. Altschuler, Peter C. Amadio, Marc L. Bernstein, John W. Bloom, Gregory P. Borkowski, Louis J. Borucki, William D. Boswell, Jr., John H. Brown, William H. Brubaker, Anthony J. Calabrese, Joseph R. Car, Dennis J. Cleri, Leland D. Cropper, Jr., Burton H. Danoff, Leonard M. DelVecchio, Jr., Michael L. Eisemann, Len E. Ennis, Domenico Falcone, William F. Fell, Jr., Theodore W. Fetter, Thomas W. Fiss, Jr., Frank B. Fromowitz, Bartley P. Griffith, Craig T. Haytmanek, Peter R. Hulick, Bruce E. Jarrell, Bertram D. Kaplan, Franklin C. Kelton, Jr., James A. Kenning, Joseph A. Kuhn, Michael H. Levy, Stephen B. Lichtenstein, Thomas E. Mackell, Francis X. McBrearty, Perry L. Mitchell, Donald L. Myers, William B. Olney, Mark S. Pascal, Frank J. Pearl, Robert V. Peruzzi, Jr., Michael M. Pryor, Mark S. Reuben, Michael J. Schmerin, Stephen H. Smith, Louis P. Soraruf, Barry S. Stein, James F. Suchman, John R. Tyler, David J. Weber, Donald B. Williams

OFFICERS
Robert Lahita, President
Terence W. Starz, Executive Council President
Gerald C. Zabielski, Treasurer
Robert McKay, Steward
Raymond W. Merrell, House Manager
Alan L. Stern, Social Chairman
Charles L. Liggett, Jr., IFC Representative & Recording Secretary
Arthur W. Colbourn, Rush Chairman

Alpha Kappa Kappa was organized September 29, 1888, at Dartmouth Medical School in Hanover, N.H. The Jefferson society was organized at the close of the last century and instituted as Epsilon Chapter, January 6, 1900. The present house is owned by the chapter and stands on the site formerly occupied by the Philadelphia Almshouse, scene of the reunion of the two Arcadian Sweetheart's in Longfellow's "Evangeline".

Louis Clerf, John Gibbon, Jr., George Willauer, Da Costa, and Chevalier Jackson are AK's of fame. Some claim that fraternity brothers swallowed pins for Jackson to extract.

Under the sound leadership of Bob Lahita, the house has once again emerged as a significant part of the Jefferson fraternity system. Outstanding comrades have also extended in significant numbers into other organizations such as Student Council and AOA.

This year the AK's started the year off with a successful rush week and an interfraternity football championship. Under the direction of Alan Stern, the brothers have also enjoyed a variety of social events including the annual Christmas Party and the Spring Fishing Trip.





nu sigma nu

Senior Brothers: Bill Atkinson, Jim Barone, Tony Bescher, Dave Cooper, Skip Davison, Jeff Dmochowski, Jim Dooley, Gray Johnston, Ted Orvald, Gus Schwartz, Joe Seltzer, Dan Sommer, Bob Waterhouse, Butch Wineburgh.

Junior Brothers: Gerry Braverman, Jim Behrend, Dick Brennan, Paul Dainer, Dick Fiorelli, Paul Fitzgerald, Jim Fticsar, Bernie Grumet, Frank Hryshko, Bill Hyde, Jim Mahoney, Bill McCoy, George Speace, Ted Sunder, Jim Wall, Steve Whitnack, Bill Wixted, Tim Wolfgang, Steve Wong.

Sophomore Brothers: Phil Bernini, Norm Braslow, Dan Brown, Vic Celani, Dick Chalfant, Tom Cunningham, Joe Frazer, Ed Kelly, Rick Kramer, Bill Kunsman, Chris Leach, Barry Rosen, Fred Rosenblum, Denny Strout, Jim Tibone, Arnie Traupman.

Freshmen Brothers: Dale Buchbinder, John Cattie, Gil Garrett, Bob Hobbs, Brad Hoch, Jim Kessel, Frank Kucer, Joe Kuchler, Bill Lawrence, Al Meyer, Vince Pellegrini, John Pholeric, Jim Plumb, Bruce Silver, Jim Wojcicki.

OFFICERS

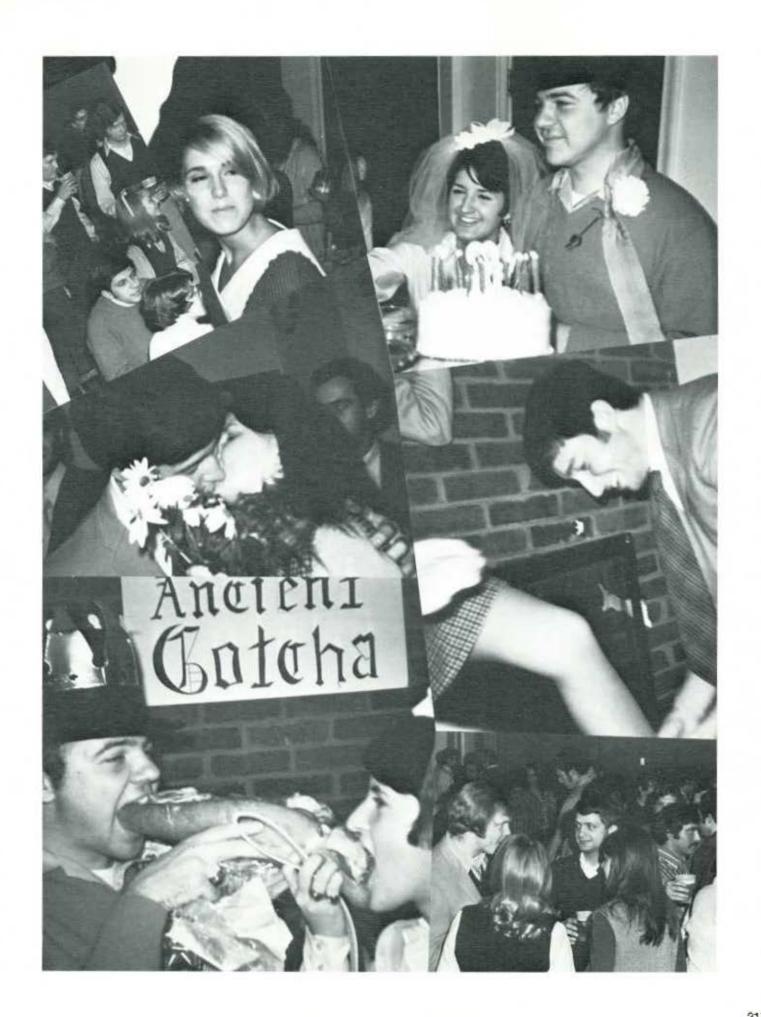
Paul Fitzgerald, President
Ed Kelly, President of Vice
Tom Cunningham, Secretary
Gerry Braverman, Treasurer
Norm Braslow, House Manager
Ted Sunder, Steward
Jim Wall, Social Chairman
Bernie Brumet, Alumni Secretary
Arnie Traupman, Historian
Paul Dainer, I.F.C. Rep.

Nu Sigma Nu, founded in 1882, is the oldest medical fraternity in America. This year the national organization was completely revamped. National dues were abolished and the fraternity now finances projects for medical education and research from interest on its large endowment.

The Nu Sig house, at 1106 Spruce St., recently underwent a complete renovation, with new living room furniture and a second-floor bridge room. This fall, however, the ancient furnace crumbled and before a new one was installed brothers in the house had hairy, matted chests from frigid showers and hoarfrost on their beds.

Nu Sigs have always competed enthusiastically and successfully in athletics. This year's fall effort was divided between football and rugby, Nu Sig comprising a main contingent for the Jefferson-Hahnemann Rugby Club. Nu Sig also fielded two basketball teams, with Bill "Albino" Wixted leading us to an "A League" Championship for the third straight year. But our athletic high point was the annual turtle race in which Jack "Flash" Pholeric gained the coveted title of "World's Slowest Human". Jack was also type-cast as Santa Claus and careened through the Pediatrics wards devastating children and nurses. Afterwards, at Mr. Harper's Christmas Party, we gave toys to disadvantaged kids who were better dressed than we were.

Many other events marked the year. Several brothers were committed in holy deadlock; Jim and Alice Fticsar were married for a second time. Hundreds of gallons of beer flowed through our tap system into bottomless stomachs as we continued our tradition of great parties.



phi alpha sigma



Senior Brothers: Arthur Brown, Thomas Bryan, Gary Buffington, Peter Caravello, George Dennish, Scott Duffy, Phillip Pomerantz, William Ritter, Barbara Tenney.

Junior Brothers: Richard Bell, Louis Blaum, William Bressler, David Burket, Anthony DeNoia, D. Preston Flanigan, Phillip DiGiacomo, Steven Dowshen, Louis Pietragallo, Robert Rinaldi, Barry Skeist, Thaddeus Szydlowski, Ernest Wynne, George Zlupko, Richard Fieo, Lawrence Olsen.

Sophomore Brothers: Paul Bialas, John Blanch, Ben Bradenham, Alan Brosof, John Cassel, John Cochran, Anthony Colatrella, John Falker, Jerry Glenn, Alan Hoover, Robert Good, Joseph Jacobs, David Jacoby, Harry Katz, Charles Korbonits, Gary Levin, Paul Mangienello, Larry Miller, Michael Quinlan, David Paul, Mark Rayner, Alan Resnik, David Rogovits, Marc Rosenshein, Lee Stelzer, Ronald Souder, Frank Taylor, Joseph Thomas. Freshmen Brothers: Ward Becker, Joe Berger, Albert Blumberg, David Boyd, Robert Breckenridge, Roy Cameron, Thomas Campbell, Neal Chadwick, Lee Denlinger, D. David Dershaw, Ray DiPhillips, Edward Drass, Ray Gasperi, Steve Gordin, Mitchell Greenspan, David Harding, Ken Jaffe, Gary Kaskey, Wesley Kerschbaum, Tom Klotz, Michael Kukucka, Larry Leichter, Mick Leo, Ken Lewis, Steve Peikin, Alan Roberts, Ken Savage, Robert Sklaroff, Alfred Vasta, Bruce Vanett, Michael Wenof, Hal Wighton, Ernie Yim, Steve Zamore.

OFFICERS

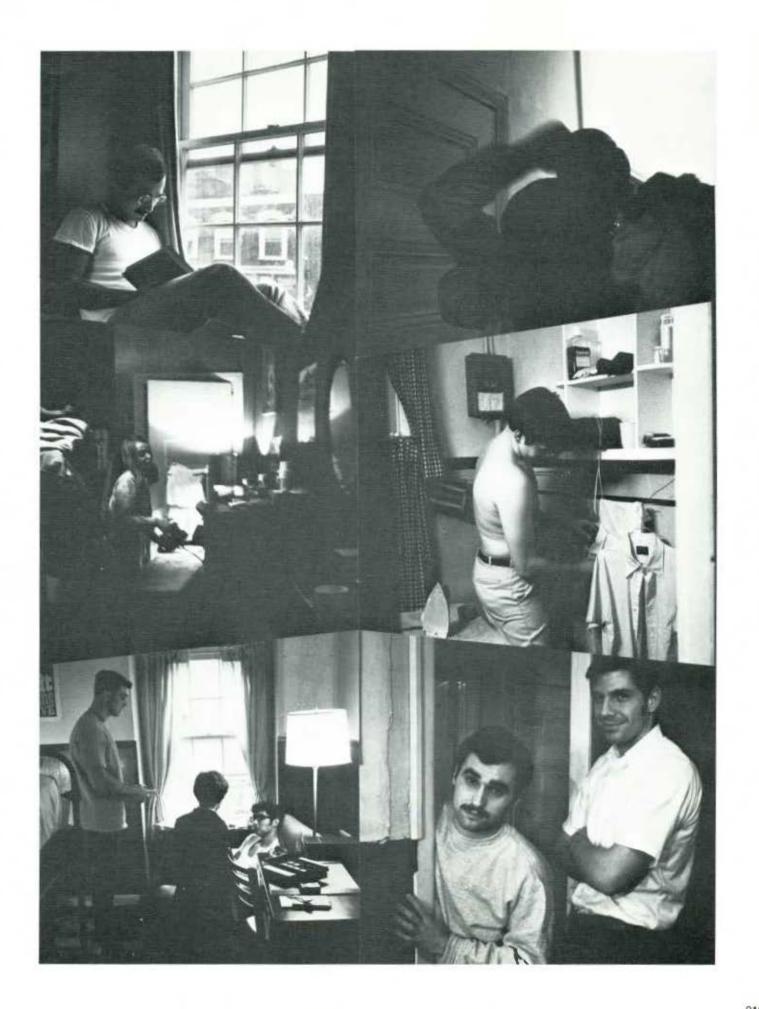
Thomas M. Bryan, President
Frank M. Taylor, Vice-President
Alan D. Hoover, Secretary
Harry R. Katz, Treasurer
Paul M. Bialas, Social Chairman
John M. Falker, Leo Stelzer, Jr., Stewards
Robert P. Good, IFC Representative
Anthony M. Colatrella, House Manager

The 1970-71 year at Phi Alpha started—with a bang—a couple of good rush week parties and a net of 37 new members, believed to be a high in the history of the fraternity. Hats off to rush co-chairmen Ron Souder and Alan Brosof.

There was another bang later in the fall as the aged oil furnace in the basement gave a last gasp and rolled over dead. This coincided with the first real cold spell of the year, so the sophomores studied for their pathology final huddled in blankets around electric heaters. The furnace was soon replaced by a new gas heating system and all was once again warm and dry (after a new roofing job). These two major improvements, along with extensive painting and other fix-up jobs has left the old place on South 10th Street in pretty good shape.

For the first time there was enough interest in the house to field two football teams. The "B" team managed to win their last game, while the "A" team, in an effort to repeat as champs, fell one game short, losing only to AKK, 6-2.

Social Chairman Paul Bialas concluded a very successful term with the best IFC open party of the year. The highlight of the fall social calendar was the initiation dinner-dance in November at Jefferson Hall where the seniors presented their annual "Outstanding Teacher Award" to Dr. Gary Carpenter of the department of pediatrics.





phi chi

The shrill cry of REEE-FILLS from the kitchen, spontaneous parties in room 4, midnight snacks at Ted's Society Hill Restaurant were all part of the informal personality of Phi Chi this year. From the Fall rush parties through the Spring alumni banquet, parties were marked by an unquenchable thirst for beer, music and the fairer sex. Thanksgiving was marked by a magnificent dinner prepared by Brothers Spigel, Falk, and Garcia, with the Wives' Club providing 18 varieties of desserts. Speegs maintained his gustatory prowess throughout dinner, consuming mountains of turkey, filling, strawberry cheesecake and prophylactic Mylanta postprandially. The house, ably led by Presiding Senior Floyd Casaday, and later in the year by Joe Mullen, was host to a group of orphans at the annual Christmas Party.

The football team, which turned in another winning season, was quarterbacked by the Pittsburgh Pistol, Stu Scherr. The culmination of the basketball season was reached when the freshman and sophomore team was thoroughly trounced by beerbellied upperclassmen. Baseball season saw a large complement of players returning to a team that had not seen defeat for three years. Enthusiasm for the fraternity house was vigorously demonstrated by the number of brothers who helped in the construction of a new ceiling for the bar. Many brothers distinguished themselves in the Jefferson community, as can be noted by the substantial Phi Chi representation in Student Government and Alpha Omega Alpha.

Senior Brothers: Christopher Balkany, John Belis, Floyd M. Casady, Robert E. Chandlee, Robert Davidson, Edwin P. Ewing, Robert B. Falk, Stephen S. Frost, Francisco J. Garcia-Torres, Michael Geha, Eric Gormally, Ronald Grossman, William Hamilton, David Hennessey, Ronald H. Hirokawa, David Jones, Barry Klein, Clifford Lynd, James G. McBride, Thomas F. Mullins, Robert Place, Jeffrey Rakoff, Paul Raymond, Jeffrey Rubin, Edward B. Ruby, Stuart Scherr, G. Thomas Spigel, Timothy Urbanski.

Junior Brothers: Howard Caplan, Herbert Caskey, Paul Cohen, Richard Doering, Rodney Dorand, Michael Dotsey, Philip Dupont, Stephen Flynn, Charles Gordon, Anthony Interdonato, Robert Jacobs, Alex Juhasz, Ronald Kabler, Myles Krieger, Allan Lenetsky, Ronald Levine, Anthony Nespoli, Morton Rayfield, Anthony Rooklin, Edward R. Russell, Carl Silberman.

Sophomore Brothers: Rodney Appell, John Benner, Frank Borgia, Philip Fuller, Larry Goldstein, George Gustainis, Ivan Jacobs, Anton Kemps, Robert K. Landow, Elliot Leisawitz, Joseph Mambu, James McGraw, Joseph Mullen, Milton Packer, Cyril Puhalla, John Sebastianelli, Eugene Shaffer, Paul Smey, Paul Zamostein.

Freshmen Brothers: Joseph Angello, Stephen Baez, Bruce Berger, Paul Berguson, Louis Broad, William Di Cuccio, Bruce Ellsweig, Joseph Giletto, Antonio Granda, John Hermanovich, R. Brooks Jeffrey, Bruce Meinhard, William Miller, Martin Mollen, Mark Pearlman, Joel Rosenfeld, Philip Seaver, Ronald Smoyer, Charles Stotler, Guillermo Vazquez, Robert Wasnick, Walter Wrenn.

OFFICERS

Joseph P. Mullen, Presiding Senior
Anton R. Kemps, Presiding Junior. .
Bruce Berger, Bookkeeper
Mark Pearlman, Charles Stotler, House Managers
Ken Landow, Treasurer
Milton Packer, Secretary
Stuart Scherr, Eugene Shaffer, Social Chairmen
Charles Stotler, Judge Advocate
Bruce Ellsweig, John Hermanovich,
William Miller, Stewards
Joseph Agnello, Member-at-large
Robert Jacobs, IFC Representative
Herbert Caskey, Alumni Chairman
Paul Berguson, First Guide
Ron Smoyer, Second Guide





phi delta epsilon

In an attempt to prevent the brothers of Phi D E from having their minds crammed too full of medical knowledge, our president, Joel Baskoff, has put the emphasis this year on combining some cultural activities with the social ones. The response was wildly enthusiastic. A large contingent of brothers and escorts attended a local production of Shaw's Arms and the Man, the quality of which was attested to by the conspicuous presence in the audience of Pennsylvania's new governor and first lady. We also attended Moliere's The Amorous Flea, and more such events are planned. These, of course, were followed by parties to satisfy the terpsichorean and ethanol needs of the brothers. To further take advantage of the cultural opportunities of a large city, a jaunt to scintillating Camden is planned.

OFFICERS
Joel Baskoff, President
Albert Fornace, Vice-President and Social Chairman
Stephen Volk, Secretary
Philip Hoffman, Treasurer
Fred Gottlieb, House Manager



Other activities include intramural sports, in which Phi D E has always had an incredible record (one way or the other), the initiation affair with Temple and Hahnemann chapters and the annual Aaron Brown Memorial Lecture by a prominent member of the medical profession.

Special mention must be made of House Manager Fred Gottlieb, who has endured the most ulcerogenic conditions in his efforts to keep the house in adequate repair. His enthusiasm spread to the other brothers, who scraped, swept, and painted the house into shape. Fred has found his niche at last.

Our congratulations to the class of 1971.

Brothers: Joel Baskoff, Alex Baskous, Larry Caputo, Jay Castle, Albert Fornace, Bruce Forrest, Alan Friedman, Fred Gottlieb, Mark Heiser, Philip Hoffman, Steven Klinman, Lowell Kobrin, Scott Lampert. Michael Lechman, Michael LeWitt, Christopher Riley, Ronald Rosenberg, Lawrence Schiller, Myles Schneider, Barton Schneyer, Mark Vizer, Stephen Volk, Jay Weisberg, Mark Widome, Dennis Young.

Dimension is great at Theta Kap. Variety and uniqueness, coupled with see-saw apathy-enthusiasm make our small yet resilient microcosm a prototype for fraternity living. Where else could the wild Basque rebel yell of Toulouse-Levesque blend joyously with Brent's blues harmonica or with the aroma of Mama Frank's herculean culinary triumphs? Surely this is a continuation of the Golden Age.

OFFICERS
Joe Wasserman, President
Wayne Rensimer, Vice president
Frank Redo, Treasurer
Jim Redka, Secretary
Andy D'Arey, House manager

theta kappa psi



Brothers: Jim Noone, Randy Read, Bob Rafal, Dave Brent. Tony Dougherty, Doug Gersh, Mike Godfrey, Chuck Maxin. Art Sitelman.

Honorary members: Big Jim Boinick, Bill Kesel, Razzu.

jefferson hall commons





"'So, whatta you expect for 15 cents a throw?"



"My secret? I wait for inspiration. Only then do I write."

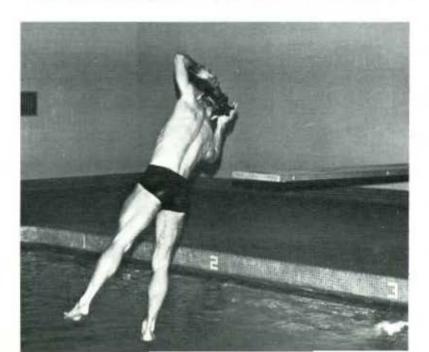




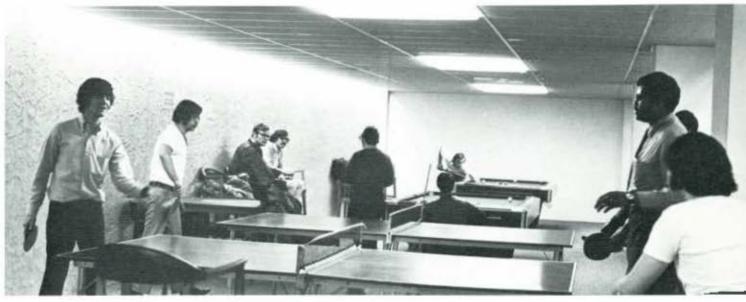














black and blue ball

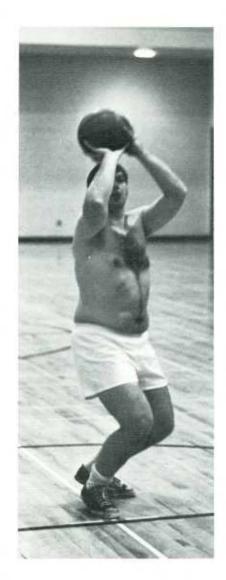
Kappa Beta Phi



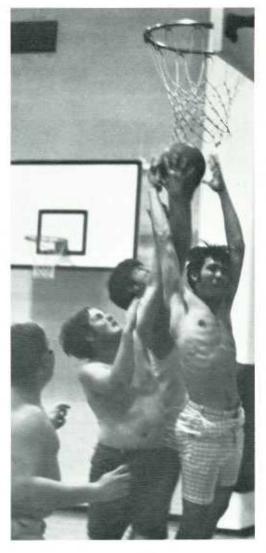
OFFICERS Floyd Casaday, president James McBride, vice president Frank Garcia, secretary Robert Falk, treasurer













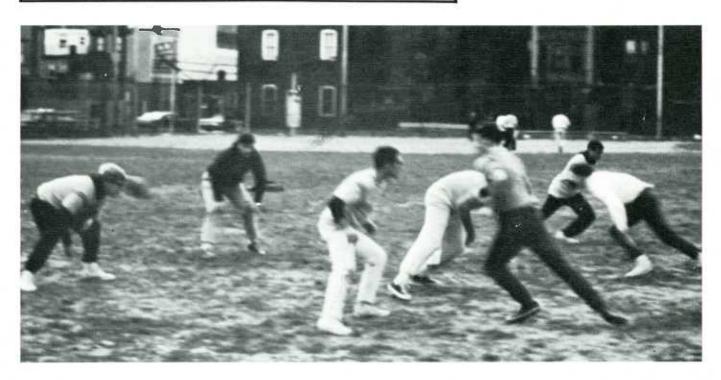
athletics

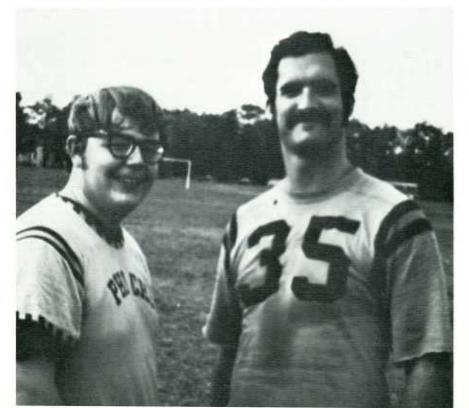
trophy winners

basketball nu sigma nu

football alpha kappa kappa

softball phi chi

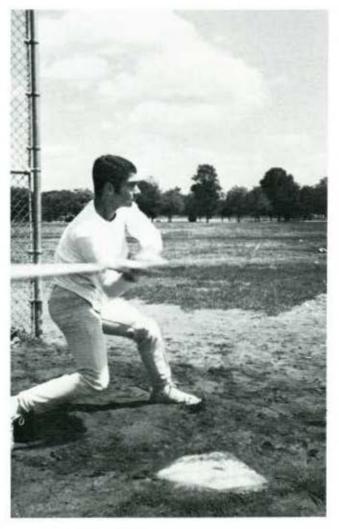










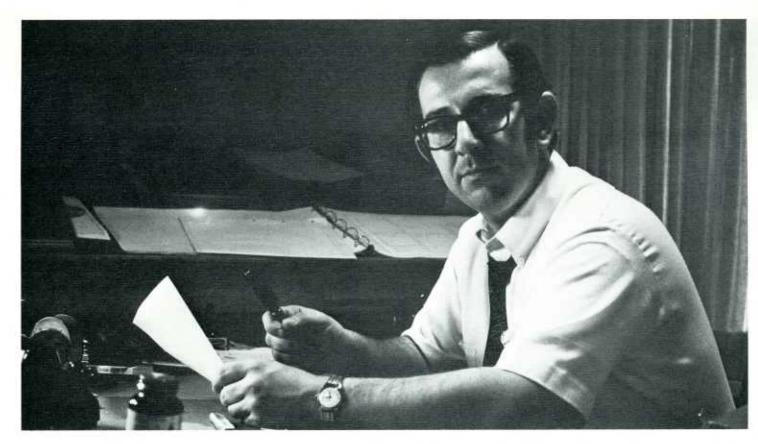












Terry Carden-little change in style

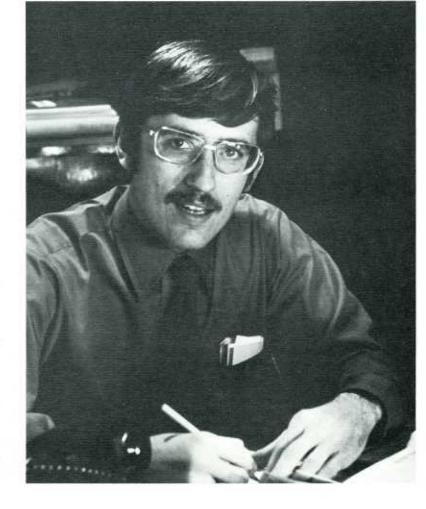
efforts of the 1971 clinic

Business Manager Thomas W. Fiss, Jr., '71 Photography Editor Stephen Smith '72 Contributing Editors ... Floyd M. Casaday '71 Frank X. McBrearty '71

McBride '71, Thomas F. Mullins '71, William Brubaker '72, William Boswell '72, David Paul '73 David A.

Jacoby '73

Barone '71, Carolyn Crawford '71



Tom Fiss-our unsung hero

A year book is a tradition. It changes slightly from year to year—and significantly over a decade—but retains many of the features of its predecessors. One of the first and most important tasks of a new staff is to decide which of these features are to remain and which are to be discarded. This year's staff—with the same editor and business manager as the 1970 Clinic—decided to make few changes in style since we were more than pleased with last year's products.

We have continued the practice of publishing candid photographs throughout the senior section. Many of these depict scenes of Philadelphia and environs. We expect they will be more appreciated in later years when our memories of these days in Philadelphia are dim and fond. Also continued this year is the essay assessing the student activities program for the year. Contributing Editor Floyd Casaday not only prepared the essay but supervised the entire activities section.

Perhaps the major change this year is the lack of a traditional senior class history. A reading of histories published by the past few graduating classes reveals that they can be categorized as either sour grapes criticism or pedestrian blow-by-blow accounts of the class' four-year experience. We were fortunate in being able to draw on the considerable talent of Contributing Editor Frank X. McBrearty, whose entertaining alternative to the usual class history should be enjoyed by all.

The unsung hero of this year's book is Tom Fiss, our energetic and determined business manager. In the face of a national recession that cut into both our advertising and patron revenue he continued to struggle to bring in the necessary funds. As always, faithful alumni and parents contributed the bulk of our income. But without the extra money raised from advertisers, this year's Clinic certainly would have gone under. Hopefully next year will be better—for both The Clinic and the economy. But given this year's conditions it is unlikely any other business manager could have done so well.

So, now all the work and plans for the 1971 Clinic are over. We can see the fruits of our labor, but it's too early to assess our effectiveness. Hopefully, the book will be a credit both to Jefferson, which has set the scene for the most rewarding period of my life to date, and to the Class of 1971, of which I am proud to be a member.

Tenence 1 Culen Ja

Terrence S. Carden, Jr. '71 Editor



Frank McBrearty—an entertaining alternative





Steve Smith-rarely without a camera



internships

RICHARD W. ALTREUTER, M.D.

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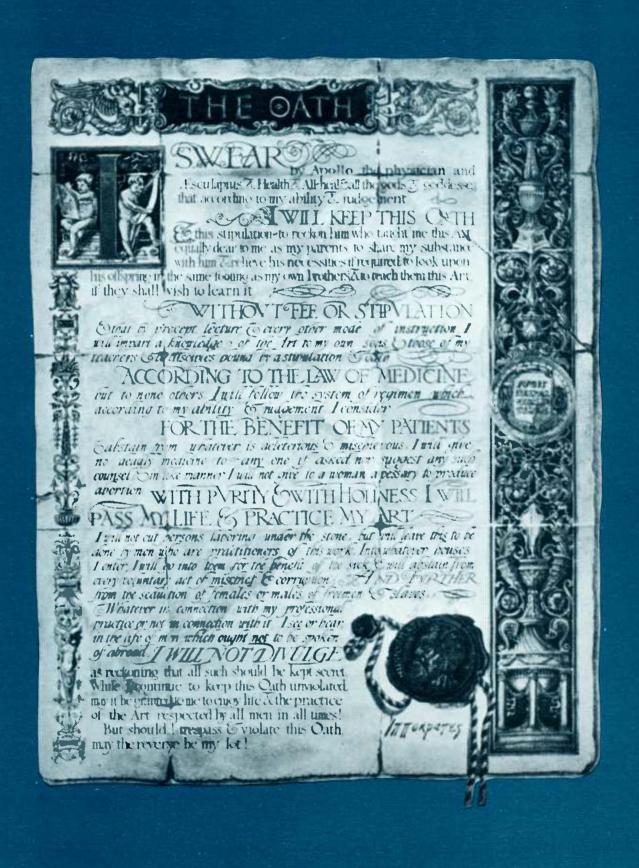
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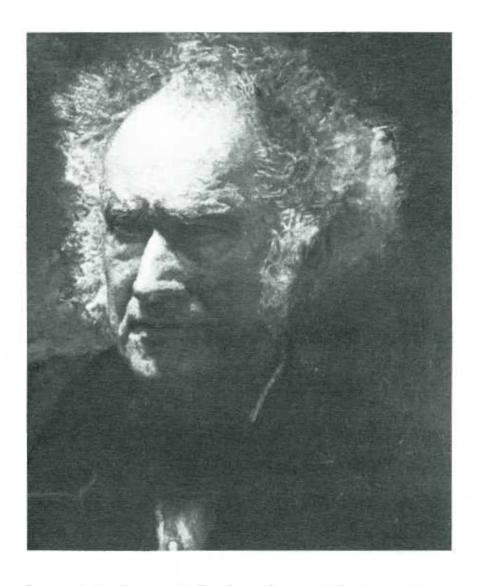
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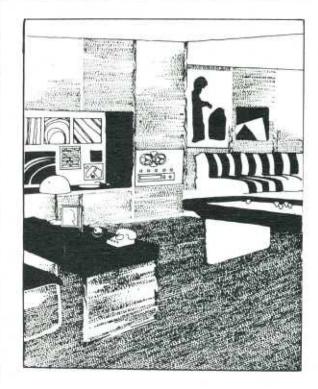
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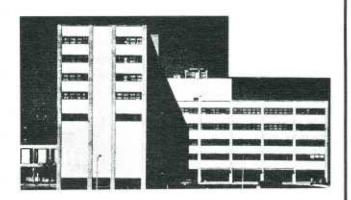
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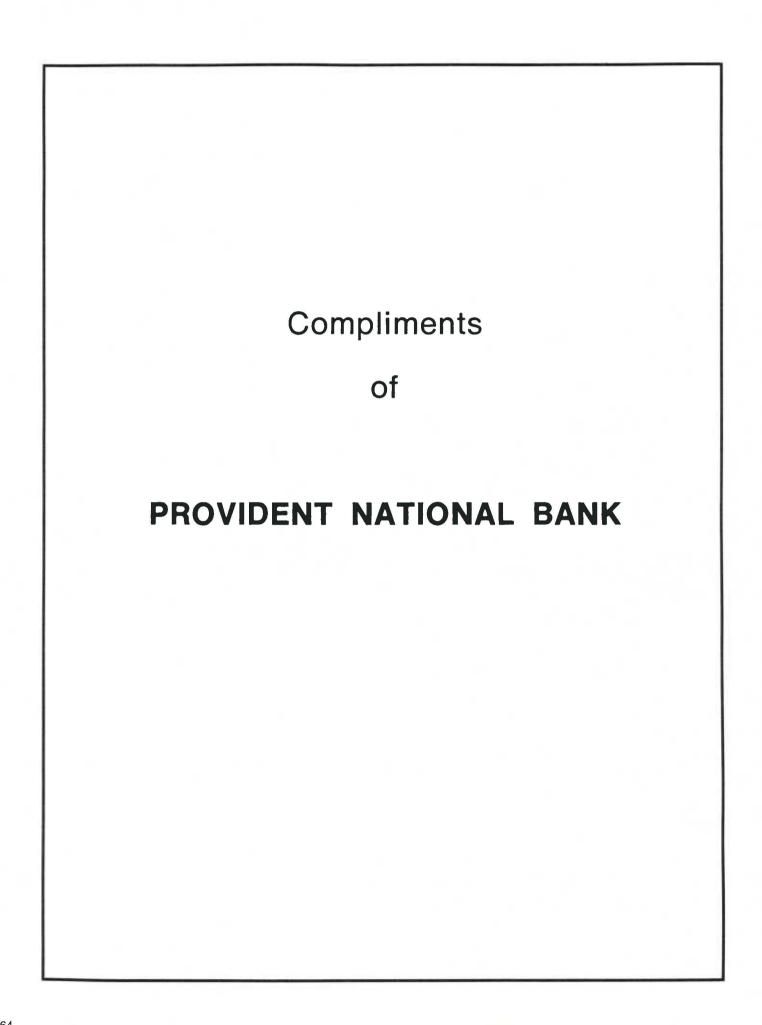
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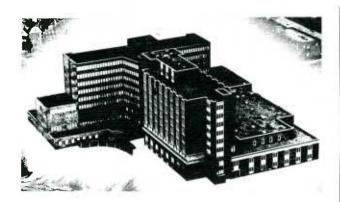
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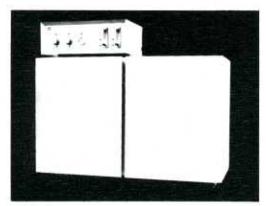
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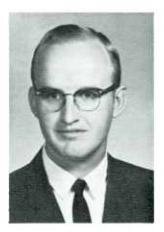
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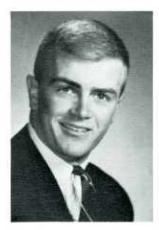
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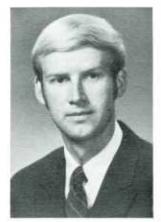
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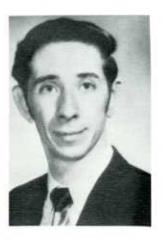
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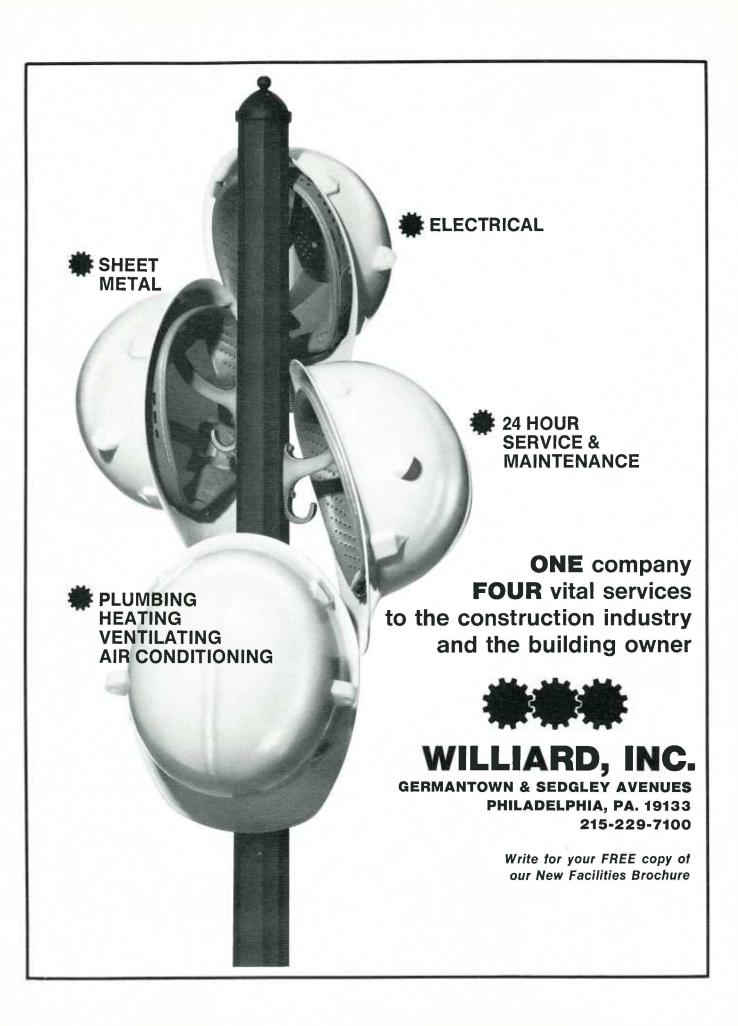
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