



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.*

## Primary care medicine bolstered by major HSC grant

A shot in the arm for Oregon's dwindling supply of primary care physicians is being provided through a new program at the Health Sciences Center.

Thanks to a major federal grant of nearly \$800,000, the School of Medicine is now able to provide planning and staffing necessary to place more emphasis on training primary care physicians.

The grant from the Bureau of Health Manpower, U.S. Public Health Service, to the department of medicine is particularly significant because it is one of only a few such grants awarded nationally for a full five years.

A 1977 study of medical manpower by the University's Dr. Harold Osterud, head of the department of public health and preventive medicine, and Lee Lewis of the Oregon Medical Association, pointed out that although there has been a substantial gain in the number of physicians in Oregon, these increases have occurred primarily in the specialties. The number of physicians in primary care has steadily declined since 1959, according to the report.

"While this new grant does not provide for additional residents in our training programs," pointed out Dr. M. Roberts Grover, acting dean of the School of Medicine, "it does allow the remodeling of our program in internal medicine to offer greater experience in ambulatory care for medicine residents."

Six of the 23 first-year residents in internal medicine who will enter the program at the HSC June 26 have been designated as primary care trainees. Six more will be singled out in 1980, 1981 and 1982. Each resident will be in training for three years.

*"Our new program aims to reaffirm the concept that a physician . . . should be there when needed for any reason and not simply when a specific medical capability is required."*

Because the primary care physician functions largely in the ambulatory care setting, the new trainees will work extensively with patients in the ambulatory care clinics of University Hospital and the outpatient care program of the Veterans Administration Hospital. Trainees will receive additional ambulatory care experience in clinics of the Kaiser Foundation Health Plan.

"When I trained in internal medicine, each staff physician, no matter how renowned or specialized, would spend at least one morning a week in the general medicine clinic seeing patients for their primary problems and taking on responsibility for their general well-being," University president Dr. Leonard Laster said.

"I enjoyed the opportunity of caring for the same patients throughout my three years of training and of seeing them through both their minor and major medical problems.

"I also enjoyed the privilege of working side by side with an internationally famous cardiologist who cared for patients with heartburn, unhappiness and nocturnal leg cramps as well as patients with heart disease.

"Somewhere between those ancient days and the current era, this approach seems to have been de-emphasized in that the balance has shifted away from general internal medicine and toward subspecialization," Dr. Laster continued. "Our new program aims to reaffirm the concept that a physician should be prepared to treat a patient and not a heart valve, should be there when needed for any reason and not simply when a specific medical capability is required, and should be a caring friend as well as a skilled technician.

"That our University was able to compete successfully for the grant, in my mind, reflects the concern that underlies all our programs — we will care for human beings, not for 'cases,'" Dr. Laster concluded.

The new residency program will operate out of the department of medicine's division of general medicine and will be directed by Dr. Donald E. Girard, assistant

professor of medicine and associate chief of staff for ambulatory care at the VA Hospital. Associate director will be Dr. Robert Sack, associate professor of psychiatry.

Primary care, Dr. Girard pointed out, comprises three elements of the provision of medical services — first-contact medical care; continuing responsibility for the welfare and health maintenance of the patient; and coordination of specialized care that may be required in case of serious acute or chronic illness.

"I think the second is probably the area that we traditionally do least well in our training," Dr. Girard said. "It requires a focus on specialized educational programs that are not offered traditionally within the internal medicine training program."

Among the nontraditional subjects for the primary care residents will be organization and management of health systems; management of a practice; team care and group dynamics; community health resources; teaching skills; and research in

*A key goal is to increase the amount of time that the residents spend in outpatient settings.*

health costs, quality of care, and manpower. In addition, experience in dermatology, surgical subspecialties and psychiatry will be offered.

Along with the standard hospital-based training, other important elements of the program are continuity of care and the preventive and psychosocial aspects of medical practice.

"The goal of this project is not to create another track of training for internal medicine, but to establish a temporary track which is similar in many ways to the traditional one but which goes beyond the traditional scope to test other programs and educational modalities," Dr. Girard said. "Those that we can determine to be successful and to have appropriate impact, we will then incorporate into the traditional program."

Another key goal is to increase the amount of time that the residents spend in outpatient settings.

While the primary care physician works mostly in the ambulatory, or outpatient, environment, at least 90 percent of resident training in internal medicine has customarily been in hospital-based, or inpatient, settings. Yet realistically, most

*(continued on page 2)*



*Providing health service and a helping hand of comfort to elderly residents of certain high-rise apartments in Portland is just one of the many ways that Health Sciences Center students serve in the community. Here, medical student Glen Stream gives his full attention to one of the residents during a blood pressure check. See pages 4 and 5 for stories and photos about students' work in the community.*



A team of academic cardiac surgeons from Japan paid a visit May 10 to the HSC, where they watched an open-heart operation through the observation dome. The 22-man team visits prominent cardiac surgical centers around the world. On a tour of U.S. centers, they came to the HSC after attending a national surgical meeting in Boston. The surgery they observed here was performed by Dr. Albert Starr, chief of the division of cardiopulmonary surgery.

## All aboard for Russia

One good tour deserves another, so the School of Medicine Alumni Association is planning a second trip to Russia next fall.

The excursion, set for Nov. 6-16, is open to all alumni, faculty, staff, students and friends of the Health Sciences Center. It will feature visits to Moscow and Leningrad as well as two nights in Copenhagen.

The alumni association sponsored a similar tour of Russia last December, which drew 130 people.

Cost of this year's trip is \$999. This includes transportation, hotel, meals and sightseeing.

Interested persons may contact Jeanette Goostree in the Alumni Records Office, Room 1160, Mackenzie Hall.



# National attention focuses on need for primary care

(continued from page 1)

graduates of the HSC internal medicine training program end up devoting at least three-fourths of their time to ambulatory medical care, Dr. Girard noted.

Instead of the usual 8 percent, residents in the new program will spend 25 percent of their training experience in ambulatory settings. (Dr. Girard added that "it's easier to move into an outpatient experience when one is well grounded in inpatient care.")

A "big problem" in the provision of primary care has been the attrition of internal medicine residents into subspecialties, said Dr. Girard.

"We're trying to look at the other side of the coin and figure out how we can interact with our trainees to keep them in-

terested in general internal medicine and keep them from turning into a subspecialty track," he said. "I think we have enough critical mass of faculty now in

*"Our faculty are intimately involved in patient care and teaching; they can be good role models for the trainees."*

general internal medicine that we can do that. Our faculty are intimately involved in patient care and teaching; they can be good role models for the trainees."

The need for primary care physicians is a national concern. Recently, the Coordinating Council on Medical Education set the objective that 50 percent of the graduate positions in medical education in the United States be devoted to primary care training. Next year, in order for a medical

school to receive capitation funding, one-half of the first-year residency positions must be in primary care.

Grant monies for the new residency program in primary care will go into salaries for faculty and staff, stipends for housestaff, improvements in the clinics, and an information system for evaluating the program.

Planning for the new program has been coordinated by a multidisciplinary steering committee. Members were Drs. Girard and Sack; Dr. Curtis Holzgang, chief of the division of general medicine and former acting project director; Dr. Michael McCally, associate chief of staff for education at the VA Hospital and primary author of the grant; Sue Davidson, R.N., assistant professor of medical-surgical nursing; Dr. Stephen R. Jones, associate professor of medicine; Dr. Walter Maurer, resident in internal medicine; and John Hutchins, administrator of University clinics.



Among the members of the division of general medicine who will be actively involved in training the primary care residents are (from left) Drs. Daniel Elliott, Marion Krippaehne, Curtis Holzgang and Donald E. Girard. Dr. Girard is project director and Dr. Holzgang is former acting director.

## HEALTH SCIENCES CENTER NEWS

Vol. 8, No. 4  
May, 1979

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## Nursing prof wins primary care fellowship

Primary care is an up-and-coming field for nurses, Dorothy Elhart believes, and she will be off and going to Denver to pursue it.

Ms. Elhart, associate professor of medical-surgical nursing at the Health Sciences Center, has been selected to receive a nursing faculty fellowship in primary care from the Robert Wood Johnson Foundation. On Aug. 20, she will begin a 12-month leave of absence to take training at the University of Colorado School of Nursing in Denver.

The stated goal of the fellowship program is "to accelerate the establishment of clinical primary care as a principal professional discipline within academic nursing education."

One of only 20 nursing educators from throughout the United States chosen this year, Ms. Elhart said, "The reason I'm particularly pleased to have gotten this is that attention to primary care in nursing and medicine is growing. We are getting an increasing number of graduate student applicants who are desiring either tracks in graduate programs, or graduate program development, in nurse practitioner primary care."

The University of Colorado School of Nursing is one of four nursing schools sin-



**DOROTHY ELHART**  
associate professor, medical-surgical nursing

gled out as training sites for the fellowship recipients.

"The sites (which also include Indiana

University, the University of Maryland and the University of Rochester) were chosen because of their excellent clinical resources and their opportunities for extensive clinical experiences in joint practice with medical colleagues," said Ms. Elhart.

"I will be starting a program with physicians jointly in the ambulatory walk-in clinic at Denver General Hospital," she continued. "Adult care will be my principal focus."

What does the nursing fellow expect to bring back from her experience in Denver?

"I would hope to have a clearer picture of curriculum design and development for primary care programs at the graduate level," she replied. "I would certainly have increased my expertise in clinical skills in the delivery of ambulatory primary care. And I would hope to be able to facilitate the development of a collaborative joint practice model (involving physicians and nurses working together)."

Reflecting on primary care, Ms. Elhart said, "I think nurses have a very definite set of skills and abilities to offer in this area. They just haven't been utilized.

"Primary care is being recognized more and more by the consumer as an option, and I think the whole mode of delivery is going to rapidly expand and improve."



# 'Mrs. Doernbecher,' 91, smiles on children's hospital



Friends call her "Mrs. Doernbecher." It's a title that brings a proud smile to Virginia Kletzer's face. For 17 of her 91 years, she has been one of the most enthusiastic benefactors of Doernbecher Memorial Hospital for Children.

Mrs. Kletzer's gently persistent prodding has led the Portland Federation of Women's Organizations to make fund raising for Doernbecher one of its annual projects.

*"They've done some fine things here at Doernbecher. I appreciate so much what they're doing and I want people to know about it."*

A longtime member of the federation, Mrs. Kletzer was on hand May 1 when a contingent of federation representatives toured Doernbecher Hospital and presented a check for \$865. Barbara Browne, nursing coordinator, noted, "This year she apparently convinced them that they should especially dig down in their pockets because it's the Year of the Child."

The annual donation is used to buy entertaining and therapeutic items for the young patients — wagons, tricycles, dolls, model cars, books, paint-by-number sets.

"I've always been interested in small

children," Mrs. Kletzer said, "because I have had such a strong feeling that those first six years are so important. I think they mean a great deal in a child's physical and emotional life. You can set them off wrong by not taking care of things early.

"So my interest in Doernbecher is just natural. They've done some fine things here at Doernbecher. I appreciate so much what they're doing and I want people to know about it."

Mrs. Kletzer has been a friend of the Hill since the mid-1940s. As a member of the American Cancer Society's Oregon Division (for which she later was executive director), she became acquainted with HSC staff when the division was helping establish tumor clinics here. One person she came to know well was Shirley Thompson, who was then director of nursing for Doernbecher Hospital and the Medical School Hospital.

Back in 1962, Mrs. Kletzer recalled, Miss Thompson was lamenting the fact that Doernbecher Hospital had run out of money for "extras" for the children. Mrs. Kletzer promptly passed word of the need to the Portland Federation of Women's Clubs. They were "delighted" to raise money, she said, "and we've been doing it ever since."

A volunteer for most of her life, Mrs. Kletzer also has served as state and national president of the PTA, whose health programs she strongly supported. Nowadays in her spare time she enjoys cultivating orchids at her home on Council Crest.

The friend of Doernbecher, incidentally, has had plenty of firsthand experience with children — as the mother of three, grandmother of 10 and great-grandmother of 10 more.

*During a visit to the HSC's Doernbecher Memorial Hospital for Children, Virginia Kletzer enjoys a moment with one of the tiny patients. Her efforts have helped provide entertaining and therapeutic items for the hospital.*



The Oregon State Board of Higher Education's schedule includes two meetings this year at the University of Oregon Health Sciences Center. The first, pictured here, was on May 25. During the meeting HSC president Dr. Leonard Laster (in foreground, center), special consultant Dr. Richard Jones (left) and School of Nursing associate dean Patricia Tomlinson testified on the need for salary adjustments for nursing faculty to bring salaries to a competitive level, to provide an appropriate mix at various ranks and to increase the number of doctorally prepared faculty. The July 27 meeting of the board also will be held on the campus, at the Child Development and Rehabilitation Center, and will be preceded by a day-and-a-half visit to the University by board members.

## Newsmakers



**DR. LOUIS TERKLA**  
dean, School of Dentistry

Dr. Louis Terkla, dean of the School of Dentistry, was awarded an honorary Doctor of Science degree from Georgetown University School of Dentistry, Washington, D.C., at commencement exercises May 13. He also delivered the commencement address. Dr. Terkla was cited as a "learned scientist and clinician, gifted teacher and skilled administrator (who) has distinguished himself throughout his life."

Dr. Joseph Matarazzo, professor and chairman of the department of medical psychology, is the charter president for the American Behavioral Health Association. The newly formed interdisciplinary group is open to medical and behavioral scientists and laypersons interested in the behavior of individuals as it affects health.

Ellean Nassir, education coordinator in cytology, has been named Medical Technologist of the Year for the state of Oregon. Selected for her outstanding contribution to her field, she received the honor

from the Association for Oregon Medical Technologists at its annual spring seminar in Portland.

Dr. Arthur Wiens, professor of medical psychology, is serving as president of the American Association of State Psychology Boards. The organization acts as a national clearinghouse for state licensing information and develops suggested policies and procedures that individual states can adopt.

Dr. Robert S. Terkla of Seattle, a 1955 graduate of the School of Dentistry, has been nominated for vice president of the Academy of General Dentistry (AGD), the second largest dental organization in the United States. If chosen at the June 27 election, Dr. Terkla will automatically succeed to the offices of president-elect and president. He recently was re-elected to the AGD board of directors.

Dr. Ben Saltzman, a 1940 graduate of the School of Medicine, has received the Will

Ross Medal from the American Lung Association for "outstanding contributions as a volunteer in the respiratory disease movement." He is professor of rural medical development programs at the University of Arkansas for Medical Sciences, College of Medicine, Little Rock. Because this is the institution's 100th anniversary, Dr. Saltzman has been traveling throughout Arkansas emphasizing the school's scientific and humanitarian objectives.

Dr. Robert Hare, a clinical professor of medicine at the HSC, has been elected to a three-year term on the board of trustees of the American Society of Internal Medicine. He is a Portland internist.

Dr. James Levy, a 1969 graduate of the School of Medicine, has been appointed vice president for professional affairs at the Greater Southeast Community Hospital in Washington, D.C. He will be working with the medical staff and professional departments.





## Students reach out to community for learning, serving

For Health Sciences Center students, the community is a classroom.

Students in all three Schools — Medicine, Nursing and Dentistry — count on experience in the Portland community, and other communities, to prepare them realistically for their roles as health professionals.

And the community, in turn, finds real value in the skills and sense of caring that the students bring as they assist in providing much-needed health care.

Students serve their practicums in a wide range of community settings — schools, health clinics, nursing homes, low-income housing units, hospitals, health service agencies in several counties, the state health division. Their community work may put them in touch with the Visiting Nurses Association or VD clinics, the Housing Authority of Portland or the handicapped, elementary schools or the elderly.

Here are only a few examples of how HSC students find the community an important part of their curriculum:

*"I think many of them feel more at ease just because we're in the building. There's a lot of psychological support or reassurance they obtain just because we're here."*

### School of Medicine

Often, the aches and pains of old age are compounded by fear and loneliness.

HSC medical students who serve practicums in Portland housing units for low-income elderly people learn the importance of providing both physical and emotional support.

"I think many of them feel more at ease just because we're in the building. There's a lot of psychological support or reassurance they obtain just because we're here," said new graduate Glen Stream, who served in the project for two years. He worked this past year with third-year student Peter Zenthoefer at Holgate House in southeast Portland.

Under a program of the School of Medicine's department of public health and preventive medicine, selected third- and fourth-year medical students provide health help at Housing Authority of Portland high-rise units for the elderly. The students work in pairs and live year-round in their own apartments on the premises. They each receive nine hours of academic credit.

Dr. Beatrice K. Rose, head of community medicine and director of the program, explained, "The project is called a health maintenance program because the students do not function as physicians, prescribing medications; rather, they serve as facilitators of health and medical care by making appropriate contact with the residents' private physicians, or, in the absence of a regular physician, making a referral for definitive care."

The students' task is to monitor the elderly residents' health and to do health counseling. They serve emergency duty at night and are available for house calls — or rather, apartment calls — when residents have a problem. Sometimes their role is simply reassurance.

"Sometimes they help define whether a situation is an emergency, requiring immediate medical attention, or an urgent situation which can wait until morning," Dr. Rose said.

In addition, the students take turns running a weekly clinic in the units. They screen the residents for high blood pressure, discuss diet and medications, and let them know whether a visit to the doctor is in order.

For Glen and Peter at Holgate House, routine duties have ranged from changing the eye patch of a man who had had cataract surgery, to helping a diabetic overcome her fears of using insulin, to reassuring worried residents that the upper respiratory tract infection would not develop into pneumonia.

"The students care; they are very people-oriented," said Dr. Rose. "And they are all better-than-average students. They have to be, because they do this in addition to all their regular school work. They are on emergency call in the housing units from 9 p.m. to 6 a.m. and they cover the units on the weekend. But they tell me they learn so much that it's worth it. They become very confident with patients."

Student participants attend a weekly seminar conducted by Dr. Rose and Dr. Michael Garland, assistant professor of public health and preventive medicine.

"The students learn how to communicate with community physicians," Dr. Rose noted, "and they've been very well accepted by them." All the while, the students get a feel for functioning as a health care provider in a small community.

And, they learn some of the nitty-gritty realities about the cost of medical care on the Social Security system and other health programs.

"For me," Glen said, "one of the biggest benefits of this experience has been an ap-

*In photo above, dental hygiene students Susan Brown, left, and Jane Harris present an entertaining lesson on the Basic Four food groups at the Holladay Center for Physically Handicapped. In photo at right, medical student Glen Stream examines a resident of Holgate House, a Housing Authority of Portland unit for elderly people. Glen and fellow student Peter Zenthoefer lived on the premises, monitoring the residents' health and doing health counseling.*



preciation of some of the special problems of the elderly — their great concern for independence; their financial limitations; boredom; loss of family either through distance, death or estrangement.

"At this point, I don't know how I will translate my knowledge into my personal practice. I do know the experience has given me a lot of empathy. I might add, one thing I probably will try to do throughout my practicing years is to emphasize the importance of the family unit . . . No government aid can take the place of the care and love that these people can get from their own families."

Peter said, "Because of this experience, I've gained a lot of insights. If I hadn't participated in this program, there would be a real void in my background in regard to the elderly and their needs. I don't think this can really be taught in medical school."

*The student nurses' health screening clinic was clear evidence that school nursing is much more than "just putting on a Band-Aid."*

### School of Nursing

The lively procession of grade schoolers willingly stuck out their arms for blood pressure checks, stepped onto the scales for weight recording, and "Ah"-ed their way through dental once-overs.

All this was clear evidence that school nursing is much more than "just putting on a Band-Aid," pointed out Margaret McCreedy, HSC instructor of community health nursing.

The scene was Sacajawea School in northeast Portland, where two senior nursing students from the HSC, Liz Kinney and Tanya Madtson, were conducting a school-wide health screening. The May 29

event was the culmination of their community health rotation at the school.

As temporary school nurses, the pair mustered enough enthusiasm among students and teachers that the screening day was declared Health Fair Day, complete with outdoor games and student-made posters.

For several weeks Liz and Tanya had been busy at the school with activities other than simply tending scrapes and bruises. The nursing seniors — like several of their fellow students working in other public schools — took the opportunity to teach preventive health to their young charges.

"The earlier we start out with these kids in educating them about health care," said Tanya, "the better the chance that they'll take responsibility for their health themselves."

Added Liz, "They'll learn that they have a say about what happens to their bodies."

Films and hands-on teaching models helped the children learn about things like how a heart works, what dental plaque is, and why nutrition is vital to growth and development.

"Teaching is part of the nursing role, and it's the part I've most enjoyed," said Liz.

Because the children had been so well prepared, screening-day squeamishness was minimal.

All the students were checked for blood pressure, height, weight, dental health and vision; fifth graders also were screened for scoliosis. Assisting Liz and Tanya were other nursing students, a professional school nurse, and two dental students (including Tanya's husband).

Any health problems discovered were



reported on referral slips which were sent to the children's parents.

"They've really gotten the kids motivated and turned on to health care," observed the nursing students' instructor, Ms. McCreedy. She added, "You have to give the school a pat on the back. There's a really positive attitude on the part of the teachers. It comes right from the principal on down."

The screening clinic was the nursing students' own idea.

"Leadership skills and teaching-learning principles acquired during their baccalaureate program aided the students in their ability to carry out such a large project," Ms. McCreedy noted. "Students are given leeway to use their creativity to motivate positive attitudes toward personal health."

#### School of Dentistry

Whether doing restorative work in a senior citizen's mouth or teaching handicapped children about the Basic Four food groups, students in the School of Dentistry have a hand in community service.

Dental hygiene students and dental students alike get firsthand experience working in community projects with people who don't normally receive ongoing dental care.

Every spring term, for example, finds the

hygiene students serving in Portland community agencies such as nursing homes, schools for the handicapped, and health centers.

"The students' goal," explained Marge Empey, assistant professor of dental hygiene and program coordinator, "is to assess the dental needs of the particular group they work with; make referrals, if

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*"I think that we have a responsibility to the public to provide dental health education. Dental disease is the biggest chronic disease in this country ..."*

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possible, for dental treatment; develop an educational program for the population, and if possible, evaluate its effectiveness."

Students' teaching tasks may involve explaining basic dental health to young mothers and mothers-to-be or showing children how to brush their teeth. The students also offer in-service education for agencies' staff members.

And, they provide screenings for caries, periodontal disease and oral cancer.

With career opportunities in dental hygiene expanding outside private dental practice and into the community, Ms. Empey said, the students' experience in

the community can bolster their professional prospects.

"Also, I think that we have a responsibility to the public to provide dental health education," she said. "Dental disease is the biggest chronic disease in this country, and it's almost one hundred percent preventable by teaching people simple techniques that they can do at home."

Taking on dental disease in the community from another angle are HSC dental students.

Their community rotation in public health dentistry includes work at the Russell Street Clinic in northeast Portland, an HEW-sponsored agency serving low-income, elderly, handicapped and minority populations. (The clinic provides the dental services portion of Project Health, which is administered by Multnomah County.)

Each dental senior spends a week at the facility. Students work under the guidance of the clinic's dentists, who are also faculty members in the HSC department of public health dentistry.

"This is a way of exposing the students to the needs of some populations, and to disease states, that they may not see in their clinical work at the Health Sciences Center," said Dr. Lireka Joseph, acting chairman of the department of public health dentistry.

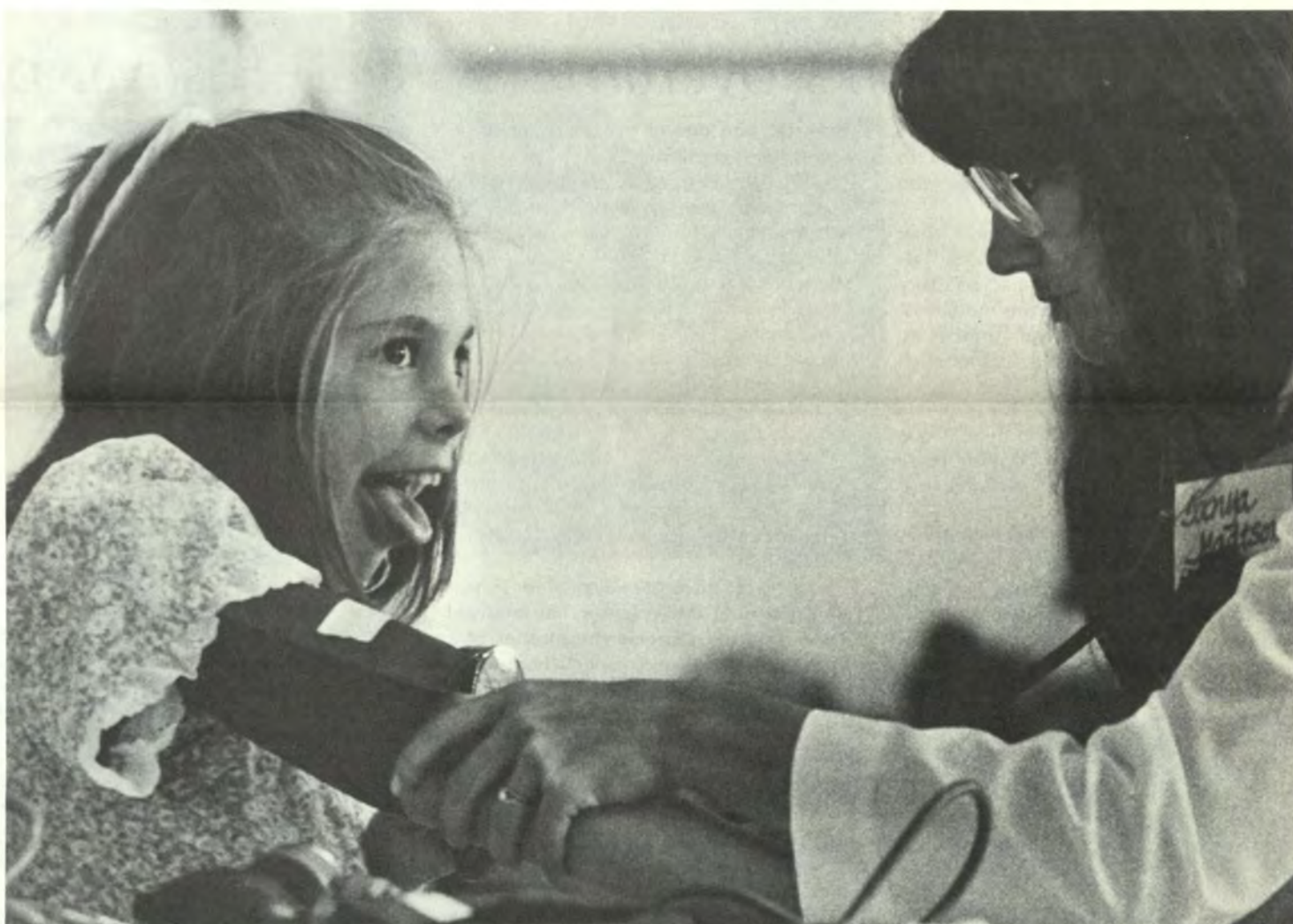
As well, the rotation gives students a feel for serving in a large group practice. Working with an experienced dental assistant at their side, they also learn more about team or "four-handed" dentistry.

"I would say the overall objective of the rotation is not so much to give students more clinical experience, because they do get that up at the School," said Dr. Joseph, "but to expose them to other aspects of dental care — for example, a different population with unmet needs; different methods of delivery and payment; and provision of care in a community environment."

She continued, "The experience also familiarizes them with some of the resources that are available in a community and, hopefully, enables them to identify resources that are lacking. Thereby in their professional life they may be able to work with appropriate agencies to alter those conditions of need."

Having recently completed his rotation at the Russell Street Clinic, new graduate Mike Sheets observed: "The dentistry that is done there surprised me. The level is very high. I would have thought that when you went to a clinic like that, you would, as the old adage says, 'get what you pay for,' and they wouldn't put in expensive dental work. But that's not true ... that impressed me."

In the picture below, dental student Mike Sheets bends to the task at the Russell Street Clinic. At right, a youngster feels the squeeze as nursing student Tanya Madtson checks her blood pressure during a health screening at Sacajawea School. Tanya and Liz Kinney planned the project.



Resusci-Baby, a mannequin used for teaching cardiopulmonary resuscitation, intrigued some of the students from Madras Junior High School who visited the Health Sciences Center May 15. They encountered the mannequin during a tour of the School of Nursing's Learning Resources Center. Other points of interest were the School of Dentistry, radiology department and White Cloud Center. Coordinated in part by the Indian Health Services at the Warm Springs Reservation, the tour was designed to give the students a first-hand look at health careers. The HSC's campus tours program has conducted some 40 tours since last June.



## New tinnitus clinic receives \$4,000 boost

The HSC department of otolaryngology and maxillofacial surgery is another \$4,000 closer to its goal of building a new tinnitus clinic.

That's the amount of a grant allocated to the department from the court-ordered \$200,000 "reparations fund" established by White Stag Manufacturing Co. to compensate for customs violations on clothing im-

ports. Thirty-nine allocations have been made to non-profit organizations.

The otolaryngology department is trying to raise a total of \$175,000, to be matched by another \$175,000, for constructing the tinnitus clinic building. Currently, the tinnitus clinic must be set up specially every week in the Kresge Hearing Research Laboratory.



# Phil Clark steps down as Veterans Hospital director

Ending a 33-year career of service to the Veterans Administration, J.P. "Phil" Clark retired May 30 as director of the Portland VA Medical Center.

Since coming to the Portland VA Hospital in February 1976, Mr. Clark has been active in promoting the close relationship between his institution and the Health Sciences Center. He has been a strong advocate for locating the new veterans' hospital on Marquam Hill.

"Phil called me the other day to say he had some news for me," said Dr. Leonard Laster, HSC president. "In my usual wary manner I asked whether the news was good or bad and he replied, 'That depends on how you take it.' He then informed me that he was retiring that very day. My response was immediate — from my point of view the news was horrible.

"I felt personally cheated at losing the opportunity to extend our growing friendship and collegial experience beyond the mere nine months he had allowed me and I felt that both our institutions were suffering the loss of an outstanding member of the group. I did go on to wish him well, to express the hope that he will enjoy every minute of his retirement and to in-

vite him to drop by now and then to nurture our friendship."

Dr. M. Roberts Grover, acting dean of the School of Medicine and acting chairman of the VA Hospital's Dean's Committee, commented, "Phil has done an outstanding job of continuing to build and develop the relations between the School of Medicine and the VA Hospital. I always

*"Phil has done an outstanding job of continuing to build and develop the relations between the School of Medicine and the VA Hospital."*

found him to be extremely cooperative and helpful, and very intimately concerned with the care of the patients at the VA. In my dealings with him, it has always been his goal to make sure that the patient comes first."

To Dr. Donald Kassebaum, HSC vice president for hospital affairs, "Phil Clark stands out from all of the VA administrators I have worked with in over 20 years of relationships with the Portland VA Hospital. He showed that he knew how the

hospital ran and what was needed by the staff, nurses and patients. Patient care and the fostering of health care education were placed in proper perspective. And he worked with and served the community as a board member of the area's health planning and review agency."

Dr. Richard T. Jones, special consultant to the HSC president, said, "Phil certainly was helpful, understanding and supportive while I was acting president of the Health Sciences Center. We worked closely together in preparing material arguing for re-placement of the Veterans Hospital on Marquam Hill, and he was always wise in his judgment of what to say and how to say it. I have found him to be a very effective administrator and a very valuable adviser."

A Navy veteran of World War II and the Korean War, Mr. Clark, 63, joined the Veterans Administration as assistant personnel officer at the Temple, Tex., VA Hospital after his World War II service.

Before coming to Oregon, he had been director of the VA hospital in Northport, N.Y. He previously had directed VA hospitals in Tucson, Ariz., and Grand Junction, Colo.

Fred Salas, assistant medical center director, has been named acting director of the VA Hospital.



**PHIL CLARK**  
retired director, VA Medical Center

## HSC nurse works overtime as Rose Festival princess' mom

When plans were being laid for the 1979 Rose Festival Court's traditional visit to University Hospital, it was obvious who one of the guides should be.

"They asked me and I was more than glad to volunteer," laughed Lenolia Talton, head nurse in the cardiac recovery room, who happens to be the mother of one of the Rose Festival princesses. Daughter Lynn represented Adams High School on this year's court.

Besides serving as a guide for Lynn and her royal companions on the June 7 tour, Mrs. Talton has been kept hopping these past several weeks as chief chauffeur for her on-the-go daughter.

"I've been her wheels, I've been her escort, and I've been sort of her fill-in" throughout Lynn's Rose Festival activities, Mrs. Talton explained. The latter duty included attending an assembly to pick up an award Lynn won for being her school's outstanding industrial arts student.

Lynn, whose personableness matches her mom's, also shares her mother's interest in a medical career. She plans to attend Pacific University and pursue a career in pediatric physical therapy.

"I've always liked kids," the princess said, "and I want to work with people, so it sounded good."

Actually, Lynn's interest in the health professions runs through three generations of her family. Her grandmother is a retired nurse; her father, Kirby, is an orderly and traction technician at Providence

Hospital; and one of her sisters works as a hospital receptionist.

Lynn has been active in cheerleading, drama, choir, volleyball and softball at Adams High School and is active in Isisarettes, a Masonic youth organization. She served on the 1972 Junior Rose Festival Court.

Incidentally, two other offspring of HSC people showed up on this year's Rose Festival Court. Cathy Leaverton, Cleveland High School's princess, is the daughter of Dr. Gary Leaverton, a 1955 graduate of the School of Medicine and a volunteer faculty member in surgery. Lincoln princess Lorrie Grewe's father is Dr. Ray Grewe, '47, who serves on the volunteer faculty in neurosurgery.

A nurse at University Hospital for almost 20 years now, Mrs. Talton has enjoyed some reflected glory as the mother of a Rose Festival princess, especially at work.

"People whom I hadn't seen for a while are coming by to say, 'Congratulations,'" she said, smiling. "That's nice."

*During the Rose Festival Court's recent tour of University Hospital, Lenolia Talton took time out to accompany daughter Lynn and other princesses as they passed out roses to some pleasantly surprised patients. The court also crowned a Doernbecher Rose Queen, 5-year-old Channa Brown, as part of their traditional visit.*



## Hot dogs help pedodontics clinic

Hot dogs, as American as apple pie but not as caries-producing, play a part in helping the School of Dentistry pedodontics clinic.

Every Wednesday at lunch time during the school year, members of the Junior Dental Auxiliary, made up of dental students' wives, peddle hot dogs with all the trimmings in the School of Dentistry lounge. Half the proceeds go into a fund to provide indigent children with dental care at the pedodontics clinic.

Auxiliary members presented a check for \$650 to the clinic at their annual spring banquet in May. That makes a total of \$2,700 that the Junior Dental Auxiliary has given to the pedodontics fund since 1973.

With the brisk sales of 300 hot dogs a week, plus countless cups of apple cider and home-baked goods, the money has been accumulating steadily.

"Oh, they love it," member Denise Ortiz

said of the hot dog sale. "The dental students and staff come up and buy. Once in awhile patients wander in, too."

Among the many beneficiaries of the hot dog dividends was a 4-year-old Vietnamese foster child. Suffering from severe caries, the boy was given extensive treatment at the pedodontics clinic and emerged with a healthy new mouth, complete with silver fillings and stainless steel crowns.

Because such extreme cases give dental students excellent educational opportunities, "the wives are directly benefiting their own husbands and their husbands' classmates as well as the children," pointed out Dr. Roger Lunt, associate professor of pedodontics. "So everybody benefits."

The balance of funds from the hot dog sales is used for the Junior Dental Auxiliary's activities such as interest groups and dental classes for members.



Rose Festival princesses Cathy Leaverton, left, and Lorrie Grewe, above, are daughters of HSC volunteer faculty members. (See story above.) Cathy's shown during the court's visit to University Hospital. Both young women, like Lynn Talton, plan careers in physical therapy.



# Retinoblastoma program saves both vision and lives

Retinoblastoma is a rare and potentially fatal disease with a particularly sobering characteristic — its victims are always children.

Yet today children suffering from the eye cancer can expect an excellent chance of cure, because of programs like the one at the Health Sciences Center.

A malignant tumor of the retina which is often hereditary, retinoblastoma affects only one in 20,000 children, mainly during the first two years of life. Untreated, it is almost invariably fatal.

Treatment in the past has been drastic, according to Dr. Andrea Tongue, associate professor of ophthalmology and director of the Elks Children's Eye Clinic. It usually has involved surgical removal of the diseased eye.

*A "peculiar look to the eye" is usually what warns parents that something is wrong. The child's pupil may reflect light and appear whitish or yellowish instead of black.*

But nowadays, with early detection, prompt referral and an arsenal of treatment modalities, the odds of preserving the eye — and the eyesight — are much better.

The Children's Eye Clinic has one of the top programs on the West Coast for treating retinoblastoma, Dr. Tongue said.

"Here at the Health Sciences Center we probably see on the average about three new cases a year," she said. "The average age when it is detected is about two years.

But it can be present at birth, particularly in the inherited form."

A "peculiar look to the eye" is usually what warns parents that something is wrong. The child's pupil may reflect light and appear whitish or yellowish instead of black. The eyes may cross, wander or squint; sometimes, parents will notice that the child's vision has deteriorated.

One-fourth to one-half of all retinoblastoma cases are bilateral, involving both eyes, Dr. Tongue noted. The bilateral tumors are genetic. If a parent had bilateral retinoblastoma, she said, his or her child has a 50 percent chance of inheriting the disease.

"Although the inheritance pattern of unilateral retinoblastoma is not clearcut, a number of these cancers are inherited also," she said. "Therefore, any sibling of any patient with retinoblastoma should be examined from the time of birth."



*A boy who suffered bilateral retinoblastoma underwent a regular checkup by Dr. Tongue at the Elks Children's Eye Clinic. One eye had to be removed; the other has been treated with radiation, freezing and photocoagulation (laser). The boy's older sister also had tumors in both eyes. In fighting retinoblastoma, early detection and prompt referral are important.*

Retinoblastoma is insidious — unchecked, the tumors can spread into the brain via the optic nerve or into other body parts via the blood.

In treating retinoblastoma, the Children's Eye Clinic works closely with both the department of radiation therapy and the department of pediatrics.

*"Ideally, the goal is not only to save the patient's life, but to save the sight in both eyes ..."*

"Treatment modalities have changed tremendously in the last 10 years," Dr. Tongue said.

"Before the advent of radiation treatment, laser treatment, freezing treatment and chemotherapy, it used to be that in the bilateral cases, both eyes were removed," she said. "So there are now

young adults who had both eyes removed because of retinoblastoma."

The present HSC program has a respectable rate of success. Every patient has retained useful vision in one eye.

Said Dr. Tongue, "Each case needs to be evaluated to see which method of treatment or combination of methods should be used."

In unilateral cases, almost invariably the cancer has done so much damage by the time it is detected that vision in the diseased eye cannot be salvaged. Furthermore, at this point the tumors are life-threatening.

So the eye is enucleated (removed). If there is danger of metastasis, or spread, a course of radiation may be used, in conjunction with chemotherapy.

In cases of bilateral retinoblastoma, "unfortunately, in the past, one eye has had a tumor that is too advanced for local treatment, and removal of the eye has been necessary," Dr. Tongue said.

"Ideally, the goal is not only to save the patient's life, but to save the sight in both eyes — by utilizing local ablative treatment of the tumors such as radiation, freezing or laser treatment, frequently in conjunction with chemotherapy."

Today, 80 to 90 percent of all children in the United States with retinoblastoma are eventually cured. However, Dr. Tongue said, these patients must be checked periodically for the rest of their lives. (As high as 20 percent of bilateral patients may develop other malignancies later in life.)

Along with Dr. Tongue, a vital member of the HSC retinoblastoma team is Dr. Robert Neerhout, pediatric hematologist and chairman of the pediatrics department, who directs the chemotherapy regimen. Dr. William Moss, chairman of the radiation therapy department, and his staff administer radiation therapy, which is used in almost all of the children with bilateral tumors. Still another important team member is the ocularist, who makes artificial eyes for the young patients.

"It's really a team approach," Dr. Tongue said, "both to the decision about the best treatment and to the actual treatment of the patient."

## CCD grant brightens school days

For a Yamhill County teen-ager whose hands are crippled with rheumatoid arthritis, school work is a little easier now. The gift of an electric typewriter has been helping her to do school assignments and take on part-time secretarial jobs besides.

The girl is one of dozens of Oregon schoolchildren who have benefited from a grant to the Crippled Children's Division from The Oregon Community Foundation. Last year the foundation gave more than \$24,412 to CCD, and this year's gift comes to over \$25,593.

The grant is funded by the foundation's Sidney and Lillian Zetosch Fund, which was established to help underprivileged physically handicapped children stay in school and complete their education. Monies are designated for helping satisfy health-related requirements.

CCD channels the gift money into buying electric wheelchairs, electric typewriters, adult-style tricycles, hearing aids, communication boards (specially designed boards that aid children with

speech problems), and other equipment for handicapped youngsters.

So far, since CCD began receiving the monies last year, 43 children and teen-agers in 26 Oregon cities have gotten an educational boost from the CCD funds. The Zetosch Fund provides for up to \$1,000 per child per year.

*An electric wheelchair which last year's grant helped buy has brought a happy change to the life of a crippled girl.*

"It's designated to keep handicapped children in the mainstream in school," Margaret McGill, CCD social worker, said of the fund, "and this has meant a tremendous contribution to their total habilitation and quality of life."

Besides the Crippled Children's Division, other agencies receiving annual gifts from the Zetosch Fund are the Easter Seal Society and United Cerebral Palsy Association. CCD, which serves a broad spectrum of handicapped children throughout the state, receives over 50 percent of the money.

An electric wheelchair which last year's grant helped buy has brought a happy change to the life of a crippled girl in Washington County, according to Ms. McGill.

"She's a bright youngster who was able to be in school but had to depend on other people to push her wheelchair around. With the electric wheelchair, she can be independent and more a part of regular school life."

*An electronic device called a Zygo board — purchased with the aid of the CCD grant — is making communication much easier for 10-year-old Christopher, who has cerebral palsy. The board contains 100 squares with a different word in each. Using the hand control, Christopher can move a light across the board, stopping it at any square he chooses. Thus he can "punch out" a sentence. Shown conversing with the boy is Mary Helen Plumb, teacher of the multiply handicapped at Sacajawea School in Portland. One of Christopher's favorite words on the board is "Rats!"*





# Cello-playing physiology professor isn't 'all science'

Alone in his laboratory one night 18 years ago, Dr. Robert E. Swanson, then a brand-new associate professor in the School of Medicine, was up against a mental block. The questions he was trying to write for a physiology exam simply weren't coming.

Dr. Swanson put his pencil down and reached for the cello that he happened to have nearby. For 45 minutes he filled the room with mellow music; then, refreshed and inspired, he zipped through the rest of the questions.

Although the professor of physiology no longer keeps a cello at his place of work for instant inspiration, he does haul one to the Health Sciences Center from time to time. He's been seen and heard performing with fellow musicians in the monthly Noon Musicales programs (which he organized), the All-Hill Talent Show and other HSC events.

"People say, 'I didn't know you were so talented. I thought you were all science,'" Dr. Swanson said with a laugh.

Haydn, Bach, Beethoven and Mozart provide an often-welcome diversion from the world of cells, tissues and organs, noted the amateur musician.

He harmonizes with a string ensemble called the THIF (Thank Heaven It's Friday) Quartet every Friday — "We all look forward to our Friday evenings. It's just a nice way to end a week and start a weekend." Sunday mornings find him rehearsing with flutists Sheryl Beck and Denise Beckberger, who are HSC students and fellow members of the Caduceus Trio.

Dr. Swanson's caduces make music for an occasional banquet, church program or wedding.

Ignoring the skepticism of friends, Dr. Swanson took up the cello at the relatively ripe age of 30. "People tried to discourage me from starting a stringed instrument at such a late age," he recalled.

He had been interested in playing the cello as far back as the seventh grade but

lost out to a boy with shorter fingernails. He started the trombone instead and wound up blowing dance music in the Army.

"Then I found myself becoming more and more disenchanted with jazz and dance music and more and more drawn to chamber music," Dr. Swanson said. "I realized that with the trombone I didn't have much chance of participating in chamber music!"

*As a member of the nationwide Amateur Chamber Music Players, Dr. Swanson has a directory that helps him locate fellow members in other cities to harmonize with during his travels.*

While playing a gig just before he started medical school, he decided he'd put his trombone in its case for the last time. And he vowed that as soon as he finished med school, he would begin the cello.

Now, Dr. Swanson is polishing his technique as a student of India Zerbe, principal cellist of the Oregon Symphony.

A favorite retreat for practicing his scales and bowing exercises is a friend's beach home that looks out over the ocean.

"Believe me, I don't go very far without my cello," Dr. Swanson said. "I just won't travel without it." As a member of the nationwide Amateur Chamber Music Players, he has a directory that helps him locate fellow members in other cities to harmonize with during his travels. He gets a few calls himself from amateur musicians passing through Portland who want to get a

*Dr. Swanson shows his adeptness at operating both cello and pipe during a recent Noon Musicales performance by the Caduceus Trio in the North Courtyard. He organized the Noon Musicales.*

string quartet together.

One especially gratifying aspect of his musical life has been organizing the HSC Noon Musicales, informal concerts for people who enjoy listening to live music at lunch time. "It's new this year," he said, "although it's been percolating for five or six years, I guess."

During a recent Noon Musicales, students, staff and faculty members lolled in the North Courtyard and listened to the music of the Caduceus Trio wafting up the slope from beneath the pink-blossomed hawthorn. There in the front sat Dr. Swanson, puffing on his pipe and playing his cello.



## Hospitals woo nursing seniors

"We want you!" was the overall message during the School of Nursing's first-ever Recruitment Day.

From as far away as Burns and Klamath Falls, representatives of some 25 health agencies throughout the state came to woo the HSC's senior nursing students. Display tables lined the Student Activities Building for the informal May 10 event.

"The purpose of Recruitment Day," explained Patricia Tomlinson, associate dean pro tem in the School of Nursing, "was to facilitate contact between graduating senior students and representatives from various health care agencies in the state — to increase the options that students might use in seeking their first employment, particularly in reference to non-urban health agencies."

There were two main motives behind Recruitment Day, Ms. Tomlinson said.

First was the School of Nursing's "commitment to rural health," which already is reflected in nursing students' practicum programs in rural areas, she said. Recruitment Day gave numerous rural hospitals and other health agencies a chance to show what they could offer.

"Recruitment Day makes explicit one of the missions of the Health Sciences Center, and that is to provide health care professionals for the state, not just for the urban areas," Ms. Tomlinson noted.

The other main reason for Recruitment Day was the ever-tightening job market for nurses in urban areas, she said. "There are opportunities in rural areas that just don't exist here (in Portland)."

The idea for the special day was hatched earlier this spring when Ms. Tomlinson was speaking at a meeting of Oregon nursing administrators. Some complained that many of the state's rural hospitals never get to see any HSC nursing graduates. So, the dean opened the door for recruitment on campus.

Already slated for next year, Recruitment Day probably will become an annual event for the School of Nursing, said Ms. Tomlinson. However, she suggested, next time the event should be held earlier in the year, to give students more time to map out their careers, and should be open to all interested nursing students, not just seniors.

"It's a very small effort on our part," she said of Recruitment Day, "and it really seems to get good response."

*Recruitment Day attracted senior nursing students such as Tara Smith, left, and Julie Alt. Tara, who said she'd like to work in a small hospital, was "surprised" by what some of the rural health agencies had to offer.*



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