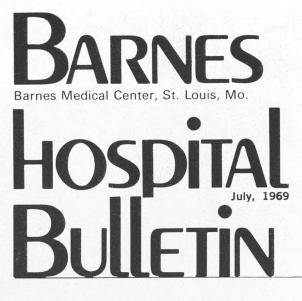
Mr Walken



Security Measures Added For Employes

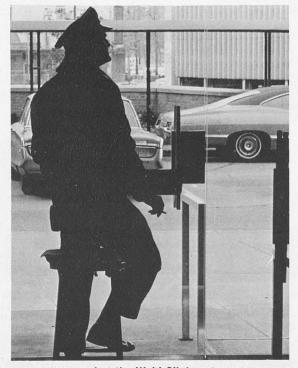
Security hardware has been installed on most entrance doors in the medical center as an additional safety precaution for Barnes employes and visitors, according to Ed Thurman, safety and security coordinator. The action was taken June 20 to combat the increasing crime rate in the city and especially around the hospital, as many evening and night personnel are located in isolated areas.

Forty-nine of the 51 outside doors to the medical complex have been outfitted with the panic hardware, which, when activated, locks each door from the outside only, allowing persons inside to leave at will. The hardware is activated daily at 5:30 or 9:30 p.m. depending on the nature of the traffic. Doors are unlocked at 6:00 a.m.

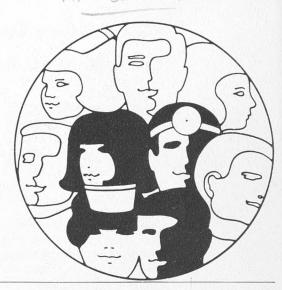
Entrances to the emergency room and Wohl clinics continue to remain open at all times to accommodate emergency patients, but are closely patrolled by the security force. Outside entrances to Maternity and McMillan are locked from the outside at night; however, emergency patients have access to a buzzer which summons a watchman on duty in the area from 9:30 p.m. to 6:00 a.m. Hotel guests in Queeny Tower coming in after 9:30 p.m. are instructed to ring a buzzer at the Rand Johnson patient admitting entrance.

To accommodate night personnel, three doors are open between 10:30-11:30 p.m. They are the Kingshighway entrance to Barnard, the Euclid avenue entrance to McMillan and the Queeny Tower main entrance. All are under security surveillance and incoming personnel may be asked to show their hospital identification cards.

Two additional guards have been added to the safety and security staff to accommodate the increased hospital surveillance.



A security guard at the Wohl Clinic entrance.



Mrs. Warren E. Hearnes Visits Hospital



Mrs. Warren Hearnes, (at left, above) wife of Missouri's governor, was at Barnes Hospital on May 29 with a group of officials including Proctor Carter, (shown at right in photo) director of the division of welfare for the state of Missouri; Dr. James Whittico, consultant for the St. Louis welfare department; and Gene Sally, director of the department of community affairs for the state of Missouri. The group talked with Dr. Robert E. Shank, Barnes associate physician and Danforth professor of preventive medicine at Washington University School of Medicine. Well-known for his studies on nutrition, Dr. Shank is a member of the food and nutrition board of the National Research Council. He has also done considerable work on the problems of malnutrition and hunger in the state of Missouri. Mrs. Hearnes and Mr. Carter were photographed while meeting in Dr. Shank's office.

Auxiliary Outlines Past Years Activities

During the past ten years the Barnes Hospital Auxiliary has given the medical center a total of \$295,114.96, over one-third of which was presented during 1969. This fact was brought out in the Barnes Hospital Auxiliary 1968-69 annual report, a colorful 15-page booklet recently mailed to all Auxiliary members.

A grand total of \$129,309.98 was presented to the hospital during the Auxiliary's fiscal year, \$90,000 of which was to be used toward the construction of the cardiac care unit. The remainder of the money was designated for the conversion of the tenth floor of Queeny Tower, nursing school awards, social service, recruitment, graduate nurse scholarship, baby services in Maternity Hospital and the tribute fund.

According to the report, a total of \$23,075.98 was received by the Auxiliary for the tribute fund. The majority of the funds—\$18,331.37—was designated for the building fund, which includes tributes to the late Edgar M. Queeny.

Other events recorded in the tenth anniversary report included take-over of the management and staffing of the Wishing Well Gift Shop on May 1. During the year the Nearly New Shop was relocated on the first floor across from the Wohl Clinics with storage facilities in the nurses' residence. In December of 1968 the Nearly New reached a sales total of \$100,000 accumulated since it opened in 1963. The yearly sales for 1968-69 nearly tripled the sales figure for 1963-64.

Sixty-nine new volunteers were recruited from newspaper advertisements last year and job responsibilities were expanded to a number of new areas of the hospital, including the Arthritis Clinic and the Lasky Center of the Dental School, the report stated. A total of 61,118 volunteer hours were recorded for the year with 37,864 hours credited to adult volunteers and 23,254 hours to Candy Stripers.

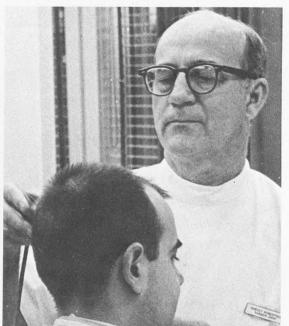
Baby Photo sales were reported to have achieved its highest net earnings in its history, and for the third year the baby photo committee was able to set aside money for their Stork Club waiting area to be constructed in the East Pavilion.

The annual report included a short history of the Auxiliary, outlined highlights of the decade's events. Letters from trustee Robert R. Hermann, director Robert E. Frank, and administrative advisor Joseph T. Greco expressing appreciation for the Auxiliary's work were included in the year's summary.

Anonymous Tribute Paid To Longtime Barber

Two months before his 30th anniversary as a Barnes employe veteran barber Harvey Robertson died June 1, after having been brought to the hospital as an emergency patient. He was employed in 1939 to open and operate the barber shop on the first floor of Barnes and had served as manager until his death at the age of 62.

Mr. Robertson is survived by his wife, Emma C., two sisters (he was one of 13 children) and a niece whom the Robertsons raised, Mrs. Don Morrison of Dallas. Mrs. Robertson resides at 9055 Crest Oak Lane in Crestwood, Missouri.



A surgeon who was a long time customer of Mr. Robertson's submitted the following as a tribute to the veteran barber. He asked that his name not be revealed.

"Who was this meticulously neat, quiet, gentle person who spent half of his adult 62 years as the manager of one of the important units of Barnes Hospital?

What kind of man was this who reflected the active strength of his Church at all times and who loved his family and friends beyond all imagination.

He was the man who stood beside Henry the V on the eve of the fateful battle of Agincourt and inspired the Bard of Avon to declare:

'He that outlives this day, and comes safe home

Will stand a tip-toe when this day is named . . . he'll remember with advantages

What feats he did that day . . . we in it shall be remembered;

We few, we happy few, we band of brothers:

For he today that sheds his blood with me

Shall be my brother . . .'

Yes, Harvey Robertson was the likes of which we see so little during these trying days. He was a man."

Barnes Hospital Bulletin Published By Public Relations Department Barnes Hospital, St. Louis, Mo. Vol. XXII, No. 7



Constance C. Barton, Director Lucy Z. Martin, Associate Editor Shirley F. Brown, Writer

Speakers' Bureau Details Featured In Modern Hospital Magazine



Robert McAuliffe, Barnes Hospital Controller, addressed a suburban St. Louis Rotary Club on "Hos-

A two-page article explaining the organization of Barnes Speakers' Bureau was published in the May, 1969, issue of **Modern Hospital** Magazine.

Accompanied by two photographs—one of Robert McAuliffe addressing the Webster Groves Rotary, and the other of two pages from the Speakers' Bureau brochure—the article was bylined by Constance C. Barton, director of public relations.

A new concept in hospital public relations, a speakers' bureau is a tool to make the public aware of available hospital services, and create a feeling of confidence in the medical center. Other major benefits to the hospital are: encouraging financial support, attracting qualified personnel, interesting young persons in health careers, creating understanding of the role of the teaching hospital (and the different procedures patients may encounter where medical education is part of the hospital picture), explaining why hospital costs are rising and what is being done to control the costs, and demonstrating that, although Barnes is large, each patient is important

pital Costs," a popular topic among Speakers' Bureau requests.

as an individual.

Sixty persons from the medical and administrative staffs were invited to participate in the speakers' bureau and 44 responded in the affirmative. Each was personally visited and possible speaking topics plus length of talks were discussed. From these talks brief descriptions of the talks were written and organized under five topic heads: "How Barnes Serves the Community," "Hospital Careers," "Volunteer Services," "Health Care Problems," and "You and Your Health." The resulting brochure—"Barnes Speaks to You"—was printed with its own mailer and sent to 5,000 recipients in the St. Louis area, including a sampling of hospital employes.

Among the programs offered to community groups are two color slide presentations that originate in the public relations office: "City of Care," a visual description of the medical complex and "What Makes Barnes Famous," an explanation of areas in which the hospital has been nationally recognized.

Medical Records Employes Go Back to Class



Nine medical records employes have had a standing date every Monday evening since last October. Enrolled in a medical terminology course taught by Mrs. Kay Bartley, medical records librarian, the twohour sessions emphasize Greek and Latin root words and rudiments of physiology, and internal medicine to familiarize the students with material to be transcribed from doctors' dictation and medical reports. The class was completed in June and certificates were presented. Seated from left to right during one of the classroom sessions are front row: Mrs. Bartley, Mrs. Sam Crockett, Mrs. Dorothy Witton; row two: Carolyn Williams, Shelby Allen, Audrey Russell; row three: Louise Hale; row four: Kathy Sheehan. Two other graduates not pictured are Cassell Newson and Emma Johnson.

Physician Narrowly Escapes Death in a Nepal Avalanche; Seven Killed in Attempt to Climb Dhaulagiri

Dr. James Morrissey, Barnes surgical resident, and William Ross, a Stanford University medical student who was slated to start his internship at Barnes in July, were part of the American expedition who attempted to climb the unconquered Mount Dhaulagiri in Nepal last April.

This is the expedition which ended when an avalanche killed five Americans and two Sherpa guides while they were attempting to lower a bridge over a crevasse at 16,700 feet.

Dr. Morrissey was lucky. While part of the group was ahead at the higher level, he had remained at 12,400 feet to arrange the high altitude equipment.

For Mr. Ross, who would have been Dr. Ross at graduation in June, luck had run out. He was one of the men who were knocked loose from position by the ice sliding down the mountain. "We didn't find any of them," Dr. Morrissey said. "They're up there on that mountain, buried under tons of ice."

For Dr. Morrissey, the expedition began on March 11, when he was contacted by Boyd Everett, leader of the party, who also was killed by the avalanche. "This was the first climbing season since 1965, for the Nepali government had closed the country to expeditions after a bad experience that year."

Boyd Everett's aim was to climb Mount Dhaulagiri, the sixth highest peak in the world, via the treacherous southeast ridge. There had been seven previous attempts to climb the peak but none were successful. The route chosen by Everett's expedition had never before been attempted.



Every American in the expedition was an experienced climber. Dr. Morrissey has been climbing since he was 17, when he first tackled the Grand Teton mountains in the U. S. When he was with the Peace Corps in Africa, he climbed Mt. Kilmanjaro, with his wife, Nola.

The Everett party was one of four major expeditions in Nepal during this past spring. The party consisted of 11 Americans, four climbing Sherpas, three kitchen Sherpas, one Nepali liaison officer and 106 Tibetan porters. (Sherpas are Buddhists from a high valley in the east of Nepal. They are mountaineers and are semi-professionals on Himalayan expeditions.)

"We arrived in Nepal on April 1, 1969," Dr. Morrissey said. "Then we had to wait in Katmandu, (the Nepal capitol), for two weeks for the airline to deliver our freight." On April 20 the climbers were ready to set out. They estimated the climb would take two weeks after reaching the base camp. First, they flew to Pokhara and walked the approximately 65 miles to their base camp. They then established an acclimatization camp at 12,400 feet.

"At 15,000 feet our deputy leader, Al Read, became ill with pulmonary edema," Dr. Morrissey said. "I treated him with oxygen, diuretics, and steroids, then I accompanied him down to 8,000 feet. He had a retinal hemorrhage, too."

Dr. Morrissey was away from the expedition for several days while he attended the ailing deputy leader. He rejoined the group the day before the accident. "An advance party of three Americans and two Sherpas were taking equipment from the acclimatization camp up to 15,000 feet," he said.

Then, it was the morning of April 28. Eight of the party slept at 15,000 feet. Morrissey and another group slept at the acclimatization camp. The temperature was about 20 degrees above zero.

"I spent that morning working on the high altitude equipment. We were well prepared for the expedition—we had 19,000 liters of oxygen," he pointed out. "Jim Janney, a student from St. Louis who will enter Washington University School of Medicine this fall, was helping me. We were just putting packs on to start climbing, about 2 p.m., when we saw Louis Reichardt running towards us, crying, 'Avalanche! Everyone's been killed!'

"My first reaction," Dr. Morrissey continued, "was, disbelief. It didn't seem possible. Reichardt was surprisingly well in control of himself. He said the group was trying to lower a bridge over a crevasse when the ice avalanche came. He was able to maintain his position, though it was almost a miracle. Ice hit him, but no pieces struck that were large enough to dislodge him. Maintaining your position is the whole secret in mountain climbing, anyway."

Dr. Morrissey took charge of arrangements for rescue. "I got together the medical equipment I thought we might need, and we went to the top of the lower end of the glacier, where the accident occurred—it was about 16,700 feet. We searched and found some sacks of food, torn to pieces, and Lou Reichardt's sleeping bag. But there was no trace of anyone in the party. We looked until 9 p.m."

"How did we feel? Empty."

The searchers spent the night at 15,000 feet and early the next morning broke up base camp. A military receiver at Jomson, a village nearby, had picked up some conversation the rescue party had transmitted on their walkie-talkie radios, and sent a runner to determine the extent of the accident.



The southeast ridge of Mount Dhaulagiri, the sixth highest peak in the world, had never been successfully scaled when Dr. Morrissey joined an expedition to attempt the climb late in April. At 16,700 feet, seven men were instantly buried under tons of snow when an avalanche occurred while the climbers were attempting to lower a bridge over a crevasse.

How did it happen? "It's corny to say, 'an act of God,' but that's about the only way to describe it. We didn't really think the expedition was in any danger. A joke among mountain climbers is that the accidents happen to someone else."

A native of Long Island, New York, Dr. Morrissey is a graduate of the New York State College of Forestry at Syracuse, with a medical degree from New York State Medical Center. He came to Barnes to serve his internship, and this month will begin his third year as a surgical resident. His wife, Nola, is a nurse, "and a good climber," Dr. Morrissey says. The couple has three children, aged seven, five, and six months.

"I've thought a lot about the reason I want to climb," said Dr. Morrissey. "The only way I can describe it is that it's a real spiritual experience. You see a beautiful, remote world which belongs to the mountain climber alone. No one can see it unless they do climb."

Will he climb again?

"I don't know-I probably will."



Sporting a full beard after a trip to Nepal, surgical resident Dr. James Morrissey returns to Barnes.

As A Matter of RECORD...

You can always tell a long-time employe at Barnes as he still refers to the monthly employe publication as "the RECORD."

The HOSPITAL RECORD was the name carried across the newspaper masthead from January, 1947, through December, 1965, when a new format accompanied the name change to the BULLETIN.

For the first five years of its publication life, the HOSPITAL RECORD EMPLOYES EDITION came out monthly printed on both sides of a single sheet of paper. A timely illustration usually complimented the news on the front side of the sheet and the back was reserved for "On the Scene" personnel items. These were short paragraphs of employe happenings written by reporters chosen from each hospital department.

Soon there were too many employes with too much news for a two-page publication and a new format was initiated in 1952 with ten pages of copy incorporating photographs. A drawing of the medical center (revised in later editions) was reproduced on the masthead below the name. "On the Scene" was continued and other standing features were added, such as the "Chaplain's Corner," "Know Your Staff" and "Personality of the Month."

March, 1962, was the birthdate of the third variation on the same RECORD. A slick stock fourpager with address label was designed under the editorship of the newly-formed public relations office. (Prior to 1962 the RECORD was written entirely by members of the personnel department). The new format introduced the "HB" logo, first seen in the 1961 annual report and later reproduced on hospital stationery. Inside the newspaper a "Know Your Hospital" column came into existence, highlighting the many departments that comprise the medical center complex.

This version of the RECORD was to last until December of 1965 when board chairman Edgar M. Queeny suggested an even larger page size, monthly 8-page issues, and a change of name to the BARNES HOSPITAL BULLETIN. This edition is recent history for most employes with its increased usage of photographs, particularly the introduction of the photo essay center spread on pages 4-5. A "Focus on Nursing" page was also added, prepared by the nursing service and featuring events of primary interest to nursing personnel.

And finally in January, 1969, the current BUL-LETIN made its debut with a new look in graphics and an emphasis on hard core news and feature stories.

Thus, for nearly a quarter of a century editors of the RECORD and BULLETIN have interviewed and photographed employes, written stories, and fought press deadlines to get the monthly newspaper to the people at Barnes.



Harry Ungerer, veteran Barnes employe with 40 years in the maintenance department prior to his retirement in 1959, provided the old RECORD issues used in this story. If other employes have files of the early RECORDS they would like to give to Barnes the public relations department would be glad to have them for a permanent file.



The BULLETIN has been cited as a winner in competition with many different types of publications. In June, the BULLETIN was given international recognition when it received a certificate of merit from the International Conference of Industrial editors. Only one other St. Louis publication, Southwestern Bell's SCENE, was honored at the ICIE conference in Boston. The BULLETIN has been named "Publication of the Month" by the local ICIE chapter, Industrial Press Association of St. Louis, three times in the past eighteen months. In 1966, the BULLETIN won the MacEachern Citation as the top Hospital publication for that year. In 1968, the BULLETIN was runner up for the same award. This award is presented at the annual American Hospital Association national meeting. That same year, the BULLETIN won first place for newspaper writing at the industrial editor's day at the University of Missouri School of Journalism. This contest included St. Louis, Kansas City and Columbia. Mo. It has not been held since.

The United Fund of Greater St. Louis has presented the BULLETIN with two second place and three first place awards for UF campaign coverage in the past three years. The Midwest Hospital Association has presented the BULLETIN with honorable mention awards for the past two years.

examples of title pages in succeeding editions of the employe publications:

Vol. 3, No 2

1959

1962

1968

1949



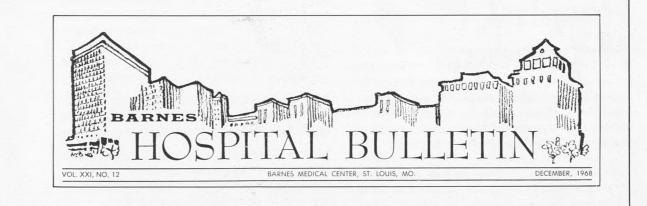
HOSPITAL

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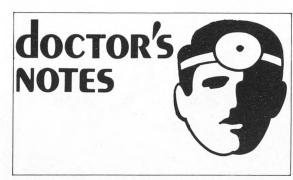
Published by Personnel Department, Barnes Hospital February 21, 1949

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Barnes Barnes Medical Center, St. Louis, Mo. Hospital February, 1969 Bulletin

1969



Edward W. Cannady, assistant physician, was recently elected president of the Illinois State Medical Society.

Bernard Becker, ophthalmologist-in-chief, has been appointed a member of the first National Advisory Eye Council of the newly-established National Eye Institute.

■ Harvey Butcher, associate physician, recently addressed a two-day symposium on the recent advances in diagnosis and management of patients with cancer held at St. Joseph's Hospital in Houston, Texas.

William Daughaday, associate physician, answered the questions of other physicians in the column "In Consultation" featured in the June 16 issue of **Medical Tribune**.

■ Igal Silber, assistant resident in urology, was awarded first prize in the annual resident's forum of the St. Louis Urological Society. Dr. Silber's paper was entitled "Longitudinal Folds as an Indirect sign for Vesicorethral Reflux."

Ernest R. Friedrick, assistant obstetrician and gynecologist, was the guest speaker in the Multidiscipline Cancer Teaching Program at the Hahnemann Medical College in Philadelphia May 16. His topic was "Effects of Progestational Agents on Morphology and Ultrastructure of Adenocarcinoma of the Endometrium."

Neal S. Bricker, associate physician, recently delivered several talks before a two-day postgraduate seminar on the kidneys at Cedars of Lebanon Hospital in Miami. His topics were: "The Glomeralopathies," "Sodium and Renal Disease" and "Nephrotic Syndrome."



George E. Dixon, ACSW, director of social work, has been appointed chairman of the division of professional standards of the St. Louis chapter of the National Association of Social Workers.

John L. Glassey has been named associate chaplain of the medical center to work with Chaplain George Bowles. A native St. Louisan, Chaplain Glassey is a retired Methodist minister.

Darline Bailey has been chosen the Messenger of the Month for July. Twenty-one years old, Miss Bailey has been with Barnes a total of seven months.

A disaster drill has been announced for 3:30 p.m. on July 14.

A picnic for the entire nursing staff was held June 18 in the nursing school residence. Originally scheduled to be held in Forest Park, inclement weather forced the picnic indoors.

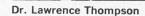
Colin C. Rorrie Jr. has been appointed the first director of continuing education and instructor in hospital administration at Washington University School of Medicine.

Newly Retired Physician and Teacher Recalls Medical Service in 1920's At Close of 47-Year Career

Lending credence to the theory that great things often come in three's, Doctors David P. Barr, Harry L. Alexander and Lawrence D. Thompson came to Barnes in 1922 from the Cornell Medical School in New York.

"Dave Barr had been appointed the Busch Professor of Medicine. He appointed Harry Alexander associate professor and told him to bring a boy out with him as an assistant. I was the boy," recalls Dr. Thompson who retired from Barnes' staff in 1969. (Dr. Alexander died last January 5 and Dr. Barr lives in New York.)

"My first impression of Barnes was that it was well-named," the internist said, recalling the large open visiting area. "In the middle of the present lobby was 'Jack's phone booth', ac tually the central switchboard, but so called because Jack was the man who handled the night phone. It seems to me that admitting was handled at this open counter, too," he added.



"Barnes occupied a three-story building and Dr. Schwarz's OB division took up the third floor. There was no McMillan or Maternity and two houses were located on the east corner. Mr. Burlingham, the hospital superintendent, lived in one; Mr. Wilson, the assistant superintendent lived in the other.

"I started in the clinical microscopy lab on the second floor," Dr. Thompson explained, "and I also taught laboratory diagnostic methods in the Washington University Medical School. The pay was low by today's standards, but it was better than I had been getting during my internship and residency at New York Hospital—which was nothing. But I earned \$5 per four-hour session at the Cornell Clinic."

Then, as now, the medical school was one of the most exacting "grinds" for students. Dr. Thompson recalls seeing students "busted out" by less than a point in pre-clinical studies. "Some teachers gave grades in fractions, for example 78¼," the professor said, "but I could never mark them that closely."

Dr. Thompson taught and worked in the microscopy laboratory full time for five years before establishing a private practice in internal medicine.

Dr. Thompson recalls the student days of doctors "Ed Rinehard, Ed Massie, Carl Moore, Charlie Duden, Frank Walton, Louis Aitken, Gene Bricker, John Hobbs—and, oh so many more."

They remember him, too.

"In school we called him 'Tommy', Dr. Frank Walton said, "and jokingly referred to Thompson, Barr and Alexander as the 'Three Wise Men from the East'. (Later, another team of doctors was given the same title.) Tommy was monolithic, handsome and blond. He gave well-organized lectures and had many students as friends. He was characterized by extreme calmness and an inherent dignity that marked him as a gentleman at all times. He was very business-like, but gentle. You had to know him rather well to discover his excellent sense of humor."

Dr. Louis Aitken remembers that "everyone had great respect for his understanding and clinical acumen—he was an excellent clinician as well as a good teacher." Dr. Carl Moore, Barnes' physician-in-chief, recalls Dr. Thompson's devotion to the Central Society for Clinical Research, a society organized for the presentation of clinical investigation in internal medicine. "He helped found it in 1929, and served in every elective office. When the Society had its 41st annual meeting in November, 1968, it was the first one since its founding not attended by Dr. Thompson," Dr. Moore reported.

In private life, Dr. Thompson is the son of a . medical missionary. He was born in Siam in 1892, but there's some confusion about the date —April 1 or March 31—depending on which side of the international date line one counts from.

The family returned to the U. S. when Thompson was three. He did his undergraduate work at Rutgers University, graduating in 1917. He received his M.D. from Cornell University in 1922 after a year's interruption while he served with the Army's division of chemical warfare. In 1922 he married Ardell Stone, a nurse. The couple had a son and daughter, and now have five grandchildren. Mrs. Thompson died a few years ago.

In October, 1968, Dr. Thompson fell and broke his hip. He fell again in January, 1969—and in April, 1969, the pin broke: "I didn't stay in the wheel chair as I should have," he admitted. It was after the January fall that Dr. Thompson decided to retire. He is home again now, at 55 S. Gore in Webster Groves, after being hospitalized for four weeks and spending two weeks with his son in Belleville recuperating.

"This time I'm going to follow the doctor's orders very carefully," he vowed.



Baseball and horseshoes were two of the spectator sports photographed at the 1948 medical staff picnic by Dr. Thompson and lent to the BULLETIN for this story. In the top photo, assistant physician Cyril MacBryde slugs one home while chief resident Henry Graham acts as catcher. Seated in the background are Doctors Seymour Reichlin, Julius Jenson and William Olmsted. In the bottom photograph retired neurologist A. B. Jones, who now lives in Virginia, pitches horseshoes.



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Services To Be Offered At Health Care Research Clinic Outlined

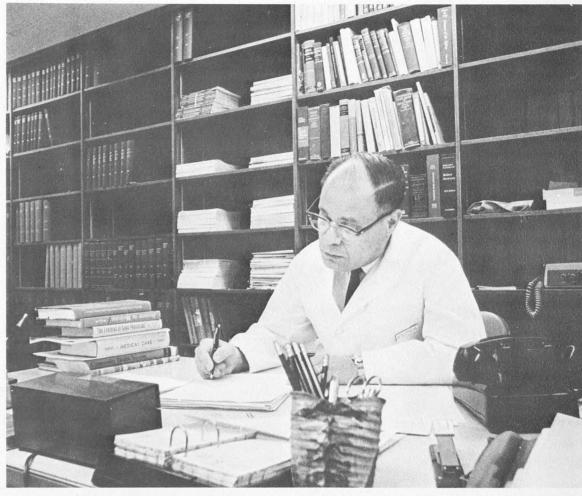
When "Gilbert Green" comes to the fifth floor of Wohl Clinic Building for a doctor's appointment, he will be seen by "Dr. Bryant Brown." Dr. Brown will see Mr. Green each time he comes and if Green's wife wants to see an obstetrician, or if his children have need for pediatric care they will be seen by physicians on the same "team" as Dr. Brown. All three physicians will have access to the family's medical history and are exclusively responsible for the medical care of the Green family.

Initially, this group medical approach will be offered to 500 families being selected to participate in the pilot study of the Division of Health Care Research of the Washington University School of Medicine. Under the medical supervision of Dr. Gerald T. Perkoff, the division was organized last July to initiate various research programs in ambulatory medical care, preventive health services and educational programs for allied health personnel.

Under the group physician experiment which will open to patients around September 1, each candidate will be screened, tested and his medical history recorded in the group files. This record will then be available to the team's three physicians and any specialists brought in on a case. A comprehensive history kept on each patient will also be a valuable teaching aid in the latter phases of the research study when programs will be developed for students and physicians-intraining who will study the group approach to patient care, learning prevention as well as treatment of disease.

The group practice program for the 1200-2000 people involved in the study is financed by grants-in-aid from the Metropolitan Life Insurance Company, W. E. Kellogg Foundation and the National Fund for Medical Education. The medical care for the participating families will be insured under experimental health insurance developed by the Division of Health Care Research and Metropolitan, in which the policyholder will retain his standard indemnity type hospital insurance. The additional policy will cover out-patient diagnostic and therapeutic services offered by the medical team, as well as laboratory and x-ray procedures. It will also cover consultant's fees on both an in-patient and out-patient basis.

The insurance policy will underwrite visits to the doctor's office, encouraging patients to make better use of the physician's services in the early stages of an illness, possibly preventing costly hospitalization later. Early study of patients before it becomes necessary to resort to hospitalization may also help alleviate current overcrowding in hospitals.



From his fifth floor office in the Wohl Clinic building Dr. Gerald Perkoff supervises the work of the Division of Health Care Research, which will soon initiate patients into an experimental group prac-

"Insofar as is possible, it is our hope to arrange visits for various members of a family at the same time to provide screening, preventive, medical and surgical patient care, social counseling and conjoint health planning for all members," said Dr. Perkoff. "In this way, the team of physicians may serve as the 'family physician.' Since the team will have continuous in-patient and out-patient responsibility, a practice situation will be provided for effective teaching of the various medical specialties," he explained.

Application of the group practice experiment may be far-reaching according to Dr. Perkoff. If the long range cost proves to be less than the traditional methods of treating patients, the insurance and group system might be applicable in a clinic set-up such as at Barnes. The continuity of care by one team of physicians could also be applied to a municipal or private clinic setup. And, if preventive maintenance and insured ambulatory services are workable in eliminating a large number of hospital patients, insurance comtice study. Five hundred families will be enrolled in a medical care program which will emphasize out-patient care, preventive medicine, and continuity of medical services.

panies might revamp their determinants for payments, bringing down costs for policy holders.

"In addition to its importance from a medical viewpoint, the emphasis on the preventive medical maintenance program and ambulatory study of patients, is to a large degree directed at costs," said Dr. Perkoff. "If, in our offices, we can handle many of the tests and procedures that patients now have done in the hospital, we will have saved the cost of a bed, meals, additional staffing, etc., inherent in even the shortest term hospitalization," he explained.

Another fundamental of the program is the coordinated care given the patient, which is often lacking for clinic and even private patients. Under the group practice program the internist, obstetrician and pediatrician will act as a team to coordinate health care for the entire family. Except where special skills are necessary, group physicians will retain responsibility for their patients' care in the hospital, as well as on an out-patient basis.

Tape Recorder Purchased Through Mildred H. Hendricks Fund

Mildred Hendricks was not a 'looking backward' kind of person. So this memorial—a video tape recorder which can be used in many ways in rehabilitation of patients—is just the kind of gift which she would approve,'' said Dr. Hugh Chaplin, Jr., at a ceremony May 21 in which the tape recorder was presented to Irene Walter Johnson Institute of Rehabilitation.

The video tape recorder was purchased by the Mildred Hamblin Hendricks Memorial fund in memory of Mrs. Hendricks, who died April 30, 1968. Mrs. Hendricks was a social worker at Barnes Hospital from 1960 until 1963, when she was appointed to the rehabilitation institute staff.

George Dixon, director of social services, also spoke, saying that Mrs. Hendricks "epitomized the principles of social work in practice."



Dr. Hugh Chaplin, Jr., director of the Irene Johnson Institute of Rehabilitation, (center) explains how the new video tape recorder works to Harris Hendricks, left, and George Dixon, right, director of

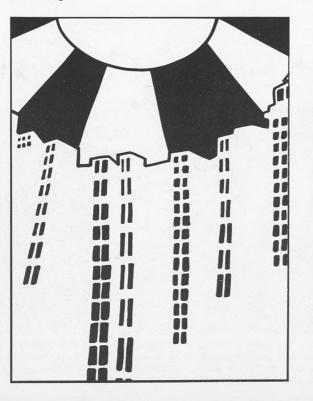
social services at the medical center. The recorder was donated in memory of Mildred Hendricks, Mr. Hendricks' wife, and former Barnes social worker, who died last year.



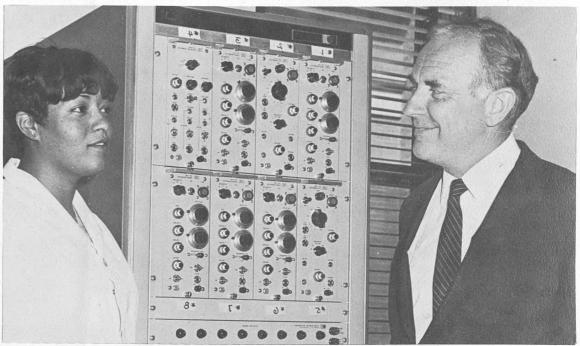
Employe Anniversaries

May 1 - July 31, 1969

Name & Department 25 YEARS	Job Title
Annie Cain	
Housekeeping	Custodian-I
Mae Riley	
Laundry	Feeder-Folder
20 YEARS	
Jennie French	
Nursing Service	Nurse Assistant
Myrtle Johnson Nursing Service	Senior Nurse Assistant
Alice Jones	Senior Nurse Assistant
General Service	Aide
15 YEARS	and the second second second
Georgia Leaks	
Housekeeping	Custodian-I
Irma Norris	
Nursing Service	Senior Nurse Assistant
Estelle Warfield Nursing Service	Senior Nurse Assistant
Dorothy Wilton	Senior Ruise Assistant
Medical Records	General Office Clerk
10 YEARS	
Cecelia Anderson	
Nursing Service	Senior Nurse Assistant
Elizabeth Burton	
Laboratories Bessie Carr	Aide
Nursing Service	Senior Nurse Assistant
Shirley Carter	
Nursing Service	O. R. Technician
James Claywell	
Executive Administration Lucretia Darris	Administrative Engineer
Nursing Service	Senior Nurse Assistant
Evelyn Gansmann	
Nursing Education	
Martha Hoelscher	Receptionist
Admitting and Emergency Hippolyte Johnson	Information Clerk
Central Service	Information Clerk
Betty Jones	Chief Technician
Nursing Service	
Mildred Jones	Licensed Practical Nurse
Laboratories Mildred A. Jones	Aide
Nursing Service	Alde
Pearl Meredith	Senior Nurse Assistant
Housekeeping	
Ava Parks	Custodian-I
Social Service Thelma Ray	Social Worker-III
Nursing Service	Social Worker III
Bettye Robinson	Senior Nurse Assistant
Nursing Service	
Thelma Shannon Nursing Service	Senior Nurse Assistant
Purcell Smith	Chief Technician
Central Service	
Blassie Smith	Senior Nurse Assistant
Nursing Service	
Pete Stewart Nursing Service	Senior Nurse Assistant
Thelma Stocking	Operating Room
Nursing Service	Technician
Margie Sykes	
Dietary	Dietary Aide
Leroy Turner	Supervisor
Housekeeping Katie Walker	Supervisor
Nursing Service	Senior Nurse Assistant
Madeline Wilder	
Emergency and	Admitting Officer
Admitting	



Visitor From 'Down Under' Comes to Barnes



From Sydney, Australia, Dr. Maurice Cleary came to the United States as part of an around-the-world tour to examine modern private facilities. Shown through the trauma unit by registered nurse Mrs.

Editor's Note: A recent BULLETIN included an article highlighting the differences between hospital organization in England and the United States. The following carries the comparison to Australia as described by a prominent Aussie on his recent visit to Barnes.

When questioned on the organization in Australian hospitals Dr. Maurice Cleary of Sydney, Australia, said it is basically the same as in American hospitals except that "perhaps you Americans live a little harder and faster."

Dr. Cleary is general superintendent of St. Vincent's, a 600-bed university teaching hospital in Sydney. As most hospitals in Australia, St. Vincent's is government subsidized with only 20% of its funds coming from patients. As its administrator Dr. Cleary spent a number of years in private practice before assuming the chief executive's job.

Dr. Cleary's visit to Barnes is part of a worldwide tour to see innovative hospital planning for a building program about to commence in Sydney. Dr. Cleary spent two days here, studying Regina Hamilton, Dr. Cleary was interested in the multi-channel analyzer shown here, which digests patient statistics, such as blood pressure, respiration, heart rate and body temperature.

particularly the details of Queeny Tower, as his new facility will be a private hospital, one of the few in Australia.

With government subsidy for hospitalization in Australia there has been little need for private facilities up to now according to Dr. Cleary, but an increasingly large number of individuals wish more luxurious accommodations than are available in the general hospitals.

The new facility will have 200 beds and although it will be connected to St. Vincent's it will be run by the Sisters of Charity. It will not be affiliated with the university but the medical staff who service the general hospital can also admit patients to the private hospital.

Dr. Cleary reported that the problems he encounters in Sydney are much the same as hospital administrators face here. "The biggest headache is payroll—about 70% of our income goes out in salaries. We want to find qualified personnel but it's getting more and more expensive to keep them," he concluded.

Barnes Lands Fifth Place in Top Ten

A two-time winner, Barnes is again among the leaders in a survey of the nation's ten best hospitals. This spring, **Resident Physician** Magazine conducted a survey among 467 interns and residents to evaluate the institutions with the most skilled senior staff and best clinical research facilities as the best place for their specialty training.

The results, published in the May, 1969, issue put Barnes in fifth place among the top ten. The

BARNES HOSPITAL Barnes Hospital Plaza St. Louis, Mo. 63110



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first four winners are: Massachusetts General, Boston; Mayo Clinic, Rochester; University of Iowa, Iowa City; and Columbia-Presbyterian in New York City.

In February, 1967, a panel of distinguished physicians was chosen by **Ladies Home Journal** Magazine to pick the ten hospitals where they believed they could get the very best medical care. In their opinion, Barnes tied for sixth place with Henry Ford Hospital in Detroit.

