

# Anatomy chief named

New head of the UOMS department of anatomy, beginning October 1, will be Dr. Vaughn Critchlow who is currently professor and acting chairman of anatomy at Baylor College of Medicine in Houston.

After receiving his Ph.D. from the University of California, Los Angeles in 1957 Dr. Critchlow joined the Baylor faculty that same year as instructor of anatomy. He has done extensive work in the field of neuroendocrinology, for which he is internationally recog-

nized, and has actively conducted research in neurophysiology, neuroanatomy and reproductive physiology.

Dr. Critchlow's professional affiliations include the American Association of Anatomists, the Endocrine Society, the American Physiology Society, the International Society for Research and Reproduction, the Society for Neuroscience and the International Brain Research Organization. He was awarded Baylor's Phi Chi Distinguished Teaching Award in 1969 and 1972 and was presented the Senior Class Teaching Award by this year's graduating class.

Dr. Robert Bacon has been acting head of the department for the past year.



# Tongue sensitivity

The tongue is one of the body's busiest organs. It is important in eating, tasting, swallowing. But one of its most important jobs is forming the sounds made while talking.

The tongue is, for its size, the body's strongest muscle and it is one of the hardest working. People spend about a third of their waking hours talking.

But some children may have trouble talking because they have difficulty feeling with their tongues. A test to detect the problem is being developed by a University of Oregon Medical School speech specialist, Dr. Curtis E. Weiss, assistant professor of speech pathology at the School's Crippled Children's Division who uses small plastic objects of various shapes to check tongue sensitivity to touch. They are pressed against the child's tongue, one at a time. Then the child tries to identify the correct shape on a chart without looking at the object itself.

A child who has trouble distinguishing the circles from squares, or the triangles from stars, using only his tongue, may also have trouble making the complicated tongue movements that speech requires.

Dr. Weiss uses 24 different objects in the test. Children with normal speech correctly identify about eight out of the 24 shapes but a child with speech difficulties may identify only four or five correctly. A low score indicates that the child is not fully aware of touch sensations on his tongue.

The problem often can be treated by a kind of training in sensitivity, according to Dr. Weiss. The child is simply given plastic shapes to put in his mouth. As he moves them about with his tongue, he becomes better able to both identify shapes and to articulate speech sounds.

Inability to form speech sounds accurately is only one of five possible speech problems



*Dr. Curtis Weiss demonstrates tongue sensitivity with his five-year-old daughter, Wendi.*

areas, according to Dr. Weiss. A child may also have difficulty developing an adequate vocabulary, speaking at a normal pace, or at a normal pitch—or hearing problems may lead to speech problems because the child cannot monitor his own voice as he speaks.

Hundreds of tests and treatments have been devised to help children with all these speech difficulties. But to be most effective, Dr. Weiss said, treatment should begin while the child is still very young—sometimes as early as 18 months. The most critical period in speech development is between two and four years. "There's more speech and language learning occurring during that time in a person's life than at any other," he noted.

If parents suspect that their child might have speech problems, they should look for help as soon as possible, Dr. Weiss advised. A speech pathologist, local health department or school nurse can all offer guidance. Waiting

## Study proposes private patients at MSH

A proposal to allow the University of Oregon Medical School to accept private patients of faculty members in the Medical School Hospital will be reviewed by the Oregon State Board of Higher Education at its July 24 meeting.

After an intensive year-long study by a special faculty committee of the Medical School headed by Dr. Tyra T. Hutchens the proposal was then presented to the clinical department chairmen. Deliberation by them and through departmental discussions continued for another six months before the plan was finalized. It encourages faculty physicians to hospitalize private patients in on-campus facilities, according to the report to the Board of Higher Education by Dean Charles N. Holman.

The objective of the plan is to increase the number of paying patients in the Medical School Hospital in order to meet budget estimates for this portion of the operating funds.

Since it opened in 1956, the Medical School Hospital has been financed from two sources: hospital fees collected from patients having the ability to pay, and legislative appropriations.

At the time MSH opened it was decided that admission of patients would be based upon need for care and ability to contribute to the educational program of the Medical School without regard to the patient's financial resources. This policy will continue unchanged.

Since then, the institution has found the percentage of income collected from patient

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# medical center news

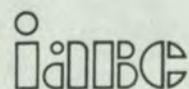
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## *sensitivity, continued*

for the child to outgrow his problem may only make it more difficult to correct later on.

It is possible, Dr. Weiss cautions, to create problems by forcing the child too hard as he learns to talk. But parents can avoid this, he added, if they "play, rather than work, with their children." Parents can provide games and opportunities for children to practice their new speech habits. And they can provide stimulation when the child attempts to talk. Or, as Dr. Weiss puts it, "When baby babbles, babble back."

## *private patients, continued*

fees (welfare, Medicare, medical insurance or the patient's own resources) has increased from the 15 per cent initially budgeted in 1956 to a projected 47 per cent in the current budget. Despite the increased percentage of collections and the marked increase in the dollars received, the size of the legislative appropriation also has increased steadily because of the rapid increase in costs of hospital operation.

The admission of private patients who bring with them the ability to pay for the cost of their hospital care is, the UOMS report indicates, the only way to increase hospital fee income.

In making the request to admit private paying patients to the MSH, a second factor was considered: that of faculty salaries. There is need to pay salaries to clinical faculty members which are more competitive with those paid in other schools allowing greater flexibility in the area of private practice. This is accomplished, the report says, by allowing faculty members the opportunity to hospitalize and collect fees from patients in their teaching hospitals.

In recognition of this factor, the UOMS has, from the time full-time members in the clinical areas were first appointed in the early 1940s, permitted their employment on a "geographic full-time" basis. These appointments were based on a specified percentage (i.e., 90-95%) of time devoted to Medical School duties with the privilege of devoting the remaining time to private practice and keeping the fees earned during that portion of time.

Presently, those "geographic" faculty members hospitalize patients in private hospitals. This has proved to be an inefficient use of faculty time.

Another consideration of importance is that historically the Medical School has been dependent upon medically indigent patients for the majority of its teaching resources. With the development of medical and hospital insurance and the new federal programs for support of medical care for the needy, the number of medically indigent is gradually declining and it seems reasonable to expect continuation of this trend in the future.

The UOMS report to the State Board concludes that the admission of more patients able to pay hospital costs, an increase in pro-

fessional income for faculty members, support of the School's education programs and an increase in faculty efficiency and availability can all be accomplished by transferring the hospital portion of faculty private practice from private hospitals to the Medical School.

As a practical matter, how will these goals be accomplished?

Mr. William A. Zimmerman, associate dean for business affairs, explained the system, which pending approval, will begin August 1 and success of which will depend on an increase in patient fee income. "However," he cautioned, "we expect that it will be some time before the increases will be felt."

A fee schedule has been prepared by the clinical departments involved and approved by the Dean's office.

At the discretion of the physician rendering care, professional fees will be assessed for personal and identifiable services to those hospitalized patients, who after thorough investigation of their financial resources, are determined to have the funds for payment of these fees.

At present, billing for services to private patients is handled by the UOMS business office and physicians' fees go into a special educational improvement account which is used to support faculty salaries and travel.

What will happen to the money collected?

Billing and collection costs—overhead—Mr. Zimmerman explained, will be paid first each month. After these costs are paid, the next \$38,000 each month will go to the Medical School for support of faculty salaries. Once overhead and the Medical School's share are paid, the next \$38,000 goes to the faculty members performing services to private patients on the basis of their billings.

Finally, income remaining after collection costs and the first \$76,000 each month, will be divided with 65 per cent going to faculty members billing for private patient services, 10 per cent to clinical departments, and 25 per cent to the Medical School.

## Emergency services head named

Dr. Joseph B. Vander Veer, who has been UOMS's chief resident in surgery, became director of emergency services on July 1. He will also serve as assistant professor in the department of surgery.



A 1965 graduate of the University of Rochester School of Medicine, he took his internship and residency at UOMS. Following his internship Dr. Vander Veer served two years with the United States Public Health Service Indian Health Service and was director of the coronary care unit at Toppenish, Washington.



## profile

Hardly a day goes by that the name Olga Corte-Real isn't heard over the University of Oregon Medical School paging system. She's not a doctor, she's not a nurse and it's a mystery to many why she is in such demand.

The reason is simple. Mrs. Corte-Real provides a unique service for the Medical School, one which only she performs. She is the School's Russian interpreter and on an average day will talk with 12 to 15 people who speak little or no English, many of whom are confused and frightened.

"In the summer when the Russian people are working in the fields we see only about two or three a day," she explained. "About 3,500 of them live in three main colonies around Woodburn (25 miles south of Portland) and in outlying areas in Marion County. A large number of them come here to the Medical School for their health care."

On numerous occasions Mrs. Corte-Real, who is very hesitant to talk about herself, is present with the doctor during an examination. "Many of these people have never been in a hospital, or even seen a doctor. I must persuade them to follow his orders—some of the Russians are very stubborn. Others you must reassure. Each patient is different."

Mrs. Corte-Real came to the United States from China 20 years ago. Born in Russia, near Lithuania, she grew up in a number of towns from Russia's western border to the Pacific Ocean. She married her Portuguese husband in Shanghai and lived in China for 20 years before coming to the U.S.

She began working at UOMS over 10 years ago in the Medical School Hospital sewing room and then transferred to MSH housekeeping in the linen room. Between three and four years ago she was asked to be the School's Russian interpreter.

Today she follows many of the Russian outpatients from the time they arrive at the Medical School until the time they leave, getting them registered, picking up medicines and explaining their importance and how to take them. She also mails notices to the Marion County Health Department so they can contact patients who are apt to forget their appointments.

Mrs. Corte-Real follows no formal routine and may be called at any time to the Emergency Room to interpret or to be present during surgery to reassure the patient and to translate the doctor's orders. "The doctors have been so good to me," she explained. "They are very patient and explain things simply so I will understand them before I talk with the patients."

In addition to interpreting, Mrs. Corte-Real, who is retiring the end of this month, assists the nurses in the outpatient clinic with supplies and general patient care, "anywhere I am needed," she said. When she has a moment she also visits Russian patients in both the Medical School and Multnomah Hospitals, "to see if they need anything, see if they're comfortable."

Mrs. Corte-Real lives by her philosophy: treat others like you would like to be treated. "I stop and think how I would feel as a stranger in a foreign land—it makes you more compassionate, I think, even when the patient is belligerent." It is this compassion that has helped make Olga Corte-Real so successful, though she would insist, "I am only doing my job."

On June 21 the PETS chopper made a long jump to Klamath Falls to rescue a five pound baby girl born with a major congenital defect which may yet require surgery. She will be hospitalized for some time.

June also marked the first PETS transport of two expectant mothers facing high-risk deliveries. Both were flown in from Baker June 19.

One mother, whose blood type was incompatible with her unborn child's, delivered a seven pound six ounce boy the following day. After 10 days in the Neonatal Intensive Care unit the infant was well enough to be released to his parents June 30.

The second mother, who has a history of problem pregnancies, received an extensive series of tests and will be returned to the UOMS to deliver her baby.

## Two faculty members honored



Dr. Todd

Dr. Haney

A reception honoring two long-time members of the University of Oregon Medical School faculty was held last month just prior to their retirements July 1.

Honored guests, Dr. Hance F. Haney and Dr. Wilbert R. Todd have served on the Medical School faculty for 35 and 37 years respectively.

Dr. Haney, who came to UOMS in 1936 as assistant professor of physiology, received his bachelor's, master's and doctorate in physiology from the University of Wisconsin in Madison and his M.D. in 1934 from the University of Chicago. He served as head of the UOMS physiology department from 1941 to 1946 at which time he affiliated with the department of medicine as assistant professor. He has served as professor in that department since 1955. Long remembered for his work on the School's committee on admissions and advanced standing, Dr. Haney has served as chairman since 1966.

Dr. Todd also received his bachelor's, master's and doctorate degrees from the University of Wisconsin at Madison. He came to UOMS in 1933 as a chemist in the School's nutrition research laboratory and joined the faculty two years later as instructor in biochemistry. He has served as professor in that department since 1953 and is currently gathering material for and helping plan the School's new medical museum.

Both men were elevated to the rank of professor emeritus.

THE FIRST National Bank of Oregon's new Medical Center Branch is expected to open this fall. Located at the corner of 10th and Gibbs Streets, a block west of UOMS where Colonel Sanders' Speck Restaurant used to be, the bank will feature a night depository, safe deposit boxes and a 24-hour banking machine. Remodeling will begin as soon as the construction contract is signed.

## Babies doing well in NICU

Three June babies, now in the Neonatal Intensive Care unit, were the first patients airlifted by the newly-established Perinatal Emergency Transport System (PETS).

The first, a three pound, eight ounce little girl from John Day was admitted June 6 after a ride over the mountains in an Army National Guard helicopter. She is coming along well and should be home by mid-July.

The second passenger, another premature infant, was a tiny boy born June 15 in Prineville. He weighed two pounds eight ounces on admission but is making good progress now. He should be ready to join his parents by the end of July.





Dr. Thomas Stern

Robert Young as  
"Marcus Welby, M.D."

## Marcus Welby's coach

One of the 1950 graduates of the University of Oregon Medical School is the physician who helps authenticate medical details in the TV series "Marcus Welby, M.D." He is Dr. Thomas L. Stern, newly-elected president of the California Academy of General Practice.

The article below is reprinted with permission of MEDICAL TRIBUNE.

Dr. Thomas L. Stern, a Santa Monica, Calif. G.P., is the man who tells television doctor Marcus Welby how to practice medicine.

As technical consultant to the popular program, his responsibilities run from reviewing scripts, to providing the latest up-to-date medical findings, to even suggesting "the most merciful way to kill someone during the first 10 minutes of the show."

Dr. Stern, who spends between two and five hours weekly as consultant to the show, is director of the family practice residency training program at the Santa Monica Medical Center. He said that many story ideas come from viewers, some of whom have suffered diseases depicted in the show.

"One story, about a complication of meningitis, was written by a girl who had suffered the disease, and it was almost entirely technically accurate," he said.

He reserves evening hours and long airplane rides for reading scripts.

He said that the show's producers have a desire for authenticity that is "almost pathological."

Once his expertise was called into action when, between the original filming of a show and the summer reruns, he found that a medical treatment had fallen into disrepute. That segment of the show was reshot at a total cost of more than \$30,000 so that the reruns would be accurate.

"Believe me, if there is a mistake in medical information getting on the screen, I hear about it from my students and colleagues," Dr. Stern said.

### Script Writer Stuck

His television consulting has caused occasional complications in his limited private practice. Once he received an emergency call from a script writer stuck for a disease to use in a story.

"I had a patient sitting before me, and my side of the conversation went something like: 'You sure you want to kill the patient? O.K., there are a number of good terminal diseases we could use.' Needless to say, my own patient, hearing this, began to turn white. It took some explaining on my part after the telephone call to set things right again."

Though he has no plans to try his hand at writing a script, Dr. Stern said he is looking forward to a cameo role he may play in an upcoming segment.

He believes the fatherly compassion projected by the star of the show, Robert Young, is the reason for the show's popularity.

"I think many viewers would like to see the same thing in their own physician," he said.

"I believe, though I have no way of proving it, that the Marcus Welby show has even caused some behavior changes in some physicians who see an image they would like to copy."



Preparing to show the minority student recruiting film "Code Blue," which has been given to UOMS by Delta Sigma Theta, are sorority members (l to r) Addie Jean Haynes, Ellen Law, Yvonne Williams, Lessie Houston and June Key.

## Minority students recruited

A series of health careers "mini-fairs" have been held in the Portland area recently to acquaint teachers, administrators, counselors and students, especially those in minority groups, with the availability of job opportunities and training in the health related fields. Sponsored by Delta Sigma Theta, an interracial national public service organization with over 60,000 members in 412 chapters across the nation, the program is closely tied to the University of Oregon Medical School's minority student recruitment project.

Mr. Bill Jackson, the School's minority student affairs coordinator, has been attending these fairs and talking with students, as have minority students from medical and nursing classes at UOMS and UOSN and other representatives from the School. In addition, Mr. Jackson has visited other schools around the state to discuss possible health careers and has

## Dr. Linman to head research center

Dr. James W. Linman, formerly head of special hematology at the Mayo Clinic-Foundation and director of the hematology training program at Mayo Graduate School of Medicine, has been named director of the newly established Edwin E. Os-good Memorial Center for Leukemia Research at the University of Oregon Medical School.



A 1947 graduate of the University of Illinois College of Medicine, he has served on the faculties of the University of Michigan and Northwestern University Medical School and was chief of the hematology section at Veterans Administration Research Hospital in Chicago. In 1970 the Mayo Fellows Association named him "Teacher of the Year."

## Medical students' summer activities

Medical students are involved in a variety of activities this summer including taking classes at the Medical School. Juniors are enrolled in medicine, child health and electives; 74 of them are on vacation. Only 27 seniors are out of school this summer with the rest taking surgery, obstetrics/gynecology and psychiatry or electives.

Several students who are vacationing this term are working in the UOMS hospitals and clinics. Some are working in other hospital and clinic facilities, at non-medical colleges or universities, in service-connected positions, or are studying in foreign countries.

A number of other students are employed in non-medical areas: driving a cab, testing pool water, working for the police department, at NASA, the Multnomah Kennel Club, Pacific Coast Fruit Company and haying in Eastern Oregon.

Everyone will be back for classes fall term except one junior and 17 seniors who will be taking their vacations until December.

corresponded with a number of potential future students.

A cooperative venture involving the UOMS and the University of Oregon College of Education's Teacher Corps, a field-centered training program to prepare teachers from the under represented populations and acquaint students with career possibilities, has resulted in six minority students from Portland high schools being placed in part-time positions at the Medical School. These students are in a summer work-experience program, fully funded by the Teacher Corps.



## OMSI award won by UOMS team



Dr. Babson and Mrs. Katagiri

A University of Oregon Medical School physician and nurse, internationally recognized for their work in the field of prematurity and care of distressed newborns, received the 1972 Oregon Museum of Science and Industry Scientists Awards at recent ceremonies in Portland.

Mrs. Helen Katagiri, R.N. and Dr. S. Gorham Babson, who have worked together for the past 20 years, were recognized for their significant contributions in the field of neonatology.

The UOMS's Neonatal Intensive Care Unit and its earlier premature nursery have had one of the highest survival rates in the country.

Dr. Babson has headed research projects on newborns in such areas as the effect of protein and electrolyte control of diet on growth, maturational development as a guide to estimation of gestational age, oxygen utilization of infants under stress and development of a method of easy resuscitation for apneic infants. Also, a long-term follow-up of premature infants has been carried out through the School's Crippled Children's Division to determine factors which have been beneficial or harmful to their development.

### Dr. Babson Heads Unit

Dr. Babson, who serves as professor of pediatrics and director of the Neonatal Intensive Care Unit, is a 1936 graduate of the UOMS. Following his internship on the Hill he took his residency training in pediatrics at Babies Hospital of New York and at Stanford Medical Center. He was in private practice in Portland from 1940 to 1960, during which time he served on the School's volunteer faculty. He joined the full-time faculty in 1961.

In 1970 Dr. Babson spent four months in Sweden collaborating with neonatologists at various medical centers.

He is past chairman of the American Academy of Pediatrics' symposium on "Intrauterine Growth Retardation" and of the Oregon Medical Association Committee on Perinatal Mortality.

Co-author with UOMS obstetrics and gynecology

department chairman Dr. Ralph C. Benson of the book, *Management of High Risk Pregnancy and Intensive Care of the Neonate*, the second edition of which was printed this spring. Dr. Babson is a Fellow of the American Academy of Pediatrics and served on its "Fetus and Newborn" committee. He is a member and past president of both the Portland Academy of Pediatrics and the North Pacific Pediatric Society.

### Mrs. Katagiri Directs Nursing Service

Mrs. Katagiri received her baccalaureate degree in nursing from Hamline University in St. Paul, Minnesota in 1947.

She started her nursing career as a surgical nurse but began working with premature infants 20 years ago in the old Doernbecher Memorial Hospital for Children. During the time her three boys, now 18, 20 and 22, were younger she worked on a part-time basis. Five years ago she joined the full-time staff as head nurse in the premature nursery. She assisted in planning the Neonatal Intensive Care Unit, where she is now in charge of nursing service.

OMSI awards are well represented in the Katagiri household. Five years ago Mrs. Katagiri's husband, George, who is on the staff of the Oregon Board of Education's Institute for Education Engineering, received the OMSI Scientist Award and OMSI Science Fair Awards have been won by oldest son Douglas, who won two and youngest son, Stephen, who has received one.

Frequent visitors to the UOMS Neonatal Center are physicians and nurses from throughout the United States who come to study methods used at the model center and share in the team's research findings.

TWENTY PER cent of the readers contacted in a recent survey for MEDICAL CENTER NEWS responded to the questionnaire. Surveys were mailed to a random sampling of employees, faculty, interns and residents and "friends."

Seventy-five per cent of those responding read MCN "always" and another 20 per cent "occasionally." Sixty-six per cent of the readers share the publication with others in their families or with friends. Reader interest appears highest in stories about science and research, future plans of the Medical Center, national and state legislation. Readers expressed great interest in the features "News-makers" and "Profiles" as well.

Of those responding, 52 per cent rate MCN as "excellent" and 37 per cent "good."

Suggestions for changes included: "more first-hand news...publish more often...more on classified employees...more on hospital employees."

Students, an important audience for MEDICAL CENTER NEWS, pick up their copies in the UOMS mailroom; they were not reached by this survey.

## Irregular work week discussed

Although an opinion by Oregon State Attorney General Lee Johnson opened the way for state agencies to institute irregular work weeks, personnel division rules still must be modified to accommodate the change.

In a ruling late in June, Mr. Johnson said that Oregon law does not oblige the state to pay overtime. A state agency can, he indicated, "establish a work week for its employees which requires more than eight hours in one day or more than 40 hours in one week without payment of overtime."

Only state personnel division rules and collective bargaining agreements limit the state's power to set schedules however it wishes, he said.

William Hughes, personnel division administrator, proposed rules that would have allowed this change, but they were rejected by the State Public Employee Relations Board. However, the personnel division is continuing its study of the feasibility for some state employees of the irregular (in many cases, forty hour, four day) work week.



After enrolling June 19 in the baccalaureate program at the University of Oregon School of Nursing three new students relaxed with friends from OSU outside the women's residence hall. The new nurses are Peggy Walker (left), Dufur, and (seated) GiGi Wilcox and Debbie Sexton, both from The Dalles. Friends are Ken Eagon and Dave Knives.

## New students enroll

This summer a total of 246 nursing students are attending classes at the University of Oregon School of Nursing. Of these, 200 are in the baccalaureate degree program; 177 are new students beginning their three years of training and 23 are seniors enrolled in public health and psychiatric nursing.

A total of 380 applications were received and reviewed by the School of Nursing out of which the entering class of 177 was chosen. Five of these new students already are R.N.s who have returned for their bachelor degrees and another 10 are men. All but one are residents of Oregon.



## Eye diseases treated with laser

Blurry vision, accompanied by dark spots with a partial veil shrouding the eye, sporadic at first but returning with increasing frequency—these are typical symptoms experienced by sufferers of many advanced vascular eye afflictions.

Each time the blood vessels in the retina begin to leak or hemorrhage the affected individual is drawn closer to that permanent veil, blindness. Now in many cases, treatment with the argon laser at the University of Oregon Medical School can arrest deteriorating vision and in some cases improve it.

The only machine of its kind in Oregon, the \$33,000 argon laser photocoagulator is located in the Medical School's ophthalmology department. The laser consists of electrically stimulated gas molecules which emit a beam of energized blue-green light one million times more intense than light of the same color released from the sun.

In a manner similar to a cauterizer, the laser can weld rips and tears in the retinal tissue or destroy abnormal blood vessels in the back of the eye.

According to Dr. Sam L. Meyer, associate professor of ophthalmology, "The laser can be concentrated into a beam size of 50 microns" (approximately the size of the point on a needle). The minuteness of the ray allows exact treatment of the precise area involved with only minimal damage to surrounding tissue. Since the involved blood vessels often are located in or near the macula (a part of the retina responsible for vision) it is important to destroy only the afflicted area.

Dr. Meyer explained that over 100 patients, many of them afflicted with the once incurable diabetic retinopathy, have received laser treatments at the UOMS. He expressed the importance of this therapy because of the rapidly rising diabetic population. "It is estimated six per cent of the population are diabetic with the total increasing five per cent a year," he said. By the time a person has had diabetes for 20 years, he has a 75 per cent chance of developing retinopathy.

"The laser treatment is done on an outpatient basis, relieving the patient of the high costs of hospitalization and freeing much needed hospital beds and personnel," said Dr. Meyer.

The machine was purchased by two faculty members in the ophthalmology department because state funds were not available. To defer the cost of the machine and maintenance, patients receiving treatment with the laser are billed for the services.

Patients treated with the laser are usually referred to the Medical School physicians by their ophthalmologists but if the doctor has completed special training on the use of the laser at the Palo Alto Medical Clinic in California, he may treat his patients with the machine at the UOMS.

## PHOTOS

When a year's membership to "Let's Dine Out" was given to Multnomah Hospital recently Personnel Director Gus Hall (right) decided it should go to an exceptional employee. Storekeeper Jake Schaffer, who has more accumulated sick leave hours than anyone else at Multnomah, was chosen. An employee since 1941, he has backlogged 1,357.18 hours—that's 169 days or more than eight months!



Admiring a \$14,800 check from the Oregon State Elks Association for the UOMS Elks' Children's Eye Clinic are Robert Freeman, 15, Elks member Bruce Reed (left) who is vice-president of the State Elks Association and Dr. Kenneth Swan, chairman of the UOMS department of ophthalmology.

The Elks have provided the department continuous support since 1949.



Addressing envelopes for notices of the UOMS faculty wives' sponsored faculty picnic Sunday, July 23 at Menucha, are (l to r) Vicki Kendall, Mrs. Mark (Marianne) Vetto, Mrs. John (Janet) Gilberts, son Tom and Mrs. John (Rhoda) Hutchins.



▲ Six off-campus service awards, presented at the second annual volunteer awards tea, went to representatives of the Clackamas Challenge Center, each of whom have donated more than 1,000 volunteer hours of work to UOMS. Receiving a certificate and rose from Dr. Michael Baird, medical director and administrator, is Kaaren Londahl from the Center. Marla Clark, volunteer services director (center), officiated.



▲ A new Health Careers Loan Fund, made possible by the Multnomah County Medical Society Auxiliary, has been established at UOMS. On hand for the check presentation were (l to r) Mrs. Ernest Livingstone; Dallas Finnell, UOMS development director; Dr. Charles N. Holman, dean and Mrs. Verner Lindgren. The initial gift of \$5,000 will be available for students needing financial assistance in their last year of study.





# Disaster plan

Floods in Rapid City, South Dakota; mining disasters in Kellogg, Idaho; tornados in Vancouver, Washington—disasters may strike anywhere showing no precedence or favoritism to a specific locale or facility. When a disaster strikes there is no time to begin to organize, to plan minute details or to make major leadership decisions. All these things must be done in advance if one is going to respond to the situation at all. And so, men and women spend many hours each day planning against that one in a million chance that fate will strike their homeland with some quirk of nature. In the event of such a twist of fate, hospitals play a key role in staving off complete catastrophe, so hospital staffs, above all others, must be prepared, calm, organized.

Many of the hospitals in the State of Oregon have recognized the need for some type of structured disaster planning and the University of Oregon Medical School is no exception. Disaster planning has been in existence at this School since early in 1950. The late Dr. Jarvis Gould initially organized a Disaster Plan and later reorganized the committee setting up new guidelines and goals in 1970 as a safeguard during the American Legion Convention held in August of that year. Luckily, no problems did develop at that time, but much was learned by those participating in a mock drill about the need for more complete, detailed disaster planning at this School. Several problems were noted: communication breakdowns were quickly recognized due to the lack of an adequate radio system and Army field telephones had to be borrowed for campus communication; no one was adequately informed as to who was initially responsible for such minor things as keys to storage supply closets, etc.; the need for staff identification cards was noted so that people could best be utilized according to their job qualifications and well-meaning onlookers and family members could be relocated out of the busy stream of activity.

Following Dr. Gould's death in February of this year, Mr. William Prentice, program planning director, was appointed chairman of the committee which has recently attempted to plan in detail for all phases and types of disaster that could affect this campus. Various committee members have received special planning assignments as follows: Mr. James Whalen, security; Mr. Ken Niehans, public information office; Mr. John Hutchins, supply coordinator; Miss Gwynn Brice, personnel requirements and volunteer services; Dr. William Fletcher, disaster medical treatment; Mr. Max Kersbergen, space utilization; and Mr. Ralph Tuomi, communications.

Some of the present goals of the committee include the following: 1) To coordinate disaster efforts on an area-wide basis so that the entire region is working together for successful disaster planning; 2) To plan for and realistically test the campus disaster program with special emphasis on a) solving communication problems, both on the campus and the outside system, such as at the site of a disaster, b) establishing a quick method of staff

identification so that the capabilities of all staff members who arrive at the hospitals during a disaster can be put to the best use, and c) effectively establishing a triage area in which patients can be rapidly sorted according to type and extent of injury and to study the feasibility of establishing a mobile triage team (such as was used in the Southern California earthquake) utilizing helicopters, vans and other sophisticated emergency equipment.

The committee is working now to develop a campus practice drill to test its reactive response to a simulated disaster situation. Consider what would happen if an airliner crashed, 75 were injured and UOMS facilities had to be mobilized to help the victims. Initial disaster information coming through the campus telephone switchboard would be directed immediately to the disaster plan coordinator or his alternate. The coordinator, with the Dean, would decide whether or not to activate the disaster plan committee. (In a situation such as a plane crash in this area the committee would be immediately activated and each committee member would be called.) The security office would be one of the first to be contacted to set up roadblocks to reroute traffic and allow ambulances and authorized personnel to move rapidly up the Hill.

The Emergency Room would also be contacted immediately. The expected number of injuries would be reported to them as rapidly as possible. An initial triage area would have to be established where patients could be sorted and then routed to the appropriate areas for treatment. Necessary supplies would have to be made available as quickly and efficiently as possible.

A public information area would also be established immediately to handle the news media and the hundreds of calls and queries from concerned family members and friends. An area would be blocked off for these people and runners would be assigned to transmit information back and forth between the triage area, the public information office and the waiting families and friends.

Far more people are needed and used in an emergency situation than could possibly be imagined and oftentimes the coordination—from disaster site to triage point to public information office to security office and so on—can become very confusing without adequate communication. Thus, the need for a control center where all information is routed and correlated is easily seen.

With the proper equipment, personnel and preplanning, the greatest disaster can be brought under control quickly and efficiently without endangering lives.



"Sorry we can't discharge you from the hospital today, Mr. Wilkins... it's far too windy outside."

# VIPs

## MAY

### Service Anniversaries—from Personnel

- 5** Marilyn A. Ausman, OPC nursing  
Dr. Julia Grach, pediatrics  
Betty Ann O'Donnell, MSH nursing  
Bonnie J. Reischman, MSH nursing  
Marguerite Shurr, student health service
- 10** Raymond Spangler, physical plant  
Thelma Wilson, public affairs
- 15** Lenore Borland, MSH nursing  
Pauline B. Laird, ophthalmology  
Dr. Evelyn Oginsky, microbiology  
Mary Anne Rogers, surgery
- 20** Dr. Louis Frische, radiology  
Verna M. Nugent, medical records  
Harriet Violette, TB Hospital
- 25** Marjorie Merrick, OPC admitting

### Moving Up

- Susan Baird, clerk 3 to clerk 4, business office
- Mary L. Baker, sec. 3D to sec. 4T, CCD
- Annie J. Bartlett, R.N. 1 to R.N. 4, MSH nursing
- Mary Enloe, clerk 2T to sec. 3T, CCD
- David Hearty, clerk 2T to clerk 3, library
- Janette Hughes, clerk 3T to sec. 3T, CCD
- Anita J. Klink, R.N. 2 to R.N. 4, TB hospital nursing
- Dianne J. Mack, office trainee to clerk 2T, library
- Sherrie Lou Montgomery, clerk 2T to clerk 3T, purchasing
- Patricia Murphy, R.N. 2 to R.N. 4, TB hospital nursing
- Ranata G. Niederloh, R.N. 2 to R.N. 4, MSH nursing
- Frances L. Olson, X-ray tech. 1 to X-ray tech. 2
- Phyllis L. Orgovan, inst. wkr. 1 to inst. wkr. 2, MSH housekeeping
- Bessie M. Strader, inst. wkr. 1 to inst. wkr. 2, MSH housekeeping

### IN MEMORIAM

- Mrs. Lillian Freer, former dermatology secretary ..... June 17, 1972
- Dr. Gunnar E. C. Nelson, associate clinical professor of obstetrics and gynecology ..... June 17, 1972

THE MEDICAL School's 1972 graduating medical students have awarded their class gift to Dr. William Fletcher's cancer research program through the UOMS Advancement Fund.

The gift, amounting to more than \$225, is in memory of Patrick Gordinier, a member of the class who died of cancer August 21, 1970.



# Retirements

Gloria Casey

Gloria Casey is planning a trip to the beach with her daughter as part of her retirement after more than 24 years at UOMS. Responsible for the microfilming in medical records where she transferred in 1957, she began working in Doernbecher admitting when she first came to the Medical School.

Mrs. Casey hopes to visit her older daughter in Memphis this fall.

Wilbur "Ike" Brockway

An employee at the Tuberculosis Hospital for 17 years, Wilbur "Ike" Brockway has now retired. A party was held in his honor late last month where he told friends of his future plans—maybe a trip this summer or fall to Kansas, Oklahoma and Tennessee.



Thelma Danilson

Thelma Danilson, social worker at the Crippled Children's Division since 1965, has retired and is traveling this summer visiting with friends and relatives.

She came to UOMS in 1957 and began working in the psychiatry department and in family counseling services. This fall she would like to work again on a part-time basis.

# Bowling

UOMS bowling trophy winners from last season have been announced and awards were given at the semi-annual bowling banquet held recently at Lakeside Gardens in Portland. The spring season winners are:

**First place:** Roadrunners—Ken Cook, Margaret Curtiss, Mardi Epps, Helen Johnson

**High game scratch:** Teresa Pietrok (women), Ray Rutherford (men)

**High game handicap:** Diana Stolz (women), Bill Runte (men)

**High series scratch:** Weslynn Marshall (women), Carl Eisenberg (men)

**High series handicap:** Claudia Carrell (women), Richard Stolz (men)

**Splits:** Stu Leatherman (6/7/10)

**Most Improved:** Henry Ferguson (15 pins)

The UOMS bowling team has disbanded for the summer but will be reorganizing again in September.

DR. RICHARD SLEETER, director of the Crippled Children's Division, who has been recovering from a heart attack, is home now and reported doing fine.

# NEWSMAKERS

Honored recently by the American Chemical Society's division of colloid and surface chemistry was Dr. Donald E. Brooks, who received his Ph.D. in biochemistry at UOMS in 1971 under the direction of Dr. Geoffrey Seaman, UOMS associate professor of biochemistry and neurology (neurochemistry). At the 46th National Colloid Symposium in June Dr. Brooks was presented the Victor K. LaMer Award, given for the outstanding doctoral thesis accepted by a U.S. or Canadian university during the last three years.

Oregon Regional Medical Program Coordinator Dr. Julian S. Reinschmidt is one of seven persons named by Governor McCall to the state comprehensive Health Planning Authority.

Dr. Albert Starr, head of the UOMS division of cardiopulmonary surgery, was recently presented a Golden Plate Award by the American Academy of Achievement and honored as "one of America's most outstanding heart specialists."

Dr. William Montagna, director of the Oregon Regional Primate Research Center, has been awarded the highest honor in the field of investigative dermatology, the Stephen A. Rothman Gold Medal and \$1,000. Dr. Montagna is the first doctor of philosophy to receive the coveted award.

TV and radio guests last month from UOMS included: Dr. Curtis Weiss, assistant professor of speech pathology, CCD, who appeared on KYXI radio's "On the Line" on June 4th to talk about speech problems in children and Dr. Nelson Niles, professor of pathology, who

appeared on channel 8's "Telescope" on June 14 to discuss cancer.

Two news items last month from UOMS were each covered by 450 ABC network stations in the U.S. On June 7th Dr. Nancy Marshall Heisley, assistant professor of speech pathology, CCD, explained a parent education pilot program at UOMS on language disorders and on the 20th Dr. Sonia Buist, clinical instructor in medicine and Ben Ross, research assistant, discussed a breathing test they are using to determine the effects of women's undergarments on normal breathing. This news item was also shown on TV stations in Europe and Asia.

Dr. John W. Bussman, UOMS clinical professor of pediatrics, has been made a fellow of the American College of Cardiology, the national medical society for specialists in cardiovascular diseases.

Those interested in an affirmative action policy for women and minorities at the Medical School met recently and elected representatives to assist the UOMS administration in developing and implementing a policy. Those elected will represent the faculty, classified staff and other employees on campus.

Representatives are Dr. Frances Storrs, assistant professor of dermatology; Dr. Elaine Lis, associate professor, Crippled Children's Division; Mrs. Ann Hoffstetter, business office; Mrs. Marion Bergstrom, pharmacology; Mrs. Elaine Piper, inventory; Miss Tekla Thiman, physical therapy.

John Hale, social worker at the Crippled Children's Division, is the new president-elect of the National Association of Social Workers' Oregon chapter.

Viola Eisenbach, assistant professor of public health nursing, University of Oregon School of Nursing, has been appointed to a three-year term on the State Board of Nursing.

## medical center news

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