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Health Care of Religious and Clergy

Diocese of Alexandria, La.

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The service of our priests, nuns and brothers cannot be evaluated in terms of money. No matter how much their work is worth financially, the spiritual inspiration which is part and parcel of themselves and their work is of infinitely greater value. However, their ability to perform their duties depends, to a great extent, on their physical health. Many large business firms recognize this fact and require their executives to have annual physical examinations in order to detect curable or preventable diseases.1-2 This has been shown to increase the functioning capacity and years of service of the individual.

Realizing the great value of such an

FEBRUARY, 1964

annual physical examination for preventive as well as curative medicine for the priests and religious in his diocese, Bishop Charles P. Greco of the Diocese of Alexandria, La. had the foresight to sponsor the pilot project for the Health Care of Religious Committee of The National Federation of Catholic Physicians' Guilds and The Catholic Hospital Association, in 1960. This project was presented to the Congregation of Religious in Rome and to the IX International Congress of Catholic Physicians in Munich, also in 1960.³

MATERIAL

The Diocese of Alexandria comprises 24,000 square miles of the northern half of the State of Louisiana containing about 82,000 Catholics. There are approximately 400 nuns in the Diocese in elementary and high schools, six general hospitals, St. Ann's Foundling Home and St. Mary's Home for Retarded Children and other institutions. There are 175 priests and 25 lay brothers. The Daughters of the Cross have their Motherhouse in the Diocese and there are 90 seminarians in Maryhill Minor Seminary in Alexandria.

PROJECT

The primary purpose of this program was to encourage every priest,

³HOLOUBEK, Alice Baker, M.D., "Health Care of Religious and Clergy" IX International Congress of Catholic Physicians, Munich, 1960, Otto Muller Verlag, Salsburg.

23

^{*}Members, Committee on Health Care of Religious and Clergy of the National Federation of Catholic Physicians' Guilds,

Both are members of the Shreveport Guild.

⁽The Medical Examination Forms may be obtained from The Catholic Hospital Association, 1438 So. Grand Blvd., St. Louis 4, Missouri. Prices: Entrance Examination Form, 50 for \$5.00; Annual Physical Examination Form, 50 for \$3.00; Medical Identification Card, 50 for \$3.00.)

¹SCHENTHAL, Joseph E., M.D., "Multiphasic Screening of the Well Patient," J.A.M.A. Vol. 172, No. 1, p. 1, Jan. 2, 1960.

²ELSOM, Kendall, A., M.D., SCHOR, Stanley, Ph.D., CLARK, Thomas W., M.D., ELSOM, Katherine O., M.D. and HUBBARD, John P., M.D., "Periodic Health Examination," *J.A.M.A.*, Vol. 172, No. 1, p. 7, Jan. 2, 1960.

brother and nun in the Diocese to see his or her physician for a complete physical examination and later to have an annual check-up.

Two forms were developed by the Health Care Committee of The National Federation of Catholic Physicians' Guilds for this program.

HEALTH CARE QUESTIONNAIRE

This four page questionnaire includes the past history, family history, inoculation record, system review and present illness in the form of questions. The examinee fills out and answers the questions by a check in a "yes" or "no" column. This form is taken to the physician who may elaborate on the history where necessary, and who does a complete physical examination. A hemoglobin and urinalysis and roentgenogram of the chest are routinely taken. Other laboratory tests, if needed, are ordered by the physician. After the examination and laboratory work is completed, the physician discusses the findings with the examinee. He then requests permission to report the findings to the immediate religious superior. In this way, definitive medical and surgical procedures, changes in diet or working conditions can be made in order to prevent further illness or effect a cure.

ANNUAL CHECK-UP

A one-page check-up form is used annually for re-examination and is attached to the original Health Care Questionnaire by the examining physician. At this annual check-up, any laboratory work which may be needed is ordered. Again a report is made to the superior, if the examinee permits it.

Both of these forms remain in the files of the personal physician and are transferred to the new physician when the examinee is assigned to another area in the Diocese.

PHYSICIAN COOPERATION

All of the one hundred Catholic physicians in the Diocese cooperated in this project. Almost all of them are members of the three Catholic Physicians' Guilds located in Monroe, Shreveport and Alexandria. In addition, an equal number of non-Catholic physicians also volunteered their services.

INFORMATION TO NUNS AND CLERGY

1. The Diocesan newspaper featured a story on the Health Care Program which discussed the necessity of a complete examination every year for everyone and outlined the method of filling out the Health Care Questionnaire.

2. Instructions were sent to all members of the Catholic Physicians' Guilds in the Diocese.

3. The Program was discussed at staff meetings of the Catholic hospitals.

4. Two physicians explained the program to the priests of the Diocese at the Bishop's regular monthly meeting with them. Examples were cited from recent medical literature listing the diseases that were found to be asymptomatic on routine examinations. The simplicity of the program was explained. The Bishop endorsed the project to the priests and all were encouraged to take part.

5. The program was also explained to the teaching nuns at the annual Diocesan Teachers' Convention. The Program was again endorsed by the Bishop and all were urged to cooperate.

6. A similar explanation was given to the nursing nuns at the meeting of the Diocesan Council of Catholic Hospitals.

7. The use of the Health Care Form as an entrance physical examination to the seminary or notiviate was discussed

LINACRE QUARTERLY

6.33

24

with the Rector of the Maryhill Seminary and the Mother Superior of the Daughters of the Cross. The Health Care Forms of the seminarians and novices remain in the files of the seminary or novitiate house. All records of illnesses are added while they are in their training period. These records are transferred with the student to his or her new assignment when continuing studies elsewhere. Finally, this entire record is sent to the physician who will care for the priest or nun after ordination or final profession of yows.

PROCEDURE

1. All priests were sent a Health Care Questionnaire form from the Chancery office with a covering letter urging them to take it to their personal physician and have an examination.

2. All teaching nuns were sent a similar form from the office of the Diocesan Superintendent of Education.

 All nursing nuns were sent the form from the office of the Diocesan Superintendent of Catholic hospitals.

4. Health Care forms were sent to each applicant for the seminary or to the novitiate with instructions to have a private physician complete it and enclose it with their original application.

FOLLOW-UP

As every new priest or nun is assigned to the Diocese, a Health Care form is mailed to him or her with a covering letter explaining the program and encouraging participation.

HEALTH CARE OF RELIGIOUS COMMITTEE

The Bishop appointed a Health Care of Religious and Clergy Committee composed of eight physicians, one dentist, three priests and two nuns. This committee meets regularly to make such recommendations as are necessary to the Bishop to facilitate the program.

At present several sub-committees have been appointed to study special projects. Among these are included:

a. Sub-committee on hospitalization insurance for nuns. Most of the clergy carry their insurance in a group plan in the Diocese. However, this has not been arranged at present for nuns. This committee will study the program and make proposals.

b. Personality Study committee, to study methods of personality testing for admission to the seminary and novitiate.

c. Recreation committee. The Bishop has always recommended that the clergy take one day of rest and relaxation a week, and an adequate vacation. He recommended to the committee that the nuns should have the same periods of rest. A sub-committee was appointed to help facilitate these recommendations.

SUMMARY

An effective program of Health Care of Religious and Clergy has been operating in the Diocese of Alexandria. The primary purpose is to prolong the health and functional capacity of the limited number of priests, nuns and brothers available in the Diocese and thereby enable them to perform their duties to God and the Church more effectively and for a much longer period of time.

Dr. James T. Nix, chairman of the National Federation's Health Care of Religious Committee, would like the names and addresses of all physicians who have participated in any local program concerned with health care of religious and priests. Please write to him: 1407 So. Carrollton Ave., New Orleans 18, Louisiana.

FEBRUARY, 1964