

# United Fund Drive To Be Held During October

The 1967 United Fund Campaign Drive at Jewish Hospital has been scheduled for October 9-23. The goal of the Hospital this year is \$13,018, based on a fair share gift of one hour's pay per month per employee, through the payroll deduction system. The city-wide goal is \$11,200,000.

Boris Axelrod, director of Food Services, has been appointed chairman of the 1967 Fund Drive. The campaign slogan this year is, "Hope Is In Your Hands." At the Hospital, reminders in the form of small cards with two ducks flying "United for the Fund" were distributed to employees.

During the two weeks from October 9-23, employees will be invited by their team captains to have coffee and view the United Fund film, "The Hour Has Seven Days."

The film illustrates examples of the nearly 500,000 persons in St. Louis, St. Louis County and St. Charles County who are served each year by the United Fund.

In 1966 Jewish Hospital received \$245,590 from the United Fund to help care for indigent tients of all races and creeds.

This year, the number of agencies has increased to 119, includ-



ing the Lutheran Altenheim Society and Mental Health Association.

The funds are used to support young and old; handicapped and physically disabled; victims of fires and disasters; armed forces personnel, and lost and confused travelers.

In 1955, St. Louisans, critical of a multiplicity of drives and appeals which confused donors and over-taxed volunteers, instituted one inclusive United Fund.

This single agent of community responsibility immediately reduced expense and increased fundraising efficiency while permitting optimum use of time and energy of volunteers.

In its 13-year history the United Fund has provided its member agencies with \$110,202,-548.

These funds, as well as those to be raised in the 1967-68 campaign are allocated to member agencies on the basis of carefully appraised community-wide needs.

The allocation process is the responsibility of a 120-member agency called the Agency Relations Committee. The Committee is staffed by businessmen, professional and labor leaders in the city.

# **Electronic Data Processing Steps up to New Computer**

The Jewish Hospital has announced plans to increase its data processing capabilities through the installation of an IBM 1401 computer.

Vernon Spradling, director of Electronic Data Processing, said "The new 1401 will be ready on

verted from the 1440 to the 1401 format.

About one-third of the Hospital programs are for uses outside the business office.

Medical Records makes use of the computer for analysis of discharges, disease and operative in-



tor of the Department of Psychi-

atry has announced the appointment of Thomas D. Hartnett, M.D., to assistant director of the Department.

Dr. Hartnett Dr. Hartnett has been acting director of the Department of Psychiatry at John Cochran Memorial Veterans Hospital in St. Louis.

# Surgical Intensive Care **Unit Nears Completion**

The new nine-bed Surgical Intensive Care Unit is scheduled to open November 1, 1967.

The U-shaped unit is located immediately adjacent to the operating and recovery rooms where doctors, anesthesiologists, and nurses are available in any emergency.

The patient rooms are on the

Initially, four patients can be monitored. However, conduits have been installed to all the rooms for additional monitors at a later date.

Suction and oxygen equipment have been built into the wall of each room.

or about November 1, 1967.'

The smaller 1440 computer, in use at the Hospital for the past two years, has been operating the equivalent of two full shifts a week.

The new computer will provide a substantial gain in processing speed. For example, time cards and time sheets which require thirty minutes to run on the 1440, will take only six minutes on the 1401; payroll checks on the 1440 take approximately 45 minutes and on the 1401, only 10 minutes.

#### **Improved Controls**

The larger storage capability of the 1401 will allow improved error controls to be instituted in the programs. Mr. Spradling reported that the Hospital has approximately 90 different programs in use. These have already been con-

dexes.

Purchasing and Pharmacy have a control inventory on all items kept in stock in the storeroom and on all drugs stocked at the nursing stations. Bio-Chemistry runs quality-control checks with the computer.

#### **New Quarters**

Electronic Data Processing will move to the space now occupied by the Admitting Office; the present key-punch room will be converted to an interviewing office; the General Accounting Department will be moved to the former Brand Room area. The lobby on the first floor is to be used to accommodate patients waiting to be admitted, and the present space now occupied by Electronic Data Processing personnel will be converted into offices for reservation clerks.

He received his medical degree from the University of Ottawa, Ontario, Canada. His pre-medical studies were performed at Loyola University, Chicago, Illinois.

He served his internship at Ottawa General Hospital, and his residency at John Cochran Memorial Veterans Hospital.

Dr. Hartnett is a member of the American Medical Association, the American Psychiatric Association, and the Eastern Missouri Psychiatric Association. He began his duties at Jewish Hospital on August 21.

Dr. Hartnett and his wife, Anna (also an M.D.,) live at 114 Trevillian, Glendale, Missouri.

perimeter of the U-shape. The nurses' station is in the center, allowing personnel to see into each room. The partitions between the rooms are glass from the ceiling to forty inches above the floor. As a result, the nurse can see into rooms on either side when she is standing in one of the rooms.

The new unit consists of a 2-bed room, and 7 private rooms. The capacity can be increased to 11 beds by using the two large private rooms as 2-bed rooms.

#### Modern Equipment

Parametron solid-state monitoring equipment manufactured by Conductron-Missouri is available for monitoring heart rate, EKG, venous and arterial blood pressure. Ultimately, the additional parameters of diastolic and systolic blood pressure will be installed.

#### **Trained Nurses**

The head nurse for the unit is Miss Elsie Null, R.N., who took a four-week training course on surgical intensive care in September, 1967, in San Francisco, California.

Nine specially trained registered nurses are planned for the unit. They will be assisted by four practical nurses, two nurseaides, three orderlies, and three unit secretaries.

The ratio of registered nurses to patients will be one to three.

Friends and relatives of the patients in the Surgical Intensive Care Unit will use the 2-Steinberg Waiting Room. Each patient may have one visitor (immediate family) for five minutes each hour. If a patient is receiving treatment or sedation is in effect, nursing personnel will alert the family to the procedure.

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Miss Toni Perring, R.P.T., has joined the staff of Physical Therapy. She formerly worked at the Kansas University Medical Center, Kansas City, Kansas.

Miss Naomi Burks, R.N., and Mrs. Margaret Petruska, R.N., have joined the teaching staff of the Jewish Hospital School of Nursing. Both are graduates of St. Louis University.

Phillip Bassin, associate director, Jason P. Blake, director of Materials Management, and Paul M. Ward, administrative resident, attended the American Hospital Association Convention in Chicago, Illinois, recently.

John W. Ash, R.N., has joined the staff of the School of Nursing as evening instructor. He is a graduate of the nursing program at Belleville Junior College.

Miss Margaret Loh, R.N., director of nursing, attended a meeting in New York City, September 21, as a committee member for the American Nurses Association and National League for Nursing. The purpose of the meeting was to develop and review teaching tools for nursing administration.

Robert J. Hickok, R.P.T., coordinator, Department of Long Term Care, served on the faculty for a seminar on "Out of Hospital Physical Therapy Services" at Stanford University, Palo Alto, California. He presented papers "Home Evaluations" on and "Patterns of Organization for Home Health Services."

# **International Employees Enrich Hospital**

Hundreds of skilled employees make up the Jewish Hospital team. This dedicated group consists of many different nationalities.

Some of these "international employees" have been in this country more than 20 years; others have been here only a few months. Some have become citizens of the United States; others plan to return to their homelands.

Their positions at Jewish Hospital range from purchasing to accounting; from the laboratories to the operating rooms.

Several of these employees were interviewed. The friendliness of the American people and particularly those at Jewish Hospital was stressed by everyone interviewed. Without fail, each person interviewed expressed surprise at the kindness and interest shown in them ... especially when they were new here and needed help.

Miss Christina Reilly, receptionist in the Moses Shoenberg Nurses Residence, traveled to this country from Ireland by the S.S. America in 1952.

Miss Reilly recalls her train ride to St. Louis from the East coast, "I was so afraid of missing St. Louis that everytime somebody would start to get off the train . . . I'd gather up my bags too. Time and time again I'd ask the conductor 'Is this St. Louis?'. Finally, in exasperation, he said, 'Lady, please have a seat. I'll tell you when we

get to St. Louis'." Miss Reilly became a United States citizen in

Mr. Sal Rozes, cost clerk in accounting, arrived in this country from Poland in 1951. He left the country during the mass exodus after the end of World War II. He caught a ride to this country on a troop ship.

Upon arriving, he was most impressed by the skyscrapers of New York City.

Mr. Rozes became a United States citizen in 1957. He was employed by Jewish Hospital in 1959.

Mrs. Tina Ura left Southampton, England, in 1946 to come to this country to marry an American serviceman.

Having just completed a visit to her home country in August, Mrs. Ura had a renewed basis for comparison. She said, "England is still old world ... this is the new world. I really believe that in the United States the sky is bluer and the sun brighter . . . this country is truly vast.

Mr. Jean B. Cineas, medical technologist in the

He came to this country in 1952 when encour-

His first impression of this country was the aroma

aged by his cousin who was an intern at a St. Louis

of food. Even though the country smelled like

food, he had his greatest difficulty in adjusting to

cational opportunities available in this country.

Bio-Chemistry Laboratories, was born in Cap-

"Having worked at hospitals in both countries, I feel that Jewish Hospital is much more progressive. The doctorpatient relationship is also better in this country. The patient's condition is more thoroughly explained to him by his doctor than in England.

Mrs. Ura, an occupational therapist assistant, has been a United States citizen since 1957.

Mr. Cineas

seasoned. He has developed some favorites since coming to our shores. He likes steaks and fried chicken very much.

met in London.

Haitien, Haiti.

hospital.

Mrs. Winifred Meehan, R.N., a staff nurse in



Miss Laila Jiwan, is a part-time employee in radiology. She was born in Mbeeya, Tanzania.

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Tanzania is a young country in Africa composed of 97% African origin, 2% Indian origin and 1% European origin.

Miss Jiwan, of Indian origin, came to this country in 1963 to become an elementary school teacher. She plans to teach upon her return to her homeland in a year.

On her arrival, Miss Jiwan was surprised with many of our social customs.

For example, her three sisters were married by parental arrangement. They had no choice in the selection of their husbands.

Also, the wife goes to live with her husband and his parents. Miss Jiwan has 3 brothers, all of whom are married, and the three wives all live with Miss Jiwan's parents.

She said, "In our country we have no such thing as old folks homes. The older people just automatically expect to be cared for by their young as long as they live. My grandparents from India also live with my parents."

Tanzania is rapidly becoming influenced by western culture.

A few young married people are living away from their parents . . . and western style dress is more popular.

Miss Jiwan's mother has already promised her that she may select her own husband.

Other employees of foreign birth include Mrs. Sandra Brown, Purchasing, who was in show business in Scotland before coming to this country; Mrs. Luis Bessone, histology technician, who came to this country from Argentina to join her husband, a surgical intern; Miss Sook Won Lee, Medicine Research, who was born in Seoul, Korea, to a family of eight. She came to this country to study.

Mrs. Marta Porth, Medical Records, came to this country in 1948 when she learned that Poland was going to fall under Russian domination; Mrs. Usha Mehta, endocrine laboratory technician, is a citizen of India. Mr. Anil Parikh, an industrial engineer, was born in Bombay, India. He was particularly impressed with the technological advancement and the high standard of living in this country.

Mrs. Rosewitha Anthony, Medicine Research, came to this country from Berlin, Germany in 1959. Mrs. Gladys Charles, a medical technologist in Hematology, was born in Port Au Prince, Haiti.

Mrs. Marlyn Magboo, a medical technologist in the Blood Bank, was born in Manila, Philippines. She was married in June, 1967, in Waterbury, Connecticut; Mrs. Helene L. Fachtmann Keran came to this country from Japan just one year ago. She was married to senior economist at the Federal Reserve Bank of St. Louis August 26, 1967.

Other international employees include: E. Thye Yin, Medicine Research, from China; Irman Grant, Hematology, of Trinidad, West Indies; Oliver Weaver, Otolaryngology, of Arruba, Dutch Antilles; Mrs. Beatriz Pena, unit secretary, from Mexico; Mrs. Agatie Champagne, R. N., nursery, from Haiti; Miss Bozena Kallus, Microbiology, of Czechoslovakia; Dagmar Pfitzner, Clinical Laboratories, from Germany; and Mrs. Jennie Wang Hsu, Clinical Laboratories, of Formosa.

## House Staff Wives Attend Luncheon and Tour Hospital

Mr. Rozes

**Miss Reilly** 

1960.

Mrs. Ura

"I think U. S. doctors are more friendly and relaxed."



our food. In Haiti, he says, the food is highly

Miss Sandra Corbin, coordinator, Home Care Training Center, spent a week in Minnesota and Wisconsin observing certified home-health agencies and statelevel department personnel to study their activities in connection with health planning.

Vincent Richter, chief inhalation therapist, lectured in September on "The Organization of Inhalation Therapy Within a Hospital" at an orientation for hospital administration graduate students at Washington University. Mr. Richter also began a course at Jewish Hospital for inhalation therapists which will continue through May, 1968.

Miss Fay Storck, R.N., and Mrs. Marianne Bokal, R.N., attended a two-day workshop at the University of Iowa on "Nursing Care of the Acutely Ill Patient."



Mrs. Meehan

hour break every two hours, and that was nice."

her studies.



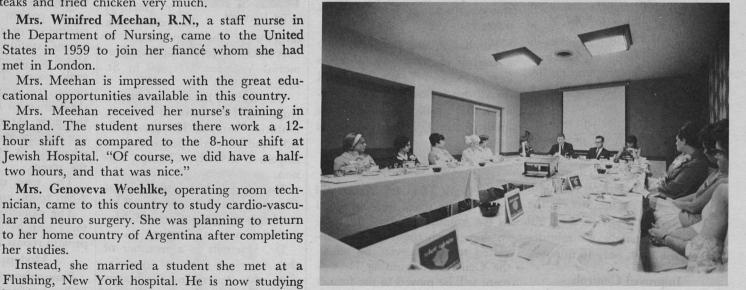
Mrs. Woehlke

hospital administration at Washington University. Mrs. Woehlke is an only child whose father owns a steel factory in Argentina. She cited political and

economical instability as her home country's greatest problems.

She likes this country. "I like the way people live here. At home (Argentina), you are either rich or poor . . . this is not good. I love this country as if it were my own."

Mrs. Woehlke hopes to become a citizen of the United States.



HOSPITAL HOUSE STAFF WIVES were entertained at a luncheon held on September 12 in the MAC Room of the Hospital.

The group was greeted by David A. Gee, executive director; Mrs. Barbara Janes, director of Community Relations; Mrs. Walter Stern, representative from the Auxiliary; William Chiles, personnel director; and Paul M. Ward, administrative resident.

Mr. Gee presented a series of historical slides to the group. After a ques-tion and answer session, a tour of the facilities included the Division of Rehabilitation; the Surgical Intensive Care Unit; Yalem Building; Pathology Laboratories; and the Business Office.

# Medical Staff

Irwin B. Horwitz, M.D., attended the Mid-Central States Orthopedic Society meeting in Kansas City, Missouri.

Arnold S. Block, M.D., attended the annual meeting of the Mid-Continent Psychiatric Association held in St. Louis, September 15-17.

Robert S. Karsh, M.D., spoke on "Radioactivity and Air Pollution Hazards" at a meeting of the National Association of Conservation Educators at Southwest Missouri State College in Springfield, Missouri.

Sidney Goldenberg, M.D., attended the annual meeting of the American Diabetes Association in Atlantic City, New Jersey, and the American Diabetes Association Symposium in Chicago, Illinois, September 29-30.

James B. Brown, M.D., recently attended a meeting of the American Association of Plastic Surgeons in Toronto, Canada.

Gunter Schmidt, D.D.S., attended the World Dental Congress, Paris, France. He also conferred with Professor Gerber, chief of the Department of Prosthetic Dentistry at the University of Zurich, Switzerland.

John H. Gladney, M.D., attended the National Medical Association meeting in St. Louis recently. The subject discussed was "Further Observations on Glomus Tumors."

Robert W. Tatkow, M.D., participated as part of the faculty in a seminar on "Back Injuries" at Southern Illinois University held by the Institute for Continued Education of the Illinois Bar Association.

Moisy Shopper, M.D., was a member of the faculty at the Institute of Child Care of the School of Social Work at St. Louis University. The topic of the discussion was "Over Development in Institutional Settings."

Arthur E. Strauss, M.D., attended a symposium on hypertension at the annual meeting of the American College of Chest Physicians of the American Medical Association in Atlantic City, New Jersey.

Franz U. Steinberg, M.D., recently spoke on "Medical Care in Extended Care Facilities" at the Catholic Hospital Association in St. Louis.

Herbert E. Rosenbaum, M.D., was secretary of the general session of the American Academy of Neurology convention in San Francisco, California.

Robert C. Packman, M.D., attended meetings of the Endocrine Society in Miami, Florida.

Frank B. Wilson, Ph.D., director of Speech Pathology, David C. Shepherd, Ph.D., director of Audiology, and Doris P. Mosby, Ph.D., psychologist, Department of Otolaryngology, participated in a panel discussion "Otolaryngology and Pediatrics," recently held at the 72nd Annual Scientific Assembly and Convention of the National Medical Association.

Alex C. Sonnenwirth, Ph.D., director, Divison of Microbiology, has een elected a Fellow of the American Association for the Advanceent of Science.

A paper, entitled, "Modifications in the Fluorescence Microscopy Technique as Applied to Identification of Acid-Fast Bacilli in Tissue and Bacteriological Material," written by Dr. Sonnenwirth, Herbert Silver, M.D. and Neil Alex, B.S., and originally published in the December, 1966, issue of the Journal of Clinical Pathology (British), has been translated verbatim into Spanish by the editors of "Laboratorio" and published in the May, 1967, issue in Granada, Spain.

William Shieber, M.D., addressed the American College of Angiology on "Lymphangiographic Demonstration of Lymphatic Abnormalities."

Samuel D. Soule, M.D., attended a joint meeting with representatives of the American Association of General Practitioners and a committee of the American College of Obstetrics-Gynecology on continuing education of the general practitioner. Dr. Soule also attended the October, 1967, meeting of the American College of Surgeons in Chicago, Illinois.

Paul S. Lowenstein, M.D., recently presided over the opening session of the combined meeting of the American College and International College of Angiology held in Las Vegas, Nevada.
Jacob G. Probstein, M.D., recently addressed the National Medical Association on the subject, "A Ten Year Review of Pancreatitis." Milton I. Lenobel, M.D., was recently appointed assistant professor of orthopedic surgery, at St. Louis University Medical School. Robert Burstein, M.D., has been requested to write some answers for "Questions" in the Journal of the American Medical Association by A. Soffer, M.D., a former resident in medicine (1948-49) and presently editor of the J.A.M.A.

# Clinical Laboratories: A Rich History and an Expanding Future

In the past 40 years, amazing changes have taken place in the Department of Pathology and Laboratory Medicine at Jewish Hospital.

When the present hospital was opened in the spring of 1926, the Board of Directors made an unusually far-sighted decision to expand the clinical and research laboratory facility. At that time, there were relatively few laboratory tests performed on patients and these few, for the most part, were done in the physicians' office. The Board also recognized the importance of research as an adjunct to better patient care.



#### DR. SOMOGYI

Biochemistry was considered an important clinical and research specialty. As the initial step in establishing Jewish Hospital as a research institution, the Board sought a biochemist to direct the Division of Clinical Chemistry. When Michael Somogyi, Ph.D., a young scientist and instructor at Washington University School of Medicine, was appointed to the position, Jewish Hospital became the second hospital in the country to employ a full-time chemist in its laboratories.

Dr. Somogyi established a laboratory of Clinical Chemistry with a total budget of \$1,200. He and his assistant (a country school teacher named Hildegard Kramer) developed about 12 tests, of which sugar and non-protein nitrogen estimations were the two most commonly performed.

One of Dr. Somogyi's most noteworthy accomplishments, was devising a method for the comseriously hampered. The Laboratories at Jewish Hospital were the first in the St. Louis area to introduce automation in clinical chemistry.

According to Dr. Frankel, "One of our biggest goals is to maintain good quality which the physicians not only expect, but demand, for the welfare of their patients."

A great deal of time and expense is devoted to quality control which is generally divided into three separate categories: reproducibility, accuracy, and trend detection. There is considerable overlap in the various systems which permits continual multiple checks.

#### Reproducibility

Reproducibility is determined by using either pooled sera or its equivalent of lyophilized sera (dried while in the frozen state to preserve its qualities). These controls are performed daily for all tests, permitting detection of any changes in procedural response. In the case of automation, each tenth sample (and in many cases each fifth sample) is a control. This also serves the purpose of detecting drifts during the run.

Accuracy is checked by using controls previously assayed by referee laboratories. These are usually lyophilized sera which are reconstituted and run along with the regular specimens. In the event that the expected value is not obtained, the entire run is discarded and run again after corrections have been made.

Since a range is permitted in the accuracy tests, it is sometimes difficult to detect insidious changes. In other words, the procedure may be slowly changing, possibly due to instrumental, reagent or standard deterioration.

Presently this procedure is being monitored by the computer. It has been possible to detect trends long before they would have become apparent by using the above mentioned control checks alone.

#### Asked To Be A Referee

As an indication of the high regard in which Dr. Frankel's work is held, one of the well known commercial firms, a leading producer of control sera, has asked the Hospital Laboratories to act as a referee in assigning official values to the lyophilized controls.

Dr. Frankel remarked, "This is actually a great compliment. To be selected as an 'expert laboratory' by one of the top firms in the country is no small honor.

"Representative samples of the product will be sent to us and a few other referee laboratories in the country. We will assay these samples and submit our data which will then be used in assigning official values to the controls.

"The Hospital has decided to participate as a referee for two reasons: Most laboratories in the nation depend completely upon these controls to validate their results; good controls are essential to all of us. Secondly, in the evaluation of these controls in our own Laboratory, we are obligated to insure that our own procedures are accurate and valid. This will help us in maintaining superior quality."

#### **Future Plans**

In the next five to ten years, many changes will be seen in hospital laboratories. The Laboratories at Jewish Hospital will gradually convert more and more of the present tests to automatic methods. This will release the time necessary to develop more difficult and specialized tests frequently required by physicians in offering the best possible care for their patients.

Dr. Frankel explained, "We want to advance to the position where any test of clinical importance can be performed here. This includes many aspects of toxicology (study of substances harmful to human physiology) which are not available anywhere in the area."

The Chemistry Laboratories will be strengthened further in October by the arrival of Dr. Gerald Kessler, a pioneer and national figure in clinical chemistry automation.

James Barrett Brown, M.D., professor of clinical surgery at Washington University School of Medicine, was presented an honorary medal at the annual meeting of the American Association of Plastic Surgeons in Toronto, Canada, commemorating his numerous significant contributions to the field of plastic surgery. Dr. Brown is a past president of the group.

Grayson Carroll, M.D., recently attended the meeting of the International Urological Society held in Munich, Germany. Clinical studies of the more recent antimicrobial agents in treatment of chronic pyelonephritis were presented.

**B. Y. Glassberg, M.D.**, attended the National Conference of Family Relations held in San Francisco, California. He also attended the American Association of Marriage Counselors annual meeting held in Washington, D.C.

Conrad Sommer, M.D., participated in a panel discussion at Temple Shaare Emeth, September 26, on the "Psychology of the Middle-Aged Woman." mercial production of insulin.

In 1953, when Dr. Somogyi retired and was named bio-chemist emeritus, the duties of director of the Clinical Chemistry Division were assumed by Sam Frankel, Ph.D. By this time, the annual volume of tests performed had risen to 30,000.

In keeping with the explosive growth of medicine in the past 14 years, the anticipated volume for 1967 will surpass 140,000 in the Division of Chemistry alone. From a beginning of one test for every fifteen patients, this laboratory averages nearly 8 tests per admission. Initially, there was a total of a dozen or fewer tests available. There are now more than 100 which must be maintained. Much of the phenomenal volume is now being processed by automatic equipment without which the growth rate would be



SAM FRANKEL, Ph.D., director of the Division of Clinical Chemistry, Department of Pathology and Laboratory Medicine, examines the results of tests which have been processed by automatic equipment. Each maximum point on the chart of the electronic recorder represents a result of a patient's blood test. Jewish Hospital presently has 12 separate tests on automated equipment.



MRS. WALTER G. STERN, (left) co-chairman of the volunteer committee for the Auxiliary, pours punch for four of the top awardees at the Candy Striper Luncheon. From left to right, the young volunteers include Helene Wise, Eugene Woods, Myrna Fergison, and Susan Hinderleider.

## **Teen-age Volunteers** Honored at Luncheon

More than 100 Candy Stripers and Teen-Aiders (boys) were honored at an awards luncheon held on August 31, in the Moses Shoenberg Memorial Nurses Residence Auditorium.

Merit certificates were presented to each member of the group, and a pink bar for each 50 hours of service at the Hospital was awarded to more than 90 persons. The young volunteers gave service throughout the Hospital - in the Admitting Department, Business Office, Long Term Care, on many nursing divisions, and in the Auxiliary Coffee Shop and Clover Garden.

Mrs. Mordecai B. Brown, director of Auxiliary Services, opened the program. Mrs. Stanley M. Cohen, president of the Auxiliary, and Mrs. Walter Stern, a co-chairman of the volunteer committee, presented the awards.

Top honors of the day went to Miss Susan Hinderleider, daughter of Mr. and Mrs. Loald P. Hinderleider, 7204 Christopher Drive. Her total number of hours for the past two years at the Hospital came to 1410.

Eugene Woods, son of Mrs. Viola Woods, 5043 Maple, received special honors as a Teen-Aider with 828 hours accumulated since June, 1966. This summer, Mr. Wood worked 286 hours.

Other honorable mentions for this summer went to Myrna Fergison (239 hours); Linda Nienhaus (224 hours); and Helene Wise (210 hours).

#### Under 50 Hours

Donna Boyd	Debbie Dent	Ronnie Newman
Wendy Biernbaum	Amy Franklin	Mary Mathis
Therese Bray	Linda Hearsh	Karen Polakoff
Elizabeth Campbell	Elisabeth Henderson	Valerie Quin
Merle Cassel	Joan Isserman	Bonnie Schumitzky
William Chiles	Lois Kuhlmann	Gary Yavitz

#### 1 Bar — 50 Hours to 99 Hours

Shelly Alton Kenneth Armoneit Mary Chubb James Cornfeld Rose Daniel Sandy Fixler Linda Gellman Rosalene Gentle Gayle Gieselmann Lorisa Glassman

Kay Haley Christine Harrington Deborah Katz Carolyn Knopp Sharon Lewis Debby Lief Janet Long Kathleen McGrath Barie Mendelsohn Lois Platt Pat Sweeney

Kim Rennard Andy Rosen Barbara Rosenberg Pamela Rosenkoetter Carol Sabol Sandy Soll Linda Sosnoff Barbara Steiner Marian Stolar

# EKG Monitoring - A Vital Heart Station Service

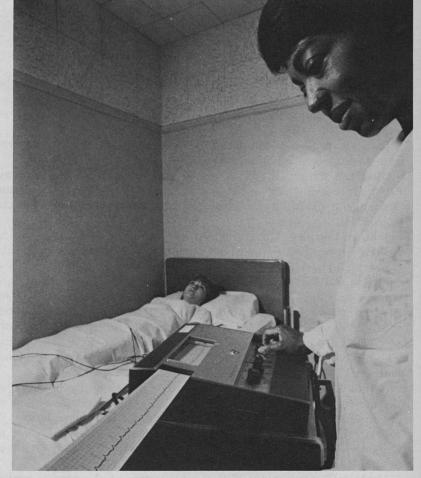
#### By Barbara Kodner

When a doctor needs an electrocardiogram on a patient, all he has to do is call the Heart Station and he will have the EKG in a matter of minutes. An electrocardiogram is a graphic record of the electrical potential differences of the heart taken from the body surfaces. It is used in the diagnosis and management of patients with heart disease.

The Heart Station, located on the ground floor near the emergency entrance, has been an important part of Jewish Hospital for 40 years. When the call for an EKG is received, one of the girls in the department wheels her EKG machine to the patient's room, works quickly and quietly with the patient and has the EKG ready for the doctor in eight minutes. After attaching four electrical cables to both of the patient's arms and legs, she moves another cable with a bulb and small suction cup at the end to six separate and exact locations over the patient's heart to get a true reading. Nothing pierces the patient's skin and no pain or discomfort is involved. The Heart Station attendant stays with the patient until the EKG is finished.

The EKG is read by the intern at the Heart Station that day. The next day, it is given an official reading by the doctors connected with the Heart Station: Edward Massie, M.D., director; Herbert B. Zimmerman, M.D.; Sidney Jick, M.D. and David Feldman, M.D. This official reading is typed up and one record goes into the patient's chart, one to the doctor's office and one into the Heart Station files, where it is kept for 10 years.

This routine is followed by all nine girls working in the Heart Station from 6 a.m. to 5 p.m. every day. These nine girls do from 20 to 50 routine EKGs and from 10 to 30 emergency EKG's each day, with the average being at least 30 or more. The call for an emergency EKG can come from just about anywhere in the Hospital, but mostly from the Emergency Room for a patient with back or chest pain who has possibly had a heart attack; or for a patient whose heart has stopped; or for a car accident victim who has had the steering wheel crushed against his chest. The Heart Station handles EKG's only during the day. At night, emergency EKG's are taken by the Inhalation Therapy Department or by the individual doctor. Working under the expert guidance of Supervisor Marge Peteler. each girl and her machine are a closely-knit team. The EKG machine is a sensitive device and almost as much an individual as the girl operating and maintaining it. As Miss Donna Agnew, a member of the staff said, "I really like my machine. We each when we need it in an emergency." Knowing each machine ing that it won't work when the sible.



**MRS. ETHEL KELLEY,** senior technician, observes an EKG tracing of a co-worker, Mrs. Faye Boyd, during a demonstration of the equipment. The nine technicians in the Heart Station average about 50 such EKG's per day.

patient is touching metal, or when too many other electrical machines in the room are causing interference. In this latter case, the girl has to work fast when the air conditioner, oxygen tent or external pace-maker is causing interference and has to be turned off. The internal pace-maker regulating the patient's heart under the skin causes an interference which shows up as an extra beat on the EKG; of course, the pacemaker cannot be turned off. The delicate monitors in the Medical Intensive Care Unit are designed to cause no interference.

Cleaning and maintenance of these \$800 EKG machines are left up to each girl. She has to know how to replace a bad needle or change a fuse in order to keep her machine in the best working condition. This requires no special training-just experience. While they are sensitive, the EKG machines are very sturdy and last a long time with broken cables

Besides electrocardiograms, this department also takes vectorcardiograms, which give a more exact picture of the electrical forces in the heart, and from one to six basal metabolism tests per month. Miss Peteler supervises the Heart Station and the electroencephlography station as well

## **Nurse Refresher Course Offered**

The Department of Nursing has established a nursing refresher course to enable inactive registered nurses to return to the profession. This will be the first time in several years that such a course has been offered.

Scheduled to begin October 9, the nursing refresher course will be taught by the In-Service Education Group of Nursing Service under the supervision of Ralph Hoecker. Mr. Hoecker has established a program which will

Sally Glazier Judy Groce

Rosalyn Poger Cheryl Ramey

#### Valeri Weiss **Terry Winter** Laurie Wittcoff

#### 2 Bars - 100 Hours to 149 Hours

Sheila Applebaum Rebecca Belkin Judy Blair Amy Bronson Joanne Brown Laurie Finger Edward Fliesher Janice Marie Gordon Susan Hecht

Thomas Howk Marilyn Schwartz Diann Kirk Barbara Segal Karen Kusmer Carolyn Sharpe Donna Lewis Marsha Sherman Judith Marcolini Sharon Slumpsky Sharon Jean Mayer Francine Stern Paula Nathan Delores M. Stith Joanie Weisman Denise Newman Carol Ann Palkes Barbara Wexler

#### 3 Bars — 150 Hours to 199 Hours

Kathy Benne Terri Bosch Sally Butterly Gail Crawford Nancy Galbierz Judy Goldman Cheryl Landis Janet Niemeier Patty Goz Donna Hendrickson Joel Reiss Barbara Holtzman Jeff Schrieber David Kaufer Nancy Shainman Sandy Sirota

#### 4 Bars - 200 Hours to 249 Hours

Linda Johnson Deborah Marcoline Linda Nienhaus Cheryl Sorkin Marsha Salamone Helene Wise

Many of this group will continue working at the Hospital on weekends as well as holiday vacations.

being the only common major outside repair needed. At least one new machine is purchased each vear since the older machines must be replaced.

"The machines are easy to operate," said Miss Agnew. The trick is knowing how to work with the patients. They are usually nervous or apprehensive, and our job is to take the EKG quickly, while comforting the patient.

These girls with their mobile EKG machines perform a vital service for the patient and doctor. The traffic problem alone involved in getting 30 or more patients to the small Heart Station on the ground floor would be insuruse our own separate machines mountable. By taking the EKG because we have to know that machine to the patient, the deit's going to work properly partment serves the doctor by getting the EKG promptly and the patient by doing it as conand its sensitivities means know- veniently and comfortably as poslast 8 hours a day, 5 days a week for 6 weeks, and will include review classes and practice in supervising nursing areas.

It will begin with an orientation to modern hospital nursing service, and will include a review of basic nursing skills and disease conditions with emphasis on psychiatric implications of patient care. Stress will be placed on advanced procedures such as cardiac monitoring, circle electric bed care and rotating tourniquets. Time will be spent in reviewing medications, particularly the new drugs on the market, and on the new concepts of team nursing and ward management.

The course is open to any inactive R.N. who is interested in gaining confidence to return to nursing. The program is being funded by a grant made available through the Missouri Hospital Association.

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# Jewish Hospital Blood Bank Performs Vital Work Each Day

#### By Barbara Kodner

"The most important aspect of a hospital blood bank is that it keep an adequate supply of blood on hand. That is why we would rather have patients replace the blood they use than to have to charge them for it," said Dr. Herbert Silver, acting director of the Jewish Hospital Blood Bank.

Dr. Silver is responsible for keeping some 85 units of different types of blood on hand at all times. Under the replacement program, when a patient uses blood, he can have his friends and relatives replace what he has used on a 2-to-1 basis for the first three units, and on a 1-to-1 basis after that. For example, if a patient uses four units of blood, he must replace seven. If he cannot replace all that he has used, the hospital must go to professional donors or the Red Cross to replenish the supply so that fresh blood will be available for other patients. This in turn increases the overall unit cost of blood for both the hospital and the patient. The replacement program helps to keep this cost down. In 1966, Jewish Hospital used 4500 units of blood and only 2200 were replaced. A large part of the deficit was made up by the St. Louis Chapter of the American Red Cross. So far this year, the Blood Bank has supplied 2000 units of blood, including 271 units in July. The average use is

The main function of the Blood Bank is to supply the hosal with blood and blood products, quickly and efficiently. The greatest demand for blood comes from the Departments of Medicine, Surgery and Obstetrics-Gynecology. Sometimes blood products rather than whole blood are needed by the patient. For example, a hemophiliac or "bleeder" may need only the clotting factors or the plasma of blood rather than the whole blood. So, for the hemophilia patient, the Blood Bank supplies fresh frozen plasma or obtains a special blood component concentrate called AHF from the Red Cross.

15 to 20 units per day.

**Requisition for Blood** 

When blood is needed, an esti-

ture control and if the bag has during periods when donation and not been violated in any way. The operating suite has a refrigerating unit in which to store the blood at proper temperature until it is used or returned. This refrigerator is constantly monitored and has an alarm system to insure that the temperature always remains within a narrow, acceptable range. If blood is requisitioned for an area where there is no refrigerating equipment, such as a medical or surgical floor, it cannot be returned unless it is done within a half-hour.

#### Storage of Blood

In the Blood Bank, the blood is stored in plastic packs containing a preservative. It is refrigerated at 4° C. It can be kept under these conditions for only three weeks. The oldest units of blood are used first, when possible, to prevent waste. The temperature of 4° C. has to be maintained for proper preservation and storage of blood; if the temperature should rise above acceptable limits, alarms are sounded at the operators' station, in the engineers' office and in the Blood Bank itself, so that the malfunction can be corrected immediately.

The Blood Bank has not, as yet, instituted the new process of freezing blood for storage since the blood demand in a hospital of this size does not warrant it at present. However, in the future, the freezing and storing of blood may well solve some of the supply problems. Blood will be stored longer than the present three weeks and will then be available replacement is not adequate to supply the needs-periods such as the summer months and the Holiday season.

The blood stored in the Bank is usually adequate for the needs of the average patient. Occasionally, a patient's blood contains a rare factor which leads to difficulty in cross-matching. When this is the case and a need for blood arises, the American Association of Blood Banks in Chicago is contacted. They have a file of donors whose blood also contains this rare factor. Blood is obtained from these donors and then flown to St. Louis for use here. The AABB also has a blood bank in which bloods containing rare factors are frozen and stored for future use. One patient at Jewish Hospital who has a rare factor in her blood now makes four deposits each year to the bank in Chicago. In this way she can be sure that blood will be available for her if an emergency need arises. The blood will be held on deposit (frozen) for her for one year.

Besides Dr. Silver, the Blood Bank personnel include three daytime technicians and two night technicians who type and crossmatch the blood. The secretary performs the vital job of explaining the replacement program to patients. She sends follow-up letters to discharged patients requesting replacement blood, if it has not already been replaced. The donor station is staffed by two trained technicians who make the blood donation a rapid and painless experience.

## New Equipment Purchased To Modernize Print Shop

Quick, reliable communications are the lifeline of any organization . . . large or small. Good communications are particularly important to a modern hospital.

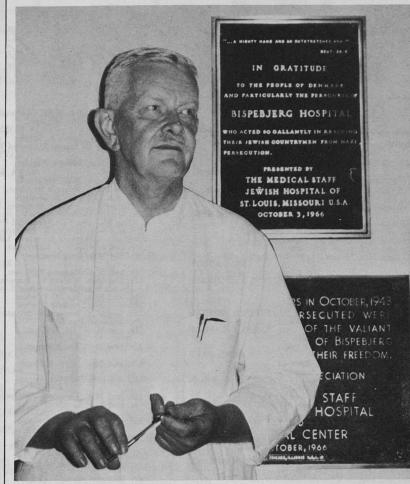
To keep pace with the growing complexity of the Hospital, a new high-capacity telephone switchboard was installed last spring.

This summer, miniature shortwave radio receivers were issued reproduction aids will help us give more economical, efficient service.

A Xerox-2400 copy machine, capable of reproducing 40 copies a minute, is used for jobs requiring less than 20 copies.

Two Youth Corps workers, Miss Shirley Cannon, and Richard Freeman, are handling the Xerox and collating work.

Clarence Taylor and Mr.



DR. KARL KØSTER, chief of Gastroenterology at Bispebjerg Hospital, stands beside two plaques mounted in the administration building of the Hospital in Copenhagen, Denmark. The upper plaque was presented to him by the Medical Staff of Jewish Hospital who brought Dr. Køster to St. Louis last year.

## <u>Visits Dr. Køster</u> **Dr. Sonnenwirth Attends European Meeting**

Alex C. Sonnenwirth, director of Microbiology, Department of Pathology and Laboratory Medicine, whose appointment to the International Sub-Committee on Gram-Negative Anaerobic Bacteria was previously announced ("216", April, 1967), recently attended, by invitation, the meeting of the International Committee for Bacterial Nomenclature at the Pasteur Institute in Lille, France.

This meeting brought together a group of 14 investigators from the United States, England, Belgium, Japan, West Germany and France.

According to Dr. Sonnenwirth, "The meeting was a shirtsleeve working session where the results of studies by each participant were discussed, and plans for future cooperative studies were made.

"The Jewish Hospital Microbiology Laboratory was entrusted with immunologic studies of these particular bacteria."

Dr. Sonnenwirth's attendance at this meeting was financed by a travel grant from the United States National Science Foundation. Visited Dr. Køster

Dr. Sonnenwirth also visited the Bispebjerg Hospital in Copenhagen, Denmark, where he met Dr. Karl Køster and was given an extended tour of the facilities.

Dr. Køster was brought to this country as a guest of the Jewish Hospital Medical Staff in October, 1966, and was honored for his efforts in helping more than 2000 Danish Jews escape the Nazi occupation of Denmark during World War II.

Dr. Sonnenwirth was shown the plaque that had been presented to Dr. Køster by the Jewish Hospital Medical Staff. The plaque is prominently displayed in the Administration Building of the Bis-

mate of the amount is made. This depends on the type of operation or procedure. The request is sent to the Blood Bank along with a sample of the patient's blood. At the Blood Bank, a technician cross-matches the patient's blood with a sample of the donor's blood to make sure they will mix together (i.e., are compatible).

The amount of blood needed varies with the conditions for which the blood is requested. A person who is hemorrhaging may be transfused with many units of blood before the bleeding finally stops. Someone having an operation may not need any blood or may need several units, depending on the complexity of the surgery.

If the requisition calls for more blood than is actually needed, the blood can be returned to the Blood Bank; but only if it has been kept under strict tempera-

to all House Staff members and key personnel.

Now, the headquarters for written communications, the Print Shop, has been modernized.

The capacity of the Print Shop has been multiplied with the addition of a Bruning Electrostatic Copier and an additional offset printing press.

This combination of equipment will replace the ditto machine and the mimeograph.

The Bruning copier can make quick masters for the offset press from original copy typed on regular bond paper. No special masters are needed as required by both the mimeograph and the ditto machine.

The new offset press is an automatic Multilith machine. It uses the same inks and supplies as the older Multilith.

Phillip Bittner, supervisor of the Print Shop, said, "These new ner operate the two offset machines.

### **Purchase Plan** Saves 12%

Jewish Hospital and 14 other St. Louis area hospitals are cooperating in a group purchasing program sponsored by the Hospital Association of Metropolitan St. Louis.

During 1966, the group made purchases of \$573,640 with a savings of 10% over the figure that would have been paid had the purchases been made separately. Jewish Hospital purchases came to \$205,070, with savings of 12%. Some of the group purchases include fuel oil, electrical supplies, surgical dressings, uniforms, housekeeping materials and medical supplies.

pebjerg Hospital.

Dr. Sonnenwirth also made a study tour of Professor Stephen Elek's Department of Bacteriology at St. George's Hospital Medical School, and of the Microbiology facilities of Dr. George Meynell, director of Microbiology, Lister Institute for Preventive Medicine, London.



DR. ALEX C. SONNENWIRTH (right foreground) met with the 14 members of the International Sub-Committee on Gram-Negative Anaerobic Bacteria at the Pasteur Institute in Lille, France.

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#### SCHEDULE

Services for the High Holy Days will be held at the Jewish Hospital of St. Louis beginning at 6:00 p.m. on Wednesday, October 4, with Rosh Hashanah Eve.

Rabbi Lawrence Siegel, the Jewish Federation Community Chaplain, will officiate in the chapel on the first floor of the Hospital.

Morning services for Rosh Hashanah (New Year) will be held at 10:30 a.m. on Thursday, October 5 and Friday, October 6. Shabbat Shuvah services will be held at 10:30 a.m. on Saturday, October 7.

At 6:00 p.m., Friday, October 13, the Kol Nidra Eve service will be held for Yom Kippur (Day of Atonement). Yom Kippur services will be held at 10:30 a.m. Saturday, October 14, and Yiskor Memorial Services will be held at 4:00 p.m. on the same day.

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# Home Care Training Center **Compiles Health Care Data**

The Training Center for Home Care and Other Out-of-Hospital Health Services recently conducted a survey on the functions of an Advisory Committee in a Home Health Agency. The findings of this survey are useful for any organization which has an Advisory Committee.

The survey was initiated in response to many requests for information on organizing and obtaining results from such Committees. Establishing an Advisory Committee is one prerequisite for certification as a Home Health Agency under Medicare legislation. Questionnaires were sent to certified Home Health Agencies in 10 Midwestern States including Indiana, Illinois, Wisconsin, Minnesota, Missouri, Arkansas, Iowa, Kansas, Oklahoma and Nebraska. Of 274 questionnaires sent, 200 agencies have responded.

Only 83 agencies surveyed had advisory committees before Medicare went into effect. Of the 117 advisory committees organized after Medicare, 46 have been organized in name only and as yet have not functioned, as compared to 8 non-functioning committees in agencies that have been in operation for more than one year. The survey

## **Auxiliary Plans Fall Meeting**

The annual fall meeting of the Jewish Hospital Auxiliary will be held at 1:00 p.m., October 25th at Westwood Country Club.

Dr. William H. Masters, director of the Reproductive Biology Research Foundation, and Mrs. Virginia E. Johnson, research assistant, will be guest speakers. They are co-authors of the book, Human Sexual Response.

Joseph F. Ruwitch, president of the Hospital Board of Directors, and David A. Gee, executive director, will greet the Auxiliary members.

Mrs. Stanley M. Cohen, president of the Auxiliary, will preside at the meeting. Mrs. Donald Quicksilver is program chairman.

Volunteers will be honored for the number of hours of service they have given to the Hospital.

All volunteers and Auxiliary members are urged to make their reservations early for this annual Fall meeting.

## Ruth Fenlon, R.N.; **Infections Officer**

Miss Ruth Fenlon, R.N., has been named Infections Control Officer at Jewish Hospital.

Miss Fenlon will be responsible for conducting routine surveillance checks of all Hospital areas to make certain that proper procedures are being followed.

showed that in agencies both old and new the Advisory Committee was unsuccessful when not given definite responsibilities and firm direction.

Most Advisory Committees have found that having some members of agency staff on the committee stimulate communication between agency and community. Of the agencies surveyed, 119 had agency staff members on the Advisory Committee, 81 were without agency representation.

This survey clearly indicated that these Committees have unlimited potential value. It remains up to each agency how they utilize their advisory committee. A group which, as its name implies, is designed to offer consultation.

## Norman Matulef Addresses Group

Dr. Norman J. Matulef, staff clinical psychologist in the Department of Psychiatry at Jewish Hospital, delivered the keynote address, "A Challenge to the American Psychological Association," at the first annual studentfaculty dialogue held September 2, at the 75th annual convention of the American Psychological Association in Washington, D. C.

Dr. Matulef is chairman of the national committee on graduate education in psychology, the group sponsoring the dialogue.

The Department of Psychiatry at the Hospital is currently investigating several of the new training approaches for psychology interns. They will presently announce plans for an advanced training program in clinical psychology for graduate students.



A METALWORKER ON THE SIXTH FLOOR of the Yalem Research Building is framed by the vertical metal bars which will cover the entire southern side of the building. The Moses Shoenberg Memorial Nurses Residence can be seen in the background to the right.

## Features Essential to Progress In Yalem Research Building

Building adjacent to Jewish Hospital is not an ordinary building.

It started with a \$1 million gift from Charles H. Yalem and other gifts from throughout the community, and was assisted by a National Institutes of Health grant. Modern planning toward construction of the finest research building possible has been the goal of the Hospital. Completion is scheduled for early in 1968.

The cost of the construction of this unusual building is comparable to that of other research buildings under the NIH grant plan.

However, compared with an ordinary building of the same size, the cost is approximately double. The sophisticated research facilities and special features to support them in the new building account for this added cost.

The over-all floor plan of the new building includes: an amphitheater on the ground floor of the building; medical research on air ducts to contiguous areas.

The \$2,600,000 Yalem Research floors 1-4; surgical research on floors 5-8; and the 9th floor will house experimental animals, including rats, guinea pigs, rabbits, sheep, chinchillae and many others.

> One of the more outstanding features of the Yalem Research Building is the electrical facilities provided, including an emergency electrical generator. In the event of any interruption in services from the local utility company, an automatic switch-over to the emergency generator will supply essential services to the building and will permit continuity of scheduled research.

> Every precaution against possible contamination has been provided for in the design of the building. Air conditioning units will supply 100% fresh air at all times. (In average buildings, only 35% fresh air is supplied and the other 65% is recirculated air). The air conditioning units will eliminate the chance of airborne bacteria being carried through the

Walk-in refrigeration compartments will be installed to insure maintenance of proper temperatures required for experiments.

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Lighting in the Yalem Building has been planned to include a light level at working plane that is two to three times greater than is generally provided in offices or homes.

The plumbing system in the Yalem Research Building will per mit all waste materials to be r moved from research areas via pyrex (glass-like) tubing which will channel the waste material and fluids to a neutralizing vat before releasing them to the city sewers.

Twice the amount of copper will be used in the electrical lines; twice as much plumbing; twice as much power for air-conditioning; and twice the light power for an ordinary building.

All these components blend together to make the Yalem Research Building quite an impressive place for research in the twentieth century.

She will also accumulate statistics pertaining to the incidence of Hospital acquired infections.

Miss Fenlon is formerly of Manitowoc, Wisconsin. She graduated from St. Mary's Hospital School of Nursing in Milwaukee, Wisconsin, and earned her B.S. degree in nursing at St. Louis University.

She served as a public health nurse in Milwaukee, Wisconsin, and Baltimore, Maryland; and was a head nurse at Johns Hopkins University Hospital in Baltimore, Maryland.

She worked for two years as a social worker, and most recently, was on the nursing staff at St. Mary's Hospital in St. Louis.

She presently has a commission with the United States Army Nurse Corps Reserves.

### **Graduate** Course **Held at Hospital**

Twenty-four graduate students from the Washington University School of Medicine Department of Hospital Administration will receive clinical instruction at the Hospital during the 1967-68 academic year.

David A. Gee, executive director of the Hospital and assistant professor for the Department of Hospital Administration, will conduct a three hour credit course in Medical Staff Organization.

Jewish Hospital administrative department heads participated in the two week orientation period for the students, September 5-15.



Form 3547 Requested

