

Alumni meeting

Annual scientific meeting for the University of Oregon Medical School Alumni Association is scheduled for May 2-4 at Portland's Benson Hotel.

Presiding over the meetings will be Dr. Albert A. Oyama, '53, clinical professor of clinical pathology and affiliate in pathology at the UOMS, who is this year's Alumni Association president.

Dr. Roy E. Lieuallen, chancellor of the Oregon State System of Higher Education, will be the speaker at the annual Alumni luncheon, May 3.

Alumni speakers during the three-day event include: Dr. Joseph B. Vander Veer Jr., assistant professor of surgery and director of emer-

gency services at the UOMS; Dallas Finnell, director of development; Dr. James W. Linman, professor of medicine and director of the Edwin E. Osgood Leukemia Center; Dr. Martin Pernoll, associate professor of obstetrics and gynecology and head of the division of perinatology; and Kenneth E. W. Melvin, Portland physician.

Sommer lecturers include: Dr. Walter F. Balingier, Bixby professor of surgery and head of the department, Washington University School of Medicine; Dr. Roman W. DeSanctis, clinical professor of medicine, Harvard Medical School and director, coronary care unit, Massachusetts General Hospital; and Dr. Thomas C. Merigan Jr., professor of medicine and director of the diagnostic virology laboratory, Stanford University School of Medicine.

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Budget cuts medical funds

If President Nixon's proposed fiscal 1974 budget passes, UOMS funds will be substantially less than in the fiscal 1972 budget. The President's proposal, released January 29, calls for the termination of Hill-Burton programs, the community mental health centers program, the regional medical programs and the end of research training support programs after the training under previously approved grants is completed.

What exactly does this mean to the University of Oregon Medical School? In a report sent to the Association of American Medical Colleges, to be forwarded to U.S. senators and representatives, Dr. Charles N. Holman, dean, and John Doerfler, fiscal officer, research services, point out that the loss of funds could seriously jeopardize the institution.

The Medical School received \$272,000 in general research support funds in 1972. The allocation for 1973 is \$99,000. In 1972, 29 faculty members received part of their salaries from the General Research Support Grant. In the 1972-73 fiscal year, the Medical School received training grants funded at an annual rate of approximately \$1,480,000. These grants provide 54 faculty members with partial support.

The phasing out of general research support will result in the loss of the small awards to young investigators to assist in establishing themselves and their research programs so they may compete for more substantial support from the various private and public funding sources. These funds provide them with equipment, supplies, supporting personnel and in some instances minor remodeling. This has

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The 50th anniversary celebration of Multnomah Hospital has been scheduled for Sunday, May 6, from 1-5 p.m. Festivities will include tours of the facilities, refreshments, displays of memorabilia, and recognition of long term employees. Tour guides will wear old uniforms representing the different time periods; vintage cars will be parked in front; an old operating room, similar to the one pictured above, will be reconstructed; and an old apartment on the second floor of Emma Jones Hall will be rejuvenated. The event will be open to the public.

Posts filled

A Special Election Committee met February 20 to count 305 ballots returned for the election of 21 Representatives to the Faculty Council and seven members to the Committee on Committees.

The Faculty Council will replace the Executive Faculty which had been the principle advisory group to Dean of the institution.

Elected representatives include:

Unit 1: Margaret Hughes, librarian, 3 years; M. R. Parelus, business manager, 2 years; William D. Parente, assistant administrator, Medical School Hospital, 1 year.

Unit 2: Dr. Ann M. Garner, professor of medical psychology, CCD, 3 years; Dr. David W. Macfarlane, associate professor of pediatrics, and CCD, 2 years; Dr. Warren H. Fay, associate professor of speech pathology and CCD, 1 year.

Unit 3: Dr. Howard S. Mason, professor of biochemistry, 3 years; Dr. J. Peter Bentley, associate professor of biochemistry, 2 years; Dr. Robert E. Swanson, associate professor of physiology, 1 year.

Unit 4: Dr. Frances J. Storrs, assistant professor of dermatology, 3 years; Dr. David Linder, associate professor of pathology, 2 years; Dr. J. Robert Swanson, assistant professor of clinical pathology, 1 year.

Unit 5: Dr. James Metcalfe, professor of medicine, 3 years; Dr. Donald G. Kassebaum, professor of medicine, 2 years; Dr. John W. Kendall, head, division of diabetes and metabolism, 1 year.

Unit 6: Dr. Clarence V. Hodges, head, divi-

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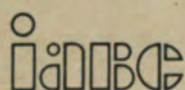
medical center news

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Medical Center News is published by the University of Oregon Medical School, 3181 S.W. Sam Jackson Park Road, Portland, Oregon 97201 to inform students, employees, faculty, and friends of the institution of programs, activities and events of interest to them.

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budget cuts continued

been an important factor in the recruitment of capable young faculty members.

The UOMS is now in the middle of a 35 per cent expansion program which will result in an increase of the medical student body from approximately 330 to 450. As soon as three more classes matriculate at the size of the 1972 fall class, 450 students will be enrolled. This is part of a federal/state matching program which involved the construction of additional buildings. Regardless of the availability of adequate faculty, the School is legally committed to this expansion.

The graduate education programs, particularly in basic sciences, will be curtailed with the elimination of the training grants. It is estimated that the existing programs in the predoctoral areas will be reduced from the 1972 level by 25 per cent in 1973 and by 60 per cent in 1974. In the postdoctoral programs it is estimated that the 1972 level will be reduced by 30 per cent in 1973 and by 50 per cent in 1974.

When the Oregon Regional Medical Program

is discontinued June 30, the Continuing Medical Education program will be markedly curtailed. The director of Continuing Medical Education is funded 75 per cent by the ORMP. His services will be terminated when the program is discontinued.

During the four years prior to ORMP support, there were 24 courses given for approximately 1,360 physicians, nurses and allied health workers. During the four years of ORMP support, there were 329 courses given for 9,959 health professionals.

Also, with the loss of the ORMP grant will be the discontinuance of a Clinical Cancer Center in Oregon and the kidney procurement program at the Medical School.

According to Dr. Holman, of all federally funded programs the most important is the Capitation Grant from the department of Health, Education and Welfare. This year the grant brought the School approximately \$750,000 for all direct educational support. The report states that the loss of this funding would be catastrophic as it would make it impossible to continue instructional efforts at their current level of excellence.

posts filled continued

sion of urology, 3 years; Dr. Alexander J. Schleuning, associate professor of otolaryngology, 2 years; Dr. John M. Porter, assistant professor of surgery, 1 year.

Unit 7: Dr. Robert D. Fitzgerald, professor of medical psychology, 3 years; Dr. David S. Phillips, associate professor of medical psychology, 2 years; Dr. Ivan Inger, associate professor of psychiatry, 1 year.

The Council will also consist of all members of the Executive Faculty, department chairmen and heads of divisions, the associate and

assistant deans, administrators of the hospitals and the administrator of the clinic. Dr. Charles Holman, dean, is chairman.

Elected to the Committee on Committees, an advisory group to the Dean, were Barbara Hiatt, administrator, TB Hospital; Dr. Robert D. Boyd, professor of CCD and medical psychology; Dr. Robert E. Swanson, associate professor of physiology; Dr. Tyra T. Hutchens, chairman, department of clinical pathology; Dr. John A. Benson Jr., head, division of gastroenterology; Dr. Harold D. Paxton, head, division of neurosurgery; Dr. Arthur N. Wiens, professor of medical psychology.

The new Faculty Council, pictured below, meets monthly in the Faculty Dining Room to discuss such matters as reorganization, promotion and tenure, and the National Academy of Science Educational Cost Study. The group consists of 21 elected Representatives, department chairmen and heads of divisions, the associate and assistant deans, and administrators of the hospitals and clinics.



profile

"The most gruesome medicine" is how Dr. David Bruce describes the first bottle of wine he made during his residency in 1959. Since that time, the doctor has produced over 7,000 gallons that would pass any wine tasting test.

Dr. Bruce, who was a resident in dermatology from 1957 to 1960 at UOMS, began his venture in Portland with a batch of concord wine that, as one consumer commented, was a "strange pinot noir."

Through the doctor's introduction to wine making by Dan Wheeler, who has a bonded winery in the Santa Cruz mountains, he realized that it was possible to make superior wines in the Golden State, and soon had approximately 30 acres under cultivation.

"I was prompted to produce wine commercially as the cost of making it is so high. Besides you can experiment more with 300



barrels than two," explained the doctor. He produces six varieties which are Zinfandel, Zinfandel White, Pinot Noir, Chardonnay, Cabernet Sauvignon and Grenache. The wine is sold at Strohecker's Inc. Foods in Portland, or can be ordered from his Los Gatos winery, which is aptly named David Bruce.

At this time, the wine maker does not plan to expand his vineyards. He employs two people to help him run the almost full-time business while he continues his practice at San Jose.

Nursing students enroll fall term

This year's sophomore class admitted to the School of Nursing will be the last to enter at summer term.

The traditional June entry will change to fall term in 1974. After a five-year study of curriculum, School of Nursing faculty have redesigned the curriculum and clinical experience, thus reducing the total B.S. program by one term. The change will place the School of Nursing on a four academic year pattern similar to other collegiate programs in the U.S.

Several benefits should result from the change according to Jean Boyle, dean of the School of Nursing. Students who graduate in June from other kinds of nursing programs and wish to extend their preparation at the UOSN can make the change more easily. In addition, students can use the extra summer to work or make up college requirements.

The School is also requesting funds to extend more faculty assignments from 9 to 12 month appointments. This will enable the School to offer all clinical courses in the summer sessions, using teaching facilities 11 months of the year instead of nine.

This increased flexibility will permit students to accelerate their studies, return from leaves of absence, or to transfer to other collegiate schools when circumstances require a change of residence.

Students form career group

Providing medical students with career information and experience in family practice is the goal of the newly formed UOMS Student Affiliate Group of the Oregon Academy of Family Physicians.

Last summer a group of students worked on activity and program plans that would help acquaint medical students with the speciality. A constitution was drawn by four delegates, Merle Sogge, first delegate, medical student II; David Foos, second delegate, medical student II; Marty Siegel, third delegate, medical student I; and Roger L. Bracchi, fourth delegate, medical student II. The organization was officially recognized this fall by Dr. Charles Holman, dean, and is a component chapter of the Oregon Academy of Family Physicians.

One of the major functions of the group will be to provide an information service where material on all family practice residency programs in the United States will be available. UOMS alumni have been contacted and asked to send an evaluation of the program they went through, and to advise students on what electives would best prepare them for the speciality.

Preceptorships for students are also being established. At this time, about 15 doctors have offered a preceptorship and, according to David Foos, about twice that many students are requesting this type of program. They

hope to set up enough preceptorships to accommodate all interested students.

Mr. Foos explained his interest in the organization. "From all I have heard, the internship program will be eliminated by the time my class has graduated, so we will have to make a career decision one year sooner than was previously required. The group will offer more information so we can make a more intelligent and informed decision."

Roger Bracchi added, "A common fallacy about our organization is people feel that when they join, it is a commitment to family practice as a career, when in fact, our goal is an increased familiarity so we can find out if the field is really for us. I am considering it as a career possibility. However, at this point it would be difficult, if not foolish, to commit myself to a speciality."

According to the delegates, the membership is growing. Last official count was 82 members, of which about 50 were second year, 30 first year, and one third year students. Membership is open to all medical students.

THERE ARE 1.56 million beds in the nation's more than 7,000 hospitals.

Gift left to hospital aids handicapped

Doernbecher Memorial Hospital for Children has received two gifts totaling \$392,823.

A Portland woman, who had no children of her own, has left \$56,000 for work with visually handicapped and blind youngsters. The UOMS was notified recently of the bequest from the Estate of Lillian Anderson, 1869 S.E. Elliot, who died January 14, 1972.

A bequest of \$336,823 from the estate of the late Mrs. John H. (Clara E.) Mulkey, 3215 N.E. Fremont, was recently presented the Hospital.

The Mulkeys, owners and operators of Western Novelty Company for many years, were devoted to children although they had none of their own. They had agreed, before Mr. Mulkey's death five years ago, that the bulk of their estate would be divided equally between Doernbecher Hospital and the Shriners' Hospital for Crippled Children.

The gift will be used for the most pressing needs of children hospitalized in the hilltop facility, according to Dr. Charles N. Holman, UOMS dean.

Lobbyist promotes nursing



After three legislative sessions, Paula McNeil is still enthusiastic about lobbying. As associate executive director of the Oregon Nurses Association, she was appointed by its board of directors as legislative representative during the 1969 session. Since then, she has been traveling to Salem from her Hillsboro home almost daily to inform legislators and the public about health care matters.

"I was willing to accept the board appointment. I didn't have any special lobby training, but I was concerned about improving nursing care and the delivery of health care," said the 1965 UOSN graduate whose interest in government was spurred by her high school civics classes. While at the University of Oregon School of Nursing, she was involved with the National Student Nurses Association as chairman of the committee on nominations; was president of Alpha Tau Delta her senior year; and was 1965 UOSN representative to the Student Nurses of Oregon. Following graduation, the former Paula Paola was employed at Physicians and Surgeons Hospital for a year and then did general duty nursing at Maui, Hawaii. She has been a staff member of ONA since 1967.

Prior to her working for ONA, the organization did not have a fulltime lobbyist. "We began to realize how much the legislative process affected us. Nurses work in so many areas, such as mental health, public health, industry, schools, hospitals and nursing homes. The budgets for state hospitals and state supported schools of nursing all go through the legislature. We realized that we had an obligation to inform the public on various health matters other than nursing."

Mrs. McNeil sees her role in two ways. "I state the concerns of registered nurses in Oregon to legislators, and provide them with information they would not ordinarily have. Legislators have their own businesses and can not be expected to be fully informed about legislation in all the various categories.

"I review all bills to see if they have some relevancy to nurses or health care in general, then feed them through the Association to get the reaction from nurses all over the state. If the legislation is urgent, we rely on phone calls for input; if not, we consider legislation

at regularly scheduled meetings to see what action nurses wish to take."

Once the feedback is in, Mrs. McNeil prepares testimony for committee meetings, or coordinates presentations to be made by others. The association's position is also related to legislators in individual conversations.

State Board of Higher Education

(Fourth in a series of articles about the Oregon State System of Higher Education.)

Day-to-day administration of public higher education in Oregon is in the hands of the Chancellor of the Oregon State System of Higher Education. The Chancellor, who has offices in Eugene, reports to a nine-member lay board appointed to four year terms by the Governor.

Executives of the nine member institutions in the System report to the Chancellor who in addition to his other duties, acts as chief lobbyist for public higher education with the Oregon Legislature.

Dr. Roy E. Lieuallen has served as Chancellor since 1961 and came to the post from the presidency of Oregon College of Education. A former high school science teacher and basketball coach, Dr. Lieuallen is a graduate of Pacific University. He holds a master's degree in school administration from the University of Oregon and a doctorate in higher education from Stanford. Both Pacific and Willamette Universities have conferred honorary degrees on Dr. Lieuallen.

The Chancellor and his wife have four children; the oldest, Douglas, is a UOMS graduate, Class of 1972, and their daughter, Barbara, is a sophomore nursing student.

Dr. Lieuallen is presently serving as chairman of the Western Interstate Commission for Higher Education.

Three vice chancellors assist in administration of the central office activities.

Freeman Holmer has served as vice chancellor for administration since 1969. Mr. Holmer holds a master's degree from the University of Oregon and has completed additional graduate work at Columbia University. He taught political science at Willamette University before joining the State of Oregon as director of the Department of Finance and Administration in 1959. In 1967 he became director of federal and state relations, Council of State Governments, Washington, D.C. and in 1968, director of environmental protection, State of Wisconsin.

Vice chancellor for facilities planning is J. I. Hunderup. Association with the Oregon State System of Higher Education began for Mr. Hunderup in 1946 when he was named an

She expects more than 200 bills will be introduced this session in which ONA will be interested to some extent or another. She will just follow the progress of many bills.

"It's exciting. Lobbying combines an exciting part of several worlds—nursing, state government and the ONA. The diversity and challenge are marvelous," says Mrs. McNeil who hopes to continue lobbying for many more sessions.



Roy E. Lieuallen



Miles C. Romney



J. I. Hunderup



Freeman Holmer

instructor in accounting at Oregon State University. In 1948 he became assistant business manager of the Corvallis school and in 1952 was appointed administrative assistant to the comptroller of the Oregon State Board of Higher Education. On July 1, 1963 he was named director of facilities planning for the State System and became vice chancellor in 1969.

Dr. Miles C. Romney holds the post of vice chancellor for academic affairs and was appointed to the position in 1963 after serving for a year as executive director of the Higher Education Coordinating Council for Graduate Study. Prior to that time he was professor and associate dean of the University of Oregon's School of Education.

Dr. Romney holds a Ph.D. in educational administration from Columbia University and has served on the staffs of Utah State University, the University of Michigan, Wayne as well as the University of Oregon.

Before coming to Oregon in 1952 he participated in a number of studies dealing with reorganization and financing of public school districts and has written extensively on the problems of public schools and curriculum development.

Dr. Romney's son, Craig, is a third-year student at the Medical School.

Night nurses keep watch

"We have a full house tonight. One patient's husband shot himself this evening; a sixteen-year-old boy with leukemia came in; a woman with cancer talked to the nurses all evening; we admitted a boy from the Emergency Room with a fracture; there are four nurses on this ward because it looks pretty heavy."

Patients are discussed as the evening shift leaves. Work is just beginning for the night nurse.

At the Medical Center a small number of people devote their lives to healing, and caring for the sick during the night hours. They live in a different world, for the hospital at night is a different place. There are few doctors hustling about, patients are not rushed from test to test, phones are not ringing, visitors are not present. It is quiet, the lights are dimmed, people are sleeping, words are softly spoken.

Why do nurses choose the night shift? Mrs. Mary McDonald, night patient care coordinator who has worked nights the two years she has been at MSH, feels there are many reasons. "Nurses have much closer patient contact. Patients become depressed, lonely and feel more pain during the night so they talk."

She says a night nurse has to be more resourceful. "It's good training ground for a head nurse. She has to handle emergencies and organize people. There are fewer resource people, such as doctors and other nurses, available so she must make decisions. It's more of a challenge."

"Also, a lot of people are night people. I hate the confusion that is present during the day. The atmosphere at night is more relaxed and realistic. There aren't so many interruptions. With all the testing done here, many of the patients are coming and going to other departments during the day. At night you are able to develop close relations with people, if for no other reason than just the lesser numbers."

Mrs. McDonald has many personal reasons for preferring her shift. "I have more time to spend with my family. I see my son in the morning, and when school gets out I'm home. My husband works days, but I guess he is used to my crazy kind of living."

Mrs. Harriet McMillan, charge nurse on 10A, agrees with Mrs. McDonald. "It is more quiet at night. There aren't near the tensions. We may be extremely busy, but we go at our own pace. And that is sometimes very rapid."

"We have more overall patient contact," added Mrs. McMillan, who has worked nights for the past two years. "When a patient calls, he gets immediate response. Patients talk out more of their problems at night."

She changed to the night shift because she felt it was a lot easier to work every night than to be switched from days to evenings to

Nurses look upon darkened hallways during the 11 p.m.—7 a.m. shift. Mrs. McDonald, standing, watches monitor during her nightly rounds with Dorothy Biggs. Mrs. Biggs, a registered nurse who has been working nights since July, finds nights more quiet and relaxing than days.



nights. But she doesn't particularly like it.

"You have to change your mode of living. All activities are reversed. I don't especially like it because I don't have my evenings free."

But, Mrs. McMillan, who says "once you make up your mind you can tolerate a lot of things," has found some advantages. She enjoys taking part in daytime activities and has time for her family.

An LPN on the same ward loves it. She says that it costs less to work. There are no parking fees, babysitters to pay, lunches to buy, and she is paid more. She also likes being able to spend more time with her family.

Night nursing at CDRC is different says Carol Vaughn, RN. The children generally sleep all night and none of them are critically ill. "It's very quiet. You are really alone and have to learn to get along with yourself."

Mrs. Vaughn has a chance to see the children awake on Mondays when she works during the day. "I wouldn't be able to understand the full extent of the program unless I could spend one day here." She prefers working with children and is looking forward to being transferred to a day shift in May.

"Patients seem to go for the night nurse," is the conclusion of Leona Vanderhoof, night supervisor at TB Hospital.

"I give them a little TLC (tender loving care) to help them settle down. That's what they like. Some even wait for you to come in. You really get to know your patients," said the 15-year night veteran.

Mrs. Vanderhoof went to work nights after her husband died and left her with small children. She wanted to be home when they were



Checking on sleeping children is part of the responsibility of Carol Vaughn, night nurse at CDRC. Darin Olson woke up long enough to sit up and roll over.

awake and found the night shift the only way to do this. Her children have left home, but she has continued her night vigil.

One nurse summarized, "The night nurse is more than a nurse. She is a mother, counselor, friend and confidant."

MEDICARE HAS had a powerful impact on hospital utilization. In 1971, persons 65 and over spent 78.5 million days in hospitals—an increase of 13 per cent over 1967. Total inpatient days—including those on Medicare—went up 6.6 per cent.

Medical writing intern here

An internship in medical writing and hospital information has been established by the University of Oregon Medical School, Office of Public Affairs, and the Oregon State University Department of Journalism.

The one-year program consists of a fall term seminar on the Corvallis campus for five to 10 students. Two of these students are then selected to spend winter and spring terms working in the Public Affairs Office of the Medical School. One student carries out public information activities one day a week during winter term, while the other reports and writes medical articles. Spring term, the students reverse their roles.

Craig Van Blokland, the first student to participate in the program, spends each Friday in the Public Affairs Office. He will continue through spring term and a new student will take over summer term.

The medical writing portion of the fall seminar consists of an explanation of magazine and newspaper medical writing, content analysis of medical publications, and the writing of medical articles. It is taught by Ronald P. Lovell, assistant professor of journalism, and a

contributing editor of *Medical World News*.

The public information segment includes lectures on medical public relations, interviewing techniques, producing material for radio and television, press relations, planning and conducting a press conference, internal communications, and public relations law. Instructors here are Ken Niehans, director of public affairs for the Medical School, and Thelma Wilson, assistant director. They also conduct seminars on the OSU campus during fall term.

Niehans said, "We're excited about this cooperative program, the only such structured one in the country that we or the OSU journalism staff know of. Especially gratifying has been the cooperation we've received from UOMS faculty in working with these young people. To date these include Drs. Curtis Weiss, Benjamin Siegel, Sam Meyer, Samuel Irwin, Wesley Horton and Marvin Rittenberg."

The internship and seminars are part of a new proposed health science minor of OSU's journalism department. Prerequisites for the program include microbiology, biological science, environmental health, communicable and non-communicable disease, sanitation, and foods and nutrition. Also required are 15 additional credit hours of electives from the areas of community or environmental health.



Nursing student Jan Schlechter pays tuition with the \$200 scholarship she was awarded March 23. Miss Schlechter was the first recipient of the scholarship set up by former president of the Nursing School student body, Mary McBride, with the aid of the Advancement Fund office. The money is made available from the School of Nursing Student Body Fund and a scholarship will be presented each year.



Oregon citizens had the opportunity to learn first hand about programs and facilities available to the state's handicapped children at the Child Development and Rehabilitation Center open house February 24. Staff members conducted tours through classrooms, therapy units, laboratories, offices and the North Unit, a residential in-patient unit which opened during the past year.

FIVE STUDENTS at University of Oregon Medical School have been named to the Dean's List in recognition of superior academic achievement in the medical technology program.

Honored were Linda Yoder, Sharon Fujimoto, Karen Nishimura, Mary Hartzler and Patricia Luster. The women earned a cumulative grade point average of 3.5 and above.

Good Samaritan law protects doctors

Reprinted with permission of *PORTLAND PHYSICIAN*, December, 1972.

We've received inquiries about whether Oregon has a "Good Samaritan" law to protect physicians who stop to render emergency aid at an accident scene. The 1967 Oregon Legislature passed a law providing this immunity from prosecution, so long as the physician does not violate the standards of reasonable professional care under the circumstances in which medical assistance was provided.

Actually, "Good Samaritan" laws, we are told, are really unnecessary. While much has been made of their importance, there have been no serious judgments against physicians who provided emergency assistance and care, even in states that have no such law. We understand also that the existence of such laws still offers no protection to a physician who may have been negligent.

In Oregon, it is a violation of the law for any citizen to leave an accident scene without attempting to provide whatever assistance may be possible. This holds as true for laymen as for physicians.

Specifically, Oregon's "Good Samaritan" law is as follows:

"No person may maintain an action against

a medically trained person for damages for injury, death or loss that results from acts or omissions of the medically trained person while rendering emergency medical assistance unless it is alleged and proved by the complaining party that the acts or omissions violate the standards of reasonable professional care under the circumstances in which the emergency medical assistance was rendered.

"The giving of emergency medical assistance by a medically trained person does not, of itself, establish the relationship of physician and patient or nurse and patient between the medically trained person giving the assistance and the person receiving the assistance in so far as the relationship carries with it a duty of a physician or nurse to provide or arrange for further medical care for the injured person after the giving of emergency medical assistance."

Oregon law further defines "emergency medical assistance" as "medical care not provided in a place where emergency medical care is regularly available, including but not limited to a hospital, industrial first-aid station or a physician's office, given voluntarily and without the expectation of compensation to an injured person who is in need of immediate medical care and under emergency circumstances that suggest that the giving of assistance is the only alternative to death or serious physical after-effects."

Volunteers serve hospitals

A different kind of dedication is brought to the hospital by the volunteer. He comes out of a love and concern for people, with a desire to help those in need.

The volunteer becomes a member of the hospital team, assisting in a service function under staff direction and supervision. His objective is to supplement the services performed by paid personnel. And, perhaps more than

any member of the staff, the volunteer has the time and opportunity to create an atmosphere of friendliness and goodwill.

Since its inception three years ago, the Volunteer Services at University of Oregon Medical School Hospitals and Clinics have recruited 864 persons who have donated over 60,800 hours. The ages range from 13 to 75 years, with one 80-year-old woman who works from her home making lap robes for patient gifts. Last year she made 100.

Prospective volunteers are given a two-day hospital orientation that is scheduled every other month for some 25 persons. The 12-hour course is presented by Marla Clark, director of volunteer services, and nurses, Betty Charles, Medical School Hospital; Phyllis Rector, Multnomah Hospital; and Penny Scott, former director of health occupations at Occupational Skill Center, Clackamas County.

A tour of the facilities is given and volunteers are taught what it means to be a volunteer, job descriptions and procedures such as making beds. At the end of the session, they are assigned to an area in which there is a need. The choice and talents of the individual are also considered when making the placement in one of the 14 areas.

Jobs range from helping in nursing service to changing babies' diapers. Areas of assignment include the Gift Shop, nursing service, information desk, clinic aide, pharmacy, emergency room, nursing office, credit office, central supply, baby picture program, blood replacement, playroom, teacher's aide, floaters, and hemodialysis.

Three different service carts are manned by the volunteer staff. The coffee cart makes its rounds at the Medical School Hospital and Multnomah Hospital twice each day serving coffee, tea or Sanka and other hot drinks; the service cart provides an opportunity for patients to purchase items from the Gift Shop without leaving their rooms; and the toy cart visits the Pediatric Waiting Room to entertain the children.



For one-and-a-half years volunteer Mrs. Anne Day has taken the toy cart to clinic pediatrics. Carmen Michelle Kozera plays with Mrs. Day while waiting to be seen by her doctor.

Bilderback lecture

Dr. Julius Richmond, professor of pediatrics at Harvard Medical School, has been named this year's Dr. Joseph B. Bilderback Lecturer and Visiting Professor at UOMS. The 11th annual conference will be at the Child Development and Rehabilitation Center May 7-9.

Dr. Richmond will take over as head of the department of preventive and social medicine at Harvard July 1. He is director of the Judge Baker Guidance Center and psychiatrist-in-chief at the Children's Hospital Medical Center. The doctor was the first director of Project Head Start in the Office of Economic Opportunity and later, as director of health affairs for OEO, developed the concept of the organization's funded comprehensive health clinics.

This year's program will be a tribute to both Dr. Bilderback and Dr. Richard Sleeter, late director of the Crippled Children's Division.

In keeping with Dr. Sleeter's interests, the program will deal with the subject of the handicapped child.

Retirements

Lucile Derby



After almost 10 years as an occupational therapist for TB Hospital, Lucile Derby retired February 28. She had worked at the TB Hospital in Salem before it was relocated in Portland.

A week-day resident of Portland, Miss Derby will retire to her home in Willamina to help her roommate raise Irish Setters. She is part owner of Tirnanog (The land of forever young) Kennels. Miss Derby also plans to read, work in her garden and travel.

Leah St. John

Learning to play the organ is just one of the activities planned by recently retired Leah St. John, who has worked in the physical plant since 1966 and retired March 7 as accounting clerk 2.

Mrs. St. John, a Portland resident during the week only, is going to return to Willamina fulltime and "get the place in shape," ride her horses, attend saddle club meetings, go fishing, and visit her children in Long Island and London.



Other recent retirements are:

Edward O. Clark, physical plant
Alvina J. Wobbrock, clinic nursing

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without your help

IT WON'T ADD UP

Private gifts are increasingly critical to the programs of the University of Oregon Medical School because conventional sources of assistance continue to decline.

The UOMS Advancement Fund, a tax-exempt public foundation, is seeking support for these worthwhile objectives.

1. Unrestricted, as the Board of Directors may determine
2. Goal for the '70's for equipment in new buildings
3. Dean's Discretionary Fund
4. Perinatal Medicine Program
5. Family Practice Training Program
6. Edwin E. Osgood Leukemia Center
7. Endowed Professorships
8. Student Aid: Scholarships and Student Loans

Without your help, the money needed to keep these programs alive just won't "add up" with the funds now available.

Gifts, payable to the UOMS Advancement Fund, or requests for our new brochure should be addressed to:

Executive Director
UOMS Advancement Fund
3181 S.W. Sam Jackson Park Road
Portland, Oregon 97201
Telephone (503) 225-8223

NEWSMAKERS

Representatives from the University of Oregon Medical School appeared on television news recently. They are Dr. Bernard Pirofsky, head, division of immunology and allergy, on immunology and research, March 25, Channel 6; Dr. Arthur N. Wiens, professor of medical psychology, on Channel 8's "Telescope" April 5 on non-verbal communication; and Dr. Charles Dotter, chairman, department of radiologic diagnosis, March 28, Channel 2, on non-surgical relief of deep pelvic arterial obstructions.

Career opportunities in medicine for women were discussed by Dr. Margaret Berroth, associate professor clinical pathology and assistant director, education program, March 28 during a week-long program conducted by VIEW (Volunteers in Educating Women).

A panel of health career students from UOMS, UOSN, and UODS spoke to a health careers class at Mountain View School in Beaverton March 1. They were Dave Watson, medical student III; John Killian, dental student; and Karen Cook, nursing student.

Dr. Paul Blachly's drug dependence film, made by UOMS Instructional Aids, was viewed at the 5th National Methadone Conference March 17-18 in Washington, D.C. Dr. Blachly is professor of psychiatry at UOMS.

Elected to the executive committee of the Kidney Association of Oregon for 1973 was Dr. Michael Baird, medical director and administrator of hospitals and clinics, University of Oregon Medical School. He was elected at the annual meeting of the Association.

Dr. Emil J. Bardana Jr., assistant professor of medicine, was elected a fellow in the American Academy of Allergy at its February meeting in Washington, D.C. In March, Dr. Bardana was elected vice president of the Northwest Society for Clinical Research at its meeting in Seattle.

Sam Lin, graduate student in the anatomy department, has been invited to present the Junior Fellowship Lecture at the annual meeting of the American Fertility Society at San Francisco in April. The paper on modification of gonadal differentiation in the hamster by treatment with cyproterone acetate was selected on a national competitive basis. Mr. Lin will receive a certificate and a \$500 award.

Dr. Harold Boverman, professor of psychiatry (child psychiatry) and pediatrics, was Hill Family Foundation Visiting Professor at Meharry Medical College in April.

Kirk Jacobson, student at University of Oregon Medical School, received an honorable mention in electron photomicrography at the 15th Annual SAMA-EATON Medical Art Award Competition. Winners will be displayed in the Medical Art Gallery during the SAMA convention in Chicago, at the AMA convention in New York, and at other national medical meetings.

VIPs

MARCH

Service Anniversaries—from Personnel

- 5** Thomas Alexander, neurosurgery
Lillian T. Cunningham, CCD
Lillian M. Dentler, MSH nursing
Dennis James Glass, physical plant
Diane I. McLaughlin, obstetrics/gynecology
Thomas J. Reddy, parking and security
Roberta P. Smith, MSH housekeeping
Doris Marie Suek, TB Hospital
- 10** Sybil Barker, clinic admitting
Lucile Derby, TB Hospital
Nancy L. Elliot, Child Development
Jean M. Miller, MSH nursing
Rebecca Jones Miller, MSH laundry
Anna G. Peters, pediatrics
Myrtle Washington, MSH nursing
- 15** Jean Boyle, School of Nursing
Emile L. Egger, MSH nursing
Violet Page, cardiac surgery

Moving Up

- Norma L. Addington, RN 1 to RN 2, TB Hospital
Marjorie L. Booton, RN 1 to RN 3, TB Hospital
Connie D. Hughes, sec. 2S to sec. 3S, program planning
Ellen J. Fitchen, ed. proj. aide to clerk 2T, library

- Regina Blackson, inst. wkr. 1 to inst. wkr. 2, MSH housekeeping
Ruth A. Warnock, seamstress to inst. wkr. 2, MSH housekeeping
Richard K. Bowen, cust. wkr. to laborer 2, physical plant
Judith Patricia Beecroft, RN 1 to RN 2, MSH nursing
Teresa Blythe, clerk 3T to sec. 3T, med. transcription
Sheila E. Bonczek, clerk 3T to sec. 3T, Pub. Health and Preventative Medicine
H. Lorraine Chapman, clerk 1T to clerk 2T, clinic admitting
James L. O'Malley, PN 1 to LPN 1, MSH nursing
John E. Boulton, main repr. 1 to main repr. 2, physical plant
Harvey D. Johnson, main repr. 1 to main repr. 2, physical plant
Priscilla S. Ernst, clerk 2T to clerk 3T, budget office
Virginia S. Scott, clerk 2T to clerk 3T, clinic admitting
Suzanne K. Tarbell, clerk 3T to med. records lib. 1, med. records

New Faculty Volunteer

- Dr. William C. Griffin Jr., clinical instructor in pediatrics
Dr. John Molendyk, assistant clinical professor of radiation therapy
Dr. Clarence L. Morgan, assistant clinical professor of pediatrics
Dr. John B. Williams, clinical instructor in medicine, chest diseases

IN MEMORIAM

- Dr. Marvin Schwartz, former clinical professor of medicine.....March 24, 1973
Evelena LeCocq, clinic nurse in orthopedics and surgery..February 23, 1973

medical center news

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