

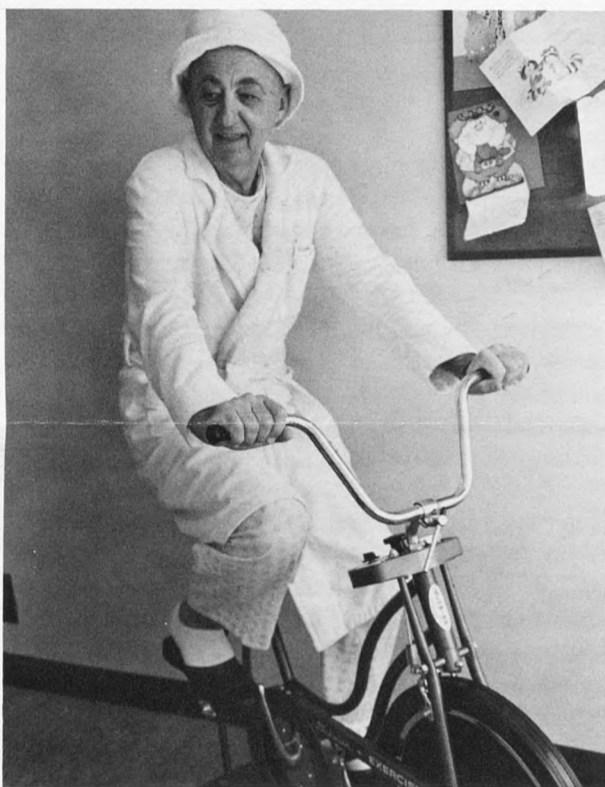
Barnes Bulletin

Barnes Hospital, St. Louis, Missouri, March 1983, Volume XXXVII, Number 3

BMTU opens for cancer patients

Barnes Hospital has recently opened a new, centralized bone marrow transplant unit for cancer and aplastic anemia patients who are undergoing high dose chemotherapy or a combination of chemotherapy, radiation and bone marrow transplant therapy.

The 12-bed unit provides specialized care and a protective environment for these patients, whose immune systems have become compromised as the result of their disease, the high dose treatment or both. Patients are usually hospitalized from four to eight weeks following a bone marrow transplant. Because of the increased risk of infection, BMTU patients are rarely allowed to go beyond the confines of their rooms.



Area residents donated exercise bicycles for patients on Barnes new bone marrow transplant unit.

To help provide maximum protection from infection, nurses wear surgical scrub suits. Rigorous hand-washing with an antiseptic scrub is done for one minute at the start of each shift and for 15 seconds between patients. Special housekeeping procedures are also employed to help prevent cross-contamination from patient to patient. Visitor traffic is closely monitored on the division, and non-nursing personnel are required to wear gowns (and a mask if they have any cold symptoms).

High-efficiency particulate air filters in each patient's private room clean out 99.97 percent of the bacteria, virus and mold normally circulating in the air. They also maintain a positive air pressure so that air is forced out of the room when the door is opened, thus preventing any unfiltered air from entering.

Louvered blinds are recessed between two layers of glass in the triple-paned windows to prevent

the accumulation of dust. (They are controlled by a dial in the room.) There are no draperies or carpet and the floor and wall coverings are seamless to inhibit bacterial growth. Special seals on the windows, outlets and doors provide further protection against infection for these highly susceptible patients.

Each room also features a standard television set and an effort is being made to also provide stereo systems for the patients' diversion and enjoyment. Exercise bicycles, recently donated by area residents, are now providing an alternative to the TV while helping patients retain adequate muscle tone and appetite during their long hospitalization period and strenuous chemotherapy/radiation therapy.

Barnes BMTU is one of twelve such centers in the United States, with the next closest unit located in Minnesota. Barnes has been performing bone marrow transplants since 1975.

Free glaucoma screening open to the public

Barnes Hospital and the Washington University School of Medicine's department of ophthalmology are sponsoring a free glaucoma screening on Friday, March 18. The screening, which is open to employees and the general public, will be held from 11 a.m. to 4:30 p.m. in the Barnes eye clinic.

A pressure check for glaucoma is a painless procedure which takes just a few minutes to complete. Most ophthalmologists recommend that a glaucoma pressure check be included as a part of routine eye exams.

Glaucoma, an elevated pressure within the eye, is one of the leading causes of visual loss and blindness in the United States and can progress without pain or other symptoms. Although glaucoma can strike at any age, individuals who are over age 35 or have diabetes or a family history of glaucoma are at a higher risk of developing the disease. Early diagnosis and treatment can prevent blindness in most cases.

Doctors' Day celebration planned

The Barnes Hospital Auxiliary is celebrating Doctors' Day, March 30, by presenting physicians with its traditional carnation boutonnières and serving them coffee and doughnuts throughout the day.

The hospital Auxiliary members are hosting three different booths in Barnes. They will be located outside the attending doctors lounge on the first floor of Rand-Johnson, in the East/West Pavilion lobby and in the Wohl Hospital corridor near Barnard Buffet. "With these three booths we hope to reach every Barnes doctor at some time during the day," said Dolores Shepard, Auxiliary president. "We want them to know how much all of us appreciate what they do, and just how special they really are to us."

The custom of honoring doctors on one certain day each year was first celebrated in the United States in 1933.

Valet parking now in service at Barnes

Valet parking is now available from 10 a.m. to 9:30 p.m., seven days a week, for Barnes patients, visitors, physicians and employees. Charge for the service, which began on February 21, is \$3, plus regular subsurface garage parking fees (if applicable).

Queeny Tower and East/West Pavilion outpatients can still receive courtesy subsurface garage parking by having their valet parking ticket stub validated by their doctor's office or by the admitting department (outpatient surgery only). The regular subsurface garage fee is 50 cents per hour or a maximum of \$3 a day.

The valet parkers are stationed at the main (West Pavilion) entrance and are easily identifiable in brown jackets, dark brown slacks, tan shirts and brown ties. Patches on the jackets are labeled "Barnes Security, Special Services, Valet Parker." There are two attendants on duty at all times. All valet parkers are fully insured through the hospital.

People utilizing the service drop their keys off with a valet parker in return for a valet parking ticket stub. After the attendant parks the car in the subsurface garage, the patron's car keys, valet parking ticket stub and subsurface garage ticket are placed in an envelope and then locked in the foyer safe. (A security officer is on duty at all times.) Patrons can later retrieve their cars by presenting their valet parking ticket stub. All fees (valet and subsurface) are collected by the valet parker.



The joy of graduation day . . .

Barnes nursing school graduates 68

Approximately 4,000 proud friends and family members watched as 68 Barnes School of Nursing students walked down the aisle at the St. Louis Cathedral in graduation ceremonies held January 29.

Joann Merritt, School of Nursing student, and Jane Owen, School of Nursing instructor, served
(continued on page 2)

Front cover: Barnes School of Nursing student Margie Rittenhouse ponders a chapter on maternity care (see centerspread).

Graduation

(continued from page 1)

as commencement speakers. Mary Jane Meyer, School of Nursing director, and Barnes Hospital president Robert E. Frank presented the graduates' pins and diplomas. A single red rose was also given to each student by Judy Parham, president of the school's alumni association.

Eight of the graduates received special recognition during the ceremonies. Mr. Frank presented the coveted \$2,500 Glover H. Copher scholarship to Theresa Ann Ramatowski. The scholarship was established by the late Barnes surgeon in 1958 and is awarded to the graduate who shows the most promise of continuing his or her education. The awardee must also have a high academic and clinical practice record and have made significant contributions to the overall student program.

Dr. David Morad, Jr., presented the first \$500 Morad award to Kathy Parmley Christopher. The award was established in 1982 by Dr. Morad in memory of his wife to honor those students who "care for patients as people, not as cases." Mrs. Morad was an RN in Barnes cardiothoracic ICU for two years before her death in 1981 from cancer.

Barnes Auxiliary president Dolores Shepard presented the top three graduates with \$200 awards in recognition of their academic achievements: Sherry Ruzensky Goodner, Donna West Nickl and Sharon GERALYN Keeven. Mrs. Goodner also received a \$100 Auxiliary award for excellence in the nursing of children.

Three other graduates also received \$100 Auxiliary awards for excellence in nursing specialties. They include: Holly Woods Huelskamp, medical/surgical nursing; Lisa Ann Kopsky, psychiatric nursing, and Anne Catherine Schmittgens, maternity nursing.

Thirty-one of the graduates have already joined the Barnes nursing staff in such patient care areas as general medicine, obstetrics and gynecology, general surgery, neurology, urology, otolaryngology and the cardiothoracic intensive care unit. They are: Janet Adams, Laura Bisch, Mary Bollegar, Marilou Braun, Katy Christopher, Lola Doyle, Janet Evers, Catherine Fagas, Stephanie Finch, Kathy Fontaine, Sandra Hennemeyer and Sharon Keeven.

Cathy Komor, Joann Merritt, Laura Mullen, Suzanne Nouri, Pam Palm, Martha Rakey, Theresa Ramatowski, Mary Richter, Michael Ruhland, Anne Schmittgens, Kathy Shive, Lisa Thompson, Jana Bruce, Joanne Friese, Teresa Gindra, Cathy Porter, Sherry Goodner, Lisa Kopsky and Donna Nickl.

Hospital notes

Dr. **Thomas B. Ferguson**, Barnes/WU cardiothoracic surgeon, has been elected to editorship of the *Annals of Thoracic Surgery*. Dr. Ferguson was elected by members of the National Society of Thoracic Surgeons.

Dr. **Jack Hartstein**, Barnes/WU ophthalmologist, is leading a symposium on contact lenses and the treatment of corneal disorders at the sixth annual meeting of the Ahmedabad Academy of Ophthalmology. The symposium, covering medical and surgical diseases of the cornea, will be held September 16, 17 and 18 in Ahmedabad, India.

Dr. **Mary Anne Tillman**, Barnes/WU pediatrician, was named a *St. Louis Globe Democrat* woman of achievement for 1982.



IWJ clinical specialist Nancy Woolsey teaches Guillain-Barre patient Esther Cutler how to use a "sip and puff" switch on a new telecommunications system.

Electronics enhance rehab patients' therapy

Patients on the Barnes/Irene Walter Johnson long-term rehabilitation unit are benefitting from a new telecommunications system that allows them to electronically control their immediate environment by simply "sipping and puffing" on a plastic straw.

Patients are considered candidates for the long-term rehabilitation unit if they suffer from a neurological problem and if they have the rehabilitative potential to eventually be discharged to their homes or an extended care facility, said Maggie Fowler, head nurse on the division. The primary goal of the unit is to teach patients to care for themselves with as minimal assistance as possible. Patients in the unit receive intense occupational, physical and speech therapy. Primary care nursing helps reinforce the therapy sessions on a 24-hour-a-day basis, Miss Fowler said, and helps keep the goals for each patient consistent from nurse to nurse.

The telecommunications system is designed for rehab patients who have limited use of their hands as the result of either injury or disease. Bedside switches, including the "sip and puff" type, enable patients to activate their room lights, television set, radio, and nurses' call button, use their telephone and adjust their bed's position.

The patient using the system sips on the straw, which is attached by a gooseneck appliance to the bed, until a light on the monitor/console indicates that the desired channel (i.e. lights, TV, etc.) has been reached. The patient then puffs to turn the channel on. A second puff switches the channel back off. A microphone attached next to the straw lets the patient carry on conversations with either the nursing station or with someone on the telephone. A few extra "sip and puffs" are required to use the telephone, as each digit has to be dialed separately.

Other switches that activate the system by either a bump of the hand or a turn of the head are also available, said Nancy Woolsey, an IWJ clinical specialist in occupational therapy who is coordinator of the project. Although the system was originally designed for a recent patient, it is portable and can be adapted to meet other patients'

needs, said Mrs. Woolsey. Each of the two long-term rehabilitation rooms have been re-wired to facilitate the new system.

The use of electronics represents a big advance in rehabilitative therapy, said Mrs. Woolsey. "The earlier patients begin having some control over what is happening to them, the better off they are in the long run," she said. During a long, acute hospitalization, depression can set in and result in a lack of motivation in patients to try new ways of caring for themselves such as eating with the aid of special hand/arm supports or writing with mouthsticks.

The new telecommunications system helps patients regain their sense of independence, said Mrs. Woolsey. "It has a mushrooming effect psychologically," she said. "The more they are able to do for themselves, the more they are willing to try new things and their rehabilitation moves along a lot more rapidly."

Barnes is the first hospital in the area to utilize the system as a part of patients' acute hospitalization and rehabilitation program, according to Mrs. Woolsey. Other hospitals have used the system to evaluate a patient's progress and to plan for their home use, she said. The environmental control system is a joint project of Barnes nursing service, plant engineering, telecommunications and IWJ.

Dietary employee retires

After over 15 years of service as a dietary employee at Barnes, Willie Mae Mosley retired on January 7. Mrs. Mosley was given a certificate of appreciation from the hospital, as well as many gifts and warm wishes from her friends and fellow employees.



The dietary department surprised Mrs. Mosley with a retirement party held on her last day of work. At the party, Mrs. Mosley commented, "it will be nice to retire, but I will miss everyone here at Barnes." Mrs. Mosley hopes to rest for a while at home, and then begin working on an unfinished college degree.

FDA approves drug for injecting lumbar discs

After reviewing results from a two-year, double-blind study conducted at Barnes/WU and six other major medical centers in the United States, the FDA has approved a drug that is used to treat herniated or "slipped" discs in the lumbar spine by an injection.

Chymopapain, a drug derived from papaya, is now being used by Barnes/WU orthopedic surgeons to dissolve cartilage in lumbar discs that are either bulging or displaced because of injury or disease. These discs can put pressure on surrounding nerves and can cause disabling pain in the back and lower limbs.

Chymopapain is injected into the cartilage of a disc during a procedure called chemonucleolysis under local or general anesthesia. The average hospital stay ranges from three to seven days—less than that of back surgery—resulting in lower cost to the patient in terms of both money and time away from the job or normal living routine.

Between 75 and 80 percent of those patients treated with chymopapain injection experience sufficient symptom relief and avoid laminectomies. Many patients experience some temporary muscle spasm and stiffness after the procedure.

Before the development and FDA approval of chymopapain, patients suffering from herniated discs who did not respond to conservative treatment such as bed rest, medication, exercise and other modalities were treated by surgical removal of the affected disc or discs. Spinal fusion was sometimes necessary. Chymopapain, while not totally replacing surgery, is giving patients and their doctors another option. Patients who have had chymopapain therapy may still have back surgery if the injection treatment fails.

Not all patients are candidates for chymopapain injection, however. Patients who have back pain without sciatica (leg pain) usually do not benefit from the drug. The decision to use chymopapain is made only after conservative treatment methods have failed and a careful diagnosis has been made through a physical examination and by a myelogram (an x-ray taken after a radiopaque substance is injected into the spinal fluid) or CT scan or both.

Chemonucleolysis by chymopapain was developed two decades ago by Dr. Lyman W. Smith of Elgin, Illinois.

New sibling class begins March 14

Barnes department of education and training and nursing service are co-sponsoring a sibling preparation program for expectant parents and their children from 10 to 11:30 a.m. on the second Monday of each month, beginning March 14. Titled "I'm Important, Too!" the program helps parents decrease the incidence of sibling rivalry and promotes family cohesiveness.

During the program, parents and their children are divided into two groups. DET instructors lead informal discussions with the parents on different aspects of sibling rivalry including things to expect from their children and various situations or comments to avoid.

Lesley Martin, head nurse on one of Barnes maternity floors and a pediatric nurse practitioner, is coordinating the children's session. Children will practice infant care such as diapering and feeding and will have the opportunity to observe new-

borns through the nursery window. Head nurses from Barnes nurseries and the clinical director over obstetrics/gynecology are also serving as instructors.

Children participating in the sibling preparation program should be members of a childbearing or adoptive family. They should also be between the ages of 2 and 6 years old. All children must be accompanied by an adult.

For more information or to register, contact the department of education and training at 454-4883. Registration is required, but it is not limited to Barnes patients.



Dorothy and Howard Walker proudly show off their son, Michael James, before his discharge from Barnes premie nursery.

Kidney patient's 'miracle' discharged from Barnes

Michael James Walker was discharged from Barnes Hospital on January 31, apparently unaware that he and his mother, Dorothy Walker, had earned a place in medical history. Arriving three months premature on October 27, 1982, Michael became the second baby born at Barnes to a kidney dialysis patient. Only two other such births have been recorded in United States history and only 10 babies have been born to kidney patients worldwide.

Mrs. Walker started kidney dialysis treatment three years ago after her kidneys failed because of high blood pressure.

Mrs. Walker and her husband, Howard, have five other children ranging from eight to 18 years of age. When Mrs. Walker's kidneys failed, doctors told the couple not to expect any more children.

As soon as her pregnancy was diagnosed, Mrs. Walker's kidney dialysis treatments were increased from three to six times a week to clean her blood of any dangerous toxins that would be harmful to her or the baby.

Mrs. Walker gave birth on October 27. Michael, who weighed 1 lb., 13 oz., at birth, was immediately transferred to St. Louis Children's Hospital's neonatal intensive care unit. Despite problems commonly associated with a premature birth, Michael continued to thrive and was transferred to Barnes premie nursery two weeks before his discharge. He weighed 4 lbs., 9½ oz., on his homecoming day.

Mrs. Walker is continuing her kidney treatments at home now. The first kidney patient to give birth to a baby at Barnes was Helen Robinson of St. Louis, Mo., on January 5, 1981.

Financial consultations available to employees

Free financial advice on such matters as credit concerns, annuity programs, availability and types of loans for buying a home, various savings programs (including IRA's and money market funds) and establishing a budget is available to Barnes employees and their spouses.

Charles H. Eyer mann, Jr., a Barnes volunteer and a retired savings and loan executive, is available for consultation between 9:30 a.m. and 3 p.m., Thursdays. Appointments can be made through the human resources department, 454-3657. All conferences are free and strictly confidential.

Mr. Eyer mann has been providing this service for Barnes employees and their spouses for approximately one year. His wife, Martha, has been in the hospital's volunteer program for 13 years and is currently vice-president (finance) of the Auxiliary. Mr. Eyer mann's father, Dr. Charles Eyer mann, Sr., was a Barnes allergist.

85-year old enjoys "working for Barnes"

Finding unique ways to serve others has been a way of life for Stella Henderson, an 85-year-old grandmother from Kansas City, Missouri. In addition to raising her own two children, Mrs. Henderson has been a wet nurse, nurses' aide, a member of the white cross and has done missionary work for her church.

And now Mrs. Henderson is "working for Barnes," knitting tracheotomy covers for patients on 8400's otolaryngology nursing division.

The covers, which measure approximately four inches by four inches, are tied loosely around the neck and provide protection from dirt and other irritating particles circulating in the air, according to Mary LeGrand, 8400 head nurse. The open weave allows for adequate ventilation and also helps warm the air slightly before it enters the patient's lungs, Mrs. LeGrand said.

"Before Mrs. Henderson began making the tracheotomy covers for us, we would make them using foam (similar to that of eye patches) and hold them on with a chain," said Mrs. LeGrand. "The knitted ones are a lot more comfortable and are also more attractive."

Mrs. Henderson sends the covers in by the dozen, all free of charge. She started the project as therapy for her hands to combat the crippling effects of arthritis, having learned of the tracheotomy patients' need from her granddaughter, Barb DeWalle, a nurse on 8400.

"I Can Cope" offered during daytime hours

Barnes department of social work is sponsoring the first daytime "I Can Cope" program in the St. Louis area beginning on March 30. The program, which helps cancer patients and their families learn to live with the disease, will be held from 1 to 3 p.m., in the conference room on the seventh floor of Barnes' McMillan building.

Barnes/WU physicians, nurses, social workers and other health care professionals who are working with cancer patients are conducting the course, which lasts eight weeks. The registration deadline is March 23. For more information or to register, contact the department of social work at 454-2415.

Changing technology, fast-paced medical advances and better-informed patients have placed new demands on today's nurses. At a time when other fields are experiencing a sharp decline or are even becoming obsolete, nursing continues to grow and expand.

Controversy exists within the field, however, as to the proper training for a "professional" nurse. Proponents of university-sponsored nursing programs stress the importance of a strong academic background in science and the humanities, while diploma school advocates point out the need for intensive experience in a health care setting.

In response to these two divergent, yet ultimately complementary needs within the nursing profes-

sion, Barnes Hospital School of Nursing, a 29-month diploma school program, has affiliated with the University of Missouri-St. Louis.

The new agreement will make it easier for students who graduate from the diploma school to obtain their bachelor of science in nursing degree (BSN), according to Sandy Lindquist, the school's associate director. "Before our agreement, students studying for a BSN often ended up attending several schools." This often caused a problem for students trying to transfer their credit hours, as different schools' requirements vary.

UMSL was chosen because of its solid reputation within the educational community, city and

state, said Miss Lindquist. UMSL's BSN-completion program, which was started two years ago, is focused at diploma school and junior college graduates.

Tuition costs were also a factor. Since UMSL is a state school and is tax-supported, the new affiliation will not raise tuition beyond the reach of prospective students. Tuition for the 1983 freshmen class' first level of study (including the summer term) is \$2,450. Financial aid through the school's student loan program and government assistance for qualified applicants is available.

Students entering Barnes nursing program this fall will attend UMSL for such academic requirements as anatomy and physiology, general chem-

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A favorable teacher-student ratio enhances learning at Barnes School of Nursing.

istry, college algebra, microbiology, human growth and development, psychology, English, sociology and elective courses in history, communications and other subjects. All nursing classes, including specialized areas such as medical/surgical nursing, pediatrics, maternity and psychiatry, will continue to be taught at Barnes.

The entire diploma program, which is fully accredited by the Missouri State Board of Nursing and the National League for Nursing, will consist of 36 UMSL credit hours and 1,297 hours of in-hospital (clinical) training.

As in the past, graduates will be eligible to apply to the State Board of Nursing Examinations for licensure as registered nurses. Now they will also have the option of completing their BSN at UMSL. In addition to the college credit they have already accumulated through their UMSL coursework, college credit may also be granted to stu-



Recruiting, admissions and financial aid coordinator Sue Co student.

dents for nursing classes taken at Barnes if they successfully complete "challenge exams" written by the UMSL School of Nursing faculty.

The new agreement is providing students with the best of both worlds, according to Miss Lindquist. "A vital part of the whole nursing system is a strong clinical component. Now, our students have the advantage of an in-hospital training program, without losing ground in terms of college credit hours to their peers in BSN programs."

The importance of clinical experience in a student's ultimate success or failure as a nurse cannot be understated. Miss Lindquist pointed out, "Our students have the opportunity to experience everything they learn in the classroom. Since nursing is a practice profession, it is only logical that the more clinical experience a student has, the better nurse he or she will become."

The school's setting in a tertiary* care hospital is also an asset to students. "Our students observe and care for a variety of patients and illnesses they simply wouldn't see at most other institutions," she said.

Upcoming changes for the school include a complete curriculum revision. "There is a growing emphasis in nursing on patient education and a trend toward encouraging patients to be more self-sufficient in terms of their own care," Miss Lindquist said. "We're trying to adapt our curriculum accordingly." Special orientation to computers and the use of CRT terminals on nursing divisions is also being considered for incoming students. "The use of computers in all areas of nursing is increasing and we realize that our students would benefit from more information than they receive informally on the nursing divisions."

Barnes School of Nursing, based on a solid tradition of excellence in nursing since its opening in 1955, is growing and changing to meet the dynamic needs of the nursing profession and the doctors and patients it serves.

***tertiary health care**—a specialized, highly technical level of health care that includes diagnosis and treatment of disease and disability in sophisticated, large research and teaching hospitals. Specialized intensive-care units, advanced diagnostic support services, and highly specialized personnel are usually characteristic of tertiary health care. It offers a highly centralized care to the population of a large region; in some cases, to the world. From *Mosby's Medical & Nursing Dictionary*, The C. V. Mosby Company, 1983.



The Nurses' Residence lounge provides a pleasant atmosphere for informal get-togethers.



School of Nursing instructor Marilee Kuhrik teaches students the proper method for turning a patient in the nursing arts laboratory.



tois Jaycox discusses various loan options with a prospective

New column highlights media coverage of Barnes

The public relations department proudly announces the birth of a new column, titled "Media spotlight." The column, which will appear in the Barnes Bulletin each month on page 6, will highlight television, radio and print coverage of Barnes Hospital.

Readers desiring a photocopy of articles about Barnes should contact the public relations department at (314) 454-3515.

Dr. **John Knesevich**, Barnes/WU psychiatrist, discussed Alzheimer's disease with *Hour Magazine's* Gary Collins in Hollywood, California. The segment will air locally on March 7 on KSDK-TV, channel 5.

A segment on the new telecommunications system designed for patients with limited hand function on Barnes neurology/IWJ long-term rehabilitation nursing division aired on KTVI-TV on February 18 (see related story p. 2).

Plans by Barnes to expand the subsurface parking garage received favorable coverage in the *St. Louis Post-Dispatch* on February 14.

Dr. **Octavio de Marchena**, Barnes/WU neurologist, discussed possible causes of early morning headaches with KMOX-TV's Al Wiman. The segment aired on February 11.

Dr. **Julio Perez**, assistant medical director of Barnes cardiac diagnostic laboratory, was a guest speaker on KMOX radio's "At Your Service" on February 3. Dr. Perez discussed the diagnosis and treatment of heart disease. He also taped a segment with KMOX-TV's Al Wiman about the CDL's doppler, a non-invasive tool used to diagnose heart disease. The segment aired on February 8.

The local news media highlighted the homecoming celebration of miracle baby **Michael James Walker** on January 31. Michael was the second baby born at Barnes to a kidney dialysis patient and only the fourth such baby recorded in United States history (see related story p. 3).

Dr. **Clarence Weldon**, Barnes/WU cardiothoracic surgeon-in-chief and Dr. **Robert Wiens**, assistant professor of internal medicine and director of non-invasive cardiology, spoke on heart disease and the pioneering operation of the mechanical heart on KMOX-radio's "At Your Service" program on January 24.

Dr. **Michael Gast**, Barnes/WU obstetrician/gynecologist, was a guest speaker on "At Your Service" on January 20. Dr. Gast's discussion on women's health included unnecessary surgery, high risk pregnancies, contraceptives and pregnancy after age 30.

Dr. **Henry Schwartz**, Barnes/WU neurosurgeon, discussed some of the many changes he has seen in medicine during his 50-year career with KTVI-TV's medical reporter Diana Davis. The segment aired in January.

Hospital notes

The following are reported on staff: Drs. **Mitchell Yanow** and **Ira Gall**, assistant obstetricians/gynecologists, effective July, 1982, and Dr. **Edgardo Mayuga**, assistant anesthesiologist, effective December 1, 1982.

Evelyn Bonander, director of Barnes social work department, was recently voted president of the Society for Hospital Social Work Directors.



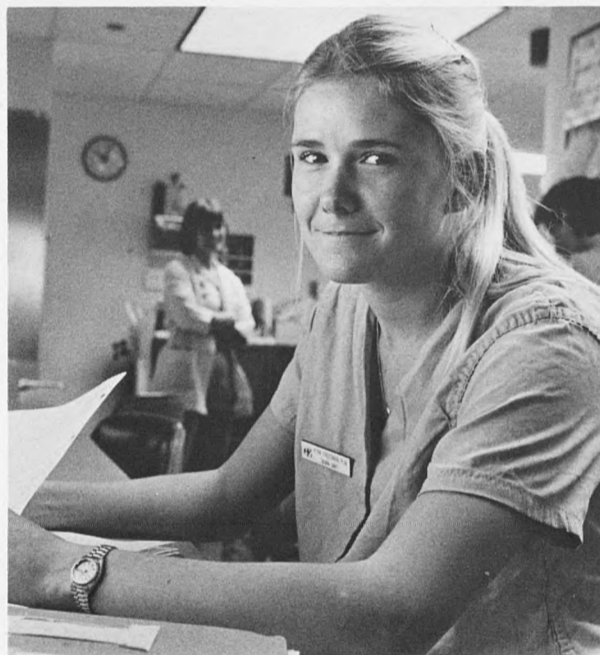
New laundry and linen services department director Gene Bonine discusses 1982 statistics with laundry secretary Catherine Taylor.

Bonine named director of laundry, linen services

Carl Eugene (Gene) Bonine has been named director of Barnes laundry and linen services department.

Mr. Bonine's duties include overseeing approximately 60 employees and an operation that processed more than 7-million tons of laundry in 1982.

Prior to joining Barnes, Mr. Bonine served as director of laundry and linen services for St. Louis County Hospital. He also served as co-chairman of the hospital's safety committee. Mr. Bonine previously was a laundry manager and customer sales representative for the National Linen Service.



Kym Freeman at work in Barnes Burn Center.

JV to RN; the Barnes way

Many junior volunteers come to Barnes Hospital hoping to one day become a nurse, doctor or other health care professional. RN Kym Freeman was one such JV. During Miss Freeman's summer breaks from Villa Duchesne High School she volunteered at Barnes Hospital in the emergency room. And, as the summers passed, she learned much about Barnes and the entire health care field. Because of these experiences, she decided on a career in nursing and enrolled in the nursing program at Vanderbilt University in Nashville, Tennessee.

Upon graduation, Miss Freeman was still unsure what area of nursing she was most interested in,

so she joined the internship program for graduate nurses at Barnes. The 10-week internship program consists of two weeks of orientation and workshops and two four-week clinical rotations with a preceptor on nursing divisions selected by the intern. It offers the new graduate a more gradual transition from the student nurse to staff nurse position while providing the nurse with a behind-the-scenes view of a prospective place of employment.

Miss Freeman chose to work in the surgical intensive care unit and the burn center during her internship. It was the burn center that she found the most rewarding, and she soon applied for a full-time position in the center. Miss Freeman is now one of 14 burn center RNs working in this special care area of Barnes.

Miss Freeman says that her experience as a nursing intern, as well as her summers spent as a JV, helped her to gain the working knowledge she needed to decide upon a specific nursing career. She also added that the internship program is invaluable to a new graduate because it offers the opportunity to gradually become aware of the difference between nursing from a student's perspective and the responsibility of a nurse assigned to a specific hospital area.

Cancer support group helps patients adjust

For many women, having a mastectomy is almost as devastating as the breast cancer which precipitated it. Barnes' "Reach for Recovery" program provides emotional support and information during this difficult period.

Patients are referred to the program, which is sponsored by Barnes volunteer department and the American Cancer Society, by their physicians. Volunteers, all former mastectomy patients who have received special training from the Cancer Society, visit patients while they are still in the hospital. Working on an individual basis, the volunteers share their related experiences and information on breast prostheses, shopping for clothes and swimwear, and exercise.

An effort is made to match-up women who have similar interests, backgrounds and ages, said the group's coordinator, Eleanor Schmitt. "Our primary goal is to help these women adjust to the change in their life," said Mrs. Schmitt, who also works as an RN in Barnes gynecology post-anesthesia recovery. Mrs. Schmitt has been active in "Reach for Recovery" since 1976.

For more information about the program, contact the volunteer department at 454-3446.

New brochure outlines Barnes' services

Copies of a new brochure titled "An introduction to Barnes," which briefly describes the hospital's wide range of services, is available in the public relations office (454-3515).

The brochure includes general information and outlines the medical services, and outpatient services, classes (including breastfeeding, diabetic, prepared childbirth, stop smoking and weight loss) and community interaction groups and services such as the better breathing club, blood pressure screenings, Explorer Scouts, junior/adult volunteers, pacemaker club and publications.

Important phone numbers such as the doctor referral lines and a map locating Barnes are also included.

Central service employees celebrate years of service

Americans are moving from city to city, changing jobs and altering their lifestyles more frequently today than ever before. Contrary to society's trends, however, the employees of Barnes central service department have remained loyal to their positions at the hospital for many years. Ella Wright, for example, recently celebrated her fortieth year at Barnes and her twenty-third anniversary as a central service employee.

To express their appreciation for all of the work, dedication and friendship Miss Wright has shared with everyone in the department, the central service staff surprised her with a party on her employment anniversary. They also gave her a new toaster-oven. Holding the oven tightly in her hands, Miss Wright commented, "It will be put to very good use at my house."

Robert E. Frank, Barnes president, and Allyn O'Byrne, an assistant administrator, recognized Miss Wright for all of the time and service she has given to the hospital. Fern Bridgeforth, director of central service, said, "Miss Wright is one among many central service employees who have worked at Barnes for many years. Many of the employees in the department spend their entire working careers at the hospital."

Beatrice Anderson, chief technician, is also a long-time central service employee. She has worked in the department for 26 years. "I love my job here," said Mrs. Anderson, "and I just could not imagine what it would be like working anywhere else."

Many other central service employees, such as Hippolyte Johnson, have also worked at Barnes for many years. Mrs. Johnson is a 25-year veteran of the department. "My job here is one that I have enjoyed since the day I started in 1957," commented Mrs. Johnson. In addition to her regular duties in the department, Mrs. Johnson also translates for French speaking patients.

Nathaniel Branchcomb, a central service employee for 17 years, said that the people in the department are like a second family to him. Betty Scalise, also a central service employee for 17 years, said, "I really like my job and I will probably be here for many, many more years."

Walt Bradford, supervisor of central service operations, has worked at Barnes for 15 years. "I've spent my entire Barnes career in this department," said Mr. Bradford. "I really enjoy the contact I have with so many different people throughout the hospital. Many of them, however, do not realize how large and diverse our department is, so I always try to convey all of our functions to as many employees as I can."

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Dr. Strominger dies, headed CF clinic

Dr. Donald Strominger, Barnes/WU pediatrician, died at the age of 54 on February 22 of an apparent heart attack. Dr. Strominger, known as "Dr. Don" to his patients, was a leader in the research and treatment of cystic fibrosis.

Dr. Strominger joined the Barnes/WU medical staff in 1960, after receiving his B.A. from Yale University in New Haven, Connecticut, and his M.D. from Washington University School of Medicine. He was director of the St. Louis Children's Hospital cystic fibrosis research center, which he started in the 1960's. At the time of his death, over one-third of his patients were 18 years or older. When he began the clinic, the average life expectancy for a CF child was about 12 years.

Gifts to Barnes Hospital

Listed below are the names of persons (honorees in **boldface**) who have made contributions during the period January 7 to February 8 to the funds at Barnes Hospital. Because Barnes is a private hospital and does not receive public funds, it relies on the gifts of individuals to continue providing quality patient care and to support research aimed at improving the lives of our patients.

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Traffic signals were recently installed on Barnes Hospital Plaza at the entrance to the subsurface garage. The signals were installed for the protection of visitors and employees crossing the street, as well as to aid those persons trying to drive out of the garage onto Barnes Hospital Plaza.

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