



UNIVERSITY OF OREGON
HEALTH SCIENCES CENTER

NEWS

Health Sciences Center News is published by the University of Oregon Health Sciences Center to inform students, employees, faculty and friends of the institution of programs, activities and events of interest to them.

Stroke is target of intensive new program at UOHSC

Stroke, the third leading cause of death and disability among Oregonians and all Americans, will be the focus of a two-year Comprehensive Stroke Center Program at the University of Oregon Health Sciences Center.

A \$1.5 million grant from the National Institute of Neurological and Communicative Disorders and Stroke has been awarded to the Health Sciences Center for the program.

Dr. Frank Yatsu, chairman of the department of neurology in the School of Medicine, will direct the project, which will cover public and health-professional education about stroke, rehabilitation of those who have had a stroke or strokes, preventive medicine, and research into stroke.

"Benefactors of our endeavors will be the public," Dr. Yatsu said. "Our grant from the federal government represents an attempt to spend tax dollars in a more meaningful way in translating medical research directly to the public."

He said, "Comprehensive efforts aimed at prevention and improved therapy of stroke have long been neglected. We need to make the public and health professionals as aware

about stroke as they are about cancer and heart disease."

It is estimated, Dr. Yatsu said, that about 2,500 Oregonians suffer strokes annually. In 1977, 2,096 died as the result of cerebrovascular diseases, which include strokes, cerebral hemorrhages, cerebral thromboses and

"Oregon is in a unique leadership position for the nation to prove that strokes can be prevented and better treated by mobilizing the available expertise within the state."

other such conditions, according to the Oregon State Health Division's vital statistics section.

About 37 staff members from the Health Sciences Center and eight from Good Samaritan Hospital and Medical Center's (Portland) Rehabilitation Institute of Oregon are directly involved in the stroke center program.

Improving the identification of risk factors of stroke and studying new and untested forms of therapy will be part of a research project in the program.

Dr. Errett Hummel and Dr. Calvin Tanabe,

assistant and associate professors of neurosurgery, respectively, are participating in an international study on the value of preventing certain kinds of strokes by extracranial-intracranial bypass. This is an operation to increase cerebral blood flow by joining an artery in the scalp to one on the surface of the brain.

Dr. Geoffrey Seaman, professor of neurology and biochemistry, is heading a laboratory study involving the use of drugs reducing "stickiness" of blood platelets, believed to be the primary event leading to thrombotic strokes, caused by blood clots that obstruct circulation.

Aspirin and the drug dipyridamole will be used in a study headed by Dr. Yatsu. Involving patients in Oregon and southwest Washington, the study will explore how aspirin and dipyridamole might prevent transient ischemic attacks, a temporary lack of blood supply to the brain which produces a distinct neurological deficit, which clears in minutes or hours. The disease can cause partial paralysis or an inability to speak or, sometimes, understand language.

Ways of improving the methods of enhancing speech recovery after a stroke or strokes will be sought in other research directed by Dr. Robert C. Marshall, assistant professor of speech pathology, Portland Veterans Administration Hospital, and speech pathologist Lee Ann Golper.

Another study will investigate patients with asymptomatic carotid bruits, noises thought caused by turbulence of blood due to narrowing of the artery, to determine their natural history, the influence of secondary circulation, and the effect of antiplatelet aggregation drugs. The study will be conducted by Dr. John Porter, head, division of vascular surgery, and Dr. Gerald Baur, assistant professor of surgery.

In the preventive medicine research project, Dr. Harold Osterud and Dr. Beatrice Rose are identifying individuals at risk of stroke and vascular disease, including heart disease, and recommending appropriate intervention therapy through modification of behavior and diet. Dr. Osterud is chairman of the public health and preventive medicine department, (continued on page 4)

Pediatric nursing takes a step up

Thanks to a new program at the Health Sciences Center, pediatric nurse practitioners will be adding an "M.N." to the "R.N." after their names.

A federal grant of over \$360,000 has given the School of Nursing the go-ahead for establishing a graduate program in a new area of specialization: ambulatory pediatric nursing. The program will prepare qualified nurses to provide primary health care to children in ambulatory settings.

The new graduate curriculum is an upgrading of the School's previous continuing education program for training pediatric nurse practitioners (PNP's).

Raising the requirements to the master's level will give PNP's a "stronger foundation" on which to build their practices, according to Dr. Wilma Peterson, recipient of the grant.

Dr. Peterson is associate professor of parent-child nursing and project director of the family-child nursing major in the School's graduate program. Ambulatory pediatric nursing is the fourth area of specialization in the program.

The three-year grant comes from the Department of Health, Education and Welfare, Public Health Service, Division of Nursing.

Since July 1975, the School of Nursing has trained pediatric nurse practitioners through a continuing education program funded by

(continued on page 4)



Demonstrating for classmates how to do a physical examination of a child is Susan Lowe, who is in the School of Nursing's continuing education program for training pediatric nurse practitioners. Her young "guinea pig" is Jeffrey Hellings. He's the son of Pam Hellings, director of the PNP program, which is being upgraded into a graduate program.

Paying attention proves important in lipreading class

Students don't daydream in Shari Kazdoy's class.

Keeping eyes and ears alert to the teacher is especially important in a lipreading class.

"It's a visual and mental strain to lipread," explained Ms. Kazdoy. "It's a skill that requires a lot of concentration."

An audiologist in the School of Medicine department of otolaryngology and maxillofacial surgery, Ms. Kazdoy actually prefers the term "speechreading" to the more familiar "lipreading." "We're not just reading lips; what we're doing is reading a speech message," she said.

She teaches basic speechreading classes at HSC to adults in the Portland area who have acquired a hearing loss through aging, illness and various other causes. This fall she conducted the first such class ever offered at the Outpatient Clinic, and she plans to give another in January.

"The goal of the speechreading class is to restore as great a degree of the communication function as possible," Ms. Kazdoy said. "An important fact to remember, one I make very clear to the group when they start, is that although this is a speechreading or lipreading class, lipreading alone is not going to achieve communication success."

"It has to be a combination of utilizing your residual hearing, with or without a hearing aid; being motivated; lipreading, which includes watching facial expressions and gestures; and paying attention to clues in the inherent situation."

Emphasized the teacher, "There's no one cure-all for communication difficulty."

The three basic guidelines that Ms. Kazdoy recommends for learning speechreading are actually good tips for even the most keen-eared of communicators:

—Concentrate the attention on the thought that is being expressed rather than on individual words. This is the way anyone understands when he hears or reads.

—Do not interrupt a speaker before he has finished a sentence to ask him to repeat what he has said. The lipreader often will find that although he does not understand the first part of a sentence, he does understand the last part.

—Form the habit of watching the speaker at all times, even when hearing without difficulty.

"A major guideline is to relax," added Ms.

Kazdoy. "Tension never made a good lipreader."

Tension and awkwardness are all-too-familiar feelings to the hearing impaired, said the audiologist. "People with hearing problems are often unwilling to admit them to the public. Hearing loss is something that people often hide. Whereas people aren't ashamed to wear glasses, there is still, unfortunately, a stigma attached to wearing a hearing aid."

So what frequently happens is that the hearing-impaired person becomes an actor. He nods his head when he hasn't really understood what was said; he pretends to follow the flow of conversation. And he may end up

responding inappropriately because he simply didn't hear.

At the start of her speechreading class, Ms. Kazdoy emphasized to her students that there's no disgrace in admitting they didn't understand or in asking her to repeat something. In her classroom, she told them, there is no need to fake it.

"It was as if they had been waiting all this time for someone to say to them, 'You don't have to pretend anymore,'" she noted. "In fact, right after I said that, one of them turned to the person next to them and said, 'I didn't catch your name.'"

Another big emotional release for the stu-

dents, she said, was to discover that other people share their problems in communicating.

At each session of the eight-week class, Ms. Kazdoy gave a lecture or presentation and then led the students in practicing their speechreading skills. Every student took a turn speaking in front of the class so the participants would gain experience in lipreading different people.

One trick to mastering speechreading, the teacher noted, is learning to recognize familiar phrases and to anticipate words that pop up in familiar situations, such as introductions.

Homework assignments found the students practicing their lipreading in front of a mirror and watching the TV news with the sound turned down.

Although Ms. Kazdoy designed her speechreading class to be an "exclusive club" of sorts for people with hearing loss, she has been pleased to discover people at HSC with normal hearing who'd like to learn the art. She plans to offer a special class for a limited number of these people in December.

Speechreading classes also are offered regularly at the Portland Center for Hearing and Speech, located on the HSC campus.

There's a warmth and camaraderie among her hearing-impaired students, Ms. Kazdoy has found, and they have supported each other's efforts.

"These beginning lipreading students are really pleased with themselves when something falls into place, when there's a sudden flash of recognition without their having to struggle to watch individual lip movements," she said. "Most of them have seemed to enjoy the class, and so have I."

Audiologist Shari Kazdoy shows her speechreading students how to distinguish between similar-sounding words.



MS victim's wish fulfilled by donors

With one last touch-up of her hair and a good-luck squeeze of her hand from the hospital chaplain, Marlene Ferris was ready to be on her way.

For over six months the multiple sclerosis victim had been looking forward to leaving her University Hospital bed and settling into a Portland nursing home. On this morning in late September, her wish was granted.

What helped fulfill her hope was a special wheelchair, purchased from donations to a fund of the University of Oregon Health Sciences Center Foundation. The \$5,487 was more than enough to buy the special reclining wheelchair and the "environmental system" that allows her to make phone calls and turn on lights and television.

Mrs. Ferris, a widow who had to sell her home and place her four teen-age children in foster homes, had been confined to bed for over a year because she could not use a traditional wheelchair. Having the special chair enabled the heavy-care patient to be accepted into a nursing home.

The 40-year-old MS patient also suffers from diabetes and asthma. She has the use of only her right hand.

Prompting the outpouring of donations was an article in the *Oregon Journal* that described Mrs. Ferris' plight.

After the wheelchair and environmental system were paid for, more than \$2,200 was left in the fund. The balance will become a "nest egg" to pay for Mrs. Ferris' nursing home care, said her medical social worker at the Health Sciences Center.

The social worker had praise for the "marvelous care" that Mrs. Ferris received during her lengthy stay at University Hospital. The nursing staff treated her not only to a going-away party, but to a birthday party only a week before she departed.

Marlene Ferris enjoys some last-minute primping as she waits to leave her hospital bed.



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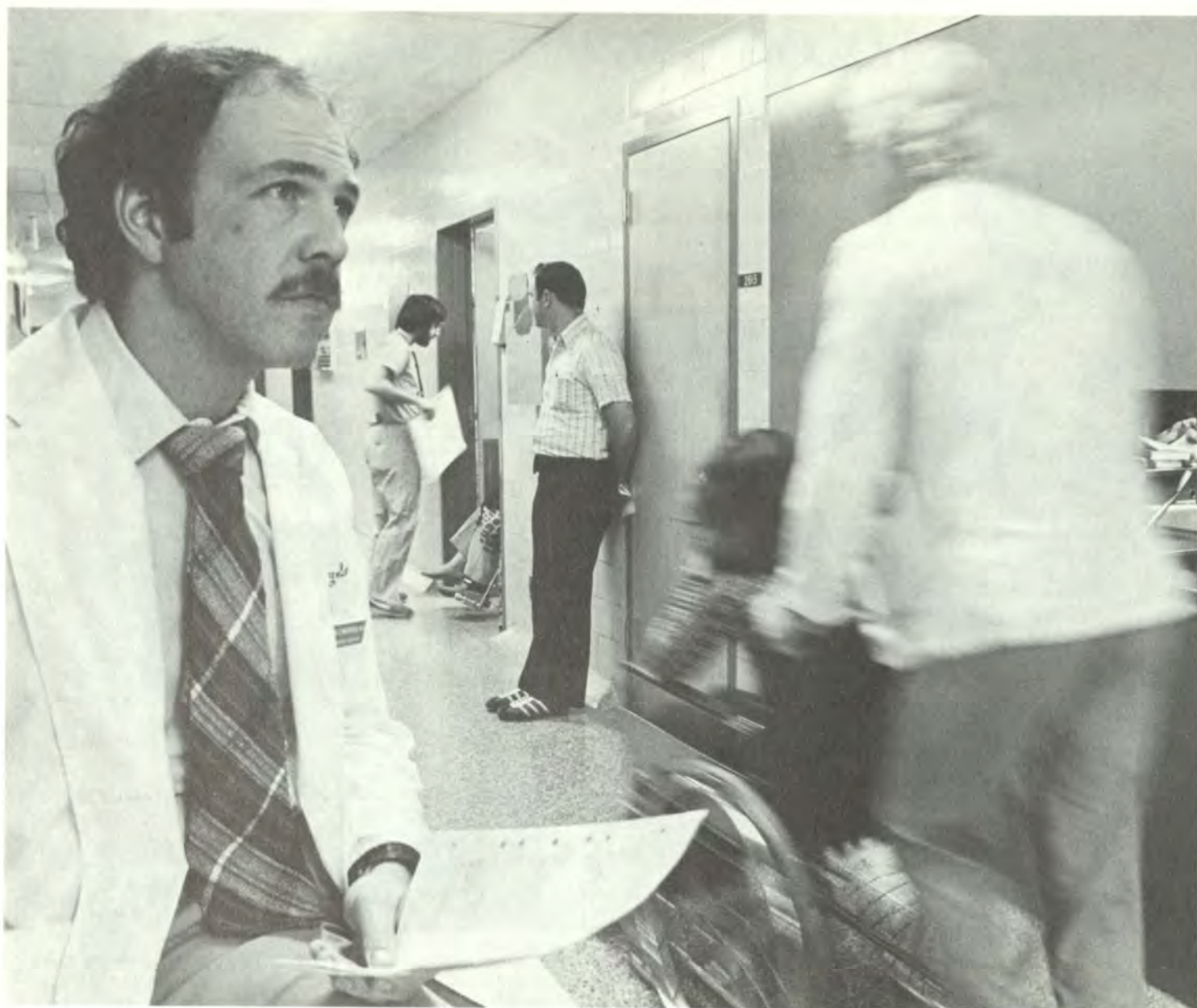
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Against the fast pulse and high pressure of an emergency room, the most difficult thing to teach people about emergency medicine is judgment, according to Dr. John Moorhead (photo at left), director of the Health Sciences Center's new emergency medicine residency program. In photo above, Dr. James "Sandy" Kline, one of three residents now in the program, treats a patient in the emergency room. "What we're trying to provide is a balance between exposure to acute situations in the emergency department and in-depth training in specialty emergency areas," Dr. Moorhead said.

HSC responds to big need for emergency physicians

"There are not many of us around," observed Dr. John Moorhead, referring to the modest number of physicians trained in formal graduate programs of emergency medicine.

But their kind is increasing, and partly because of the new residency training program in emergency medicine at the Health Sciences Center. Dr. Moorhead is the director.

The only one of its type in the Northwest, the program is a response to a long-recognized need for better training of physicians working in emergency services, he said.

Three physicians started their two-year residency in the UOHSC program last July. Three more residents will be added next year.

The new program expands the educational and service programs of the School of Medicine's division of emergency medicine, which includes advanced paramedic training and the Oregon Poison Control and Drug Information Center.

"What we're trying to provide is a balance between exposure to acute situations in the emergency department and in-depth training in specialty emergency areas," from pediatrics to plastic surgery, Dr. Moorhead said of the residency program.

Before such programs began several years ago, he said, no formal training was available for a specialty in emergency medicine. For

many years emergency rooms have been staffed by general practitioners, surgical residents, assorted moonlighters and others, with no one really adequately trained in the field, said Dr. Moorhead.

In 1968 the American College of Emergency Physicians was formed to help launch emergency medicine residency training programs and to establish educational standards.

"There's no doubt that the number of these programs is just exploding," said Dr. Moorhead. "From three programs six years ago, there are now over 50 in the nation. And there are more every year. The need has been defined, and the medical profession has responded by setting up these residency programs."

Nationally, about 400 physicians have been trained in emergency medicine. Seven of them practice in Oregon and three are at HSC.

A physician trained in emergency medicine is a generalist in acute care, able to handle a wide variety of problems, said the director.

"Emergency medicine is not just working in an emergency department and seeing patients," Dr. Moorhead noted. "It's a whole spectrum. It happens to be just one way that people are fed into the system of health care."

Residents in the new program will train at UOHSC and also have rotations at Portland Adventist Medical Center and Denver (Colorado) General Hospital. Portland Adventist, which is a co-sponsor and training affiliate, will provide the residents with exposure to emergency medicine in a community hospital. At Denver General, the main training emphasis will be on management of trauma victims.

In the first year of the program, residents will work for 22 weeks in emergency rooms in University Hospital, Portland Adventist and Denver General. They also will spend, at University Hospital, four weeks each in psychiatry and anesthesia; six weeks each in obstetrics/gynecology, orthopedics and pediatrics; and one week in the Oregon Poison Control and Drug Information Center.

Included in the second year of residency will be 20 weeks of emergency services work at University Hospital and Portland Adventist. Residents will receive training in medical intensive care, neurology, cardiology, plastic surgery, dermatology, and eye, ear, nose and throat. The second year also will include research studies in emergency medicine and training in emergency room administration.

Eventually, Dr. Moorhead believes, a residency in emergency medicine will be required for a physician to work in a major

emergency room.

Said the director, "The difficult thing to teach anyone about emergency medicine is judgment. In most of medicine, we're taught that we have to see a patient, make a diagnosis, and start treatment."

"In emergency medicine, we learn that we have to initiate treatment often before we make a specific diagnosis. Probably what we do best is decide which patients are sick and need treatment immediately, and which patients can be examined over a longer period of time."

All three of the residents, Drs. Edward Geehr, Russell Crawford and James Kline, had worked in emergency departments before they began the HSC program. Such experience is not a requirement for admission, said Dr. Moorhead: "I think it speaks well for the program that we are attracting these kinds of physicians."

He gets telephone calls from all over the United States and Canada about the residency program, partly, he believes, because it is well balanced between practical experience and in-depth education.

"It's really exciting to know that these people are hearing about our program. It's such a new program and yet there's a tremendous amount of interest in it," he said.

He hopes eventually to see the residency program expand to other Portland-area hospitals.

When he stepped in as director of the program last July, Dr. Moorhead was fresh from completing a residency in emergency medicine at the Royal Victoria Hospital, Montreal, Quebec, Canada. His internship was at Royal Columbia Hospital, New Westminster, British Columbia. He earned his bachelor of arts and doctor of medicine degrees from Queens University, Kingston, Ontario.

"Our basic goal is to improve patient care," Dr. Moorhead said of the emergency medicine residency program. "At University Hospital, I think we're going to provide better services for patients who come into the emergency room."

"Not only is that beneficial for the patients but for the rest of the Center. I think we are going to make difficult situations a little easier, both for the staff and the patients."

Apple sale's for everyone (even doctors)

If an apple a day keeps the doctor away, how welcome will 10 tons of them be at the Health Sciences Center?

That's how many Grandpa Lee Canady will be hauling in on Dec. 12, and based on his apple sale of last year at HSC, the produce is very popular, even with doctors.

Grandpa Lee, beloved benefactor of the Crippled Children's Division, plans to put on "the biggest damn apple sale Portland has ever seen" in the CCD lobby that day. Proceeds will go to the CCD gift fund.

He has said he also wants to put "one apple in each hand of each crippled child for Christmas" when he comes.

Noted for his unusual tactics of raising

money for the Division, Mr. Canady, 62, drives a forklift and takes care of fruit bins at the Duckwall Pooley Fruit Co. at Odell in the orchards of Hood River Valley.

Grandpa Lee uses his forklift to kidnap fruit bins, then ransoms them back to their owners, with the ransom money going to CCD. He considers any bin without a grower's label to be fair game. He calls these naked bins "CCD streakers."

Grandpa Lee's apples, donated by Hood River Valley growers, will sell for \$5 per box, with the "extra-fancy" ones going for \$6 a boxful. The sale will start around 10 a.m.

Last year, the 127 boxes of apples sat in CCD's lobby for only five hours before all

were sold. The \$381 in proceeds brought Grandpa Lee's fund-raising total for the year to nearly \$900.

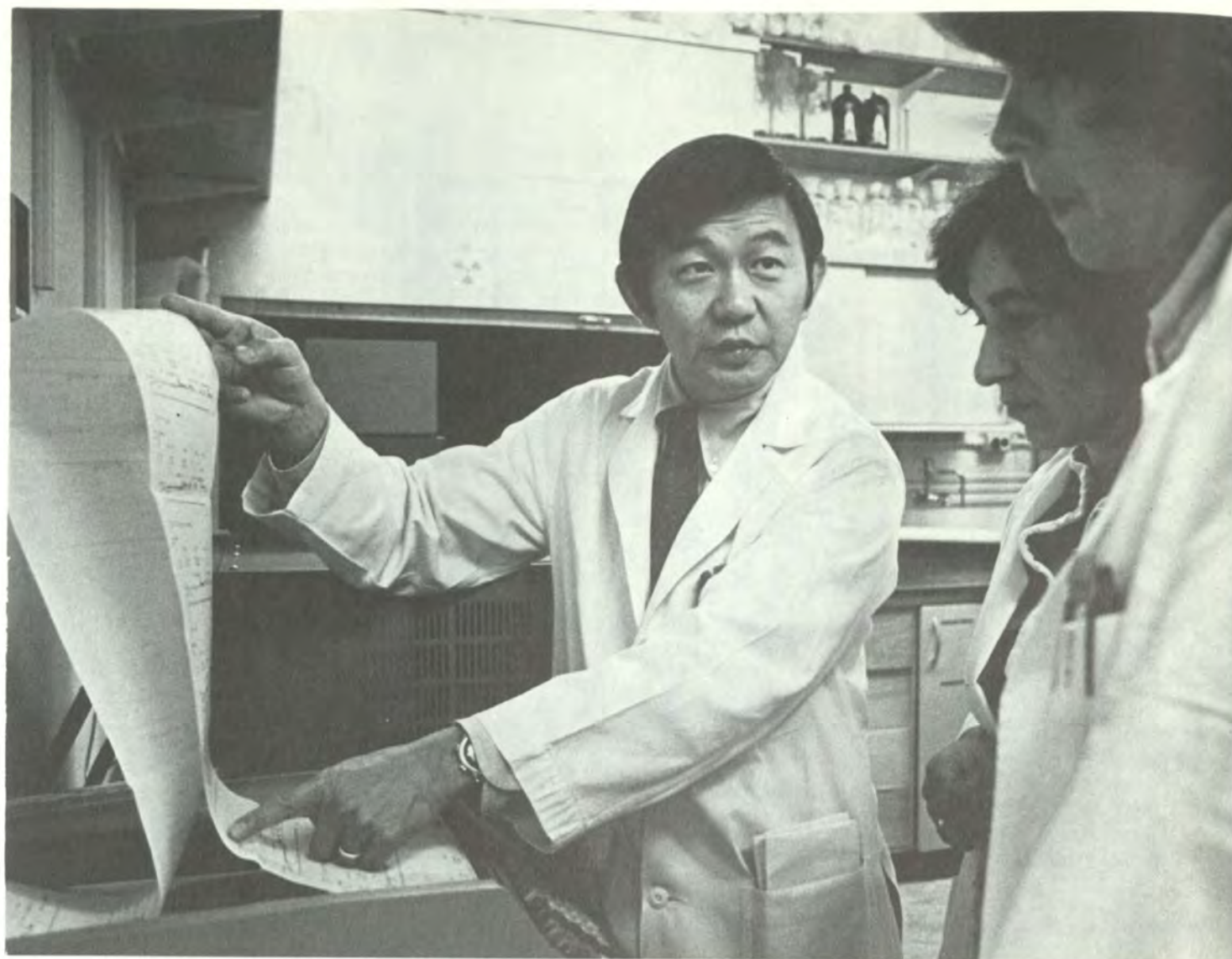
The relationship between CCD staff and their benefactor has been strengthened through his letters to Mary Louise Baker, administrative assistant to CCD director Dr. Victor Menashe, describing his money-raising activities.

Mr. Canady also hosted staff members of the Division last August on a tour of the Parkdale community (near Hood River) and a picnic lunch.

"Everybody has to have a hobby," CCD's special friend has said. "Mine happens to be crippled kids."



Quite pleased with her effort in the Fifth International Tongue Depressor Hurling Contest was Dr. Celly Ramirez, a pediatric fellow at the Crippled Children's Division. But it was dental student Tim Thompson who won the competition this past September at HSC. The man with the hard hat and judicial look is Dr. Don Nelson of CCD.



Predicting an individual's risk of arteriosclerosis, and therefore stroke, is the aim of one experiment at HSC funded by the stroke grant. Discussing the data on a printout from a gas chromatograph used in the experiment are Dr. Frank Yatsu, director of the stroke project and chairman of the department of neurology; Fay Hagemenas, research associate in neurology; and Dr. Lynne Manaugh, instructor in the department. The instrument is being used for analyzing blood and tissue samples to determine cholesterol levels.

Stroke target of new HSC program

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in which Dr. Rose is associate professor.

A major hypothesis to be tested, with the assistance of Dr. William Connor, director of the Lipid Research Laboratory, is the value of dietary reduction of cholesterol in preventing stroke syndromes.

As part of the Health Sciences Center project, the Housing Authority of Portland commissioners recently approved a stroke prevention program in which elderly residents of its high-rise structures were invited to participate.

In the rehabilitation project, Dr. John Kennedy, chief, department of physical medicine and rehabilitation, Rehabilitation Institute of Oregon at Portland's Good Samaritan Hospital and Medical Center, is heading the development of stroke teams throughout Oregon.

Purpose of the teams is to train existing personnel, such as physical therapists, occupational therapists and speech pathologists, to develop rehabilitation programs that will speed up patient recovery, particularly for independent activities.

Stroke teams from seven cities in Oregon (Coos Bay, The Dalles, Newport, Lincoln City, Burns, Klamath Falls and Bend) were represented at a recent stroke seminar, funded by the stroke grant, at Good Samaritan's Rehabilitation Institute of Oregon.

Directing the educational project are Dr. C. Conrad Carter, associate director of the Comprehensive Stroke Center Program and HSC professor of neurology; Dr. J. S. Reinschmidt, head of the HSC School of Medicine division of continuing education; and Howard Stroud, executive director of the Oregon Heart Association.

Two other stroke grants went to similar, but separate, programs. One is with the North Carolina Heart Association through the Bowman Gray School of Medicine at Wake Forest University, Winston-Salem, N.C., and the other is with the University of Rochester School of Medicine, Rochester, N.Y.

Dr. Carter noted, "Oregon is in a unique leadership position for the nation to prove that strokes can be prevented and better treated by mobilizing the available expertise within the state."

Pediatric nursing takes a step up

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HEW. That funding ran out June 30, although nurses still in the program will complete their work this academic year.

Continuing education certification has required that participants complete three months of intensive classroom and clinical study at HSC, then spend six months in an "internship" working with a preceptor. The preceptor is a community physician who agrees to sponsor and supervise them while they gain clinical competence.

However, the PNP's produced by the new graduate program will have undergone even more rigorous preparation, said Dr. Peterson. Six quarters (18 months) of full-time study, including 480 hours of supervised practice and a thesis, will be required. School of Nursing faculty will provide the preceptorships.

Highly trained pediatric nurse practitioners are needed to ensure the best possible health care for children in Oregon, said Dr. Peterson.

In her grant proposal, she noted: "The maldistribution of pediatric health care manpower in Oregon interferes with the delivery of primary health care services to children in many parts of the state.

"Additionally, the proportion of the nursing

work force with an educational preparation at or beyond the master's degree (3.4 percent) is inadequate to meet Oregon's needs for teachers, administrators, clinicians and practitioners with advanced preparation."

On an economic note, Dr. Peterson pointed out that federal funds for PNP continuing education programs across the country have dried up. The move is toward graduate programs.

Furthermore, nursing professionals recognize the need for graduate-trained pediatric nurse practitioners, she said. The Oregon State Board of Nursing has ruled that programs training nurse practitioners must carry credit toward a master's degree in nursing by 1981.

The changeover to the graduate curriculum is right in line with the School of Nursing's own plan to expand and upgrade all nurse practitioner programs to the master's level. This plan is based on recommendations arising from data collected from citizens and nurses throughout Oregon in 1976.

Acknowledged nationwide as a vital member of the health care team, according to Dr. Peterson, the pediatric nurse practitioner



A firsthand look at the health professions was the order of the day when Native American high school students and their counselors from Oregon, Washington and Idaho visited the Health Sciences Center in September. They came to learn about programs in dentistry, medicine, nursing and allied health. Here, medical student Ken Hughes shows his tour group a growth of bacteria on a laboratory culture medium.

works in a collaborative relationship with the pediatrician. The PNP can take medical histories, do physical exams, make child health assessments, and take care of patients in a number of emergency and chronic situations.

"The main emphasis is on wellness and prevention," Dr. Peterson said. "As the primary care giver, the PNP is one of the first of the health professionals to have contact with the family. In addition to the emphasis on wellness, this person also is prepared to diagnose and treat acute minor illnesses."

Set to begin in September 1979, the ambulatory pediatric nursing program will have a component of nine students. Applications

are being accepted now. Two full-time nursing faculty and one half-time pediatrician will be hired.

Pam Hellings, director of the PNP continuing education program, commented, "Pediatric nurse practitioners contribute a lot to the health care of children, and as we enter the International Year of the Child, I am personally very pleased that PNP education will continue to be a reality in Oregon.

"The trend nationally is to move projects from continuing education into master's programs, and so the School of Nursing is moving in an appropriate direction for the future."

Snakebite episode gave hospital a night to remember

A Mexican green rattlesnake gave Frank Ardillo a deadly dose of venom—and University Hospital one of its more unusual cases in years.

The snakebite story had a happy ending, but before it was over, the efforts of several hospitals, numerous police officers and the military had been mustered.

Helicopters hovering over Marquam Hill in the post-midnight hours of Aug. 26 were rushing anti-venom serum to an anxious medical staff and patient waiting below.

Days later, the ordeal over, Mr. Ardillo was relaxing in his University Hospital bed, displaying a swollen right hand and a smile. "I can say nothing but good things about this hospital," he remarked. "Even the food isn't too bad!"

The episode started at about 9:45 p.m. Aug. 25 when 34-year-old Mr. Ardillo of New York City, a herpetologist employed by a traveling reptile exhibit, was tending the ani-

mals' cages during a visit to Portland. In a hurry to finish up, he reached into the Mexican rattlesnake's cage to put a turtle inside, forgetting he had the smell of food on his hands.

"The snake in question was still hungry," he recalled, "and I didn't realize how close he was until it was too late and he bit me."

Fiery pain shot through the two punctured fingers. Forcing himself to remain calm, he managed to suck some of the venom out through the fang marks. His hand started to swell to twice its normal size.

Co-workers hurried him to Portland's Woodland Park Hospital, where doctors applied a tourniquet, administered steroids, lanced his fingers for drainage and squeezed out all the venom they could.

But the poison was doing its work. Discoloration and swelling, along with a form of blood blisters in some places, extended up the victim's arm to near his shoulder. He was feeling constriction in his chest and a heavy weight all over his body—"At that point I thought I was dying"—and was suffering facial swelling, nausea and diarrhea.

In the meantime, the hospital had called on

Dr. Emil Bardana, head of the allergy section of the division of immunology, allergy and rheumatology at the Health Sciences Center. Dr. Bardana, who had experience with snakebite as a battalion medical officer in South Vietnam, arranged for the patient to be transferred to University Hospital.

It was an emergency, Dr. Bardana felt, that required horse serum anti-venom.

Even before Mr. Ardillo was delivered to University Hospital's medical intensive care unit, staff members had launched a search for the serum. Rattlesnake bites are rare in northwestern Oregon because the reptiles are not native.

In the course of his 11-day stay at University Hospital, Mr. Ardillo became something of a celebrity. Quite a few people revealed an interest in herpetology, and one doctor even sneaked a pet snake in to show the patient.

Staffers put through about 20 phone calls to places like the Portland zoo before locating even one unit of serum. "You wouldn't believe the calls we made," said Dr. Bardana. Manning the phones and caring for the patient were Dr. Bruce Ourieff, intern; Dr. Jeff Laser, resident; and Dr. Michael Sidoff, emergency room physician, who was on call for the Oregon Poison Control and Drug Information Center at HSC.

A call to the reptile poison information service at the Oklahoma City zoo put the staffers on the right track in the race against time. All told, they located three units of serum in Portland (one at Emanuel Hospital and two at Nob Hill Pharmacy), 10 units at St. Charles Medical Center in Bend, and 16 units in Seattle.

Meanwhile, a phone conversation with Dr. Findlay Russell in Los Angeles, the nation's top expert on snakebite, indicated that Mr. Ardillo probably had received a lethal dose of venom.

A military helicopter brought the serum from Seattle, while Emanuel Hospital's Life Flight helicopter flew to Bend. City police, their sirens howling, delivered the serum from Portland.

Campus security forces scrambled to clear a landing site west of the library for the choppers. Flares lit the way; fire trucks waited close by.

"It really was pretty dramatic. It's a major undertaking to bring a helicopter into this campus," said John Long, associate adminis-

trator of University Hospital. He and Marcia Gardner, an R.N. in the emergency department, handled many middle-of-the-night calls to arrange the landings.

Before the night was over, Mr. Ardillo had received 25 units of anti-venom in a saline solution. The peak of the crisis was cleared.

Helping manage the patient's medical care for the next three days was Dr. Joseph Bander, co-director of the medical intensive care unit. He was no novice on snakebite cases, having handled them before in southern California.

"Snake envenomation," he explained, "is categorized on a zero to four gradation—zero being just a puncture with minimal local tissue damage, and four involving severe systemic symptoms and vascular collapse. He (Mr. Ardillo) would probably be classified as a grade two to three."

Dr. Bander also classified Mr. Ardillo as "a very good-humored individual. After getting over his initial fright, he took it very well. He was quite surprised with the improvement of his hand, considering the initial damage there was."

In the course of his 11-day stay at University Hospital, Mr. Ardillo became something of a celebrity. Quite a few people revealed an interest in herpetology, he related with a smile, and one doctor even sneaked a pet snake (non-venomous) in to show the patient.

"I didn't know hospitals could be this nice. They've really treated me wonderfully here. I feel as though I've made a lot of friends as well. . . . It's going to be rough to go back to being a regular person again!" the pampered patient said.

If the snakebite episode has taught Mr. Ardillo to be a little more careful around rattlesnake cages, it also has taught the Health Sciences Center a lesson or two.

University Hospital and other HSC departments and staff are preparing a feasibility proposal for an approved helicopter landing site on campus. The HSC pharmacy is planning to stock a variety of common anti-serums, and the poison control center has now compiled a list of places to obtain the rare antiserums in an emergency.

And some of HSC's doctors are boning up on snakebite, just in case the unlikely should ever happen again.

Fluffy, huggable creatures of every kind came to Doernbecher Hospital on Sept. 5. That is when Oregon State Grange members delivered some 250 colorful stuffed animals, all made by hand, to the children's hospital at HSC. The animals were for the youngsters to keep.

"Handle with care" is the idea as Karen Dooley, a physical therapy student at HSC, gently works on Frank Ardillo's swollen hand. The rattlesnake bite produced discoloration and swelling, along with blood blisters, that extended up the victim's arm to near his shoulder.



Providing a normal camping experience for children with asthma is the goal of Camp Christmas Seal, sponsored annually by the Oregon Lung Association. At this year's camp, held in late August at Camp Colton, a young participant gets some angling advice from Dr. Joe Anderson, a fellow in the division of immunology, allergy and rheumatology in the Health Sciences Center School of Medicine. Round-the-clock medical supervision is provided at the camp. Dr. Anderson volunteered his services in recreation and medical assistance.

Newsmakers

The Distinguished Honor Award, the highest award given by the U.S. Department of State's Agency for International Development (AID), has been presented to *Dr. Merritt W. Stark* of Salem. He is a clinical instructor in the School of Medicine department of pediatrics.

Dr. Stark, who served as chief of the Public Health Branch of USAID in Vietnam, was cited by the agency for "acts of courage and exceptionally outstanding performance under difficult and dangerous conditions during the evacuation of Vietnamese and Americans from Vietnam, March-April, 1975."

Carol G. Jenkins, director of the Dental Library and co-director of the division of educational resources at HSC, is participating in the first year of the Health Sciences Library Management Intern Program. One of three top librarians selected from 34 candidates, Ms. Jenkins will spend the 1978-79 academic year interning with the director of the Medical Center Libraries, University of Cincinnati, Ohio.

The program is sponsored by the Council on Library Resources, Washington, D.C., and the National Library of Medicine, Bethesda, Md. Ms. Jenkins' internship, which begins Sept. 1, will include a month at the national library.

Dr. John O. Branford, associate professor of anesthesiology in the School of Medicine, has been elected chairman of the University Hospital Medical Board. *Dr. Harold D. Paxton*, professor and head of neurosurgery, was elected vice chairman and *Dr. Herbert M. Woodcock*, associate professor of child psychiatry and pediatrics, was chosen as secretary.

Dr. Paul E. Kirk has been appointed assistant chairman of the School of Medicine department of obstetrics and gynecology and director of the residency education program.

Dr. Scott H. Goodnight Jr. is the new head of the division of hematology and medical oncology in the School of Medicine. He replaces *Dr. James W. Linman*, head of the division since 1972, who will continue on a half-time basis as professor of medicine and director of the HSC Osgood Center for Leukemia Research.

Dr. Goodnight, associate professor of medicine, will continue as director of the HSC Coagulation Research Laboratory, which he has directed since 1974. He is a graduate of the School of Medicine.

Serving as director of research services at HSC is *Abdul Anani*, formerly director of accounting and reimbursement, fiscal services, University Hospital.

Dr. Steven Starker has been appointed associate professor of medical psychology at HSC and chief of the psychology service at the Portland Veterans Administration Hospital. He has served as an assistant clinical professor of psychology at the Yale School of Medicine since 1972 and he headed several psychology programs at the West Haven (Conn.) VA Hospital.

Joyce Diffendal has been appointed assistant administrator for the outpatient clinics at HSC. She assists with operational management of the outpatient clinics, emergency services, outpatient dental service, the hemodialysis unit, and volunteer services. She replaces *Gwynn Brice*.

Manuel S. Berman is a new assistant administrator for University Hospital, replacing *Guy Mount*. His responsibilities include material management, food service, infection control, laundry, housekeeping and linen, and hospital safety programs.

The new director of surgical services at University Hospital is *John Robertson*, who will supervise operating room and post-anesthetic recovery room functions. He came from Christian Hospital Northeast-Northwest, St. Louis, Mo. He replaces *Mark Scott*.

Chuck Mayo has been named manager of inpatient services in the pharmacy department of University Hospital. His primary responsibility is directing the I.V. therapy service and inpatient drug distribution.

Mary Ann Lockwood, assistant to the president for university relations, has been appointed acting executive assistant to the president at the Health Sciences Center.

Serving as president-elect of the Oregon chapter, American College of Emergency Physicians, is *Dr. Marc Bayer*, associate director of emergency services at HSC and co-director of the Oregon Poison Control and Drug Information Center.

Dr. Emil Bardana, head of the allergy section of the Center's division of immunology, allergy and rheumatology, is serving as president of the Oregon Thoracic Society. He has been active for years in the OTS, the medical section of the Oregon Lung Association.

Dr. Herbert B. Laffitte, professor and chairman of the department of periodontology, School of Dentistry, has been reappointed as a consultant to the Councils on Dental Education and Hospital Dental Service and to the Commission on Accreditation. The groups are sponsored by the American Dental Association. Dr. Laffitte was first appointed in 1975.

New members of the Oregon Lung Association board of directors are *Newell Miles*, personnel officer at HSC, and *Evelyn Schindler*, associate professor of nursing.

Serving on the Academic Systems Group (steering committee) of the Oregon State Department of Higher Education's Computer Network is *Dr. Patrick Nalbene*, director, School of Dentistry instructional development division.

Dr. Knut Eie has been named to the EMT (Emergency Medical Technician) Advisory Committee of the Oregon State Board of Medical Examiners. He is coordinator of HSC's paramedic training program.

The new president-elect of the Greater Portland Area Admitting Officers is *Frances Morse*, director of hospital admitting at HSC.

New president of the Oregon Society of Hospital Pharmacists is *Lee Wanke*, associate director of the Oregon Poison Control and Drug Information Center at HSC.

On the Community Advisory Board at Providence Child Center in Portland is *Dr. Anthony E. Gallo*, professor of neurosurgery at the Health Sciences Center.

Dr. Harold Osterud, chairman of the HSC



Max Hurlimann got kissed by *Julie Parpala* during a retirement party in his honor this past summer at the Health Sciences Center print shop. A volunteer jack-of-all-trades in the print shop for 19 years, the little man with the accent has delighted employees all over the Center with his frequent deliveries of bouquets of tiny home-grown roses. Mr. Hurlimann and his wife planned to vacation in his native Switzerland.



After their certification ceremony, medical technology graduates at the Health Sciences Center unwound at a reception that featured humorous videotaped skits. The skits were performed by class members and were about their experiences in the 12-month med tech program. Forty-nine students were in the class that received certificates and pins at the August ceremony.



DR. GEORGE PORTER
Selling Professor of Medicine

department of public health and preventive medicine, has been named by Gov. Bob Straub to a three-year term on the Sanitarians Registration Board. The board examines and registers sanitarians in Oregon.

Serving as clerk of the board of directors of William Temple House in Portland is *Margaret Hughes*, retired librarian of the Health Sciences Center and an active volunteer here. William Temple House is a nonprofit, non-denominational social services and counseling center in northwest Portland.

Dr. Walter Gabler, professor of biochemistry in the School of Dentistry, has been invited to join a committee to construct examination questions in biochemistry and physiology for dental National Boards. The appointment is for five years starting in October.

Dr. George Porter, chairman of the School of Medicine department of medicine, has been named Laurence Selling Professor of Medicine. The School's Alumni Association established the Selling Chair of Medicine Foundation in 1966 to perpetuate the memory of Dr. Selling, former professor and chairman of the department of medicine, who died in 1964. The fund is used toward endowment of a professorship in the department of medicine.

Three faculty members were honored by residents at the School of Medicine department of medicine's closing ceremonies this past summer.

Dr. Donald E. Girard, associate professor in the department and associate chief of staff for ambulatory care at the Portland Veterans

Administration Hospital, received the award given by the chief residents.

Earning the teaching award for a senior faculty member was *Dr. Walter J. McDonald*, associate professor of medicine and vice chairman for departmental affairs. He also is the new chief of medical service at the VA Hospital.

The teaching award for a junior faculty member went to *Dr. John H. McNulty*, assistant professor of medicine, division of cardiology.

Dr. James H. O'Brien, professor in the School of Medicine department of medical psychology, has won the Fulbright-Hays award under the Mutual Educational and Cultural Exchange Program for his research on cryogenic technique on sensory-motor integration and learning. The award was announced by the Board of Foreign Scholarships and the U.S. International Communication Agency.

The longest-practicing physician in Polk County, *Dr. E. B. Bossatti*, retired Sept. 1 after a 46-year medical career in Dallas. A 1930 graduate of the School of Medicine, Dr. Bossatti also served as Polk County medical examiner and county health officer.

The Reed College Foster-Scholz Club, composed of alumni who graduated 50 or more years ago, has presented *Dr. J. Otto George* with its first Distinguished Achievement Award for both professional and personal achievements. A practicing physician in Clatskanie, Dr. George, 84, is an alumnus of the Portland private college and a 1930 graduate of the School of Medicine. He is an accomplished artist and scientist.

Recently inducted into the Washington State Medical Association's 50-year club were *Dr. Robert H. Stewart* and *Dr. John C. Brougher*, 1927 and 1928 graduates, respectively, of the School of Medicine.

Dr. Theodore S. Smith of Minneapolis, Minn., a 1943 graduate of the School of Medicine, has been elected to fellowship in the American Academy of Allergy.

A 1958 graduate of the School of Medicine has become the first woman in the country to chair a medical school department of radiology. She is *Dr. Catherine Ann Poole*, new chairman of the radiology department at the University of Miami School of Medicine, Miami, Fla.

Paula A. McNeil, a 1965 graduate of the School of Nursing, has been promoted to executive director of the Oregon Nurses Association.



Fill 'er up for dental freshmen

"You don't have to be a contortionist to do this, but it helps," remarked Lee Morrone, bending gingerly across a row of boxes to place a can of Separatine inside one of them, just so.

The cardboard box was only one of 79 waiting in line to be filled with supplies for freshmen in the School of Dentistry. And the Separatine, a medium used for making plaster models of teeth, was only one of the 180 items going inside each box.

Amid the rush of registration time, few dental freshmen stop to think of the work that goes into assembling the supply kits that they're issued at registration time. But Mr. Morrone, manager of the School of Dentistry bookstore, certainly does.

"It's a very hectic job, and we're very thankful that we only have to do it once a year," he said with a laugh.

Everything from a mouth mirror to Kerr Sticky Wax Sticks—\$2,025 worth of goods in all—finds its way into each frosh carton. Add the similar supply kits for sophomore dental students and the bags of supplies for junior and senior dental hygiene students, and the whole assembling job requires four people working two-and-a-half weeks.

The task begins every year in early April. After each School of Dentistry department has reviewed and revised the previous year's lists of supplies, Mr. Morrone makes note of any changes and sends out orders to the vendors.

By mid-June the merchandise is arriving. It's stored until school lets out at the end of

June, then Mr. Morrone and his bookstore staff busy themselves with sorting the supplies.

Once summer school is over, around Aug. 1, the store closes down and the work starts up in earnest.

Because every freshman box must be filled with exactly the same arrangement, Mr. Morrone puts together a mock-up carton, making sure all the items fit neatly and snugly. Then he and his staffers literally bend to the task of producing 79 identical boxfuls.

"It takes a little concentration and a little figuring," Mr. Morrone said, and a lot of physical effort. The procedure is similar for the other class kits.

Once the kits are safely salted away, the bookstore team must turn its efforts to stocking the store shelves for the coming school year. "Every year we make it," said the manager, "but I'll tell you, we sweat those last two weeks as to whether we'll be able to open those doors or not!"

The most rewarding part of the enterprise comes when it's time to issue the supply boxes to the incoming freshmen. As the students file into a lab room at registration time, their kits are waiting for them. For the next two hours Mr. Morrone and his staff take the freshmen through all the items in the box, piece by piece.

Invariably, Mr. Morrone noted with amusement, at least one student ignores the "Do Not Open" instructions on his box and proceeds to strew the contents before the formal identification procedure even begins. This leaves the hapless freshman in quite a predicament.

Just in case any of the students' items are damaged or missing, the bookstore has IOU slips handy. However, added a well-organized Mr. Morrone, "We seldom have to issue an IOU slip. We're very proud of that."

Bending to the task of filling the supply kits for dental freshmen are (left to right) Roger Brown, Bruce Bowers and Lee Morrone, all of the School of Dentistry bookstore. All the boxes must be filled with exactly the same arrangement.



DR. CHAROLD BAER

chairman, department of medical-surgical nursing

Chairman named

Dr. Charold Baer is the new chairman of the department of medical-surgical nursing, the largest department in the HSC School of Nursing.

In addition to her classroom and administrative duties, Dr. Baer, who specializes in renal nursing, will engage in clinical practice and research in University Hospital.

The chairman earned her baccalaureate degree in nursing in 1968, her master of science degree in nursing education in 1970, and a Ph.D. in education in 1977, all from Ohio State University.

She has served as staff nurse at the Ohio State University Hospitals and as instructor in the university's school of nursing. Her most recent position was director of the Transitional Employment and Education Program, a federally funded project of the Ohio Nurses Association designed to assist newly graduated nurses to make the transition from student to practitioner.

Dr. Baer is a member of several professional organizations and honor societies and has been extensively involved in providing continuing education programs for nurses throughout the country.

The new chairman replaces Dorothy Elhart, who will assume a new position when she returns from sabbatical leave.



Listening as Dean Carol Lindeman outlines plans for the School of Nursing are Patricia Tomlinson, left, and Dr. Betty Jo Hadley.

Active year awaits acting nursing deans

While the assistant dean is away on sabbatical, Patricia Tomlinson and Dr. Betty Jo Hadley will help keep the home fires burning in the School of Nursing.

Ms. Tomlinson, associate professor of psychiatric nursing, has stepped in as associate dean pro tem for administration. Dr. Hadley has taken over as associate dean pro tem for academic affairs.

The two are serving in the absence of Donna Schantz, the School's assistant dean, who will pursue a doctorate in urban studies at Portland State University from October through May.

"I'm very enthusiastic about being a part of what is happening right now in the School of Nursing, and working with the faculty in probably one of the most exciting years of our growth," said Ms. Tomlinson.

"We will be developing programs for outreach into the state of Oregon; increasing our graduate program; increasing the School's

impact on health care planning in the state; making our impact felt here on campus; and attracting new faculty who will bring new blood to health care and education in Oregon.

"To me," she continued, "one of the most exciting things is the opportunity to work with Carol Lindeman (dean of nursing), a nationally known and respected nurse educator and researcher."

As associate dean for administration, Ms. Tomlinson will be responsible for academic student counseling, faculty committee issues, central administration issues of the School of Nursing and HSC, the Learning Resources Center, affirmative action, and student body organization.

"I'm looking forward to working with students in both their undergraduate and graduate programs," she said. "Students need to know that administration is concerned about their professional growth."

Ms. Tomlinson is also deeply interested in supporting research by nursing faculty and in promoting interdisciplinary education among the HSC schools.

The duties of Dr. Hadley, associate dean for academic affairs, are the outreach programs, continuing education, special projects in the School, research development, curriculum development, and R.N. education.

Among her specific tasks will be laying groundwork for the next accreditation visit by the National League for Nursing, and working with department chairmen to develop a procedure manual for the School.

Dr. Hadley, who will serve part-time, is also involved in a research project at the University of California at San Francisco. The study seeks to identify characteristics of high school students that would be predictive of success in nursing.

Ms. Schantz will return in June to become associate dean for administration.



Eye department has new chairman

The department of ophthalmology in the Health Sciences Center's School of Medicine has a new chairman, Dr. Frederick T. Fraunfelder.

A 1960 graduate of the HSC School of Medicine, he replaces Dr. Kenneth C. Swan, who had headed the department since 1945. Dr. Swan will continue to be active in programs of the department, teaching medical students and residents and serving as a consultant in the patient care programs.

Dr. Fraunfelder also is the new director of the Center's John E. Weeks Institute for the Advancement of Ophthalmology, which Dr. Swan had headed since its inception in 1948.

The new HSC professor and chairman had directed the department of ophthalmology at

the University of Arkansas Medical Center, Little Rock, since 1968. At the time of his appointment he was the youngest chairman of an ophthalmology department in the United States.

He served his residency at HSC in 1964-66 under Dr. Swan and other ophthalmology department members.

The author and co-author of nearly 100 scientific articles and two medical textbooks, Dr. Fraunfelder is interested in research on effects of drugs on the eye, cancer of the eye and eyelid, and corneal surgery.

Dr. Fraunfelder is national director of the Registry of Drug-Induced Ocular Side Effects, which is supported by the American Academy of Ophthalmology and the Federal Food and Drug Administration.

He is immediate past president of the Association of University Professors of Ophthalmology and for three years has been ophthalmology's representative to the Council of Academic Societies of the Association of American Medical Colleges.

Dr. Fraunfelder mingles during a break at the Oregon Ophthalmological Alumni Association's annual meeting in September at HSC. Among the guest speakers was Dr. Charles Kelman of New York, nationally known for his work in cataract surgery and research.

Center joins forces with Southwest Oncology Group

In the ongoing fight against cancer, the University of Oregon Health Sciences Center has joined forces with the Southwest Oncology Group (SWOG).

The Center has been granted full membership in SWOG, one of the six large clinical care cooperative groups sponsored in part by the National Cancer Institute (NCI). The oncology groups assist the NCI with clinical evaluations of new anti-cancer drugs as well as investigating the best approaches to treatment.

The Health Sciences Center is the only Oregon medical facility that belongs to SWOG, which includes 36 member institutions and approximately 475 medical investigators treating patients in controlled multimodality clinical studies.

In 1977, SWOG entered 6,800 patients into clinical studies. A total of 23,000 patients are either on active SWOG treatment or on SWOG follow-up.

Dr. William Fletcher, head of the division of surgical oncology in the HSC School of Medicine, is principal investigator for the SWOG project, which involves the department of radiation therapy, the division of surgical oncology and the division of hematology and medical oncology at HSC, and the division of medical oncology at the Portland Veterans Administration Hospital. Altogether, some 200 patients per year are placed on study protocols.

Dr. Fletcher and other associates on Marquam Hill have belonged to cancer study groups since 1960. With the initiation of the Western Cancer Chemotherapy Study Group that year, he and others began studies in cancer chemotherapy in solid tumors.

Since then, HSC has participated in the Central Drug Evaluation Program and the Central Oncology Group. In 1976 when the National Cancer Institute reorganized the oncology groups, HSC applied to SWOG.

Membership in a cooperative oncology group has many benefits, according to Dr. Fletcher.

"It's the most effective network for the provision of modern cancer care at the local level as yet devised," he explained. "A cooperative oncology group provides a means of communication among clinical investigators so that efficient new methods of therapy may be exchanged as quickly as possible to benefit patients."

"While cure frequently remains elusive for some of the 100 clinically distinct types of cancer," he said, "we are achieving a normal life span for some patients and lengthy remissions for others."

"After all, we haven't cured diabetes with insulin or heart disease with digitalis, but no one cares as long as the patient can live a normal, useful life. This is an important concept to get across to both patients and physicians."

Dr. Fletcher pointed out that other hospitals and physicians in Oregon may participate in SWOG clinical studies by affiliating with the program at HSC. The affiliation not only may benefit a patient but it may provide a practicing physician with the same modern information about advances in cancer care that a medical student is learning on campus.

Cancer researchers at the Health Sciences Center continue to get a helping hand from Oregon's Order of the Eastern Star. For the eighth consecutive year, the OES has presented a check for cancer research to HSC. This year the gift totaled over \$52,880. Here, during a tour of the Center by Eastern Star representatives, lab technician Dana McNaught explains how ultracentrifuges work. These ultracentrifuges are used to separate parts of mouse tumor cells in a cancer research project conducted by Dr. Charles Faust, assistant professor of surgery.

Radio waves focus of cancer study

Is there a correlation between human exposure to radio waves and the incidence of human cancer?

To help researchers answer that question, the Environmental Protection Agency has awarded a grant for \$55,983 to the Health Sciences Center.

The two-year study, which will focus on Multnomah, Clackamas and Washington counties, is being directed by Dr. William Morton, professor and head of the division of environmental medicine at the Center.

Dr. Morton hopes to learn whether there is any correlation between human exposure to non-ionizing radiation, such as that emitted from radio towers, and the incidence of and mortality rate for cancer.

"The chances of our finding a specific relationship right now are relatively slim, but they do exist," said Dr. Morton. "It would be worth risking a little capital to find out."

For the last six years, Dr. Morton has been studying the distribution of cancer in Oregon. He has been involved in several studies that explore the relationship of occupation, lifestyle and environment to cancer.

In one study, he discovered that cancer of the endometrium (the body of the uterus) seemed to be concentrated in the West Hills area of Portland. That area also happens to have a high concentration of radio towers, and Dr. Morton has speculated that radio waves may contribute to the risk of getting the disease.

Other cancers that might be radiation-related, he mentioned, are leukemias, lymphomas, and cancers of the breast, pancreas and lung.

"It has been demonstrated elsewhere that radio-wave exposure is cumulative. There are three unpublished reports on the increased incidence of cancer in workers in radar installations," Dr. Morton noted.

The EPA has said that no known health effects have been attributed to radio-frequency emissions at the levels found during a 1977 EPA survey in Portland.

However, Dr. Morton said that as the use of non-ionizing radiation increases, it will be vital to detect what effects the radiation might have on human health. Heavily involved with radiation is the communications industry, from telephone companies to TV stations.

"The question is not that we would abolish the industry, but simply that we would learn the limits of what's consistent with healthy life, and then develop control mechanisms. ... We have to find out what those limits are," said Dr. Morton.

Assisting him with the research project are Dr. David Phillips of the School of Medicine and William Bise, a member of the volunteer faculty.



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