

Dispensary

Items for Consideration Regarding the
Portland Free Dispensary

No-1. A decision should be made regarding the continued occupancy of the building at 4th. & Jefferson Sts.

The Committee which was appointed at the last meeting of the Dispensary Board to ascertain if the building now occupied could be leased for a term of years, reported that a lease could be secured for three years at \$125. a month for the first year and \$150 a month for the two succeeding years. Otherwise the rent is \$100 a month with no assurance that it will not be increased at any time.

No-2. Consideration of many points which tend to retard the up-building of the Dispensary.

a. Lack of responsibility on the part of attending physicians.

Physicians who are scheduled for certain clinics often fail to keep their appointments, do not notify the nurse, and do not supply a substitute.

Many times the patients wait for hours and then are sent away without seeing a physician.

The Doctors are due at 11 A.M. The nurse waits until 11:30 then calls up his office to see if he is coming and discovers that he is out of the city or has been called on a case, or is ill and then it is too late to get a substitute.

Illustrations:- In July, 35 patients were sent away because of failure in attendance of physicians. In August, 40 patients were sent away for the same reason. Some came back another day, some never returned.

On Monday Aug. 30, no doctors came for any clinic. Dr. Ricen was on his vacation. The physician in charge had arranged for Dr. Wilmot Fister to take his place. Dr. Foster wished to go on a vacation and he arranged with Dr. Foskett to take his place. Dr. Foskett was moving on that day and forgot to come.

If the physicians who are asked to take charge of the clinics could in some way be impressed with the responsibility of their engagement, it would greatly assist in building up the Dispensary. They should realize that they must send a substitute or at least notify the nurse in time for her to secure another physician. She should be provided with a list of substitutes to call upon for each clinic.

b. Instruction of students.

The physician in charge of the clinic should realize that he comes to the Dispensary not only to attend patients but also to instruct the students.

He should be ~~scheduled~~ here at the time the students are here. The physicians have been coming later and later and often do not arrive until after the time scheduled for the students to depart.

No student is supposed to attend a patient except under the supervision of a physician but this ruling cannot be carried out unless the physician is here with the student.

c. Notification of Nurse.

Whenever a change occurs in the schedule of physicians or students the nurse should be notified before the day on which the change occurs.

d. Eligibility of Patients for Free Treatments.

This question frequently comes for discussion, and some of the attending physicians have the impression that many patients are given free treatment who could afford to go to a private physician.

Various Points of View.

The physician who is instructing does not consider this question, his point of view is to obtain material for his instruction. The medical student holds the same view point, he is anxious for instruction, but the student who the following year becomes the young practising physician anxious to build up his practise, changes his point of view and is very fearful lest too much free medical attention is being given.

The City and Federal Authorities constantly urge us to help in maintaining a higher standard of public Health by rendering more medical Assistance.

As Social Workers we desire to aid every deserving person. On the other hand we realize the injustice of renderin g free aid to those who do not deserve it.

A number of instances have occured where physicians have referred dispensary patients to their private offices and then have sent them a bill for their services.

Other instances have occured where arrangements have been made for an operation on a dispensary patient at some hospital and then a bill for the doctors services has been sent to them. In one instange a patient was sued for his bill, but the case was dismissed after the nurse explained the circumstances to the collection company.

These instances have occasioned dissatisfaction on the part of the patinet and also on the part of the co-operating organizations which referred the patient to the dispensary. The Superintend of the Visiting Nurse Association states that thses things have occured in connection wth several cases which they have sent here and that they cannot continue to send patients to the d&spensary if this practise continues.

Illustration. On Aug. 10 1920, the Visiting Nurse referred a mother and two small children, 6 and 10 years of age, to the dispensary to have tonsils and adenoids removed. The Doctor in attendance at the clinic examined these children and told the mother it would cost her \$30.00 to have this operation including hospital expenses. The nurse in charge knew nothing about this

until Miss Crow of the Visiting Nurse Association told her about it. We feel that the nurse who takes the social history of a case is the one who should decide whether a patient is entitled to free treatment or not as she is the only one who knows the facts of the case.

A large number of patients are referred to the dispensary by other organizations who make their investigation before sending the patient to the dispensary. Such organizations are the

Visiting Nurse Association	The Louise Home
Public Welfare Bureau	The Juvenile Court
State & City Health Dept.	The Cedars
Widows Pension Dept.	The Big Sisterhood
Infant Welfare Assn. of Oregon	Child Labor Commission
Oregon Social Hygiene Society	Woman's Protective Dept.
The School Nurses	

When necessary, the social service visitor of the Dispensary will make further investigation. The physician attending the clinic usually knows nothing about these investigations though each card as it goes to him with the patient is marked to show the organization which has referred the case to the dispensary.

We feel that there should be a definite ruling that no patient should be referred to a physician's private office for further treatment, nor should any operation be performed at any hospital without the physician first confers with the nurse regarding the case. And no charge should at any time be made to a dispensary patient other than that made by the nurse in the dispensary.

No.3 Desired Change in Clinic Rooms

The Pediatric Clinic is increasing so rapidly that another clinic room is necessary for its accomodation.

For the accomodation of the students and the nurse, an additional Gynecology Clinic room is desirable.