



THE

PULSE

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University of Oregon Medical School — Portland, Oregon

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MILITARY DEMANDS OF THE MEDICAL STUDENT

by Richard Crisera, M. D.

Selective Service Laws make all citizens 26 years of age and under liable for military service.

If an eligible citizen accepts a deferment for any reason such as school or employment in a critical occupation, his liability for military service is extended to age 35.

Physicians under 35 are drafted whenever there are insufficient volunteers to provide adequate medical support for the military. The July 1966 draft call is for approximately 2,500 physicians, which will

include essentially all of the present intern group except those deferred through the Berry Plan, and those with prior military service.

Several choices are available to the medical student facing military service. He should investigate all of these and choose the plan entailing the least inconvenience to himself. These choices include: 1) Early Commissioning program 2) Senior Medical Student program 3) Berry Plan, and 4) Cord Plan. The programs of the various services differ only in details, so that which branch you choose must be based on other factors. These

include location and size of hospitals and bases, most common types of duty and intangibles such as "esprit". For example, Naval bases tend to be located away from population centers, and Army bases are in general concentrated in the Deep South.

EARLY COMMISSIONING PROGRAMS:

In these programs a medical student applies for, and if selected, is granted a commission as a reserve officer in the service of his choice. He must agree to accept a commission as a medical officer upon graduation from medical school, and to complete his obligated period of military service in that branch. He loses the option of taking his chances with the draft and possibly avoiding service if the world situation improves, but retains the option of participating in the Berry Plan if he desires.

He may also compete for an internship at the hospital of his choice, military or civilian, through the intern matching program. Additional advantages include performance of service counting toward fulfillment of reserve obligation while in medical school, eligibility to participate with pay in various summer training programs, and service in the branch of his choice.

SENIOR MEDICAL STUDENT PROGRAMS:

Available through the Navy, Army, and Air Force on a competitive basis, these programs provide full pay, allowances, and privileges to those selected during their senior year. Applicants must also apply for a commission, agree to serve on active duty for three years following internship, and to accept a regular (vs. reserve) commission if tendered. Participants are not guaranteed a military internship and may take a civilian internship if they prefer.

BERRY PLAN

Every year each intern is officially given three draft options. These are: call to active duty immediately on completion of internship; call to active duty on a date he specifies within one year of completion of internship; or call to active duty on completion of a residency in a certain specialty. Those who choose residency will be deferred on a random basis, if projected needs of the services so indicate. The remainder will not. Those remaining, unless guaranteed an active duty date because of prior participation in an early

(Cont'd on page 2)



John E. Tysell, Jr., recently elected president of SAMA, Oregon Chapter, receives congratulations and good wishes from the 120th president of the American Medical Association, James Z. Appel, Lancaster, Pennsylvania, during recent visit to the State, while father John E. Tysell, M.D. (left), Eugene, president-elect of the Oregon Medical Association beams approval. All three presidents participated in the recent Midyear Meeting of the House of Delegates of OMA at the Benson Hotel, Portland.

Let's Keep a Healthy PULSE

THE PULSE, a non-profit publication, exists to improve communication between students and students and faculty. To keep THE PULSE regular and normal we need only timely contributions of interest to all; plus modest financial support.

We were pleased that the initial response to our efforts was so enthusiastic, and we hope to stimulate continued interest. We also wish to solicit financial support from our interested readers, and will gratefully accept any contribution to defray the expense of typesetting, printing, and mailing.

Please send your contribution to THE PULSE.

The "Digitalizer" award will be given to those supporting THE PULSE with a contribution of \$5 or more. This month's Digitalizers are the UOMS Chapter of SAMA for covering the typesetting (\$120) and to the Oregon Medical Association for handling printing costs.

— GENETICS OF LEARNING —

Each year eighty graduate MD's and RN's, new copies of the UOMS DNA template are turned out complete with inversions, translocations, and all the copy errors inherent in the complex 4-5 year replication process. Our basic strand of DNA — the curriculum — evolves as does biological life with the additional "help" of teleology and retrospect.

Mutations in our medical curriculum DNA don't arise by chance. They are induced purposely by our teachers for species betterment. Many of the tools for inducing curricular mutations are used with ease, but other tools lie abandoned or are used awkwardly. This paper is devoted to polishing one tool, that of student communication.

Ideas for changing the amino acid sequence of our learning template come from nearly everyone. Suggestions range from abandonment of the grading system to less testing, from non-compulsory lectures to a unified basic science, or patient contact to greater student responsibility in clinics.

BUT, all action stops at this point. If students and staff are really serious about curricular eugenics, why do they stop here? If students want a change, they must accept the responsibility for inducing this change!

Student organization, a non-existent force on our campus, could be a useful tool for exploring existing thought, unifying ideas, and inducing needed change. But, at UOMS, the consultant voice of students is nearly mute. The student-faculty committee is confronted with trivia, SAMA is a magazine subscription, and nursing student body meetings are poorly attended.

Are the problems and ideas only cafeteria small-talk? We feel that the problems are real and that the ideas for solving them have merit. We also feel that a large part of the reason we have only lipservice is the lack of organized student action on these problems.

How can we explore the merit of suggested ideas and follow through with action leading to the implementation of these ideas if we act as individuals?

A well-handled student organization would be a credit to UOMS and could do much for the students in making their many worthy ideas more than small-talk.

Reviving SAMA and the nurses student body on campus will be a big job for the new officers. We believe that it is a job well worth doing. We pledge our support to polishing these rusty implements for mutation and selection in the DNA curriculum of UOMS.

One caution . . . only mutations with a selective advantage survive.

C. M.



Associate Dean Charles N. Holman accepts check for \$11,346.20 from Dr. Raymond M. McKeown, president of AMA-ERF. This amount represents Oregon's share of physician contributions to medical education.

A Senior Thank You:

Over several years, members of the University of Oregon Medical School graduating classes have felt that inadequate seating facilities for graduation are available in our library auditorium. Limitation of tickets for interested family and friends has made it impossible for some persons to attend the ceremony who were directly concerned with the achievements of these new physicians. Mutterings and rumblings from students concerning this matter were not heard. The various administrative persons and Student-Faculty Committee had seemed unable and/or disinterested in solving this "family problem."

This year's graduating class felt quite strongly regarding this need to have facilities for adequate family participation in this milestone. Individual class members discussed the problem with faculty members. Wives spurred husbands on to be assured that mother-in-law could attend. Class officers again presented this problem to the Dean's office and Student-Faculty Committee with emphasis on — "No animosity is acting here — rather we love this 'hill' too, but certainly our most desirable facilities have been outgrown."

As Seniors we sincerely thank those persons interested in this plea. Drs. Haugen, Holman and Dean Baird particularly took interest in bringing these problems to the attention of the Executive Faculty. Today, as Seniors, we look forward to graduation in the Student Activities Building with adequate seating for faculty - family - friends and "new Physicians."

Errett E. Hummel
Senior Class President

MILITARY DEMANDS OF THE MEDICAL STUDENT (Cont'd from page 1)

commissioning program are called as the needs of the service dictate. Although current policy does not allow this, the services may if necessary call Berry Plan participants to active duty prior to completion of their residency training. This is unlikely at present, but would be a consideration in the event of general mobilization.

CORD PROGRAM

This program is similar in all major respects to the Berry Plan, but is operated by the Public Health Service.

Further information may be obtained by contacting Dr. Richard Crisera, Dept. of Pathology (ext. 657), the local representative of the Commandant, Thirteenth Naval District, or through the recruiting stations of the Army, Navy, and Air Force, and from the Public Health service by writing to Washington, D. C.

A Murmur

Overheard in Pharmacology Lecture
"Fatal deaths have been caused by
Doridan (R)"

SAMA ELECTS OFFICERS, INVITES SUPPORT

Elected to Lead SAMA for the Coming Year Are:

President John Tysell
Vice-President Robert Sack
Secretary-Treasurer James Levy
Senior Class Reps
 Frank Thomas — Don Wade
Junior Class Reps
 David Sack — Stephen Teal
Sophomore Class Reps
 David Hagen — Mike Carroll

President's Report

SAMA has been accused of being run by a handful of individuals and of not really accomplishing much. This is not by design but by necessity. An organization is always guided by those few who are active, interested and informed. We would like to expand this group at Oregon and would urge you to attend our monthly meetings.

Even though manpower is short, several new programs have been instituted this past year. An advisory committee met in January and THE PULSE was born under the direction of Craig Mac Closkey who attended this meeting. An externship evaluation was formed by Dean Barnhouse. Coming up is the SAMA golf tournament and picnic, a used book sale, and the National Convention May 12-15 in L.A. which will be attended by your executive committee. On the National level, your president-elect has served as Region 7 secretary, as a member of the Standing Committee on Medical Education, and is a candidate for national vice-president. In addition, we have continued existing programs such as Big

Mr. Lawrence Dean
Sophomore Student
University of Oregon Medical School
Portland, Oregon

Dear Mr. Dean:

From your letter in the March "Pulse" it is clear you are dissatisfied with public education since it is inefficient and has robbed you of your initiative, interest and inquisitiveness. You specifically attack the lecture system because it is archaic and actually inhibitory to the learning process. To this observer it is unclear whether you level your barrage at the lecture system itself or at certain lecturers.

The quality of a given lecture depends greatly on the person delivering it. We have all listened, dejectedly, to the poorly prepared, disorganized, inaccurate, inarticulate and soporific lecturer. There is no defense for such a person and I agree

Brother, Internship Questionnaire, SAMA dance, and liaison with the OMA, MCMS and OAGP. Proposed programs for 1966-1967 will be presented at our next meeting.

SAMA To Meet Monthly

The Executive Council will meet the first Wednesday of each month at 5 p.m. in the Library. All members and other interested persons are invited to attend. Let's make this organization an effective voice of the student body. Attend the next meeting June 1.

UO-SAMA

Advisory Committee Organized

Deans Representative:
 Robert J. Meechan, Asst. Prof. of Pediatrics
Faculty Representative:
 George Saslow, Prof. & Chairman, Department of Psychiatry;
 Robert Bacon, Prof. of Anatomy
OMA Representative:
 Merle Pennington, General Practice
MCMS Representative:
 John Bussman, Pediatric Cardiology
UO-SAMA Executive Committee

Externships Evaluated

A survey of the senior and junior classes was taken by Dean Barnhouse, SAMA's Senior Class Representative. The Questionnaires are now on file in the reserved section of the Library and contain valuable information on a wide variety of both summer and year-round externships. At this

ACTION AND REACTION

that attendance in these instances is a waste of time and energy.

On the other hand a well delivered, well prepared lecture can be an extremely stimulating educational experience. The ideal lecture is intended to supplement other areas of study and to offer direction to the student. It gives the student the benefit of his instructor's experience regarding the topic. By editing, elaborating and in general clarifying the subject as presented in the text, the student is given insight into the important aspects of the material.

In my opinion, complete rejection of the lecture system would be very dangerous. Modifications of the lecture system are already in operation at this institution. Lectures and reading are supplemented by laboratories, seminars, conferences, ward rounds, and personal communication. By utilizing all these methods of exposure the students learn the vast amount of material necessary to become a modern

writing, UOMS, Vancouver Memorial, Physicians and Surgeons and St. Vincent Hospital externs are most satisfied with their program.

THE PULSE

The PULSE, official publication of University of Oregon Medical Students, published periodically throughout the school year by an Editorial Board which is solely responsible for its contents. The views expressed are those of the authors and do not necessarily represent those of the board or the school.

Sports Shorts

Varsity Tennis

Medical-Dental varsity schedule is as follows:

Week of:

May 7 — Varsity vs. Medical Faculty here.

May 14 — 1:30 at Uni. of Portland

May 21 — Varsity vs. Medical Faculty here

The Coach is Dr. G. Schemm of Neurosurgery. Team members are: Dave Oehling, Rich Ellerby, John Earhart, Neil Reynolds and Mike Lucas. Persons interested in playing varsity tennis are encouraged to see Mr. Dockery in the Student Activities Building.

Squash

Team of Dr. J. Foster and Mr. W. Dockery won the Oregon State Squash Doubles Tournament April 9-10-11 at Lewis and Clark College. The winning trophy cups are on display at the Activities Building.

physician. Perhaps you feel these modifications insufficient. If your attitude (letter?) is to be considered serious and constructive, you must offer meaningful alternatives to this system. Otherwise, your timely letter will be dismissed as little more than the idle ranting of a nihilistic student.

In any event, since attendance at most lectures is not compulsory, you are free to "beat the system" in whatever way you see fit. Certainly, in view of your remarks, there would be no "exam material" which you could not better retrieve on your own initiative from other sources, thus allowing you to make your own correlations and to achieve truth as you see it.

Finally, it is not clear, since any system depends on the quality of the instructors and on their judgment, that any new system would be invulnerable to mediocrity.

Richard T. Gourley, M.D.

PEOPLE WATCHER'S GUIDE

A little sunshine brings out the best in everyone and it has become readily apparent that most of the male population on the hill is sadly out of shape. The PULSE once again comes to the aid of its readers with a self practice program in preparation for the rigors of the sport of Girl Watching.

We feel it is best to start with a neutral program of bird watching with the firm hope that you can then apply these fundamental skills toward the attainment of more artistic goals at your own leisure. UOMS bird watching requires no special equipment but a boring lecture and the ability to keep your eyes open. The following UOMS birds have reported in the area and are listed here to help you get started on your project:

The Front Row Scriber (*Scribitus agitans*) . . . This bird is usually found nesting somewhere in the front row. He is often seen in full flight midway between the lecture hall and the library about twenty minutes before the lecture. Notice the identifying features: The beady eyes from sitting so close to the board, the nervous movements of the head from side to side so as to not miss a thing, and the nimble fingers with which he transcribes every word uttered by the lecturer.

The Knowingful-nodder (*Pseudo impressus*) . . . This bird is especially colorful on ward rounds. He starts into his characteristic dance in response to the stimulus of any explanation offered by his mentor. The nodder's head immediately begins to bob up and down in agreement with everything being said almost as if he were fielding each pearl individually. Often these birds travel in groups and the fortunate watcher may see an instructor conversing with four or five at a time!

The White Legged Grace (*Schussus interruptus*) . . . This is a grounded variety of the Slalom Snipe or the Downhill Flit. This bird is usually recognized by its mahogany coloration and characteristic flying call "Track..Track..Track." The female of the species is indeed a lovely creature. You are immediately struck by the robelating action imparted by her gait by the fifteen pounds of plaster of Paris wrapped around one leg. The White Legged Grace actually acquired her name from the delicate manner in which she sits down to drink her coffee. Its rather reminiscent of an attempt to play the cello in a sheath dress.

The Small Bladdered Fidget (*Impulsus argentii*) . . . This is a normally rather mild mannered bird who derives his name from the intense anxiety he seems to generate when the lecturer decides to go half an hour over time.

The Scarlet Eyed Bleary (*Bacchus bacchus*) . . . This bird migrates to either the beach or the ski slopes on the weekends. He is often either accompanied by, or in search of a female of the same species. This bird has a habit of finding fermented berries somewhere along the way, and is so named for his appearance on Monday morning ward rounds.

Some of these birds will escape the inexperienced eye but patience and practice will reward the diligent bird watcher. If you should come across any birds not listed here please write down the description and name of the bird and hand them in to any member of the PULSE staff and the Fall issue will contain the newly identified birds and rewards will be given their discoverers.

Stephen Ebert, Humor Editor

ACTION AND REACTION

Portions of the MCAT, taken by all incoming medical students, have been shown to correlate favorably with students grades in the first two years of medical school.¹ In fact, as this data indicates, one could inform an incoming freshman student who received 513 on the MCAT Science Exam (an acceptable score at this institution) that he has only two chances in ten of ever achieving a grade point average in medical school above the class mean.

Since many students grades can be approximately predicted before they ever begin course work (especially those at the upper and lower 27% level) it would seem that emphasis on grades would be minimized. However I have never known a group so grade conscious; often to the exclusion of all other concerns. Even students who are in no particular scholastic difficulty will express the idea that this preoccupation is detrimental to their learning but feel it is inevitable under existing conditions.

Special stress is laid on those at the

low end of the grade population who feel they must struggle for grades to keep from repeating an entire year. I believe this stress contributes to even greater scholastic demise as well as grossly inhibiting attainment of essential knowledge. Furthermore I feel that this breeds much resentment of the faculty; with subsequent "loss of communication." The presence of this stress attests to the initial existence of high motivation and it is curious that anyone should feel that this negative reinforcement is necessary to promote learning.

Those who feel some means must be provided to weed out incompetent medical students might consider the very low number of these students which the present grading system actually selects out each year in relation to the detrimental effects which it has on the learning process of many students. Furthermore, those concerned with loss of student-faculty communication should realize that it is absurd to suppose that any close, sincere relationships can exist between an individual and his judge.

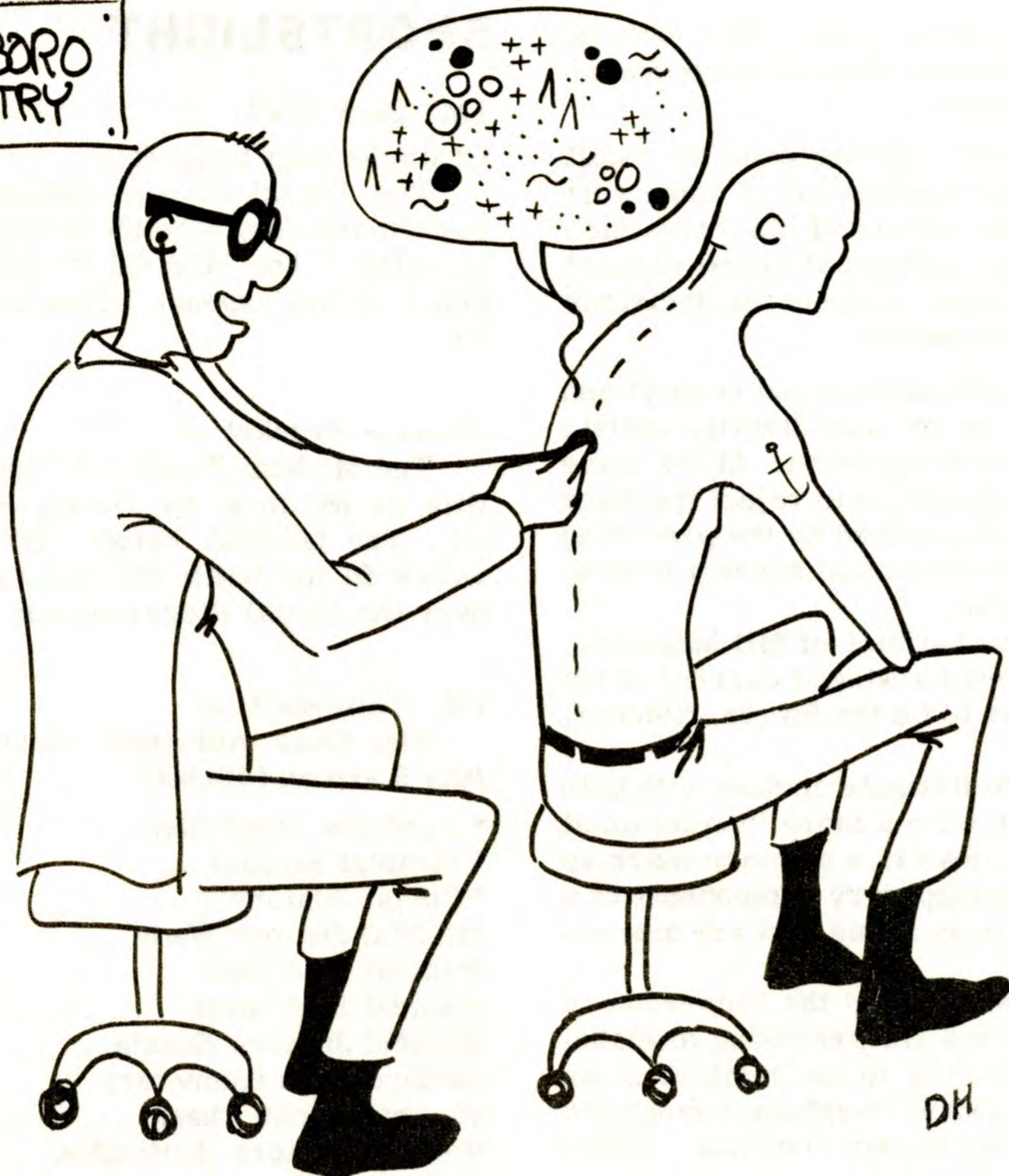
Other medical schools are making organized attempts to investigate the purpose, method and effectiveness of medical student evaluation.² To my knowledge no established effort, toward this end, is being made at our school. It seems to me that an impartial evaluation could be built into our system; not handled by our professors and based on an individual's maintenance of his original position in the student population.

(1) "Prediction of Medical School Performance and its Relationship to Achievement," J. A. Buehler and J. B. Trainer, *Journal of Medical Education*, 37, 10-18, 1962.

(2) One very recent example has appeared in the *Journal of Medical Education*: "Examination Procedures as Part of a New Curriculum," 41, 135-142, February, 1966.

Respectfully submitted
Lawrence Dean, Sophomore

MARLBORO
COUNTRY



HOW LONG HAVE YOU HAD THIS LITTLE TICKLE IN YOUR THROAT
MR. FINKELDY?

OPPORTUNITY

To the Editor
The Pulse

Dear Sir:

I would very much like to place an ad in the Pulse, if this is permissible, for an Externship that is available at the Lebanon Community Hospital for a 12 week period in the summer of 1966. This Externship has a stipend of \$400 per month and is available for married as well as single students.

The primary purpose of the Externship is to acquaint the individual with the fundamentals of a rural practice and to have close observation of this type of practice. Definite complete particulars of this program have been placed on the bulletin board at the Medical School.

Have all interested people contact Dr. Ken Haevernick, 41 W. Maple, Lebanon, Oregon or call collect, 258-6467, evenings.

Very truly yours,
K. B. Haevernick, M.D.

A Model For Our Residents And Other Medical Chart Keepers

"They say man has succeeded where the animals fail because of the clever use of his hands, yet when compared to the hands, the sphincter ani is far superior. If you place into your cupped hands mixture of fluid, solid and gas and then through an opening at the bottom, try to let only the gas escape, you will fail. Yet the sphincter ani can do it. The sphincter apparently can differentiate between solid, fluid and gas. It apparently can tell whether its owner is alone or with someone, whether standing up or sitting down, whether its owner has his pants on or off. No other muscle in the body is such a protector of the dignity of man, yet so ready to come to his relief. A muscle like this is worth protecting."¹

Ability like this is worth nourishing. Many medical students could learn to write with equal flair. We should be teaching them.

1. Bornemeier, W.C.: Sphincter Protecting Hemorrhoidectomy, Amer. J. Proct., II:48-52, (Feb.) 1960. (JAMA 1965).

WE GET LETTERS

Dear Editor, The Pulse:

I enjoyed your first issue and welcome it to our life at the medical center. May more students get into the act with their own contributions of questions, doubts, praise, comments, evaluations, etc. Only students can tell us what it is to be a student.

George Saslow, M.D.

The Editors, "The Pulse"

Dear Colleagues:

It was a great pleasure to read the first issue of "The Pulse". I'm sure I join many of the faculty who wish you every success in what is clearly a disciplined effort to improve our understanding.

James Metcalfe, M.D.
Professor of Medicine

Craig MacCloskey
Editor, The Pulse

You're great. Congratulations and thanks for your initiative and openness in getting such a potentially valuable project going. The responsibility and spirit you guys are modeling for all of are certainly needed and I wish you well.

Jeanne S. Phillips, Ph.D.

Nursing Students' News

Nursing students recently concluded their campaign for Student Body Officers. The results of the election will be announced in the next issue.

The Student Nurses of Oregon (SNO) have elected two junior nursing students to executive offices in their association. Sandi Ross was elected first vice-president and Phil Hostetler as second vice-president. Sandi, as well as 31 other U. of O. nursing students, will help represent our state at the National Student Nurses' Convention to be held in San Francisco June 9-13.

Alpha Tau Delta, the national fraternity for university nursing students, will pledge its new members on Thursday, May 12, at 7 pm in the SAB.

CONCERNING ETHICS.....

"The Golden Rule is an admirable statement so far as it goes. But its basic defect today is that all too often we do not know how we ourselves wish to be done unto. This of course makes doing unto others somewhat difficult." — Dr. Richard Thomas Barton

It is not altogether too uncommon for a young person who is just beginning to "shift and do" in the world for himself to become concerned with the formulation of some sort of code of correct or right behavior which will govern the nature of his interaction with other people. Some of these individuals gather up their notions of moral conduct around pillars of one or several central premises. From these maxims the decisions of conduct or correct actions fall into more or less logical sequence.

Still others look to some person who inspires their admiration and respect and attempt (with varying degrees of success) to be guided by or perhaps directly imitate this person and his teachings whether or not they follow any logical pattern. At the same time there is a common tendency for these young thinking people to reject (perhaps temporarily) those notions of moral ethic which have been propounded by the preceding generation. This is probably no cause for concern and is in most cases a natural accompaniment to new-found physical and intellectual freedom.

To use the metaphor of Doctor Marti-Ibanez, Editor-in-Chief of MD Magazine, "everyone during his lifetime sends forth with his word a winged carrier of his thoughts — a crystal arrow." In other words, youth yearns to be the forger, fletcher, and archer of "crystal arrows" of his own making.

Due to the nature of a profession in which one comes into intimate contact with both the lowest and highest forms of human need, medical men have a more than minimal concern that each of their individual arrows strike as close to a common mark as possible and consequently should be acquainted with the contemporary components of a moral decision. Complicating his decisions are the rather hazy areas that are associated with many medical problems.

Doctor Barton in a freshman orientation address to the students at the University of California aptly stated that the doctor often finds himself in the embarrassing dilemma of not knowing how he himself might wish to be dealt with were he in the position of the patient. Doctor Barton goes on to make the assertion that in today's western democratic society moral issues tend to be judged on the basis of three primary concepts. These concepts simply stated are freedom, truth and love. According to his theory one's stand as a physician on any moral impasse should allow:

1. Freedom of choice for the individual.
2. Should be based upon scientific and empirical evidence, and not upon personal bias or blind acceptance of authority.
3. One's stand should stem from personal concern for the patient and an honest desire to alleviate his suffering.

One possible criticism of this system of thought is that it has a tendency to negate the existence of the physician as an individual. There is no statement in these postulates giving the physician his freedom to choose in accordance with his own philosophy. In other words, it denies him his right to be human and forces him to assume a super-human role from which he is inevitably doomed to fall.

Another enigma presents itself in the light of the recent Thalidamide tragedy. Might it not be possible for two physicians to be on opposite sides of the issue of abortion and still fulfill all three postulates? On the basis of these postulates can we say either position is morally justifiable?

THE PULSE

University of Oregon Medical School
Portland, Oregon

Kenneth A. Niehans
Director of Public Affairs

IN THE SPORTSLIGHT

IM Basketball

Championship bracket —

The Dental Juniors defeated Medical Sophomore Gastrocs 65-60 for the championship. The Medical Seniors took 3rd place at the expense of the Cardiacs 69-63.

Class A Bracket —

The Medical Frosh "A" team took the title by handling the Dental Robbers 57-52. The Medical Frosh "B" team prevailed in the battle for third place 46-40 over the Dental Ridgerunners.

IM Volleyball —

The final volleyball standings as of May 9 are as follows:

* Cardiacs (Med Res)	8 - 0
* Medical Seniors	5 - 3
* Dental Juniors	5 - 2
Medical Juniors Wade	9 - 1
Medical Soph Jets	7 - 2
Medical Soph Mets	5 - 3
Medical Juniors Hakala	4 - 6
Medical Soph Sphincters	1 - 7
Medical Frosh Chang	2 - 4
Medical Juniors Huntington	2 - 7
Medical Frosh Danley	1 - 5
Medical Soph Gastrocs	0 - 8

* Double elimination playoffs began May 4

CONCERNING ETHICS CONTINUED

Clearly we cannot.

Thus it would seem that these concepts, while they are used by many in the judgment of ethical positions and doubtless would be an improvement over prevailing legal opinion and encumbered legal precedents, in the judgment of forensic medical ethic they are not the "Rosetta Stone" for moral decisions.