

Patient receives 100th transplant

On April 10 Mrs. Thomas (Ethyl) Boyle became the 100th patient to receive a kidney transplant at the University of Oregon Medical School. Dr. Russell Lawson, associate professor and head of the UOMS transplant team, performed the surgery.

Mrs. Boyle has been under treatment for polycystic renal disease, often a familial trait, for the past eight years. In October, 1971 she was referred to Dr. Lawson by her Portland physician, Dr. Lowell Keizur. When her kidneys failed to respond adequately to further

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Transplant team head Dr. Russell Lawson, left, and urology resident Dr. Jerald Albrich prepare donor kidney for waiting recipient.



Student admissions

The process of selecting a class of 112 medical school freshmen from a highly qualified undergraduate group numbering over a thousand is, like medicine itself, both an art and a science. Using all of the subjective and objective tools, processes and information available to them, the many-faceted members of the University of Oregon Medical School Admissions Committee bring to bear all of their varied judgment and experience in evaluating the qualifications of each candidate.

Eight members of the Medical School faculty, representing both the basic and clinical sciences, serve on the Committee: Chairman Dr. Hance F. Haney, professor of medicine and faculty member for 35 years; Dr. Robert L. Bacon, professor and acting head of the department of anatomy; Dr. George C. Buchan, professor of pathology and head of the division of neuropathology; Dr. Joseph D. Matarazzo, professor and chairman of the medical psychology department; Dr. Robert J. Meehan, professor of pediatrics and a 1953 graduate of UOMS; Dr. Clifford S. Melnyk, associate professor of medicine (gastroenterology); and Dick B. Speight, director of admissions and registrar.

Since the Committee's final decision is based upon the data gathered about and given by each student, it is vital that this input be as complete and accurate as possible. Included in this material are a complete college transcript of all courses and grades from all colleges attended, recommendations from college professors, a list of all college honors, extracurricular activities, employment experiences, hobbies and recreational activities, family background, state of residence, military experience, age, raw and percentile scores on the national medical aptitude test and an essay by the stu-

dent explaining his reasons for wanting to study medicine plus any additional personal information he chooses to relate. "We check and recheck the material on each applicant to make sure we have considered every aspect of his or her background. We must consider Oregon students first but men and women are evaluated equally; the ratio of applications to acceptances is almost the same for both groups," said Dr. Haney.

From the candidate's personal letter, the comments his chosen professors make, the objective data gathered about him and the remarks, appearance and impression he gives at the interview, the members of the Admissions Committee form a composite picture of the student as a whole person. His character, personality, mental and physical health, ethical values, ambition, industriousness, perseverance, emotional stability and stamina, sense of humor, poise, maturity and ability to communicate and relate to others are all a part of this total picture. It is these qualities that must be weighed, one against the other, in the final analysis.

For the entering class of 1972, 101 of the 112 accepted candidates are from Oregon, 86 men and 15 women. The remaining are from WICHE states (Western Interstate Commission for Higher Education) with five from Montana, four from Idaho, one from Wyoming and one from Alaska. Due to the exceptionally high number of qualified applicants from these states alone, UOMS, for the first time, was unable to accept any out-of-state, non-WICHE students.

SPECIFICATIONS HAVE been written for new incinerator facilities at the Medical School Hospital, according to Ralph Tuomi, physical plant director. When the unit is installed, all such facilities on the campus will meet the standards of the Columbia Valley Air Pollution Authority. Mr. Tuomi anticipates contracts will be let in June and installation will be completed early in the fall.

Alums elect president

Dr. Albert A. Oyama, '53, associate clinical professor of clinical pathology, and Portland pathologist, was named president of the UO Medical School Alumni Association in April. Dr. Oyama, who is associated with St. Vincent Hospital, succeeds Dr. Willis Irvine, '48, Portland, in the presidency.



Dr. Oyama

Other officers elected at the annual meeting which occurred at the Benson Hotel April 27, include Drs. Ernest Livingstone, '51, assistant clinical professor of medicine, vice president; Dr. Richard Lalli, '56, assistant clinical professor of ophthalmology, treasurer; and Dr. John D. O'Hollaren, '47, assistant clinical professor of medicine, secretary.

Regional vice presidents elected by the graduates include: Drs. Dudley M. Bright, '62, Salem; Lucille Kellmer Champion, '46, North Little Rock, Ark.; James Y. Liu, '69, Fresno; Clifford W. Phillips, '52, Mountlake Terrace, Wash.

During this same meeting, Dr. Irvine presented Lifetime Membership certificates to 26 UOMS graduates of the class of 1932 who have specifically contributed to the Medical School in time, effort or financial support. Receiving certificates were: Drs. A. B. Baker, Spokane; John D. Blair, San Leandro, Calif.; Donald Blanche, Los Angeles; J. E. Campbell, Roseburg; Lewis H. Carpenter, Camas; Filmer Carter, Portland; George Davis, New Plymouth, Idaho; Louis Goodman, Salt Lake City; Irene Grieve, Spokane; Wendell Hutchens, Portland; Clyde Hutt, Vancouver, Wash.;

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medical center news

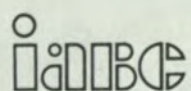
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transplant, continued

treatment she was placed on a twice-weekly dialysis program at the School last February and her name was entered on the long list of patients waiting for renal transplants.

When arrangements were made for her brother, Howard Dilley, to donate a kidney, Mrs. Boyle underwent preliminary surgery March 6 for removal of her grossly enlarged kidneys and her spleen, which normally would trigger the body's attempt to reject any foreign tissue. Her dialysis schedule was then stepped up to three blood-cleansing sessions weekly to substitute for her kidneys' vital function until the transplant date.

In the past 12 months the UOMS transplant program has a functioning graft record of 94 per cent for related donors and 66 per cent for implanted cadaver kidneys. "It should be emphasized," Dr. Lawson said, "that these statistics represent not patient survival rates but renal transplant functional survivals of at least one year when the major likelihood of rejection has passed. If a graft is rejected the patient is put back on dialysis to wait for another suitable kidney. The 100 transplants at the Medical School actually include 86 patients, 14 of whom have had more than one kidney implanted. Age is no longer the barrier it once was," he added.

In 1969, when the feasibility of renal transplants was well established, the Oregon legislature appropriated \$248,570 to support the UOMS program. This fund, backed by an additional \$220,104 for the 1971-73 biennium, enabled the urology division to increase transplant services to Oregon residents with potentially lethal kidney failure. Currently over 40 patients are being maintained on hospital or home dialysis while waiting for the operation.

Merit increases and salary adjustments

According to the University of Oregon Medical School personnel office, the number of merit increases that may be granted to eligible employees will be reduced effective July 1, 1972. For fiscal year 1971-72 a maximum of 85 per cent of employees eligible for raises could receive an increase. For the next fiscal year the maximum will be 75 per cent.

The increase restriction was part of House Bill 3047, the State employee pay bill for 1971-73, passed in the 1971 Legislature. The intent of this legislation is to assure that increases are given to employees with the most merit.

House Bill 3047 also included funds for mid-biennium salary adjustments for classified employees. These adjustments have not been allocated by the Personnel Division as yet but most probably will result in a 3.5 per cent increase to most employees effective this July 1. The personnel office will publish the results of salary allocations as soon as they are available.

alumni, continued

Clifford Kuhn, Portland; Ellery Landers, Portland; John McVay, Seattle; Frank Minas, Boise; Thomas Montgomery, Portland; Walter Moren, Bellingham; J. Claude Proffitt, South Bend, Wash.; Frank Rafferty, Astoria; Joseph Roberts, Portland; Alexander Ross, Indianapolis; John Russell, Grants Pass; Lillian Shutter, Los Angeles; G. H. Strickland, Oregon City; J. Irving Tuell, Seattle; Ben Vidgoff, Portland.

Isolation tape

One of the most popular TV shows among hospital people on The Hill is an hour-long program produced at UOMS.

"Isolation Techniques for Use in Hospitals," a cooperative production of the division of infectious diseases, Multnomah Hospital Nursing Service and the division of instructional aids, has played to over 500 health personnel on the campus and at Bend and Newport.

The script, written by public health and preventive medicine department nurse Mary Norman, was based on isolation procedures developed by the U.S. Public Health Service. Mrs. Norman, along with production consultants nurses June Lerma and Helen Peterson, designed the program to show correct procedures for carrying out respiratory, strict and protective isolation and enteric and wound and skin precautions.

In addition to the nurses mentioned, "starring" in the educational production are Dr. Bradley Sack, head of the UOMS infectious diseases division, Claire Jeannis of Multnomah Housekeeping, nursing student Vickie Wilkerson, medical student Robert Poole, nurses Jean Bates, Marie Hall and Alex Mahomet and her student nursing class. Mrs. Bates' young daughter Susan is the volunteer "patient."

Viewer response to the video tape, which is available for showing throughout the State, has been excellent. The division of instructional aids currently has a library of some 200 TV tapes which they have produced. A number of these have been shown at hospitals and medical meetings throughout the State under the auspices of the ORMP's Circuit Course programs.



profile

Amanda, *Glass Menagerie*Miss McKay, *The Prime of Miss Jean Brodie*

The second wife in "Blythe Spirit"...leading lady in "The Glass Menagerie"... agonized heroine in "Summer of the 17th Doll"... are but a sample of the vast number of roles Peggy Cooke, head nurse on 14-A in Doernbecher Hospital, has attributed to her acting career.

A resident of Portland for 12 years, Miss Cooke was introduced to drama in a school-room in England at the age of seven. At 14, she debuted in amateur theatre and while in

Portland has averaged involvement in three plays a year, mostly at the Civic Theatre.

"The facilities in Portland are terrific, and I love the theatre in the round." Directors are also very influential, she feels. They mold the cast into performing as one workable unit. Rehearsal period usually lasts a month, with five or six days of concentrated study per week.

Miss Cooke performs in various roles. She prefers contemporary plays, choosing either comedy or drama. There is sometimes a struggle with her English accent but she manages to manipulate it to her greatest advantage.

Good audience reception is very important in amateur theatre as well as professional, Miss Cooke feels. She finds herself "testing" the audience as a play begins, allowing them to set the mood for the evening; she likes to "bring the audience into the play." This discourages mere spectating on their part and any inhibition on the actors' parts.

She learns from "watching other actors in other shows," and frequents the theatre often. "You must work with and help each other to produce a successful play and enjoy these actors as people."

"It's worth all the hard work," she said, "when strangers compliment your acting, or directors you haven't worked with before ask you to audition," as this actress has had the happiness of experiencing.

Educational Methods

The Educational Methods Committee, headed by Dr. Tyra Hutchens, recently surveyed the full-time faculty regarding their feelings toward programs and seminars dealing with educational techniques. The results showed that almost 100 per cent of those involved in teaching felt such programs would be beneficial.

Various plans were suggested with several short, one to three hour workshops receiving the greatest support. Audio-visual aids, grading, course development and teaching modes were some of the topics suggested to be covered in the workshops.

Additional information is being collected to determine the time most convenient to the largest number. All faculty members will be notified of workshop schedules as they are established.

Centrex

Following in the footsteps of many other State institutions, the University of Oregon Medical School is planning a switchover to the Centrex phone system.

Scheduled for installation the end of this year, the system offers a number of advantages over the present arrangement. It allows out-

side calls to come directly to each number without going through the operator, yet allows internal calls on four-digit extensions; gives a main listed number for the institution so people who do not have an individual's number may still reach him through the campus operator; allows callers to consult privately by telephone with another individual during an existing call; allows individuals to add a third party to an existing call; allows the caller to transfer to another party within the system without the aid of an operator; and includes all the features of the present system.

Representatives from Pacific Northwest Bell have already met with William A. Zimmerman, UOMS associate dean for business affairs; M. R. Parelius, business manager; Mrs. Ann Hoffstetter, assistant business manager; Mrs. Phyllis Seid, telephone clerk; and Mrs. June Jansen, chief operator to discuss potential problems in the system transfer. Decisions must be made in the next three to six months concerning the listing to appear in the Portland Directory, the format of the UOMS phone book, the appropriate departmentalization of all phone equipment (which facilitates departmental billing), and which phones are to be restricted to on-campus, local, toll and/or any combination plus tie lines.

Training sessions will be held beginning October 1 to acquaint Medical School personnel with Centrex. Because of the many new features of the system it will be necessary for all personnel who use the telephone to receive approximately an hour's training.

Merit ratings

A revised system of performance appraisal is being implemented for all classified personnel which will focus greater attention on the achievement of program goals and the development of persons in state service.

Work planning and a continuous evaluation of results in carrying out agreed-upon work plans will receive greatest attention in the new modified "merit rating" system which will go into effect July 1.

It is anticipated that supervisors and employees together will develop individual work plans and will come to an agreement on the criteria by which work accomplishments will be appraised. Plans will focus on the problem-solving and innovative aspects of each employee's work rather than on tasks for which routines are well established.

"It is important to know what is expected before a new assignment is begun; what the priorities are; when work should be completed; and how well it should be accomplished. These are the things that will be included in the work plans," Byron Phillips, UOMS personnel director, said.

Summaries of the work plans reviewed over the course of the year will be the major source of information that supervisors will use in making the annual appraisal of employee performance, he indicated. The revised system will avoid the use of arbitrarily-assigned and ill-defined personality traits that may have little or no significance for the work of the institution or the job of the employee. In addition the new system will avoid complicated numerical ratings and will substitute a simple system for summarizing supervisory judgments.

An integral part of the new system is an intensive training program which will begin May 22 and run for five days in room 3204 of the Child Development and Rehabilitation Center. All supervisors and administrators involved in performance appraisals must attend for one day and be certified as having participated in the program.

New MICU

The medical intensive care unit on the eighth floor of the soon-to-be-completed addition to the Medical School Hospital will be named in honor of Dr. Howard Lewis, longtime member of the faculty and former chairman of the department of medicine.

The Howard P. Lewis, M.D., medical intensive care unit is uniquely designed for multidisciplinary critical care. The unit will provide the facilities and instruments required for the treatment of a variety of intensive care problems including cardiovascular, respiratory, renal, gastrointestinal and metabolic diseases. It will also provide resources for the management of multiple systems failure commonly occurring in patients who are acutely ill.

Equipment necessary to complete the unit will cost \$121,000 and contributions may be made through the UOMS Advancement Fund.

Management by objective

A new system of evaluating the work of each classified employee in State service, which will be implemented July 1, 1972, has been announced by the Personnel Division of the Governor's Office. It will be a modified "merit rating" based on a Management by Objectives philosophy. The program is intended to bring about a greater understanding of the role each employee plays in the work of his or her agency and a greater participation in achieving institutional objectives.

In the following article, MEDICAL CENTER NEWS assistant editor Jo Stage discusses Management by Objectives—what it is, what it means and how it operates—with J. J. Adams, assistant dean.

Q: All the units under your supervision have been involved in a Management by Objectives (MBO) program for some time. Could you explain?

A: Yes. We initiated MBO as a pilot project in the fall of 1969 in the public information, publications, program planning, instructional aids, and development sections of the institution to see how this modern management technique would work in an academic setting.

Q: How would you define Management by Objectives?

A: Let me get to that in a sort of round-about way. First of all, when an organization is small, just about everybody knows everybody else. Each employee has a pretty good idea of the various jobs within the organization, the kinds of education and experience required for each job, and each knows something about the others' philosophy of life, attitudes, family background, and the like. Such information is invaluable to the manager in delegating responsibility and authority to his employees. It also assists him in his relationship with them, his understanding of them as human beings, and helps him to recognize how their work may be affected by attitudes, motivation, and personal life style. In summary, it's a rather simple task to create team work in achieving the goals of a small group.

Q: What you are suggesting is that this does not occur as an organization begins to grow.

A: I think that is correct. As more and more persons are hired and the organization becomes larger, we tend to become impersonal and employees could be treated as automata capable of getting out "so much work" per unit of time. As a result of such growth, job responsibilities oftentimes are poorly outlined, administrative procedures become fuzzy, the span of control—or the number of persons reporting to a supervisory person—tends to become too large, and sometimes there is improper delegation of responsibility and authority. If allowed to continue, employer-employee relations suffer, friction begins, progress begins to slow, and innovation suffers.

Q: The kind of system you describe must make it difficult to locate the outstanding employee and promote him or grant pay increases or other benefits to employees.

A: Exactly! These things become real problems in the organization which has grown rapidly. That's where a Management by Objectives system comes in, which may be defined as a philosophy of management which concentrates on the achievement of specific, measurable, planned results.

Q: Planned results?

A: Well, really it results, or should result, in six things. First of all, it provides an opportunity for the supervisor to sit down with each of his employees and together discuss his work and to agree on specific goals and proper budget, adequate assistance, and a reasonable timetable to achieve them. Secondly, it clearly outlines the amount of responsibility and authority delegated. Thirdly, it provides data for cost accounting systems. Fourthly, evaluations are made on the degree of accomplishments, not on the basis of personality or other profile data. Fifthly, channels of communications are opened between the supervisor and his employee so that both can learn more about each other's assignments, feelings and value system. And finally, the institution itself eventually should feel the impact of a better organization, tuned to carrying out the fundamental objectives for which it exists.

Q: You mentioned evaluation of employees based on personality or profile data. What did you mean?

A: Well, many organizations—whether private or governmental—fall into the trap of granting promotions and salary increases on such nebulous things as judgment, cooperation, initiative, decisiveness, emotional stability, fairness, loyalty, and you name it. All of these things have their place. But in general, promotions and salary increases ought to be granted on the basis of how well one accomplishes the work assigned to him.

Q: You indicated earlier that an MBO system had been implemented with your group beginning in 1969. How is it working?

A: Reasonably well. It uncovered some instances where a manager and an employee obviously had not been in substantial agreement on the work responsibilities assigned. It also required a meeting once a year of each supervisory person with each of his employees on a personal, individual basis. This has provided a situation in which both discussed their work, their obligations to each other, and their activities for the next year.

Q: Is there something written at that time which constitutes agreement between manager and employee?

A: Yes, we devised a form which, among other things, calls for a definition of the major job responsibilities agreed upon by employee and supervisor; a statement to the effect that the employee has sufficient authority to carry out his assigned tasks; a place for the supervisor to set forth how well the employee has carried out routine as well as innovative proj-

ects and other goals during the preceding year; and room for a statement on new goals, new procedures, change of direction in current programming, etc. anticipated in the year ahead. Both the supervisor and the employee sign the form, it is filed, and then is reviewed at the time merit increases are to be granted, when promotions may be indicated, and when manager and employee next meet for annual review.

Q: Have you found any particular problems with the program?

A: Yes, a few. The most difficult aspect has been that of hammering out job responsibilities for each person and the amount of authority to be delegated. The next most difficult thing has been to establish realistic goals for the ensuing year which are in keeping with those of the institution as a whole. These generally are sufficiently flexible so that they may be altered as emergencies or other significant changes occur.

Q: What has been the total effect so far?

A: We have observed several benefits from this pilot program. In many instances, a better working relationship has been established between managers and employees. It also has given us a sound basis upon which salary increases and promotions have been made. And finally, and most importantly, it has provided a mechanism to advance a number of the Medical Center's objectives in this community and in our state.

Q: I take it then, you are "sold" on MBO?

A: Not completely. It is no panacea. It does not replace hard work or dedication to one's responsibilities. But it does provide a framework around which some fundamental principles of employer-employee relationships can be cultivated, or perhaps re-established if they have been missing.

Q: Is MBO applicable in the faculty-teaching area?

A: There seems to be a real question about this; but Dr. George Odiome, Dean of the School of Business Administration at the University of Utah and the nation's leading authority on Management by Objectives, has indicated a modified MBO system will work in an academic setting.

Q: Wasn't Dr. Odiome a campus guest late last summer?

A: Yes, the UOMS administration sponsored a day-long seminar September 16, 1971, for administrative officers, departmental chairmen and others on the campus who head important service or other supportive units. At that time, Dr. Odiome outlined a faculty evaluation criteria which he has implemented in his own school at Utah with some considerable success.

However, for an MBO system to really work successfully, Dr. Odiome cautioned that it must be adopted on an institution-wide basis. The new thrust given to this management system by the Personnel Division of the Executive Department beginning this July should start us in that direction.

Ruth Swinney retires



The only woman on the Oregon State Police force has retired after 21 years as a chemist in the State Crime Lab, located at the University of Oregon Medical School.

Sgt. Ruth Swinney, who began work at the Crime Lab at the request of Dr. Edward S. West, retired professor and chairman of the department of biochemistry, is the daughter of a Nobel prize winner and the wife of the late surgeon Dr. Robert Swinney. Originally most of her time was spent in the lab doing chemical analysis work for every law enforcement agency in the state plus toxicology for all the coroners. More recently she has spent about one day a week testifying in court. And in just the past five or six years the drug problem has increased so rapidly she said, "It has been a challenge to keep up."

Now that Mrs. Swinney won't be following her former routine, being summoned at midnight for illegal lab raids or called out to identify a substance before an arrest is made, she plans to visit her daughters and grandchildren, and garden and maybe even take some Spanish lessons and tour Mexico.

Security office moves

The University of Oregon Medical School security office is officially moved into its new area on the third level of the parking structure, directly adjacent to the elevator.

"Now we have all our facilities in one area," said Security Director James E. Whalen, "the radio center, the office and our squad and locker room which used to be at the TB Hospital. There has been a real change in the officers' attitudes, too—we are more of a unit now and I've heard many favorable comments."

The security office is planning to set up a fingerprinting service in the near future as this information is required with application for some jobs at the Medical School. "I think we'll really be providing better all-over service because the morale of the men is so much higher," Mr. Whalen added.

The parking office, now a separate facility, headed by Warren E. Davis, is located in the administration building in the area formerly used by the old security and parking division.

VIPs

MARCH

Service Anniversaries—from Personnel

- 5** Honora R. Ediger, clinic nursing
Helen H. Johnson, purchasing
Mary Ann King, MSH nursing
Lois P. Tipton, social service
- 10** Dr. Clifford Allen, radiation therapy
Richard E. Beckett, physical plant
Evelyn C. Bryant, MSH nursing
Olga Corte-Real, OPC nursing
William Jackson, animal care
Dr. Russell L. Jolley, biochemistry
- 15** Thelma Danilson, CCD
John Edwards, MSH house-keeping
- 20** Leland Aldrich, research instrument service

Moving Up

- Linda Weissenbuehler, P.N. 1 to L.P.N. 2, hospital nursing
- Gabriella Vankatwyk, inst. wkr. 2 to R.N. 1, hospital nursing
- Marilyn S. Paul, lab tech 1 to lab tech 2, cardiology

Patricia A. Meade, clerk 2T to clerk 3T, patients' business office
David A. Jones, office trainee to clerk 2, physical therapy
James Rider, custodial worker to laborer 1, physical plant
Elizabeth Hubbard, ed. proj. aide 2 to secretary 3, public health
William E. Franke, patrolman 2 to store clerk, student activities

New Faculty Volunteer

- Dr. Lawrence W. Buonocore, clinical instructor in family practice
- Dr. Steven J. Carlisle, clinical instructor in psychiatry
- Dr. Roger W. Haskell, assistant clinical professor of public health and preventive medicine
- Dr. Aina J. Holt, clinical instructor in psychiatry
- Dr. LeRoy Lamoreaux, clinical instructor in anesthesiology
- Dr. Adel Matar, clinical instructor in cardiopulmonary surgery
- Dr. Wilhelm Sittner, assistant clinical professor of public health and preventive medicine
- Dr. Kathleen Weaver, clinical instructor in medicine
- Dr. Robert D. Vallion, clinical instructor in medicine

Campus bulletin board

The department of ob/gyn at Emory University School of Medicine is offering a number of summer employment opportunities for medical students. Listed below are some of these programs.

Seven externships in clinical ob/gyn are being offered at Grady Memorial Hospital in Atlanta to students who will have completed the junior year by June, 1972. Supervised experience will include labor and delivery, postpartum wards, gyn surgery, ob/gyn outpatient, voluntary interruption of pregnancy, family planning and gyn tumor services. Externs will participate in the full teaching program. The program begins June 10 and includes a \$300/month stipend, plus laundry.

A limited number of additional summer research opportunities for medical students are also available within the department of gyn/ob. Projects should be worked out with the appropriate faculty member and submitted to the Faculty Committee for Medical Student Research. Stipends vary from \$750 to \$1250 for the project. For more information on both programs contact: Dr. M. G. Freeman, department of gyn/ob, 69 Butler St., S.E., Atlanta, Georgia 30303.

Two externships in clinical ob/gyn are being offered at Crawford W. Long Memorial Hospital in Atlanta and two are being offered at the Columbus Medical Center, Columbus, Georgia. Students must have completed the junior year. Experience is offered in a broad range of clinical ob/gyn, including labor and delivery, gyn surgery, inpatient and outpatient care, conferences and teaching rounds. The stipend is \$350/month. For more information contact: Dr. John R. McCain, Crawford Long Memorial Hospital, 35 Linden Ave., N.E., Atlanta, Georgia 30308 or Dr. Micki Souma, department of ob/gyn, Columbus Medical Center, Columbus, Georgia 31902.

Northwest Medicine has opened its annual manuscript contest to encourage excellence in medical writing for medical students, interns and residents. Awards will be presented for the best article on any subject in the field of medicine received by July 1, 1972. Prizes include \$200 in cash, bronze plaques and a 24-volume set of the *Encyclopaedia Britannica*.

For more information on the form the manuscript should take, write to the Editor, *Northwest Medicine*, 500 Wall Street, Seattle, Washington 98121.

Fellowships and grants-in-aid are being awarded by The Dysautonomia Foundation for research on Riley-Day Syndrome. The fundamental defect may involve synthesis, storage, or release of acetylcholine or the trophic function of the nerve and the possible action of acetylcholine at sensory receptors. Research need not be restricted to cholinergic mechanisms. For more information write The Dysautonomia Foundation, Inc., 370 Lexington Ave., New York 10017.

Retirements

Ruth Collier

Ruth Collier retired April 14 after 15 years at UOMS in the department of clinical pathology. Cashier in the department's lab office for the last seven years, she also worked as a lab assistant when she first came to the Medical School.

A trip to Denver to visit sisters and a vacation to Canada are included in her immediate plans.

Recently retired also is Erik F. Eriksson, physical plant carpenter.





A valentine sent to Mrs. Pommarane this year included the signature of every member of the second-year class.

Registrar retires after 29 years

Caroline Pommarane retired April 1 after 29 years as registrar at the University of Oregon Medical School. During these years her warmth and understanding helped hundreds of students over the rough spots as they progressed through medical school.

The recollections of former students, now practicing physicians, reflect the feelings of many for this woman who was a friend to all.

"Her friendliness is what I remember most. She was always available to help students with their problems."—Dr. George Caspar, '61

"The outstanding thing about Mrs. Pommarane was her feeling for students—she knew everyone by name and was interested in each as an individual."—Dr. David Bristow, '53, chairman, UOMS department of medicine

"She was a mother to us all...a great lady. She had a personal interest in each student—when you were talking with her you were the most important person at the time. The School seemed to circulate around her. She's a great gal."—Dr. Gordon Grout, '54

"When you had a problem she was always there. You could count on her to help you or give direction to who could. Your problem never went unsolved. She was genuinely interested in students."—Dr. Albert Oyama, '53, president, UOMS Alumni Association

"Mrs. Pommarane had a marvelous memory for names and always had, or made time, for students. She always gave so unselfishly of her time and talents and was especially generous to the women medical students. Her house at the beach was always open to us."—Dr. Joanne Jene, '60

"She was one of the few friends the freshmen had."—Dr. Jack Battalia, '46

"She will always be remembered for her humanistic qualities. She was a mother surrogate for countless generations of medical students and had an indelible influence on many generations of doctors."—Dr. Clare Peterson, '43, UOMS professor of surgery

Plane crashes at UOMS

The article below was contributed by Dr. Ernest A. Meyer, UOMS associate professor of microbiology.

Nineteen years ago this month, an injured pilot parachuted from his crashing plane to the roof of the Veterans Administration Hospital on Marquam Hill in Portland.

W. R. Todd, professor in the University of Oregon Medical School biochemistry department, recalls that exceptionally clear and sunny May 25. The urge to get out in the sun bit him this day and he satisfied it by eating his lunch on the roof of Mackenzie Hall. (This practice is no longer permitted.)

At about 12:30 his attention was caught by four P-39 pursuit planes in formation, flying over the Medical School, heading north. The P-39, also known as the Bell Airacobra, was a familiar sight in Oregon skies while World War II was in progress. A number of the craft were stationed at the Portland Air Base from which they were dispatched on a variety of missions.

Professor Todd watched with casual interest as the four planes flew into a cloud, but was surprised to see only three planes emerge. Suddenly the fourth P-39 dropped out of the cloud in a gradually descending half circle and headed directly toward the western slope of Marquam Hill.



Loaded with fuel and ammunition, the plane sheared off the top of a small fir tree and slammed into the ground, exploding into a fire a mile south of the Veterans Administration Hospital. Another eyewitness reported the other three pursuit planes circled for five or 10 minutes, then flew off in the direction of the air field.

Witnessing the event, Professor Todd ran downstairs from his rooftop vantage point and telephoned the Hospital's switchboard operator, informing her that a parachutist had landed on the roof. Dr. J. R. Broun, V.A.'s chief surgeon in 1943, had also seen the pilot bail out. He ran up the Hospital stairs to the roof to get a better view of the parachutist's landing place. Dr. Broun couldn't have chosen a better spot. In a bizarre twist of fate the pilot landed hard on the Hospital roof, almost in the doctor's arms, and about 50 feet from the surgery department.

The unconscious pilot, twenty-year-old First Lieutenant D. M. Schultz of Ripon, Wisconsin, was promptly transported to V.A. surgery where his injuries were treated, having achieved

hospital admission by a route not used before or since. After receiving a hard blow on the head in landing, Lt. Schultz regained consciousness several hours later. A week after his landing, the fortunate pilot was sufficiently recovered to be transferred back to the Air Base Hospital.

News of the plane crash traveled quickly that sunny afternoon with curious medical students, faculty and local residents hastening to the site.

Professor Lyle Veazie was in her bacteriology office that noon. She remembers the lecture room door across the hall bursting open and the entire class of medical students running out and down the steps. From the window she observed a caravan of grossly overloaded cars, with white-coated students and faculty perched on fenders and bumpers, toiling up S.W. Gibbs Street toward Fairmount Boulevard and the plume of smoke.

The plane, which had been on a routine training mission, proved to be a rich source of booty. It had been loaded with live ammunition, including tracer bullets, many of which, although scattered far and wide by the impact, remained undetonated. Souvenir hunters triumphantly returned, loaded down with ammunition and various parts of the plane.

An enterprising student acquired the cockpit door which was soon to be recovered as it had a special compartment, not readily detectable, containing Government codes. The student who removed the door had a part-time job at Good Samaritan Hospital in Portland and had stored the door in a room there. A determined group of Government investigators traced the door to its resting place and were relieved to find the codes undiscovered.

The authorities responded promptly to the crash site and an Army board of inquiry was quickly named and arrived even before the plane's wreckage had cooled. At one p.m. police, firemen and sheriff's officers blocked roads leading to the scene. Soldiers from the air base threw a cordon around the smoldering mass of wreckage buried deep in the ground; other troops waited at the top of the steep trail relieving homeward-bound booty hunters of their souvenirs.

Now, many years later, the incident is all but forgotten. The cause of this mysterious crash, however, has never been revealed.

PHYSICIANS' CIRCUIT courses for May include *Drug Disposition: The Basis of Pharmacological Drug Interactions*, in Astoria on May 17; *Antibiotics and Infectious Diseases*, in Bozeman, Montana on May 23, Great Falls, Montana on May 24 and Missoula, Montana on May 25; *Coronary Artery Disease* in Coos Bay and Roseburg on May 30 and 31.

The nurses' course *Inhalation Therapy and Respiratory Disease* will be given in Corvallis on May 18.

Doernbecher guild donates funds

A pediatric radio-immunoassay laboratory is being established at the University of Oregon Medical School with funds donated to the pediatrics department this year by the Doernbecher Guild. A portion of the \$26,000 given by the Guild will be used to purchase a nuclear gamma counter, an instrument which allows sophisticated hormone and enzyme testing. The new facility, an expansion of the pediatric metabolic lab, is expected to be in full operation by this summer, according to Dr. Richard W. Olmsted, department chairman.

This year's donation is part of the Guild's ongoing support of Doernbecher Hospital, assistance which began almost a half a century ago, two years before the Hospital admitted its first patients.

The Doernbecher Memorial Hospital for Children was founded by action of the Board of Regents of the University of Oregon in 1923, and admitted the first patients in July, 1926. Funds for the first hospital were provided by the \$200,000 bequest of Frank S. Doernbecher and by contributions obtained by the Doernbecher Children's Hospital Guild.

The Guild was formed in 1924 "for the purpose of creating an interest in and encouraging the support of the children's hospital," and has been of important financial assistance to the Hospital ever since. In discussing the Hospital, a founder of the Guild stated its purpose: "To add to the sum of human knowledge in the science of the care and prevention of diseases of children through research and through the teaching of future doctors in the care of children." To help the Hospital serve this purpose to the fullest is the objective of the Guild today.

Although the Hospital is administered by the University of Oregon Medical School and basic support is provided by the State of Oregon, support for research, equipment and technical staff is supplied by the Guild. Through its Board of Directors and officers, the Guild maintains a close working relationship with the medical staff and the administration of the School. The latest developments in pediatric treatment, and the needs of the Hospital and staff are reviewed with them, and as it becomes necessary, the Guild provides funds for the newest in hospital and laboratory equipment, and for support of research in the diseases of children.

When the first patient entered the doors of Doernbecher Children's Hospital in 1926, members of the Doernbecher Guild had spent two years preparing the way for him. The building was finished and furnished through their efforts. From that day to this they have remained the best friends the Children's Hospital ever had. In the past few years, for example, they have provided among many other gifts, \$50,000 to equip the new Doernbecher Hospital on the 13th and 14th floors of the present Medical School Hospital. The Guild has also provided \$12,000 toward the endowment of a professorship and \$15,000 for spec-

ialized care and treatment. Consider what these invaluable aids have meant... \$11,000 for a stand-by emergency generator, \$13,000 for a photo-coagulator used in eye surgery, over \$8,000 for the famous Stubblefield Siamese twins, over \$10,000 for special nursing care for Johnny Steger, the little boy who survived burns covering 85 per cent of his body, and most recently, more than \$6,000 for an X-ray machine for infants.

In recent years emphasis has increased in funding of research activities, as attempts to conquer childhood diseases have become increasingly important. New activities, such as kidney transplants and research into infections in the mother which may result in mental retardation in the child, demonstrate the determination of the Doernbecher Hospital staff to find answers to previously insoluble problems.

The Doernbecher Children's Hospital Guild has reason to be proud of its history in the care and treatment of children for 45 years.

Dr. Frisch to leave

Dr. Arthur Frisch, professor and chairman of the department of microbiology, has resigned as department chairman effective July 17. He will be taking a two-year leave of absence during which time he will serve as Liaison Scientist with the U.S. Government Office of Naval Research in London.

To make recommendations for Dr. Frisch's successor as chairman of microbiology Dean Charles N. Holman has appointed a search committee headed by Dr. Tyra Hutchens, chairman of the department of clinical pathology. Committee members are Drs. Marcia Bilbao, professor of radiology (diagnosis); John Brookhart, chairman, physiology department; Kaye Fox, associate professor of pharmacology; Robert Koler, head, division of medical genetics; Russell Lawson, associate professor of urology and Michael Miller, associate professor of pediatrics.

Until a new chairman is named, Dr. Lyle Veazie will return from retirement on a part-time basis effective June 1 to serve as acting head of the department.

THE PORTLAND Center for Hearing and Speech is celebrating its 50th anniversary this month. A dinner was held at the Benson Hotel May 3 to celebrate the event and to honor Dr. David D. DeWeese, chairman of the UOMS department of otolaryngology, who served on the Center's board of directors for 25 years, 10 of them as president.



Student trial

Students from the University of Oregon Medical School and Northwestern School of Law held a mock trial for the first time on April 8. Scheduled as part of the "Law and Medicine" course offered at both schools and taught at UOMS by Dr. Harold Osterud, head of the department of public health and preventive medicine, the trial was based on an actual case. Judge Alan F. Davis, circuit court judge for Multnomah County, presided.

Four law students represented the defendant (a doctor) and the plaintiff (a young lady seeking settlement for emotional stress). Karen Ireland, five-year student, played the plaintiff who claimed she had been consulting a psychiatrist for over a year following a physical examination in the defendant's office by a student preceptor who she thought at the time to be an M.D. Key Stage, third year, was the defendant; Mike Olsen, third year, the student; Dan Thompson, third year, the "expert witness" for the defense; Jean McCusker, five-year student, witness for the plaintiff; and Marvin Benson, fourth year, psychiatrist.

Four other UOMS representatives were part of the six-member jury: Walter Lee, UOMS internal auditor; Jeannie Kiesling, wife of third-year student Vic Kiesling; Candy Thompson, wife of third-year student Dan Thompson; and Don Piper, fourth year.

The trial, unfortunately, was never completed. Due to an error in room scheduling the proceedings came to an abrupt halt midway through the defense. The original case, on which the trial was based, was settled out of court.

Speakers' Roster

A 1972 Medical School SPEAKERS' ROSTER is being sent to program chairmen of influential civic and fraternal organizations in the Portland area. Seventeen UOMS faculty members plus a panel of medical, nursing and allied health students have volunteered their time as a service to the community and will each be speaking three or four times during the year. The roster brochure is part of the public affairs office's ongoing speakers' bureau.

Leukemia research center announced

Establishment of the Edwin E. Osgood Memorial Center for Leukemia Research at the UOMS was announced this month by Dean Holman. The Center is named for the late Medical School faculty member who was one of the world's leading authorities on leukemia.

Initial funds for beginning the Center were provided by a \$45,000 grant to the UOMS Advancement Fund.

The Center, which will be a part of the School's division of hematology, is scheduled to encompass a broad program of laboratory research, patient care and teaching, according to Dr. Arthur J. Seaman, head of the division. A director for the new Center is expected to be appointed in the near future.

Dr. Osgood, who died in 1969, had been on the Medical School faculty for 48 years and had headed the divisions of experimental medicine and hematology for 20 of these. He was revered by hundreds of UOMS graduates as a teacher and by his patients as a compassionate and dedicated physician.

In 1936 when he was the only physician on the UOMS full-time faculty, Dr. Osgood established the first colony of short-term cultures of human marrow cells. In 1941 he initiated the treatment of chronic leukemias by titrated, regularly spaced, total-body-X-ray irradiation. In 1954 he established the first successful culture of cells from human leukemic blood.

During his career Dr. Osgood addressed major scientific meetings throughout the world on his research and discoveries in the field of leukemia and authored two books and some 200 medical manuscripts on that and related subjects.

Mrs. Osgood, when told of plans for the Center, expressed her appreciation. "There isn't anything that would have pleased 'Dwin' more," she said.

Contributions to the new Memorial may be made through the UOMS Advancement Fund.

NEWSMAKERS

Dr. Richard L. Dobson, UOMS professor of dermatology, is one of 11 distinguished physicians from throughout the nation selected by *Modern Medicine* as contributors to a special "Symposium on Dermatology" in the journal's April 17, 1972 issue.

Marla Clark, director of volunteer services at UOMS, was elected vice-chairman of the Directors of Volunteers in Hospitals section of the Association of Western Hospitals at the Association's recent meeting in Anaheim, California.

The Community Child Guidance Clinic has a new name: "The Carl V. Morrison Center for Youth and Family Service." The name honors Dr. Morrison, associate clinical professor of child psychiatry at the Medical School and director and psychiatrist at the Center since it began in 1947.

At a recent meeting of the board of directors of United Cerebral Palsy of Northwest Oregon, Dr. Richard Mathewson, associate professor of dentistry, was re-elected president of the board. Dr. George Cottrell, senior clinical instructor in orthopedics and Dr. L. Paul Rasmussen, professor of pediatrics, CCD, were also re-elected to the board of directors.

Dr. Ernest T. Livingstone, assistant clinical professor of medicine and vice-president of the UOMS Alumni Association, has been named by the American Medical Association's Board of Trustees to serve as a consultant to the American Dental Association's legislative council. This is the first time the ADA and AMA have exchanged representatives.

George I. Johnston, director of research instrument service, and assistant director Robert L. Morris, are instructors for a class in "Safe Use of Electrical Devices in Patient Care," sponsored by the Oregon Association of Hospitals, which is being presented at hospitals in Medford, Salem, LaGrande and Eugene over the next two months.

Panelists for the Portland League of Women Voters' "Population Stabilization" education symposium last month included Dr. Thomas S. Manaugh, UOMS instructor in medical psychology and John Kitzhaber, third-year medical student and past president of Zero Population Growth.

TV guest spots for March included appearances on channel 8's "Telescope" on the 1st by Lee Killam, director of MSH nursing service, who discussed nursing careers and on the 30th by Dr. Daniel Labby, professor of medicine, speaking on married men in middle life; channel 2's "Midday" with Dr. Laurel Case, head of the division of family practice, on the 6th discussing family practice; Dr. Robert Campbell, professor of pediatrics, guest on the 7th to talk about respiratory diseases in children; Dr. Paul Blachly, professor of psychiatry, explaining drug seduction on the 21st; and Dr. Stanley Jacob, associate professor of surgery, discussing DMSO research on the 29th. Dr. Jacob also appeared on channel 8's "Viewpoint" on the 28th. Other TV guests were Drs. George Robins, assistant clinical professor of medicine, William Fisher, assistant clinical professor of family practice, Willis Irvine, clinical instructor in family practice and immediate past president, UOMS Alumni Association, and Dale Reynolds, clinical instructor in family practice, who appeared on channel 8's "Northwest Notebook" on the 20th to discuss the care of welfare patients, and Dr. Stephen Seager, assistant professor of animal care, speaking on animal research on channel 6's "R.F.D." on the 18th.

Dr. Morton takes post

Dr. William E. Morton, professor of public health and preventive medicine, has been named acting head of the division of environmental medicine.

A graduate of the University of Washington Medical School, Dr. Morton received both his master's and doctorate in public health from the University of Michigan.

Before joining the UOMS faculty in 1967, he served as research epidemiologist for the Colorado Heart Association and as assistant clinical professor of preventive medicine at the University of Colorado Medical School.

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