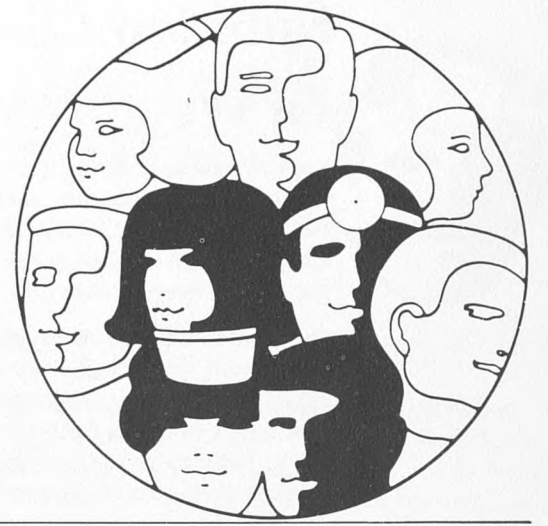


# BARNES

Barnes Medical Center, St. Louis, Mo.

# HOSPITAL November, 1969 BULLETIN

## SHELVED IN ARCHIVES



## Employee Cafeteria to Be Completely Refurbished by Early 1970; Bright Hues, Decor Designed to Make Lunch Areas Big Attractions

Lunch time!

If "happier" words can be found midway through the work day — every day — it's hard to know what they'd be.

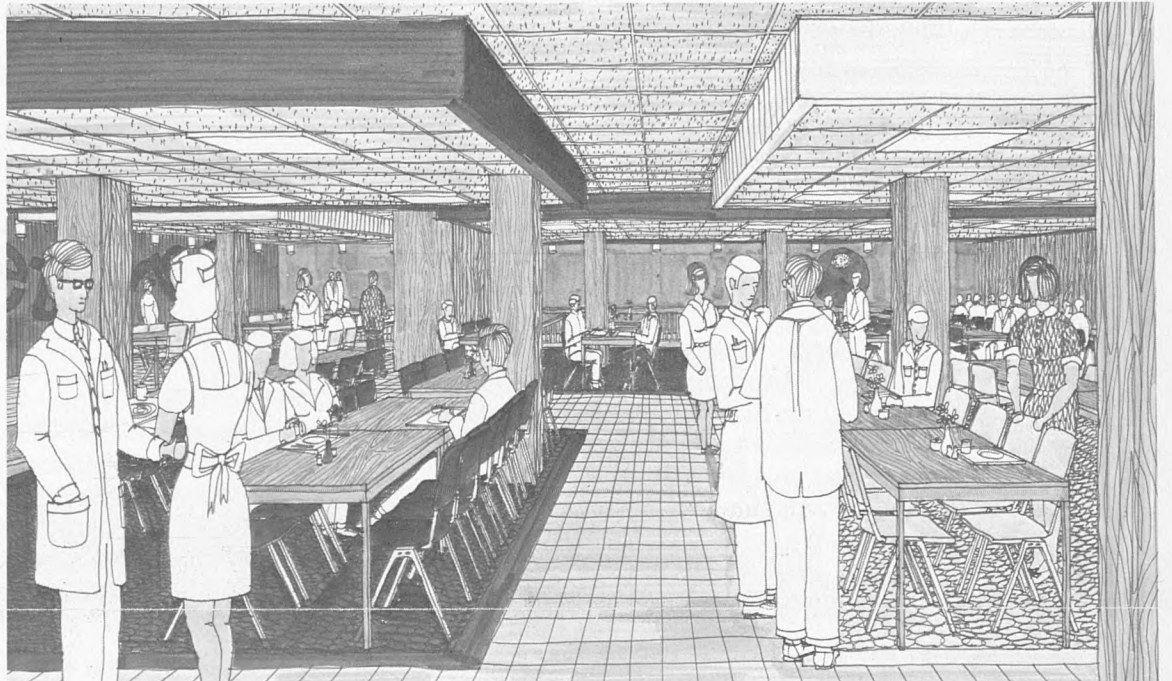
And coming soon, for hundreds of Barnes Hospital employees every day, they will have a special meaning: Eating in brightly-refurbished surroundings of the Employee Cafeteria.

Remodeling of the cafeteria is tentatively set for completion by mid-January. Walls, ceilings and the floor will undergo a complete face-lifting. Vinyl wall coverings, new lighting and a false ceiling will be installed for eye-appeal and to minimize noise.

Ceilings will be dropped from 14 feet to eight and nine feet. Basic color schemes will be orange, yellow and red. Vertical ceiling drops will designate the corresponding colors of the floor and chairs in certain areas.

The floor will probably be an easy-to-clean small-chip terrazo. Air-conditioning will be substantially improved by four additional air-cooling zones. Prior to the remodeling, the cafeteria had two air-cooling zones.

Recently, air-conditioning ductwork was installed



This is an artist's drawing of the employe cafeteria renovation which will be completed early next year.

in the cafeteria to help with the kitchen ventilation. Now, additional air-cooling ductwork will be installed, so both areas are adequately cooled.

Work areas, including salad preparation and

The Barnes board of trustees approved the project at its meeting on Oct. 22.

dish-washing will also be revamped.

During construction, the seating capacity of the cafeteria, 581, will probably be reduced by one-third as sections are being completed.

## Pace Quickens in Last Moments of UF Campaign

Barnes Hospital employees made valiant last-minute efforts to reach this year's United Fund

"fair-share" quota of \$52,000, by turning in large sums of money in the last few weeks of the

drive to swell the total pledge to \$41,935.

On Oct. 24, with returns still coming in, the hospital had reached 81 per cent, to be within striking range of reaching the fair-share goal which was set by the United Fund itself.

On Oct. 24, nursing service, the division with the most employees, turned in \$2,000 to hike their total to \$11,401.

The first departments to meet their divisional goals were personnel, purchasing, stores, forms control, print shop, methods, data processing and cashier's office, under the direction of John L. Warmbrodt, deputy director. On the same day, Oct. 7, Controller Robert McAuliffe's departments of budgeting, general accounting, internal audit, cost-accounting, patients' accounts and fund office passed their divisional goal too.

Among the first nursing divisions to reach their quota were 2 and 7 Maternity which almost doubled their quota. Forty-two head nurses were responsible for the solicitation throughout nursing.

Last year, Barnes employees contributed \$47,263. This year's goal of \$52,000 was a 7.5 per cent increase over the 1968 actual pledge.



By participating in the United Fund Drive, hundreds of Barnes employees joined in the "feeling of sharing" with some of those persons who are less fortunate. Contributions from Barnes employees approached the \$52,000 fair-share quota. Glad to be United Fund contributors, these employees are turn-

ing in their pledge cards. They are, left: Rebecca Smith, chief technician; Eloise Crymes, dispatch; Jessie Mae Pinkston, clerk; Odell Richardson, discharge clerk; Mrs. Ethel Breidenstein, supervisor of the laboratory office; Miss Margie Anderson, R.N., coronary care unit; and John Curry, maintenance.



## Nutrition Clinic Measures Dietary Progress Of Weight-Watchers by Incentive 'Star' Chart

Back in the days of the little red schoolhouse, the teacher rewarded the winner of the spelling bee with a gold star. A chart bearing similar stars hangs on the wall in the Nutrition Clinic on the second floor of Wohl Clinic.

The stars are "won" by patients who lose weight by following "our" recommended diets, according to Mrs. Rose Lee Summers, clinic dietitian. She supervises all activities of the Nutrition Clinic. Patients go to the clinic on referrals from medical doctors at the Barnes Medical Center.

The Nutrition Clinic deals with all types of diets for out-patients.

"Today, obesity is one of the major reasons why patients seek guidance in the Nutrition Clinic. Here, we stress the effects of the Basic Four Food groups—milk, meat, fruit and vegetables, bread and cereal in order to maintain a nutritionally adequate diet," Mrs. Summers said.

"Although the star chart is a gimmick, it is an effective incentive to a patient who is trying to establish correct eating habits. If a patient loses five pounds, his name is placed on the weight-watchers' chart. By losing five additional pounds, the patient receives one of the "coveted" stars. About 300 patients are listed on the elite honor roll and some have successfully decreased their weight by as much as 60 pounds," she said. In mid-September, the Nutrition Clinic launched a series of weekly classes covering four topics: "Planning the Diet," "Food Nutrients," "Cooking for the Low-Calorie Diet," and "Fad Diets." These classes are held at 9:30 a.m. Mondays in the second-floor Conference Room. The classes are available to everyone. Dietetic interns, on their Nutrition Clinic service duty, are the teachers.

Two dietetic interns are on duty daily in the office where they plan diets, counsel and instruct out-patients.

**Mrs. Summers stated:** "If a patient adheres to his diet, he can lose an average of one to three pounds a week. Metabolism is usually not a factor, but overweight is due to overeating and

underexercising."

She noted that most of her patients do not know basic food values and indulge in too many high caloric foods. "One of the biggest problems that we encounter is that most of our patients cook their vegetables with fat meat, thereby adding unnecessary calories," she said.



Miss Carolyn Peters, a dietetic intern, left, checks the progress of a non-hospitalized patient who is sticking her gold star on the weight-watchers' chart.

Obesity is only one of the many diet problems that patients have. Diabetes is also a major concern of the Nutrition Clinic. Classes for diabetics are conducted in cooperation with the nursing staff. The diabetic classes are held at 8:30 a.m. on Tuesdays and Saturdays on the fifth floor of Wohl Clinic. Dietary and Nursing also teach a series of classes for expectant mothers.

Many patients go to the Nutrition Clinic seeking dietary guidance for various reasons. As in the case of the overweight individual who goes to the clinic, he just may find his "lucky star" there, which may drastically change his appearance, health and outlook.

## Recommended U.S. Caloric Intake Ranks Low

An individual's calorie requirements vary depending on the amount of exercise he has, his height and weight.

The daily recommended calorie intakes for American men and women are among the lowest on earth but there is still more obesity in the United States than in most other nations, according to Dr. Robert E. Shank, a professor and head of the department of preventive medicine and public health at the Washington University School of Medicine. Dr. Shank is also a nutritionist.

He attributed it to our sedentary life and the fact that most persons eat more than the recommended number of calories a day.

"Labor-saving devices and technical progress

are reasons why Americans are fat . . . most of us drive rather than walk," he said.

The National Research Council recommends that the average man needs 1600 calories daily and the average woman needs 1200 just to perform bodily functions. Young adults need from 800 to 1200 additional calories.

Dr. Shank noted that the Japanese have a higher recommended daily calorie intake than Americans even though they are smaller "because they are engaged in more physical activity."

## Ed Thurman Elected to Post Of Hospital Security Group



Thurman

Edward Thurman, safety and security director for Barnes Hospital, has been elected president of the International Assn. for Hospital Security. The officers will serve for the year 1970.

The International Association for Hospital Security (IAHS) was formed in February, 1967, for the purpose of establishing a forum for the exchange of information on hospital security administration policy and for a standardization of hospital security concepts, procedures and methods for the general goal of coordinating better security systems in medical care.

## Employee ANNIVERSARIES

MAY 1 - OCTOBER 20, 1969

Name & Department	Job Title
<b>45 YEARS</b>	
Bernice Scott Cashiering	Cashier Supervisor
<b>40 YEARS</b>	
Howard Hehner Stores	Storeroom Manager
<b>35 YEARS</b>	
Murray Adams Maintenance	Store Keeper
<b>30 YEARS</b>	
Orville Lambert Print Shop	Assistant Printer
<b>25 YEARS</b>	
Mae Helen Riley Laundry	Feeder-Folder
Annie Cain Housekeeping	Custodian I
Mae Alice Jones Laundry	Wearing Apparel Preparer
Bertha Bingham Nursing Service	Senior Nurse Assistant
<b>20 YEARS</b>	
Alice Jones Central Service	Aide
Jennie Lou French Nursing Service	Nurse Assistant
Myrtle Johnson Nursing Service	Senior Nurse Assistant
Celeste Feise Dietary	Salad Cook
Mildred Brocksmith Nursing Service	Head Nurse
<b>15 YEARS</b>	
Georgia Leaks Housekeeping	Custodian I
Dorothy Virginia Wilton Medical Records, In-Patient	General Office Clerk
Irma E. Norris Nursing Service	Senior Nurse Assistant
Estelle Warfield Nursing Service	Senior Nurse Assistant
Josephine M. Davis Infection Committee	Infection Control Coordinator
Mary Elizabeth Shannon Infection Committee	Infection Control Coordinator
Glennon Noser Maintenance	Maintenance Man "A"
Maxine Nora Loucks Nursing Service	Nursing Care Advisor
Rose Valle Public Service Administrator	Administrative Secretary
Elizabeth Miller Admitting and Emergency	Administrative Secretary
<b>10 YEARS</b>	
Pete Stewart Mildred Jones	Senior Nurse Assistant Housekeeping and Supply Aide
Mildred A. Jones Madeine Wilder Eveyn Gansmann Elizabeth Burton	Senior Nurse Assistant Admitting Officer Receptionist Housekeeping and Supply Aide
Bessie Carr Hippolyte Johnson Blassie Smith Margie Mae Sykes Bettye Robinson Martha Hoelscher James C. Claywell Thelma Ray Purcell Smith Thelma Stocking Katie L. Walker Ava H. Parks Betty Jean Jones Lucretia B. Darris Leroy Turner Shirley Carter Cecelia Anderson Thelma Shannon Pearl Meredith Delores Peterson Willie Lee Allen Nannie Robertson Lillian Weindel Hattie M. Brown Carolyn Ann Otz Ruth Lee Barr Wayne E. Hankey Patricia Klump Evelyn Stewart Eleanor Delphine Alexander	Senior Nurse Assistant Chief Technician Senior Nurse Assistant Dietary Aide Senior Nurse Assistant Information Clerk Administrative Engineer Nurse Assistant Chief Technician O. R. Technician Senior Nurse Assistant Social Worker III Licensed Practical Nurse Senior Nurse Assistant Supervisor O. R. Technician Senior Nurse Assistant Senior Nurse Assistant Custodian I Ward Clerk Psychiatric Technician Senior Nurse Assistant Salad Cook's Assistant Senior Nurse Assistant Technician Occupational Therapist II Chief Mail Clerk Staff Nurse Custodian I
Ruth Corbin Leimbach Norman Frank Hampton Blanche Jeude LeVerne Snow Wilmer G. Brooks	Ward Clerk Pharmacist Supervisor Nurse Anesthetist Credit Clerk Staff Nurse Maintenance Man "B"

### Barnes Hospital Bulletin

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Constance C. Barton, Director  
John Manley, Associate Editor



## Medical Staff Society Gives Queeny Portrait to Hospital



An oil portrait of Edgar M. Queeny, former chairman of the Barnes Hospital board of trustees and donor of the Queeny Tower addition at Barnes, was presented by the Barnes and Allied Hospitals Society to the Barnes Hospital trustees recently at Barnes. The Barnes and Allied Hospitals Society is an organization of the medical staff in the Barnes Hospital medical complex. Representing the society is the group's president, Dr. Arthur Stein,

right. Accepting the portrait is Raymond E. Rowland, chairman of the Barnes Hospital board of trustees. Queeny was chairman of the hospital board from 1961 until his death in 1968. During those seven years, the size of the board more than doubled and the value of the hospital's service to the community increased by about \$15 million. The portrait is on permanent display in the Queeny Tower lobby.

## New Kidney Unit Set to Open on Jan. 1

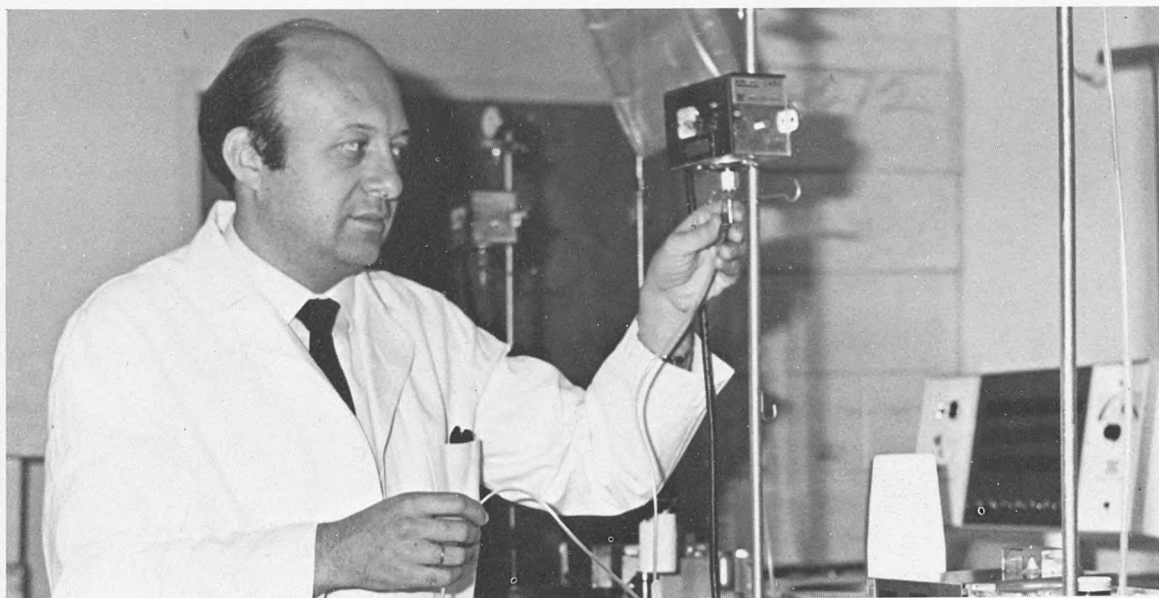
Within the last few years, it has become possible to maintain the life of a patient who has a kidney disease. In some cases patients are restored to normal activities, using an artificial kidney machine.

Yet, despite the existence of this life-sustaining procedure, more than 30,000 persons a year die of kidney failure in the United States. Missouri has about 200 persons who are prime candidates for dialysis which is the use of a kidney machine to replace damaged kidneys. In dialysis, impurities are washed from the blood.

### Tentative opening is set for Jan. 1.

Under the direction of Washington University, the new unit consists of two central rooms — one room with two kidney machines and the other room equipped with three machines, conference room, laboratory, nurses' station and nurses' lounge.

The old unit which is also located on the second floor of Barnes has three artificial kidney machines. The new unit will have five additional machines. The old unit will continue to serve patients with acute renal failure.



Dr. Eduardo Slatopolsky, director of the kidney unit, checks one of the expensive kidney machines.

The Renal Division of the Department of Internal Medicine at Washington University, which has been engaged in a broad-based attack on kidney disease since 1956, has under construction a larger, more modern hemodialysis unit on the second floor of Barnes Hospital to serve as a combined treatment and training center.

The new unit is being built in the area that was formerly the interns' quarters. Construction of the new unit is proceeding on schedule.

Upon qualifying for chronic hemodialysis, patients and their relatives come to the center for treatment and a training period. Training prepares a patient's family so they can undertake continuing dialysis in their homes. Training takes about eight weeks.

Currently, there are five patients who are undergoing treatment and training in the old unit. Seventeen patients are receiving artificial kidney treatment on home machines.

## DOCTOR'S NOTES



■ A group of Barnes Hospital physicians concerned with air pollution control has formed an organization named Lung Specialists of St. Louis Against Air Pollution. Chairman of the organization's executive committee is Dr. S. David Rockoff, director of the division of pulmonary diseases; Dr. Thomas Ferguson, assistant surgeon; and Dr. Charles Kuhn, assistant pathologist. The group plans to meet at intervals to plan action that will help attain cleaner air in the metropolitan area.

■ Dr. Charles Eyermann, who has just retired as emeritus assistant professor of clinical medicine, at age 80, was honored by his friends and associates recently. Dr. Eyermann is a 1911 graduate of the St. Louis University School of Medicine. He established the Washington University Asthma Clinic in 1915. In 1938, he was president of the American Assn. for the Study of Allergy. He served more than 50 years at Barnes and Washington University School of Medicine.

■ An article by Dr. Hugh Chaplin, Jr., Washington University School of Medicine, "Current Concepts — Packed Red Blood Cells," appeared recently in *The New England Journal of Medicine*. Packed red blood cells refer to the procedure of salvaging a donor's most valuable components of blood and "packing them so the recipient receives the components that are most desirable and beneficial. Dr. Chaplin said that it is likely that over 80 per cent of the transfusion needs in this country can and should be met with packed red cells.

■ House Bill No. 40, sometimes referred to as the "Battered Child Act" has been enacted and is now in effect. According to Barnes officials, any member of the medical staff, registered nurse, social worker or others responsible for care of children, having reasonable cause to believe that a child under age 17, brought in for care or treatment, that has suffered injury or disability from physical abuse or neglect by parents or those responsible for the child's guidance, should report the incidents to the City of St. Louis Police Department. Copies of the law have been distributed to each chief of service at Barnes.

■ Dr. Michael De Bakey, heart surgeon from the Baylor College of Medicine, discussed mechanical cardiac replacement during one session of the seventh annual meeting of the Society of Engineering Science, Inc., Nov. 3-5 at the Chase-Park Plaza Hotel. Four hundred persons attended the sessions which covered Engineering Science in Biomedicine. Ninety scientific papers were presented.

### Big Din, Better Learning

Medical students, please note: A person can study just as effectively in the hospital cafeteria, or in a room with rock music blaring, as he can in a hushed library, according to Dr. Peter McLean of the University of Calgary. He states that long-range memory is better when students have to concentrate over background noise.

He tested about 160 students who tried learning to a noise equivalent to a sports car. Immediately afterward, tests were given. It was found that students who studied with noise scored lower than those who concentrated in quiet conditions. But tested the next day, the results showed greater retention of the test material studied with noise.



## HOSPITAL HAPPENINGS



Mrs. Doris Canada, director of dietetics at Barnes, presented the Marjorie Hulsizer Copher award for distinguished service in the profession of dietetics recently to Miss LeVelle Wood, retired educator and author who lives at Portland, Ore., at the Fifth International Congress of Dietetics in Washington, D. C.

The Copher award, established by Dr. Glover Copher in memory of his wife who was the director of dietetics here in the 1920s, is considered the highest award of the American Dietetics Assn. Barnes Hospital administers the award, while the recipient is chosen by the ADA.

Miss Wood was selected for a number of achievements. In 1928, she launched the Department of Institution Management at Kansas State University. In the early 1960s, Miss Wood was a dietary consultant to the surgeon general of the U.S. Air Force. Six thousand dietitians from 27 countries attended the ADA Congress.



Miss Merrell Liveakos, a Barnes dietetic intern, is a recipient of a \$250 American Dietetic Assn. Foundation scholarship for graduate study. Miss Liveakos' application was submitted last year while she was a senior at the University of Alabama. Six scholarships, in all, were presented by the ADA to "outstanding" college seniors entering intern programs or related graduate programs.

Thomas Winston, assistant director, was accepted into membership of the American College of Hospital Administrators recently at the organization's convention in Chicago. The college is an honorary organization which recognizes superior performance and advanced qualifications of hospital administrators.

Miss Diane Mueller has been selected "Messenger of The Month." An escort messenger, Miss Mueller has been employed here for two and one-half years.

About 15 employees, who are artists in their spare time, displayed about 20 art items at a showing and sale held Oct. 27 in the Nearly New Shop. Proceeds were given to the hospital.

Contributing artists and their works were: Thomas Smith, housekeeping, driftwood; Dale Pendleton, maintenance, metal sculpture; Miss Dana Stiebel, daughter of Mrs. Elida Stiebel who is employed in gastroenterology, block print; Marvin Bush, store-room, oil paintings; Mrs. Lucia Trovillion, wife of Henson (Dixie) Trovillion, yard department employe, oil paintings; James and Mark Bemberg, sons of Mr. and Mrs. Kurt Bemberg, prints and paintings.

### Attending-Staff Changes

The following changes in status of the attending staff have been announced. Now on staff are: Dr. Hanna Klaus, assistant obstetrics-gynecology at 3 Maternity; Dr. Julio Lagos, assistant surgical pathologist; Dr. Charles C. Carter, assistant neurologist, Dept. of Neurology; Dr. Alton L. Steiner, assistant physician; Dr. Jay Meyer, assistant psychiatrist, 911 South Broadway; Dr. David Moore, assistant dental surgeon, ninth floor Wohl Hospital.

## Barnes Patients Want Company, Survey Says

A patient survey conducted by Assistant Director Thomas Winston indicates that the great majority of Barnes patients do not want a private room when they are in the hospital, even when they can afford it.

All patients in private and semi-private rooms were given a questionnaire during November 1968. (Excluding emergency admissions.). Members of the Barnes Auxiliary distributed the questionnaires to patients within 48 hours of admission, and discharge questionnaires were mailed to the patient's home with return postage provided.

A total of 882 responses were returned with preferences clearly marked. This was 25 per cent of total possible respondents.

Interesting trends which the survey indicated are:

- 1) Patients who requested private rooms while in the hospital did not regret their decision after discharge, the survey showed. But, a greater percentage of patients said they would have chosen a private room if they didn't have to worry about the cost.
- 2) However, more patients wanted semi-private

rooms, regardless of the cost. And, the percentages stayed the same, whether the person had a more luxurious room or accommodations in one of the older buildings, leading Mr. Winston to conclude: "The request for privacy is apparently just that and not necessarily influenced by the opulence of the facility."

- 3) There was little variation between the sexes, or age groups, in the desire for private rooms. The only exception was in the patients from age 16 to 25. These young people had less interest in a private room than older patients.
- 4) Fewer than half the inpatients who responded felt that their health insurance plan coverage had affected their room choice. Less than ten per cent of discharged patients who had occupied private rooms would request a change to semi-private if hospitalized again; but 56 per cent more semi-private patients would request private rooms if cost were not a factor.
- 5) Regardless of costs, only 38 per cent of patients wanted private rooms.

## Computer Aids Radiology Treatment of Cancer

Aided by the computer, radiology staffs at 19 St. Louis medical units are being helped to provide a more efficient, more thorough and faster methods of radiation therapy for treatment of cancer patients. The computer system was pioneered by the Washington University Biomedical Computer Laboratory.

The hospitals are participating in a program which is funded by a grant administered by the Bi-State Regional Medical Assn.

Hospitals have to first code all the input to the computer and draw some linear pictures. Data about the patient's cancer condition and all the treatment areas and methods are recorded. Then the information is coded. The information must

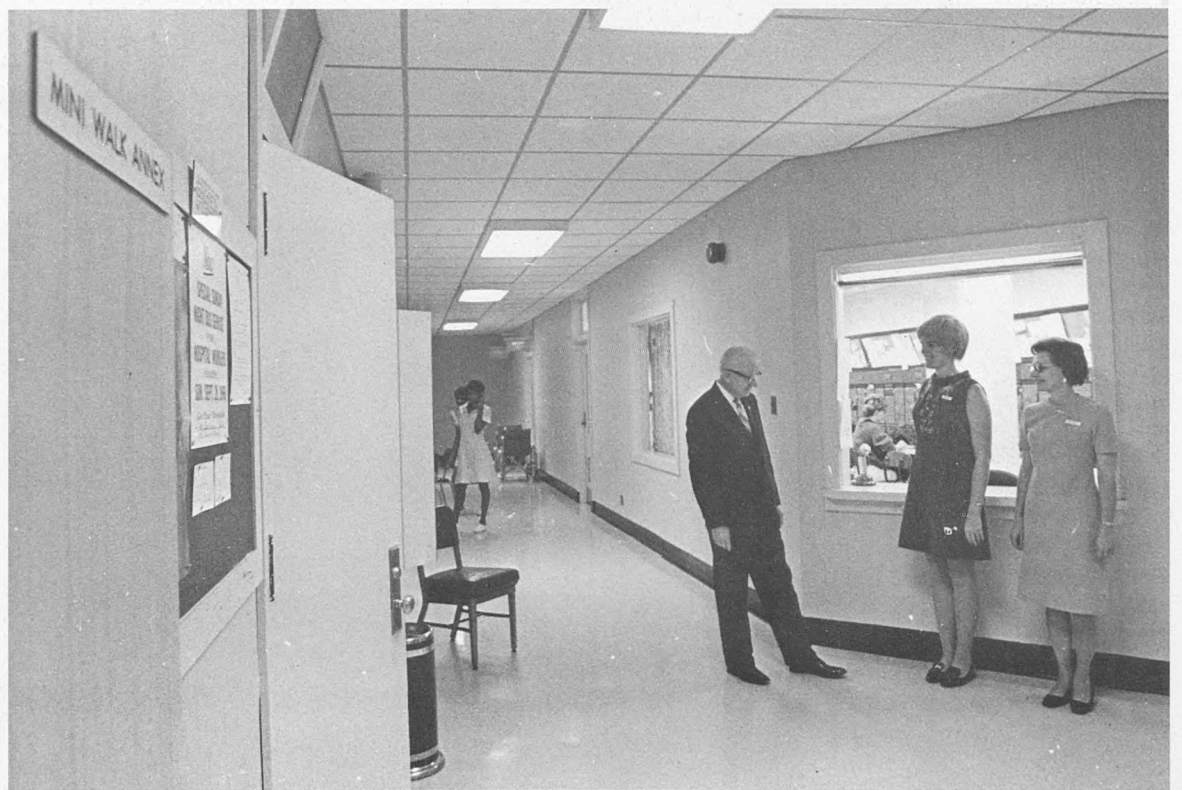
be accurate so that the computer can properly feed back data into meaningful information.

Information concerning x-rays, treatment procedures, the radiation therapy and all the patient's inherent difficulties and the problems that might occur during the treatment are included.

The information is transmitted over telephone lines to Washington University's Mallinckrodt Institute of Radiology. There, in the ground floor of radiation therapy, a telecopier also receives the electronic "impulses" and etches the drawings.

Data is fed into the computer and returned by the telephone lines and telecopier. Cost is nominal.

## The Long and Short of Mini-Walk



Clarence Bopp, communications coordinator, sizes up the situation as Mrs. Marilyn Ross, assistant medical records librarian, center, and Mrs. Angela

Barbour, secretary for medical records, both residents on the Mini-Walk Annex, model current dress lengths.

Skirt lengths on "Mini Walk" and "Mini Walk Annex" didn't really have anything to do with the naming of the newly-renovated area adjoining the main lobby of Barnes. Though the idea may have occurred to employes who thought their little corridor of offices behind the Barnes "red carpet" deserved a special name, the small area deserves the name "mini" too.

Offices and employes who moved to the Mini

Walks this summer are: The methods office, room 1; Clarence Bopp, communications coordinator, room 2; patient information, room 3; the Rev. Robert M. Krawinkel and the Rev. Gerald Wolff, Catholic chaplains, room 4; telephone switchboard, room 5; blood bank office, room 6.

The Mini Walk Annex includes a beauty shop; medical records, room 7; and the doctor's lounge room 8.



# Incentive Plan (1-500) Helps Escort Messengers Keep Pace With Expanding Hospital Services

Four years ago, Barnes Hospital's escort messenger service seemingly had reached the "ultimate" in providing vital hospital services as they made 411,563 trips and errands throughout the medical complex that year.

According to predictions by Dillon Trulove, executive house-keeper, his unit will have completed a whopping 700,000 trips during 1969. About the same number of employees make up the messenger service as back in 1965.

### How did our messenger service almost double its output without hiring additional personnel?

There are many reasons, the largest of which is the "1-500" plan. This particular "500" stands for an incentive plan involving monetary rewards for full-time escort messengers for every completed trip in excess of 500 trips performed during the two-week pay periods. It is not the famed Indianapolis "500" of auto-racing, but like the Indy 500, the incentive plan pays off for speed and accuracy. The incentive plan was introduced into the dispatch system in July, 1968.

Prior to this innovation, six direct lines were installed in key locations throughout the hospital so, upon completion of a trip, messengers could call dispatch for another assignment. The telephone system saves 10 to 15 minutes on each assignment.

Without direct telephone lines, the average number of trips daily by a messenger was 25. Now the average is 50 trips daily.

"I feel that our whole operation has improved, thanks to the incentive plan. Employee turnover has dropped considerably, and absenteeism has been reduced by 50 per cent. At first, employees felt the new plan was unreasonable. However, they gradually realized what it means to them and to our department.

**"There's no doubt about it, the incentive plan has speeded our operation and improved our service. As a result, we are getting more calls daily from departments who are also realizing how we have improved,"** Trulove said.

Other duties of the messengers are: acting as shuttle runners, elevator operators, working in the mail room and assisting in Code 7's. Employees assigned to these duties receive credit for six trips for each hour worked. The shuttle runners have hourly-scheduled runs from 7:30 a.m. until 9:30 p.m., picking up mail, medication and other store-room items and delivering them.

Messengers also operate elevators to the operating rooms in Barnes, McMillan and Maternity hospitals, full-time daily. They also operate freight elevators in Rand-Johnson and Renard, dispatching food carts and central-service items.

The most important duty performed by an escort messenger is a Code 7000 which is a cardiac arrest. A Code "7" is initiated when a person's life hangs in the balance. Messengers are dispatched to the area of the stricken patient in order to be of assistance to the



A Barnes patient receives a smooth ride back to his room from Ron Lasche after a testing session.

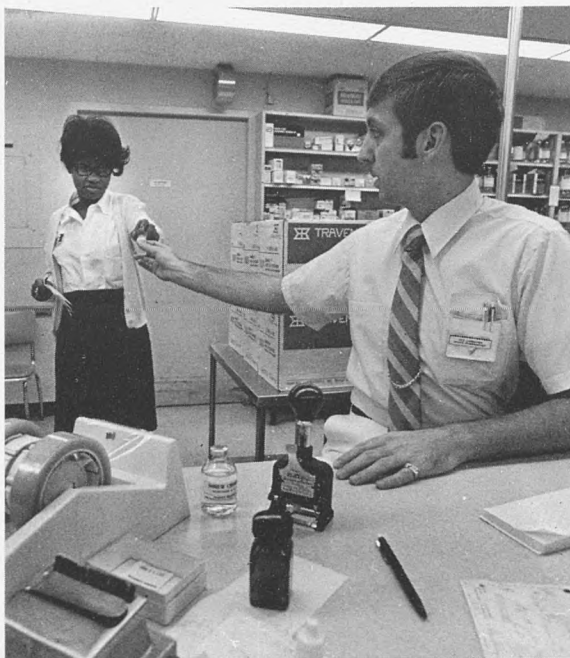
medical staff. Messengers run the hospital stairways on Code 7's to save valuable time.

Dispatch also buys movie projectors and maintains them for use by the medical staff, administration and organizations. Keeping track of the 200 wheel-chairs in the hospital is another duty — and it's no easy chore. Dispatch, which operates 24 hours daily, also distributes the morning newspaper to patient areas and they collect weekly. Messengers also take mail and lab specimens to a nearby hospital, three times a day.

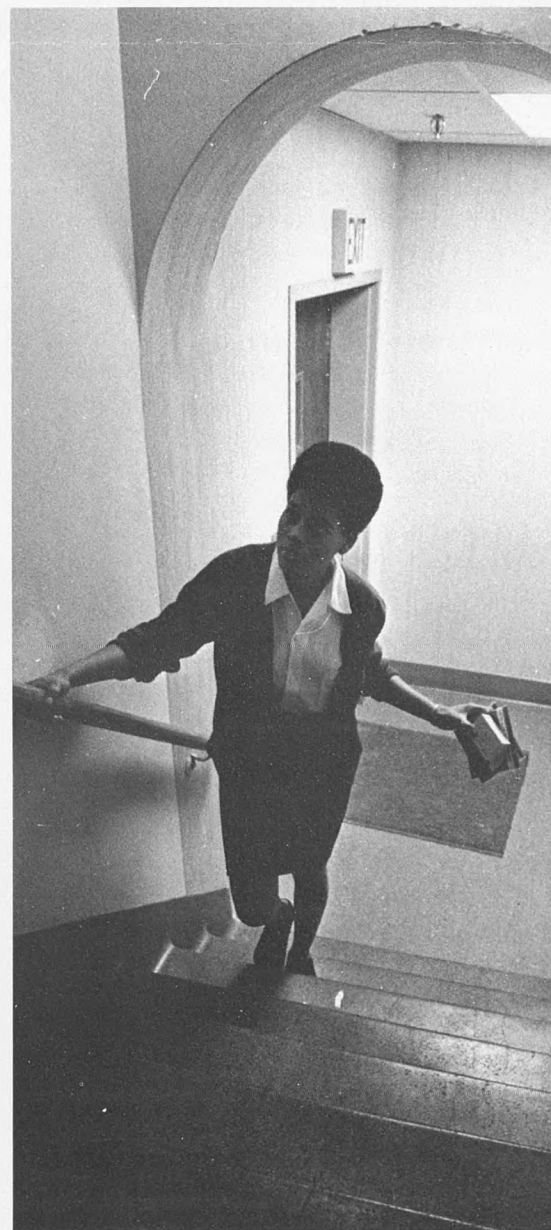
Kay Bartley, director of Barnes medical records department, echoed the same sentiments about the revitalized messenger service: "Their service is 100 per cent better. In fact, their system is so impressive, our department may put our dictaphone pool of typists on such an incentive plan . . ."



Miss Joe Mae Smith hurriedly returns from one escort messenger trip to get another assignment at the message center which is located in dispatch. Upon receiving a call, it usually only takes a few seconds for it to be assigned to a messenger.



Staff pharmacist Ted Limbaugh hands "stat" medication to Miss Diane Perkins in the pharmacy.



Miss Billie Nelson runs the stairs on a "Code 7."



## Check Your Waste Line--It May Be Bulging

The Nutrition Clinic is not the only area that is concerned with bulging waist lines. At Barnes, many persons are concerned with a bulging "waist-line" of a different sort — the bulging WASTE line.

Waste can occur in heat, lights, water and materials. Material waste is the biggest concern at Barnes. There's no doubt about it, excessive waste is material down the drain. The cost of individual items may seem insignificant



Charles Hugger, housekeeper in Wohl Hospital, hauls rubbish in plastic trash bags to the compaction unit.

at first glance, but the items are costly when added together.

As a whole, employees are careful about waste. It is easy to be unconcerned about a leaky ball-point pen or a smudged wash cloth, but these items make a difference as the hospital attempts to provide the most modern medical care possible in the face of rising prices.

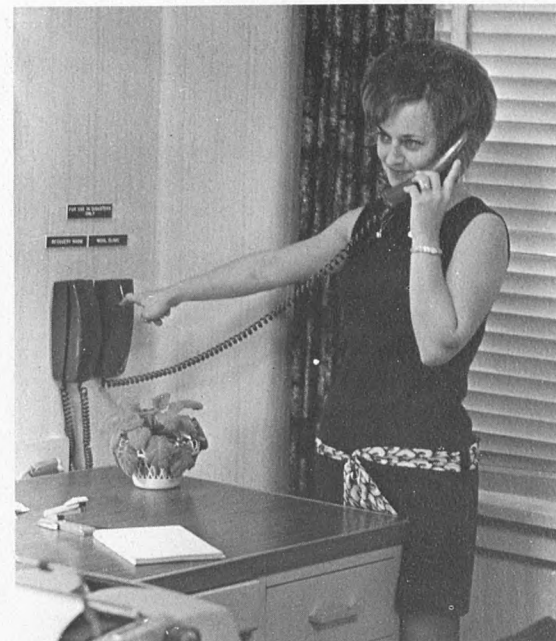
An example of possible waste or poor usage could be in the area of ball-point pens. During a 12-month period in 1966, Barnes used 42,000 pens. The hospital now uses 60,000 pens a year.

Plastic trash bags are another item which may need to be considered. Until this year, Barnes was using 16,000 bags a month. Now the hospital is using 25,000 plastic bags a month. Wash cloths also seem to be getting out of hand. During a recent 12-month period, the hospital used 110,000 wash cloths or 3.67 wash cloths a patient. Projected usage, in the next few months, shows that 134,000 wash cloths will be needed for the next 12 months. This means that each patient will now need 4.48 wash cloths.

In addition, alcoholic swabs, razor blades and many other items are being restocked at a rate of 20 per cent more than in periods in previous years.

Orders for everything seem to be sky-rocketing. However, soap is one item that has remained stable over the past two years, although the patient population has increased. As always, soap is distributed as needed in patient care kits and throughout the hospital.

Considerable amounts of money could be saved if waste could be curbed. A number of factors contribute to waste. Materials supplied from vendors may be damaged or not function properly. Another reason for waste is the human factor. Such things as doors left open and lights left on can cause the utility bill to rise. Last year the hospital utility bill was \$479,198.



Mrs. Pat Tilley, a secretary in the director's office, checks the new direct "hot-line" telephone system to be used for communication during disasters.

### 'Hot-Lines' Installed

## Moscow, Washington Have Nothing On Us

Two red "hot-line" telephones, wall-mounted, have been hung in each of the following locations in Barnes Hospital to more smoothly direct operations during disasters: Disaster Control, which is the director's office, the triage (Wohl Clinic lobby) and the post anesthesia recovery room.

Upon lifting the telephone receiver, a person should immediately be in contact with the unit he is calling. The telephones were installed at the request of the 18-man Disaster Planning Committee after studying results of the July 1 disaster drill in which the entire hospital participated.

At a recent meeting of planning groups, Dr. John Collins, surgery, was appointed a committee member.

The committee decided that casualties going to the post anesthesia recovery room or to the Rand-Johnson operating rooms from triage should be taken via the clinic elevators and across the third floor. In an emergency, triage should be set up outside the clinic entrance rather than in the lobby, except in inclement weather. This decision was reached to prevent patients from entering through the emergency room and should decrease congestion in the lobby area.

Another drill is planned before the end of the year.

There are five categories into which disaster victims, traditionally, are divided. Barnes has used these categories, which are taught to medical personnel at Brooke Army Medical Center at Ft. Sam Houston, Tex. The "high priority" category is patients who need "immediate" medical attention. "Delayed" are victims whose treatment can be delayed, after minor attention. "Expectant" are persons who would die regardless of care.

Of least urgency in the care priority list is the "minor" category, which is for persons who require first aid only, and can care for themselves. The "dead-on-arrival" cannot be helped. "We've now done away with the 'expectant category,'" said disaster chairman Nancy Craig. "No matter how hopeless someone is, we will route them to the emergency room for more intensive care."

## Barnes Says 'Thanks' With Party for Volunteers

Barnes volunteers and their husbands and wives will be the guests of Barnes Hospital at a reception from 5 to 7 p.m. Friday, Nov. 14, in the Olin Residence Penthouse, 4550 Scott Ave. The party will honor almost 300 volunteers who work in the day, evening and week-end programs that are sponsored by the Barnes Hospital Auxiliary and the American Red Cross.

## Rehabilitation Service Doubled Since '59, Dr. Chaplin Tells Barnes and Allied Group

Dr. Hugh Chaplin, rehabilitationist-in-chief at Barnes and director of the Irene Walter Johnson Rehabilitation Institute was the main speaker at the fall meeting of Barnes and Allied Hospitals Society on Oct. 16.

Growth of the rehabilitation service from 12,000 treatment visits in 1959-60 to 24,500 visits during the past year was shown in a slide presentation by Dr. Chaplin. A sophomore medical student, Robert Fahl, described his work in a rehabilitation course, and biomedical engineer Howard Bomze illustrated the use of rehabilitative measuring equipment. Mr. Bomze used the video tape machine recently acquired by the Institute in memory of Mrs. Mildred Hendricks.

John Holloszy, M.D., described a program for the return of the post-coronary patient to normal activity. He outlined therapy which would begin three to four weeks after the patient's myocardial

infarction. The patient would be ambulated under electrocardiographic monitoring, accelerating his heartbeat to 80 per cent above normal, in order to evaluate how much exercise is desirable.

Robert E. Frank, Barnes' director, reported on plans for nursing division 3400, including adding more bathroom facilities. Kenton King, dean of the Washington University Medical School, announced that a department of genetics would be added to the pre-clinical specialties available at the medical school.

Dr. Norman Muschany told the group of recent action at the meetings of the Joint Medical Advisory Committee. President Arthur Stein announced that Barnes and Allied Society had presented a portrait of Edgar M. Queeny to the Barnes Hospital board of trustees, and the board was pleased to receive this tribute to the former board chairman, who died last year.

## Dr. Cordonnier Honored by Former Students

Dr. Justin Cordonnier, urology surgeon-in-chief, was honored by a dinner given by his former Washington University medical students, Oct. 5, at the Broadmoor Hotel at Colorado Springs, Colo. About 50 persons, including doctors and their wives, from across the country attended the fete. Dr. Cordonnier was given a plaque. Dr. Cordonnier has been a full professor at Washington University since 1953. The dinner was held concurrently with a five-day regional meeting of the South Central section of the American Urology Assn., of which Dr. Cordonnier is a past president. About 500 persons attended the sessions.

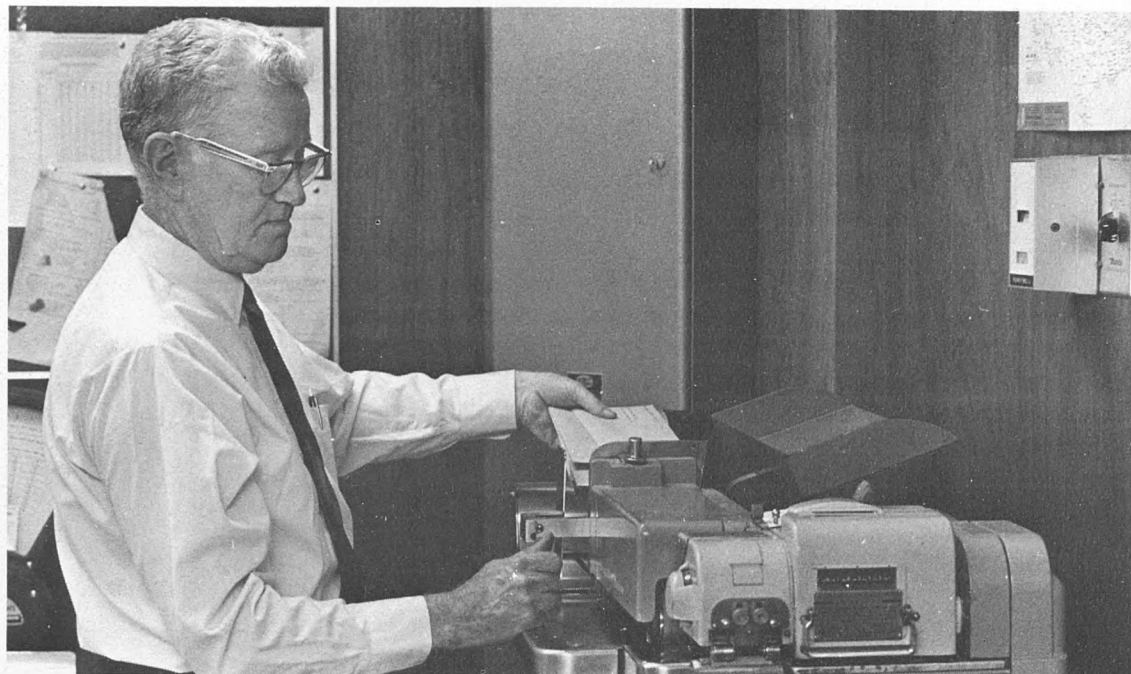
Dr. Charles Manley, assistant professor in the urology department of Washington University, received a plaque at one of the sessions for presenting a case-study of a rare lesion which retard-

ed a child's growth. Other urologists also presented what they considered exemplary cases and Dr. Manley's case was selected as the best in the group.



The Cordonniers





Fred Keeling, assistant chief clerk in the mail room, feeds mail into the hospital's postage meter. There has been a 50 per cent increase in outgoing mail here in the last four years.



Mrs. Martha Hankey, mail clerk, occasionally spends two or three minutes doing "detective work" because an envelope is improperly addressed. Re-routing is Mrs. Charlotte Wagner, mail secretary.



Wayne Hankey, chief mail clerk, prepares to sort a stack of mail which has just come in from the early morning pickup. Magazines, periodicals and packages are also included. Keeling is placing an envelope in the boxes to send it to its proper destination.

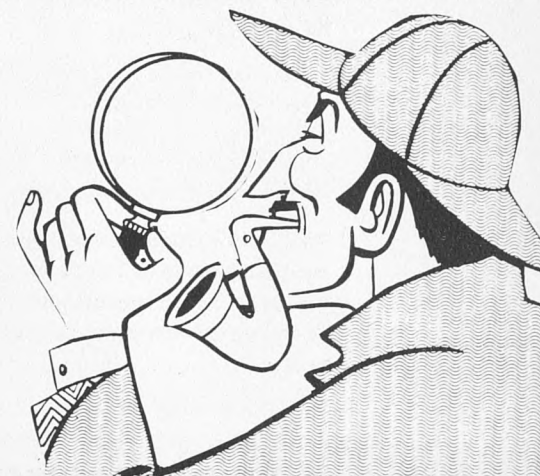
## Mail Room Clerks Double As Detectives

You don't have to be a detective to work in the Hospital's mail room—but it helps.

Patience and self-control are also beneficial. More than 10,000 pieces of mail are processed daily in our mail room in the basement. On some days, as many as 200 letters have to be re-addressed because of faulty addressing by the sender.

Even the astute Sherlock Holmes would be dismayed at the thought trying to deliver a letter which is addressed simply: "Mrs. Dave, Barnes Hospital, 600 S. Kingshighway." Most of the time, it takes our mail clerks only about two or three minutes to pinpoint the location and individual to whom the mail is addressed.

How does a mailman keep from "blowing his cool" as he attempts to handle improperly-addressed mail which threatens to create large bottle-necks? Wayne Hankey, a retired mail clerk in the U. S. postal services, relies on savvy



gained through years in dueling with garbled names and scribbled writing. "We're accustomed to handling these things, and it takes valuable time," he said.

Turning away to sort mail, Hankey said that in the case of Mrs. Dave, he could probably trace her name by checking the daily admission cards. Sometimes, the searching gets really involved. How do you deliver a letter that comes in simply addressed: "Annie, Barnes Hospital?"

Gene Spaulding, assistant dispatch coordinator, who helps supervise the mail-room activities, outlined one approach that might be taken. "Let's say the letter comes in post-marked "Kirkwood." The fact that it is addressed to Annie, not Miss or Mrs., indicates that it could be a child. Since McMillan deals with children patients, we would first check the admitting and discharge cards, then we would probably call both admitting and information at McMillan and ask if they have a patient named Annie from Kirkwood. We would try something else, if that would fail," he said.

The mail room handles mail for patients, doctors, administrative offices and inter-office mail. Special mailings include letters from the director's office, the annual hospital report, **The Barnes Bulletin**, news letters from the School of Nursing and the Hospital Auxiliary. The mail room also sorts and distributes house-staff mail in the doctor's lounge.

"According to our postage meters, there has been a 50 per cent increase in out-going mail here in the last four years because of departmental expansion and increased patient loads," Spaulding said.

Hankey approached and said with tongue in cheek: "I like to think that I can read almost anything that is half-way legible, but here is one that I sure can't." Hankey then handed Spaulding an inter-office envelope with no address whatsoever!

"We face this type of thing daily and the volume of mail keeps increasing," the men nodded.



## Hospital Security Protects Property, Benefits Employes

To a stranger seeking directions at one of the Barnes Hospital entrances, the smile of a hospital security guard can create a favorable image for the hospital and its services. The hospital guard is often the first and last person someone meets upon entering or leaving the hospital.

Creating a favorable image to outsiders is just one of the many duties of our hospital's safety and security force.

Edward Thurman, safety and security coordinator, heads a staff of 36 security guards and officers who are assigned to the hospital.

As urban populations become more and more dense and impersonal . . . as hospitals install more and more expensive equipment . . . and unfortunately, as crime rates make headlines daily, the Security Department constantly increases the scope of its activity.

"Our men check for proper identification, evidence of intoxication and possible theft of materials. The guards also prevent unauthorized persons from entering the hospital complex and wandering aimlessly.

"Such an individual could injure himself or cause a serious accident which could destroy property. These are reasons why we check identification cards on occasion," Thurman said.

Like other vital hospital services, security is on duty 24 hours daily. During the day-



Helping a stranger in a courteous manner is just one of the many duties performed by the security guards. Earl Rickard, a security guard, is pointing out the restricted parking areas to an inquiring motorist. A guard's friendly smile is important.

time, an officer staffs four entrances — the emergency entrance at Wohl Clinic, the entrance of Wohl bridge and the doctor's parking lot, the "courtyard" entrance and the Queeny Tower entrance.

From 9:30 p.m. until 6:30 a.m., the doors of these entrances are locked, except the Wohl Clinic emergency entrance.

In emergencies, outsiders seeking medical attention at Maternity Hospital or McMillan, can ring a door-bell which summons a nearby guard. One guard is always on duty in the security force office in the basement of Barnes.



Security guard Val Tiehes discusses how to use the hospital's fire-fighting equipment with R.N.'s, Mrs. Judie Seronello, center, and Mrs. Barbara Krug, on

Hospital security has many duties, such as checking hospital parking lots during the evening hours. Hospital security constantly patrols the hospital complex. During a patrol, guards carry a two-way walkie-talkie. The guard questions anything he sees that is unusual. One of the pet "peeves" is unlocked cars.

Throughout daytime hours, Security guards regulate brisk auto traffic at all entrances, assist patients and visitors and police restricted parking areas.

Hospital guards have the same power on the hospital grounds that a policeman has.

"We are responsible for picking up a patient's money and jewelry from the nursing division and locking the valuables in a safe in the Cashier's office. Each day, our section is called to escort persons with large sums of money for deposit in the Cashier's safe," Thurman said.

**Security also maintains a lost and found. Items not claimed are turned over to the Nearly New Shop after 90 days, Thurman said.**

"We also provide transportation for about 15 nurses returning home each night. We also escort women employes and wives of patients at night to living quarters nearby," he said. Security also finger prints and photographs each new employe. Another function of the hospital Security force

5200. Fire drills are held weekly in small areas of the nursing divisions to familiarize everyone with the procedures.

is maintaining a fire-fighting unit. Every two weeks, someone from the security force talks with new nurses on how to use fire extinguishers. Fire drills are held weekly in nursing areas.

## Building Projects Told

Two other construction projects are of interest this month. One is just beginning and the other is being completed.

Renovation of the Renard elevators is now underway to completely upgrade the existing elevator system which was installed when the building was constructed. Each elevator will be out of service about 10 weeks.

A dental treatment facility has been established on the second floor of the Wohl Clinics for registered hospital in-patients who may have secondary dental problems that require treatment of minor surgery.

Coinciding is the fact that Gary Baker has been appointed to a newly-created position of dental intern at Barnes. The internship is organized under the plastic surgery division. Duties of the position include repair work in oral surgery.

## Keppel Elected to Post

John Keppel Jr., credit manager at Barnes, has been elected first vice president of the Missouri Consumer Credit Assn., which is affiliated with the International Consumer Credit Assn.



BARNES HOSPITAL  
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