

THE PULSE

Public Affairs

APR 07 1971

U. of O. MEDICAL SCHOOL

Vol. 7, No. 5 SAMA Chapter, University of Oregon Medical School March 29, 1971

MEDICAL SCHOOL STUDENTS have themselves to blame for the resumption of the "doctor draft" this year, according to Louis M. Rousselot, M.D., Assistant Secretary of Defense for Health and Environment. His department has requested 1,531 doctors of medicine, 77 osteopaths, and 536 dentists to enter active duty in the Army, Navy or Air Force this summer.

American Medical News
March 8, 1971

TEN PHYSICIANS IN ALBERTA, CANADA, earned more than \$200,000 in the year ended June 30, 1970, the Alberta Health Care Insurance Commission reported. All were specialists, including eight pathologists, one radiologist, and one nose and throat specialist. Commission reported 48 physicians and one chiropractor received more than \$100,000. General practitioners averaged \$40,888. Specialists averaged \$52,292, but the average for pathologists and radiologists was \$108,593.

American Medical News
March 15, 1971

"NO" PREDOMINATED WHEN SAMA asked students at 62 medical schools whether they were being adequately instructed in dealing with socio-medical problems. Forty-eight schools were rated poor at equipping future M.D.s to handle alcoholism, 44 were deemed inadequate on sex counseling, and 38 were failed on drug abuse.

Hospital Physician
March, 1971

THE AMERICAN HOSPITAL ASSOCIATION is now pushing a national health insurance plan which would, for all practical purposes, wipe out the fee-for-service system and force most physicians to become employees of state controlled health care corporations. AHA President Jack Hahn says that physicians, et al, "must be willing...to forsake some previously guarded prerogatives and accept a degree of regimentation in order to balance resources and meet new justified goals.

American Family Physician
March, 1971

SPORTS

With the quarter-break halting (?) scholastic activity on "The Hill", sports action also declined with the exception of the Thursday night turtle races at the Faucet (9:00 p.m.).

Before Winter quarter ended, however, the Intramural Basketball Championships were completed. Dental Freshmen won the Tuesday League title, while a powerful Dental Juniors team remained undefeated by capturing the Wednesday League Championship.

Spring quarter brings intramural volleyball to "The Hill" with the season scheduled to begin on Wednesday, April 7. All interested groups are asked to submit team rosters to the Student Activities Building Office by Wednesday, March 31. Each team will play two matches every Wednesday night.

Any persons interested in tennis lessons may contact the Student Activities Building Office for information.

Now that Spring weather and occasional sunny days are with us, the temptation to get out in the "fresh" air is overwhelming - but one must be cautious. The UOMS Association for the Prevention of Smog Injuries to Joggers warns anyone running in the greater Portland area to take only shallow breaths when the air pollution index rises above 60% and to hold their breath when Tri-Met buses pass by (especially ones climbing Marquam Hill).

Respectfully submitted this 23rd day
of March 1971 A. D. by
Lee Davis Hall

LETTERS



To the Editor: I read with great interest the article written by David Pearlman concerning the curriculum reform instituted at the UOMS. As a UOMS graduate, Class of 1965, I can well sympathize with the frustrations of Mr. Pearlman since these are exactly the same frustrations that my class experienced. Curriculum reforms have been much ballyhooed in the UOMS alumni material which I have been receiving and I have been disheartened to hear that the changes made are actually of such a minor degree.

George Waldmann, M.D.
Madras, Oregon

Comment: Thank you for your sympathy and comments. It would be truly tragic, however, if Madras is as close to home as these criticisms come.

C. W

Juniors and Seniors

Do you want to know why Marijuana is a dangerous drug? The Drug Committee of the Multnomah Medical Society is looking for a medical student to join with pharmacology and law students in investigating the reasons for the inclusion of marijuana in the UNIFORM NARCOTIC DRUG ACT in 1932. If you are interested, contact Cody Wasner, MS I, for details.

A NEW CURRICULUM

Georgetown University 1970

Perhaps the most important new principle is that of flexibility and freedom of choice for the student. For instance, 96 hours of electives will be offered during each of the first four semesters. During this time the student may choose courses in the behavioral sciences, such as psychology, sociology or demography; in advanced basic medical sciences; in mathematics and computer applications, and in selected basic clinical material, such as first aid and rescue techniques and human reproduction. In addition, he will have two afternoons a week free. In this time he may study, participate in a research or community project, or relax and do nothing, as he chooses.

This theme of individual responsibility and development will be carried into the fourth year, which is a "year of choice". In it each student will spend three months in an advanced clerkship, three months in the study of ambulatory health problems, and three months in an elective. During each period he will have a wide choice; that is, during his clerkship period he may serve in the clinical area (or areas) he wishes and during his ambulatory health rotation he will choose the program which best fills his needs from a variety of outpatient, emergency room and community health study offerings. While in these periods he may also participate in courses in the application of basic sciences to clinical problems. His elective period may be spent in any way that has educational value for him. For example, he may work in a basic science laboratory or with a clinical speciality group. Alternatively he may take an additional period of advanced clerkship or community medicine. He may leave the Washington area if his best opportunity is in another institution.

Finally the new curriculum provides for more exposure to clinical medicine during the first two years. One new program, Introduction to Clinical Sciences, will begin in the first semester and continue for two years. The other, Laboratory Medicine, will be taught in the two semesters of the second year. Both will be coordinated with the concurrent Basic Science program and together they will introduce the student early to patients and to the problems of health and disease, of man and his ecology, of the applications of basic science to the diagnosis and treatment of disease, to the comprehensive consideration of a patient in his family, medical and community environment and to the problems of delivery of preventive services and medical care.

First Year

Structure & Function	304 hrs
Intro. Clinical Science	64 hrs
Electives	96 hrs
Free	96 hrs

Sept. - Jan.

Structure & Function	244 hrs
Intro. Clinical Science	124 hrs
Electives	96 hrs
Free	96 hrs

Feb. - May

Second Year

Structure & Function	200 hrs
Intro. Clinical Science	96 hrs
Laboratory Medicine	72 hrs
Electives	96 hrs
Free	96 hrs

Sept. - Jan.

Structure & Function	100 hrs
Preventative Medicine	96 hrs
Intro. Clinical Science	136 hrs
Laboratory Medicine	72 hrs
Electives	96 hrs
Free	96 hrs

Feb. - May

Third Year

Medicine	Surgery	Pediatrics	Neurology	Obstetrics & Gynecology	Psychiatry
12 weeks	12 weeks	8 weeks	4 wks	6 weeks	6 weeks

Sept. - Aug.

Fourth Year

Advanced Clerkships	Ambulatory Health Services	Other Electives
12 weeks	12 weeks	12 weeks

Sept. - May

A FABLE

Once upon a time there was a small province named NOGERO. The prince of this small province was a fine man, who had once been one of the heralds of the capital city before he was chosen to be the prince.

Now the province of NOGERO was part of a kingdom. The king, NOXIN, was a former barrister who had been raised in a humble peaceloving family, but now had palaces in all corners of the kingdom: at the eastern, southeastern, and western boundaries of the kingdom.

The health of the people of the kingdom, including those in the province of NOGERO was clearly inferior. Some well-to-do citizens received good care as did some of the paupers, who were tended to by dedicated magicians and their aides. But many people received no care at all or no care until they were terribly ill.

Some people thought that King NOXIN and his government did not really care for the health of the people. For one, his army had wanted to dump large quantities of a potion called EOD (elixir of death) in a remote part of NOGERO where only a few people lived. After many protests the king's army agreed not to do this.

For another thing, one of the king's councils, called the CEA (Commission of Extraterrestrial Activities), decided to allow the installation of project NAJORT within 38 miles of the capitol of NOGERO, as the crows used to fly.

Now NAJORT was to be a center of alchemy, transforming a rare element into useful pulsations. However, in the process a by-product, a toxic potion, was put into a nearby river. The magicians were concerned, and talked largely, but did nothing, so NAJORT was born.

All went well until the children born one year in NOGERO appeared without arms or legs. The prince of NOGERO was very upset but the king said it was just one of those things. Then the king's daughter had a child - - a great event - - and that child also was limbless. In the meanwhile the magicians had effectively voiced their concern, the king gave them an audience and decided to call a moratorium on NAJORT-type projects. He decided that normal babies were more important than his army or his impressive projects. Thus it was that the people of NOGERO and of the entire kingdom decided that normal babies and healthy people were of great importance to them.

THE END

This is my fable. Whether this tale has a moral I will leave up to all people of all Kingdoms.

Fred Hecht, M. D.
Associate Professor
Pediatrics and Medical Genetics

THE PULSE - Office OPC 4352



Coordinating Editor: Larry Zagata
Associate Editors: Bud Nicola,
Cline Hickok, Cody Wasner,
Linda Frison, Dave Pearlman
Selwyn Halibut, Lee David Hall

Relevance (An Adult Game for Physicians)

from Hospital Physician, March 1971

To find the political relevancy quotient (PRQ) of the subject, answer the following questions and compare his point total with the chart

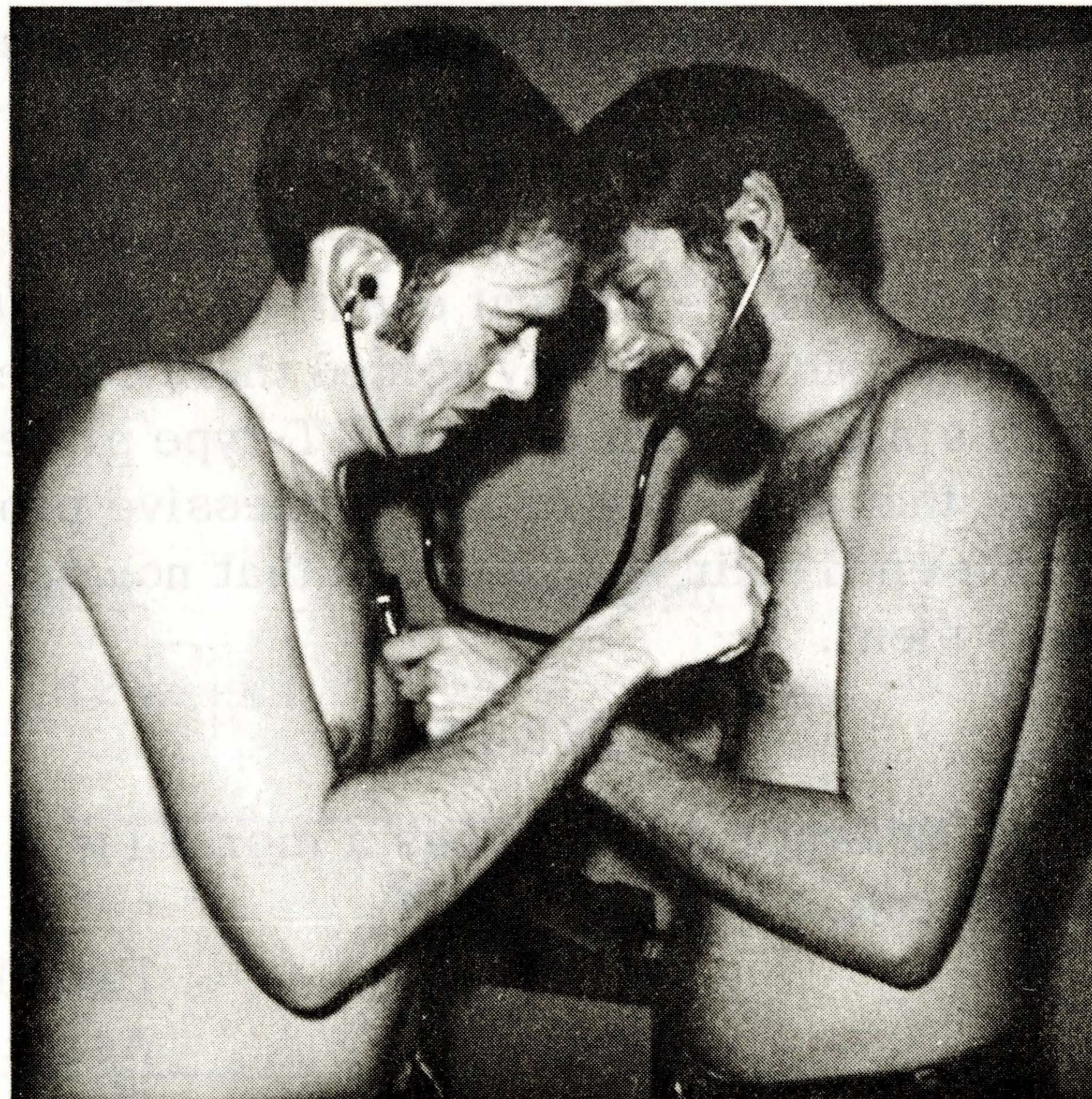
1. If the doctor has been in practice under 5 years, give him 4 points.
2. If he works at a voluntary hospital, add 2 points.
3. If he thinks residents should unionize, add 2 points.
4. Subtract 1 point for chief of service.
5. If he thinks its proper for M.D.'s to participate in protest marches, add 4 points.
6. If his title is assistant department head, add 1 point
7. In a surgical specialty? Subtract 1 for yes.
8. If he's an assistant professor, add 1.
9. If the doctor has been in practice 5 to 25 years, add 3 points.
10. In a medical specialty? Add 1 for yes.
11. State employed? Subtract 1 for yes.
12. In practice over 25 years? Add 2 for yes.
13. If he works for a Federal hospital and he says it has a liberal administration, subtract 1. But if he thinks it's not liberal enough, add 1.

If the subject totaled - - -

He's

- 10 or more points
- 8-9 points
- 6-7 points
- 4-5 points
- 2-3 points
- 1 point (or less)

- A latent revolutionary
- Someone for Spiro to watch out for
- No firebrand, but young at heart just the same
- A probable fence straddler
- Cozy with the Establishment
- Unbearably conservative, shouldn't grow sideburns



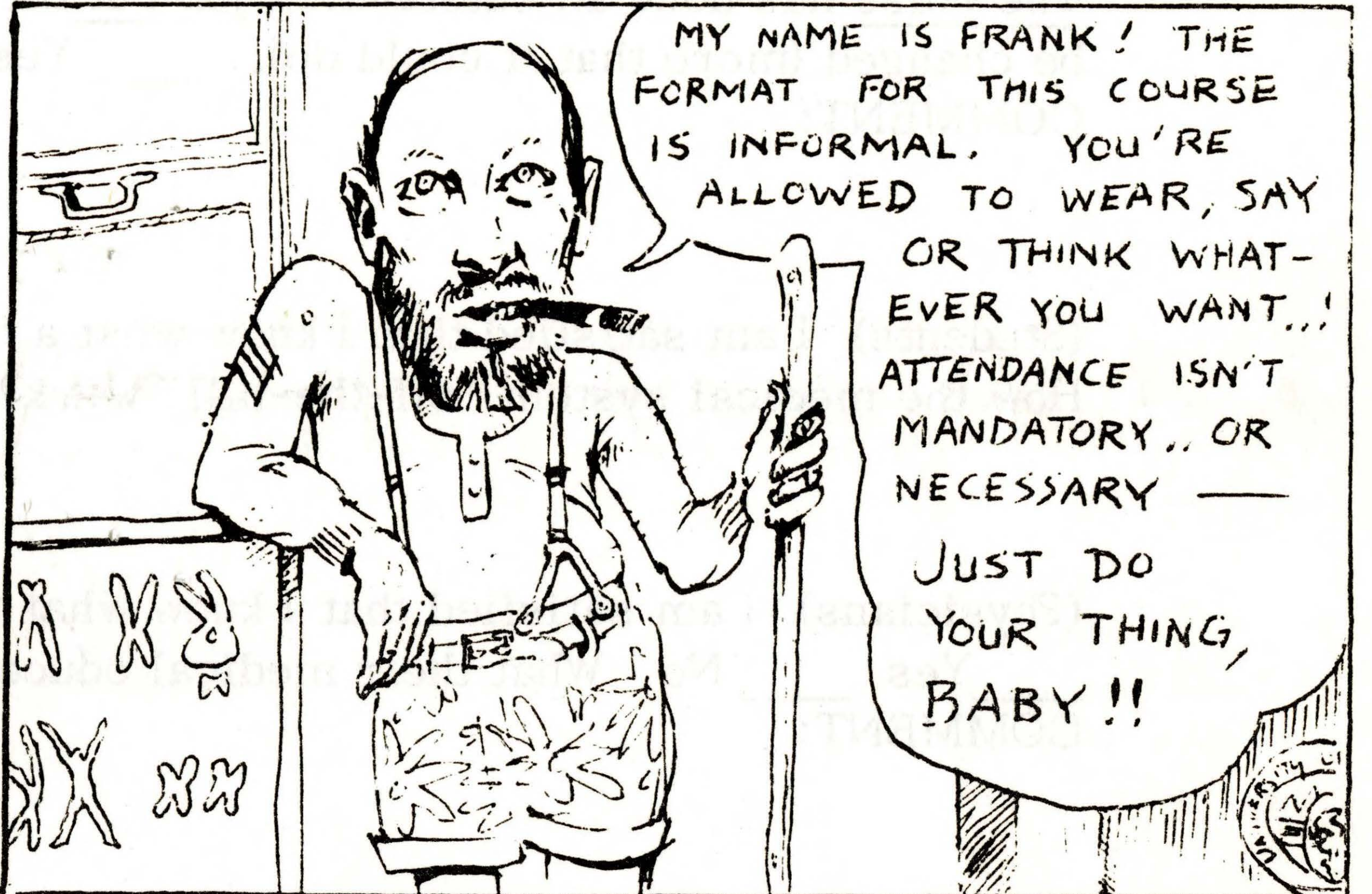
PHYSICAL DIAGNOSIS?

THE HARD CORE

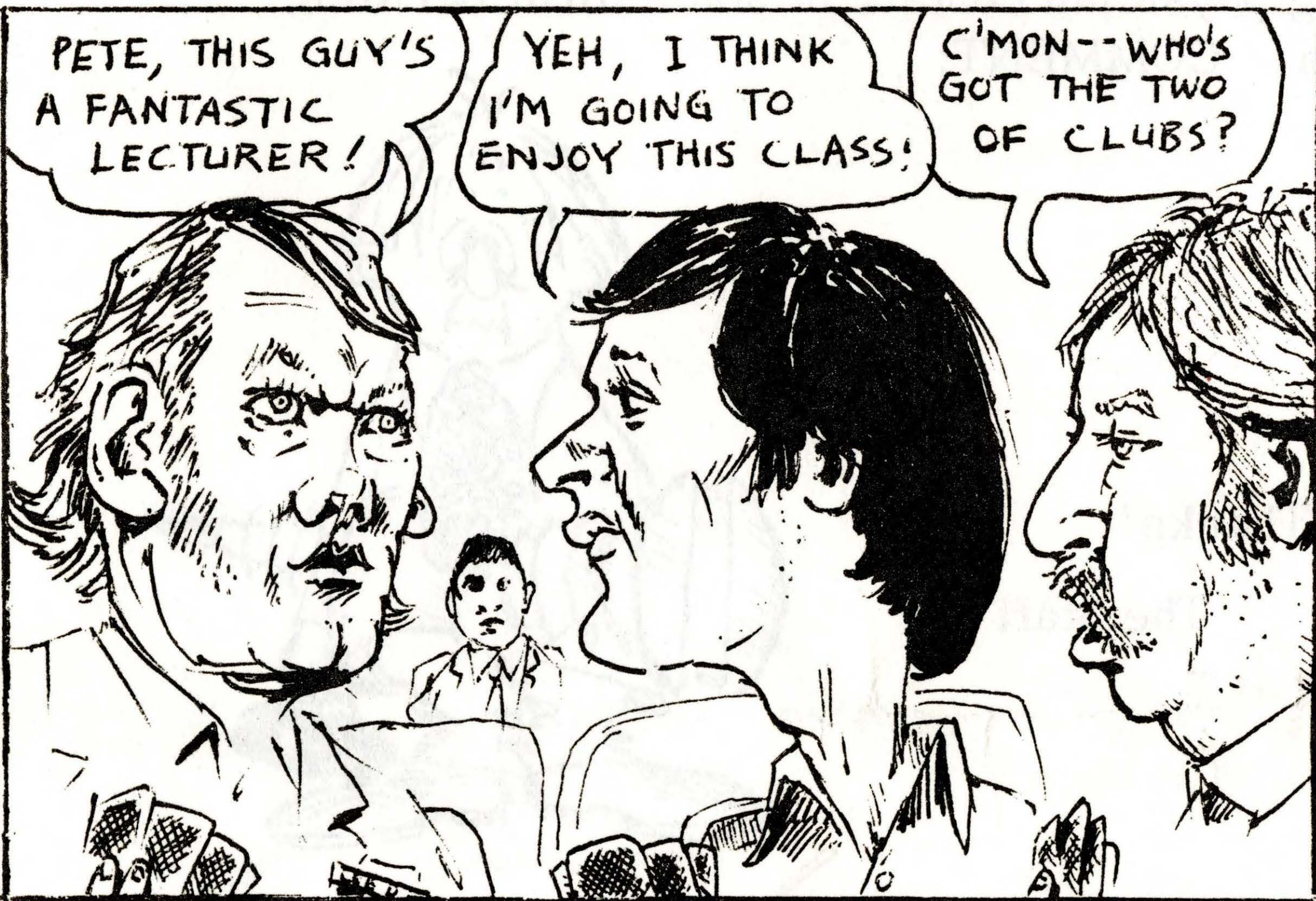
THE FRESHMEN MED STUDENTS, HAVING JUST COMPLETED A COF (CELL ORGANIZATION AND FUNCTION) COURSE, ATTEND THEIR FIRST GENETICS LECTURE ...



by Selwyn Halibut MD, PhD, BVD



MY NAME IS FRANK! THE FORMAT FOR THIS COURSE IS INFORMAL. YOU'RE ALLOWED TO WEAR, SAY OR THINK WHATEVER YOU WANT...! ATTENDANCE ISN'T MANDATORY.. OR NECESSARY — JUST DO YOUR THING, BABY!!



PETE, THIS GUY'S A FANTASTIC LECTURER!

YEH, I THINK I'M GOING TO ENJOY THIS CLASS!

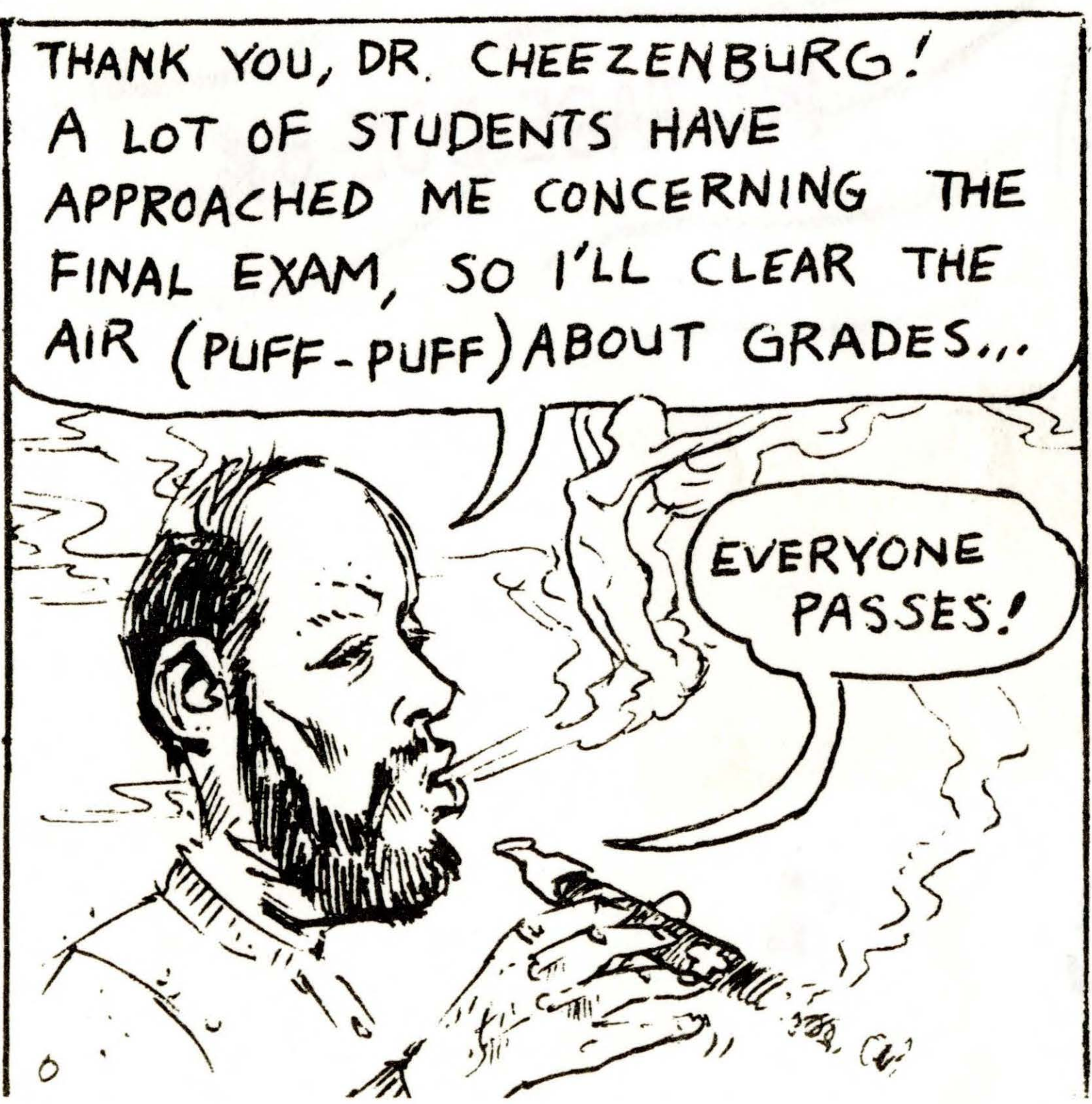
C'MON--WHO'S GOT THE TWO OF CLUBS?



DR. CHEEZENBURG WILL NOW GIVE YOU A PEDIGREE!

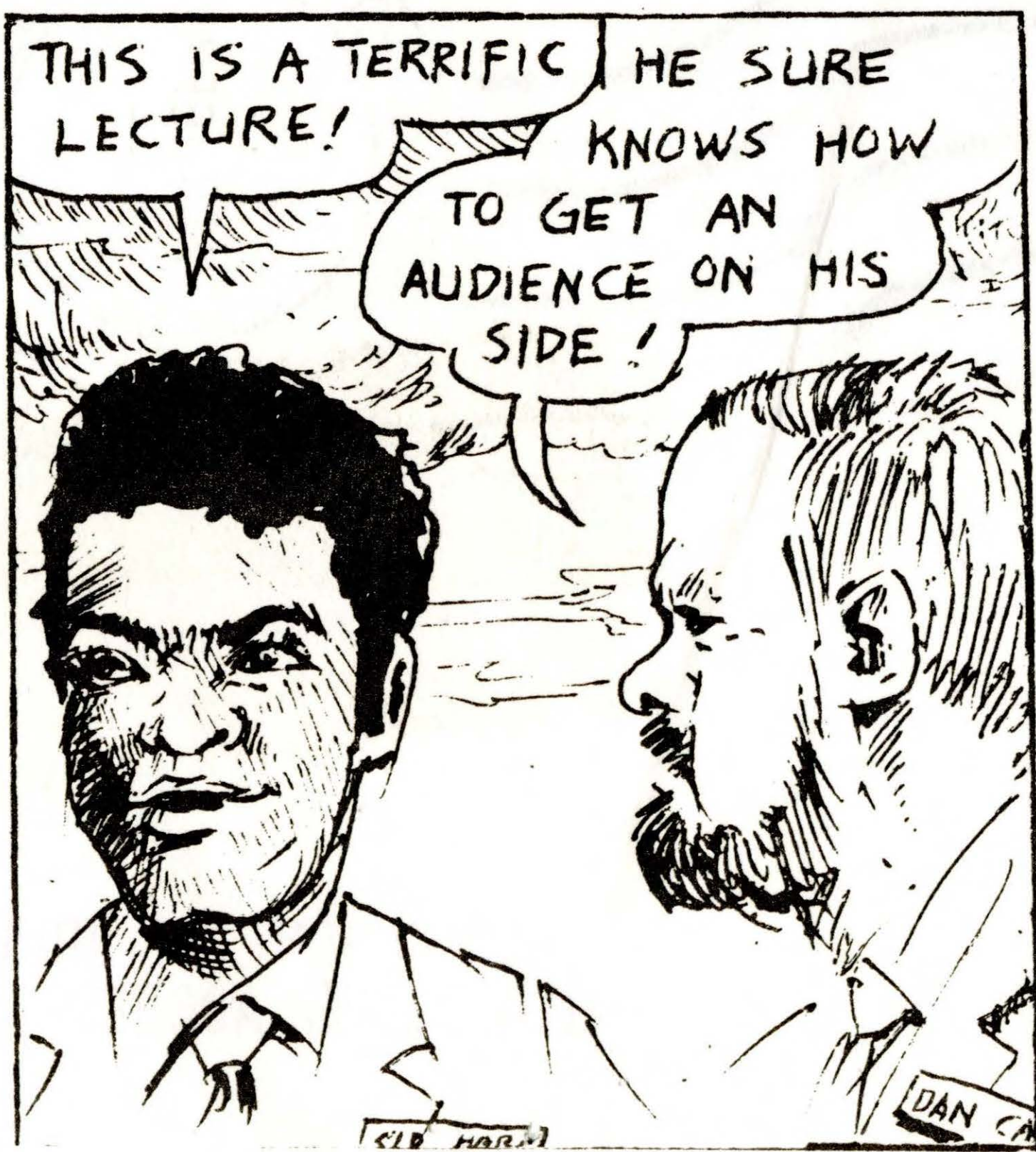


THIS IS A PEDIGREE SCOTCH TERRIER!



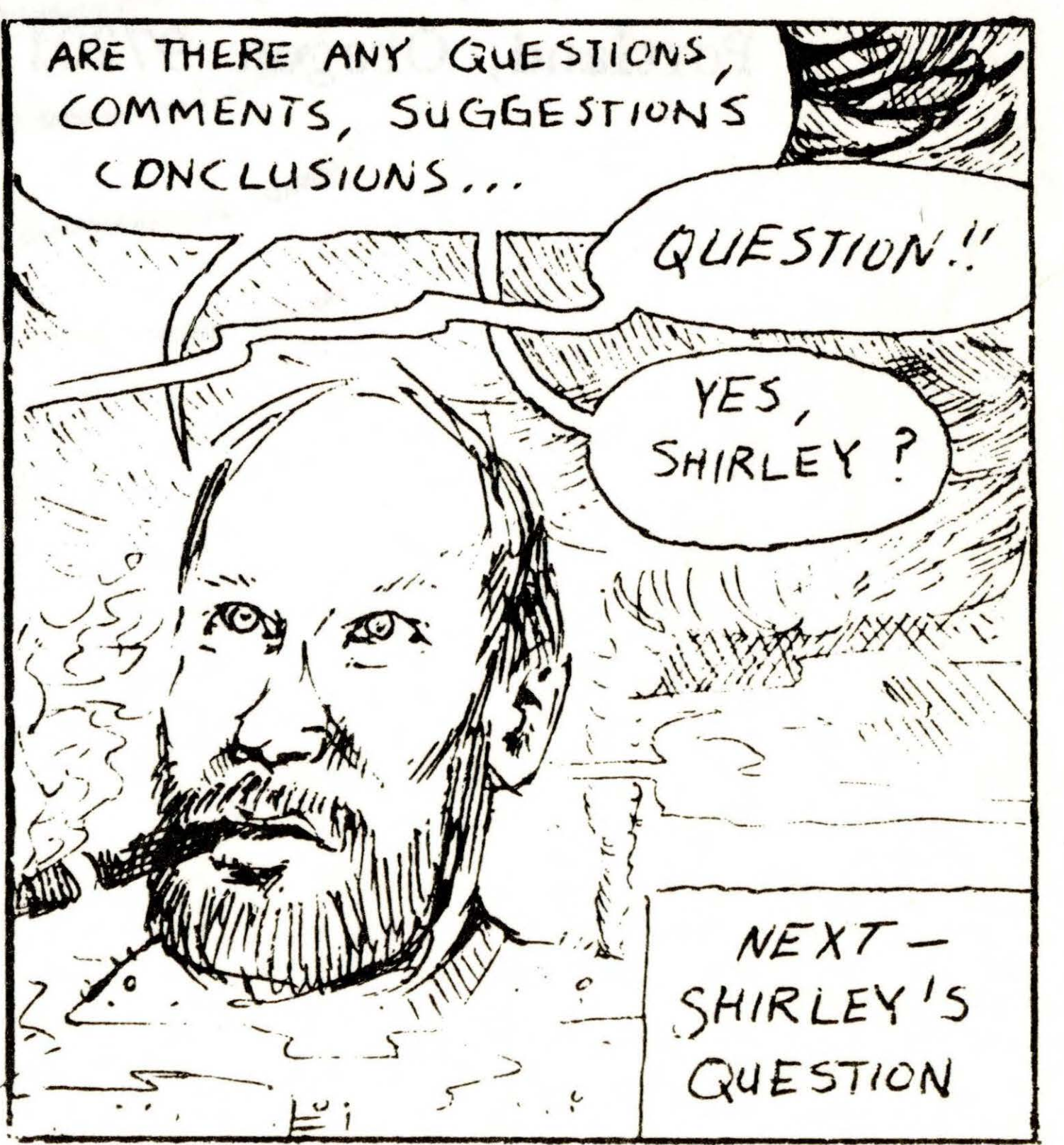
THANK YOU, DR. CHEEZENBURG! A LOT OF STUDENTS HAVE APPROACHED ME CONCERNING THE FINAL EXAM, SO I'LL CLEAR THE AIR (PUFF-PUFF) ABOUT GRADES...

EVERYONE PASSES!



THIS IS A TERRIFIC LECTURE!

HE SURE KNOWS HOW TO GET AN AUDIENCE ON HIS SIDE!



ARE THERE ANY QUESTIONS, COMMENTS, SUGGESTIONS (CONCLUSIONS)...

QUESTION!!

YES, SHIRLEY?

NEXT - SHIRLEY'S QUESTION

READER SURVEY (Return via campus mail, Pulse staff, or your local postmaster)

HELP! We need a little feedback:

I read The Pulse and would like to see it continued Yes No

The Pulse has done an outstanding job but there are many things about it that should be changed (more that it could do). Yes No

COMMENT:

(Students) I am satisfied that I know what a doctor in practice does. Yes No
How the medical system "off-the-hill" works. Yes No COMMENT:

(Physicians) I am satisfied that I know what today's medical students are like. Yes No
What their medical education consists of. Yes No

COMMENT:

I would like to see more student-practicing physician contact in some form (written, meeting, you name it). Yes No COMMENT:

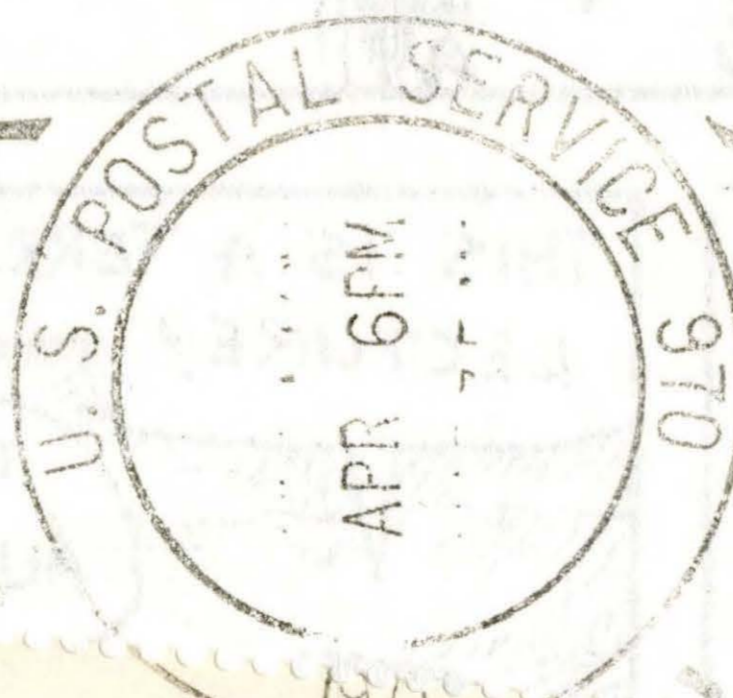
COMMENTS on this issue:

Thanks!

The Staff



THE PULSE
University of Oregon Medical School
3181 S. W. Sam Jackson Park Road
Portland, Oregon 97201



POSTAGE DUE 6¢

Ken Niehans
Public Affairs

INSUFFICIENT, RETURNED
FOR BETTER ADDRESS

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