

NUARY
1964



the

multnomah county
medical society

BULLETIN

*MCMS Opposes
Cigarette Smoking*

*Annual Dinner-Dance
Set for January 25*

New Commissioners Elected

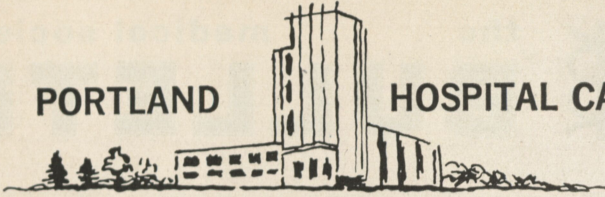
*8,218 Get Free
Diabetes Tests*

*Medicare Push
Appears Certain*

PORTLAND

HOSPITAL CALENDAR

February, 1964



1	GOOD SAMARITAN HOSPITAL CPC	8 a.m.	17	HOLLADAY PARK HOSPITAL Surgical department meeting	7:45 a.m.
	PROVIDENCE HOSPITAL CPC	8 a.m.		PHYSICIANS AND SURGEONS HOSPITAL Medical department meeting	8 a.m.
3	GRESHAM GENERAL HOSPITAL Staff meeting			EMANUEL HOSPITAL EENT service meeting	12 p.m.
	PHYSICIANS AND SURGEONS HOSPITAL EENT department meeting	8 a.m.		X-ray conference	3 p.m.
	EMANUEL HOSPITAL X-ray conference	3 p.m.		ST. VINCENT HOSPITAL General practice department mtg.	6:30 p.m.
	PROVIDENCE HOSPITAL Medical conference	7:30 p.m.	18	GOOD SAMARITAN HOSPITAL Pediatric section	7:45 a.m.
4	PROVIDENCE HOSPITAL Infection committee	7 a.m.		Neuro-pathology conference	8 a.m.
	GOOD SAMARITAN HOSPITAL Neuro-pathology conference	8 a.m.		Neuro-ophthalmology conference	5 p.m.
	Neuro-ophthalmology conference	5 p.m.		EMANUEL HOSPITAL Tumor clinic	12 p.m.
	OB section	7:30 p.m.		ST. VINCENT HOSPITAL Surgery department meeting	12 p.m.
	EMANUEL HOSPITAL Tumor clinic	12 p.m.		HOLLADAY PARK HOSPITAL Psychiatric department meeting	12:15 p.m.
	ST. VINCENT HOSPITAL Surgery department meeting	12 p.m.		PROVIDENCE HOSPITAL Tissue committee	7 p.m.
5	ST. VINCENT HOSPITAL Medical department meeting	8 a.m.		General staff meeting	8 p.m.
	EMANUEL HOSPITAL Fetal-neonatal death com. mtg.	8 a.m.	19	PORTLAND SANITARIUM Staff meeting	7:50 a.m.
	GOOD SAMARITAN HOSPITAL X-ray conference	4 p.m.		ST. VINCENT HOSPITAL Medical department meeting	8 a.m.
7	GOOD SAMARITAN HOSPITAL Tumor clinic	12:30 p.m.		EMANUEL HOSPITAL Fetal-neonatal death com. mtg.	8 a.m.
				GOOD SAMARITAN HOSPITAL EKG conference	8 a.m.
8	PROVIDENCE HOSPITAL Surgery conference			X-ray conference	4 p.m.
	GOOD SAMARITAN HOSPITAL Medical section	8 a.m.		Ophthalmology conference	5:30 p.m.
10	PHYSICIANS AND SURGEONS HOSPITAL Surgical department meeting	8 a.m.	21	PROVIDENCE HOSPITAL Ophthalmology conference	5:30 p.m.
	GOOD SAMARITAN HOSPITAL EEG conference	8:30 a.m.		GOOD SAMARITAN HOSPITAL Tumor clinic	12:30 p.m.
	EMANUEL HOSPITAL X-ray conference	3 p.m.	22	GOOD SAMARITAN HOSPITAL Surgical section	8 a.m.
	PROVIDENCE HOSPITAL Medical conference	7:30 p.m.		PROVIDENCE HOSPITAL Surgery conference	8 a.m.
11	PROVIDENCE HOSPITAL Executive committee	7 a.m.	24	HOLLADAY PARK HOSPITAL Medical department meeting	7:45 a.m.
	Record committee	7:30 p.m.		EMANUEL HOSPITAL Executive meeting	8 a.m.
	WOODLAND PARK HOSPITAL Monthly staff meeting	7:30 a.m.		GOOD SAMARITAN HOSPITAL EEG conference	8:30 a.m.
	EMANUEL HOSPITAL Pediatric service meeting	8:30 a.m.		Orthopedic fracture clinic	11:30 a.m.
	Tumor clinic	12 p.m.		EMANUEL HOSPITAL X-ray conference	3 p.m.
	ST. VINCENT HOSPITAL Surgery department meeting	12 noon		Anesthesiology department meeting	4:30 p.m.
	GOOD SAMARITAN HOSPITAL Neuro-ophthalmology conference	5 p.m.		Surgery service meeting	7 p.m.
12	PORTLAND SANITARIUM Tumor clinic	8 a.m.		ST. VINCENT HOSPITAL Ob-gyn department meeting	5 p.m.
	ST. VINCENT HOSPITAL Medical department meeting	8 a.m.	25	EMANUEL HOSPITAL GP service meeting	8 a.m.
	GOOD SAMARITAN HOSPITAL X-ray conference	4 p.m.		Tumor clinic	12 p.m.
	PROVIDENCE HOSPITAL Medical conference	7:30 p.m.		Ob-gyn service meeting	7:30 p.m.
13	PROVIDENCE HOSPITAL Surgery committee	7 a.m.		ST. VINCENT HOSPITAL Surgery department meeting	12 p.m.
	GOOD SAMARITAN HOSPITAL Neuro-radiology conference	4 p.m.		GOOD SAMARITAN HOSPITAL Neuro-ophthalmology conference	5 p.m.
14	GOOD SAMARITAN HOSPITAL Tumor clinic	12:30 p.m.	26	PORTLAND SANITARIUM Clinical pathological conference	7:50 a.m.
15	GOOD SAMARITAN HOSPITAL CPC	8 a.m.		ST. VINCENT HOSPITAL Medical department meeting	8 a.m.
	PROVIDENCE HOSPITAL CPC	8 a.m.		GOOD SAMARITAN HOSPITAL X-ray conference	4 p.m.
				EMANUEL HOSPITAL Medicine service meeting	7 p.m.
				EMANUEL HOSPITAL Orthopedic service meeting	8 a.m.
				GOOD SAMARITAN HOSPITAL Neuro-radiology conference	4 p.m.
				GOOD SAMARITAN HOSPITAL Tumor clinic	12:30 p.m.



Regained: *an interest in her surroundings, a feeling of well-being*

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SIDE EFFECTS: Insomnia, excitability and increased motor activity are infrequent and ordinarily mild.

CAUTIONS: Use with caution in patients hypersensitive to sympathomimetics or barbiturates and in coronary or cardiovascular disease or severe hypertension. Excessive use of the amphetamines by unstable individuals may result in a psychological dependence; in these rare instances withdrawal of medication is recommended. It is generally recognized that in pregnant patients all medications should be used cautiously, especially in the first trimester.

SUPPLIED: Tablets, in bottles of 100; 'Spansule' capsules No. 1 (1 dot on capsule) and No. 2 (2 dots on capsule), in bottles of 50.

Prescribing information Jan. 1963



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NEWS - VIEWS

President Johnson's position on financing health care for the aging was made abundantly clear in his 1964 "State of the Union" message. He said "... We must provide hospital insurance for our older citizens financed by every worker and his employer under Social Security..." and he demanded "a fair and final vote" in 1964.

* * *

If you pay your office employees \$1.50 per hour, and each takes two 15-minute coffee breaks a day, it's worth \$190.98 a year per employee in time paid away from the job.

* * *

A Portland doctor returned to his car to find a freshly crushed fender, and this note under his windshield wiper:

Dear Car Owner:

The people who saw me crush your fender with my car and are now watching me write this note, naturally think I'm leaving my name and address so you can contact me to pay the damages. But I'm not.

* * *

It has been estimated that the cost of medicine dispensed in the U.S. by quacks and charlatans exceeds \$1 billion a year.

* * *

Recent studies indicate that coffee tends to prolong the effects of alcohol, rather than to curb them.

* * *

Physicians' fees have increased by 105% since 1940, according to recent Bureau of Labor Statistics. But all items in the cost of living for the same period have increased 116%.

* * *

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Western Union's "personal opinion message service." Just ask for the special rate when you call in your message to Western Union. In Portland, the number is CA 8-8661.

* * *

In 1963, the health insurance business helped to protect 145 million Americans against the costs of their health care, reports the Health Insurance Institute.

* * *

H. L. Mencken on progress:

"Unquestionably, there is progress. The average American now pays out twice as much in taxes as he formerly got in wages."

* * *

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* * *

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— Adolf Hitler

* * *

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—The Story of Free Enterprise

* * *

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—Doug Baker, in the Oregon Journal



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150.00	(Semi-Annual)	148.50	130.50	121.50	113.25	106.00	84.25
200.00	(Semi-Annual)	196.50	172.50	158.90	149.25	139.60	110.65
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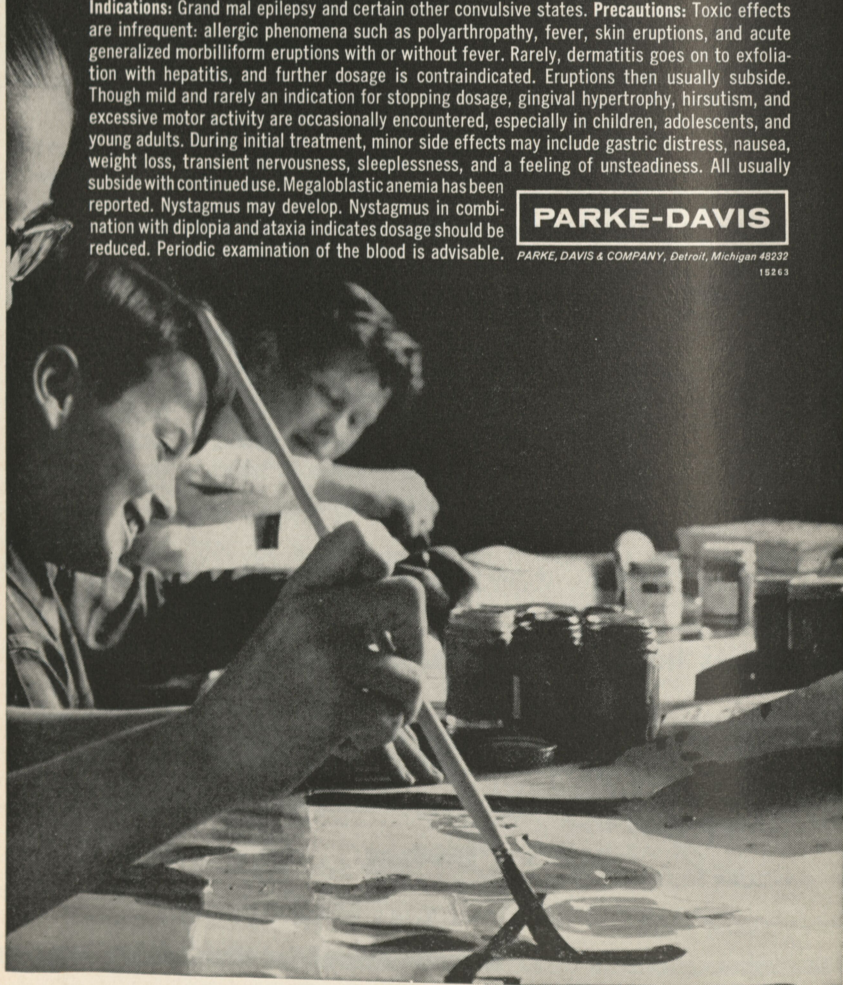
Effective in control of grand mal and psychomotor seizures, this agent enables the epileptic patient to lead a useful life.

Indications: Grand mal epilepsy and certain other convulsive states. **Precautions:** Toxic effects are infrequent: allergic phenomena such as polyarthropathy, fever, skin eruptions, and acute generalized morbilliform eruptions with or without fever. Rarely, dermatitis goes on to exfoliation with hepatitis, and further dosage is contraindicated. Eruptions then usually subside. Though mild and rarely an indication for stopping dosage, gingival hypertrophy, hirsutism, and excessive motor activity are occasionally encountered, especially in children, adolescents, and young adults. During initial treatment, minor side effects may include gastric distress, nausea, weight loss, transient nervousness, sleeplessness, and a feeling of unsteadiness. All usually subside with continued use. Megaloblastic anemia has been reported. Nystagmus may develop. Nystagmus in combination with diplopia and ataxia indicates dosage should be reduced. Periodic examination of the blood is advisable.

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January 25th

MCMS Annual Dinner-Dance Set for Columbia-Edgewater CC

Everything is ready for the Multnomah County Medical Society's annual dinner-dance, to be held Saturday evening, January 25, at Columbia-Edgewater Country Club.

Physicians, their wives and guests will start the evening with a no-host social hour at 7 p.m., followed by dinner at 8:30. There will be dancing to Jerry Van Hoomisen's orchestra until midnight.

Cost for the semi-formal affair is \$15 per couple. Reservations should be made with Society headquarters prior to Friday, January 24. Advance reservation cards were sent out earlier this month to all Society members. Tables will not be reserved.

Dr. and Mrs. Raymond W. Mangels and Dr. and Mrs. Jack Dowsett are in charge of arrangements for this year's event.

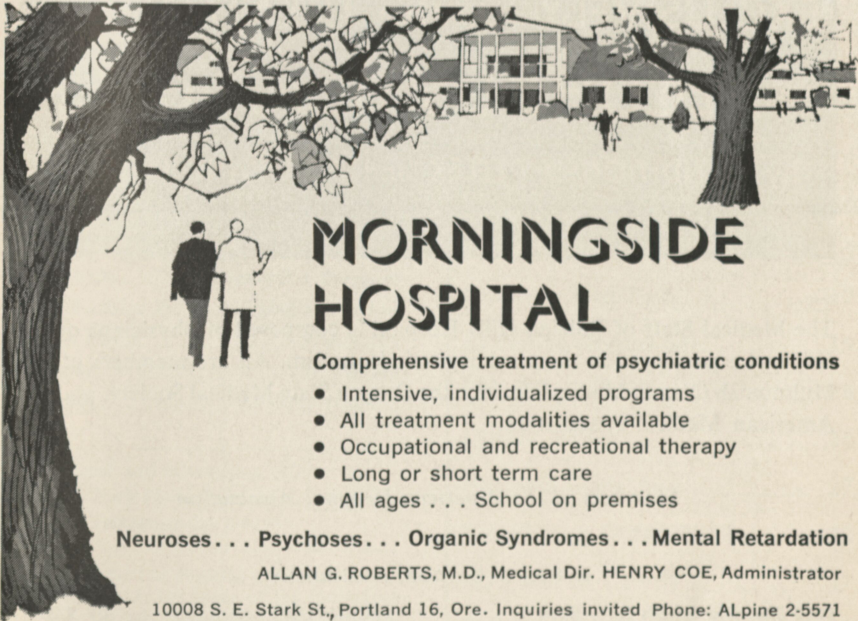
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THE BULLETIN
of the
MULTNOMAH COUNTY
MEDICAL SOCIETY



Multnomah County
Medical Society

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of the

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The Bulletin

MULTNOMAH COUNTY MEDICAL SOCIETY

Vol. XIX

JANUARY, 1964

No. 1

Especially for Young People

MCMS Takes Official Stand Opposing Cigarette Smoking

An official stand opposing cigarette smoking has been taken by the Multnomah County Medical Society. At its December meeting, the Board of Trustees unanimously adopted a resolution which cited the "overwhelming evidence" of a relationship between cigarette smoking and the increasing incidence of lung cancer.

"We are particularly concerned about the need to discourage cigarette smoking among teenagers," said President Raymond M. Reichle.

"The resolution stipulates that the Multnomah County Medical Society will direct its delegates to the Oregon Medical Association to promote a similar resolution at the April meeting of the House of Delegates in Eugene," Dr. Reichle added.

"We owe a vote of thanks to the Society's Public Health Commission and its 1963 chairman, Larry Lowell," said Dr. Reichle. It was that commission



Stand Taken Before PHS Report Issued

The position of the Multnomah County Medical Society was adopted nearly a month before the U.S. Public Health Service report on smoking was announced, on January 11.



which prepared the cigarette smoking resolution and recommended its adoption by the Board of Trustees.

Following is the text of the resolution:

WHEREAS, there is overwhelming evidence of a definite causative relationship between the smoking of cigarettes and the ever increasing incidence of lung cancer, and,

WHEREAS, there is also good evidence that illness and death from other common diseases such as emphysema and coronary artery heart disease is much higher in cigarette smokers than in other persons,

THEREFORE, BE IT RESOLVED, that the Multnomah County Medical Society goes on record as favoring the discouragement of cigarette smoking, especially in young people.

BE IT FURTHER RESOLVED, that this Society cooperate with other health agencies in disseminating information concerning the relationship of smoking to the causation of disease, and further, that the Delegates to the Oregon Medical Association be instructed to propose a resolution similar to this at the next meeting of the House of Delegates.

8,218 Persons Participate in Diabetes Detection Campaign

More than 8,000 persons participated in the recently-concluded diabetes detection campaign sponsored by the Multnomah County Medical Society and the Portland Retail Druggists' Association. Of the 8,218 persons who mailed "dreyapak" test strips to the Society for free screening by private pathologists, 426 were found to be positive, according to Robert L. Hare, chairman of the diabetes detection campaign.

"This is a considerable increase over last year's screening," said Dr. Hare. "A year ago, 274 suspected diabetics were discovered, from a total of 5,316 persons who submitted the test strips."

Nearly 200 local druggists made the test strips available, at no charge, along with instructions and two-way envelopes.

After the test strips were sorted, tested and the results recorded, each person was notified whether his test was positive or negative. Those with positive reports were requested to contact their family physician for more conclusive tests.

Special Praise

Dr. Hare had special praise for the four pathologists who "so generously made the testing facilities and talent available." They were Herbert H. Fokett, B. Marlowe Dittebrandt, Charles H. Manlove and Harold R. Eason.

"Without them, this diabetes detection campaign would not have been possible," emphasized Society President Raymond M. Reichle.

Dr. Hare also expressed appreciation to the many Portland area retail druggists who purchased and distributed the test strips.

"A special vote of thanks should go to Mr. Fred Meek, secretary of the Portland Retail Druggists Association, who did a marvelous job in seeing to it that the druggists got the test strips," said Dr. Hare.

Extra Effort

"I also want to thank those ladies from the Woman's Auxiliary and the Interns and Residents Auxiliary who helped sort and process the test strips. But most of all, we should thank Miss Peggy Cloyd, of the Society's headquarters staff, for the many, many nights she voluntarily took the test strips home to undertake the tedious job of matching thousands of them to thousands of return envelopes. If she hadn't put forth this extra effort, it would have taken months to record the results," Dr. Hare added.

Because of the tremendous and widespread response — one of the positive tests came in from Boise, Idaho — Dr. Hare said the Society undoubtedly would conduct a diabetes detection drive again next November, during national "Diabetes Detection Week."

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16 New Commissioners Elected



Chairmen Appointed For 1964 Terms

Chairmen of the Society's five Commissions for 1964 have been appointed by President Raymond M. Reichle. They are:

Laurence K. MacDaniels, Judicial and Business Commission; Warren E. Nielsen, Medical Service Commission; Joseph L. Miller, Jr., Professional Relations and Community Affairs; Clifford L. Peasley, Public Health Commission, and Lendon H. Smith, Public Relations and Public Policy Commission.

Members Invited to Attend Meetings

All members of the Society are invited to attend any meetings of the Board of Trustees or the five Commissions, reminds President Raymond M. Reichle.

The Board meets on the third Wednesday evening of each month for dinner at 7 p.m.

The Commissions meet on the following schedule for 12:15 luncheons:

Judicial and Business—First Monday of Month

Medical Service—Second Monday of Month

Professional Relations and Community Affairs—Second Tuesday of Month

Public Health—Third Monday of Month

Public Relations and Public Policy—Fourth Monday of Month

All meetings are held at Society headquarters.

Sixteen physicians were elected to fill vacancies on the Society's five Commissions at the December Board of Trustees meeting.

All but one of the new Commissioners will serve three-year terms.

Norman A. David was elected to serve the remaining two years of a term on the Judicial and Business Commission vacated by A. J. Kreft, who earlier last month was elected MCMS Secretary for 1964.

The 15 newly-elected Commissioners and their assignments are:

Judicial and Business Commission—Peter DeWitt, Herbert E. Griswold and Ivan I. Langley

Medical Service Commission—Herbert L. Armentrout, Quinten W. Cochran and J. Gordon Grout

Professional Relations and Community Affairs—H. Freeman Fitch, P. Carlyle Green and Gordon Myers

Public Health Commission—John W. Bussman, C. Stanley Lloyd, and Beatrice K. Rose

Public Relations and Public Policy Commission—Robert B. Johnson, Richard H. Kosterlitz and Wilbur L. Senders

The Society's five Commissions are each comprised of nine members, elected for staggered three-year terms by the Board of Trustees. In addition the President may appoint one or more Trustees to serve as liaison members on each Commission.

President Raymond M. Reichle made the following Trustee assignments to the Commissions for 1964:

Judicial and Business—George M. Robins

Medical Service—Ernest H. Price

Professional Relations and Community Affairs—William C. Scott

Public Health—Lawrence M. Lowell

Public Relations and Public Policy—George R. Satterwhite

Standing Committees Named

Appointment of physicians to serve on the Society's six standing committees were announced by President Raymond M. Reichle and approved by the Board of Trustees at its December meeting.

George M. Robins was named to serve as chairman of the Grievance Committee for the second year. Alfred C. Hutchinson was selected as chairman of the Supervisory Committee of the Oregon Physicians' Service for 1964.

Paul Campbell again will serve as chairman of the School Health Committee. Bernard Pirofsky remains as chairman of the Committee on Regional Blood Center.

A. J. Krefit, as Secretary of the Society for 1964, heads the Program Committee this year.

Kenneth C. Wilhelmi will be chairman of The Bulletin Editorial Board.

Following are the full committee appointments for 1964:

Grievance Committee

George M. Robins, chairman; Arthur W. Berg, Morris L. Bridgeman, Donald P. Dobson, Laurence M. Langston, David P. Paull, Harry E. Sprang, Marvin J. Urman, Edward E. Wayson and Joseph C. Mitchell. Special advisors will be George H. Lage and William M. Rosenbaum.

Supervisory Committee to the OPS

Alfred C. Hutchinson, chairman; G. Alan Fisher, Joseph E. Gambee, C. H. Hagmeier, Ivan I. Langley, James A. Mason, Willard L. Mathiesen, John W.

Partridge, J. Richard Raines, Charles H. Sparks, and Robert C. Turner.

School Health Committee

Paul Campbell, chairman; Charles Bradley, David B. Franck, Norman M. Janzer, L. Kimball Page, Robert G. Pittenger, Edgar M. Rector, Thomas E. Talbot, Gordon F. Wolfe. Special advisor is John F. Abele.

Committee on Regional Blood Center

Bernard Pirofsky, chairman; Stanley F. Bergquist, Terence H. Cochran, Warren C. Hunter, John A. Larrabee, E. Colton Meek, Albert A. Oyama, and C. W. Van Rooy.

Program Committee

A. J. Kroft, chairman; Quinten W. Cochran, William A. Fisher, Willis J. Irvine, and John R. Montague.

Bulletin Editorial Board

Kenneth C. Wilhelmi, chairman; G. Alan Fisher, Gerhard B. Haugen, Huldric Kammer, and Donald R. Laird.

Board of Censors Elected for 1964

J. Richard Raines, Louis O. Machlan, Jr., and F. Keith Markee will serve as the Society's Board of Censors for 1964. The three were elected by the Board of Trustees in December.

Doctors Raines and Machlan are holdover members. Dr. Markee succeeds Ernest T. Livingstone, who has completed three years service on the Board of Censors, most recently as its chairman.

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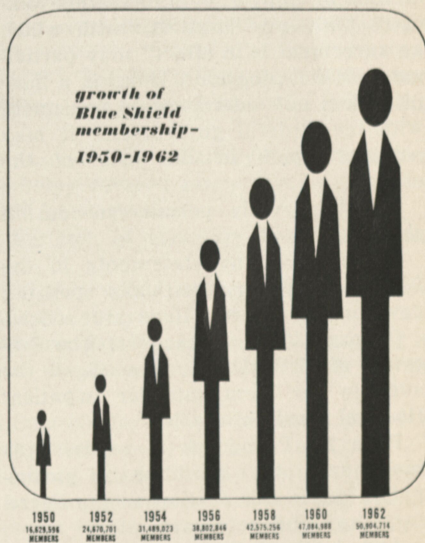
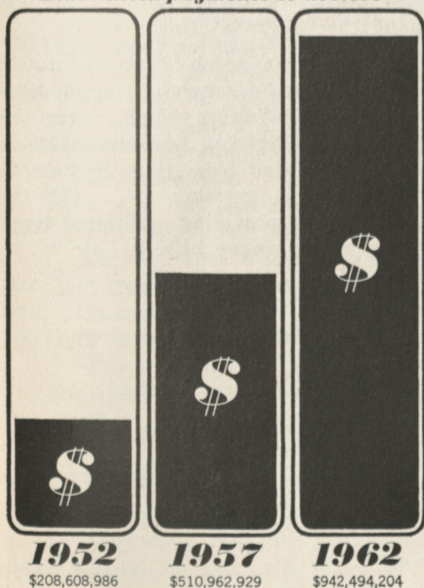
Nearly a billion dollars was paid to doctors in 1962 by the 78 Blue Shield Plans of North America for services rendered to the plans' subscribers. Over the last 10 years, Blue Shield payments for professional services have nearly quintupled. On behalf of their subscribers, Blue Shield pays doctors an average of \$2½ million a day for professional services. During 1962, physicians received over \$2,990,000 from OPS-Blue Shield.

In 1962, more than 50 million people were protected by Blue Shield in the

United States, Canada and Jamaica. The total number of members is constantly rising and currently there are more than 52,000,000 Blue Shield members. This figure represents more than one quarter of the population of the United States.

New York City, Washington, D. C., Boston, Cleveland and Detroit—as well as eight other large American cities—had more than 40% of their populations covered by Blue Shield protection. OPS-Blue Shield showed one of the highest percentage increases in members during 1962. When 1963 figures are available, another major increase is expected.

Blue Shield payments to doctors



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Freedom of Choice— Or Government Control?

(Editor's Note: The following article appeared in the January 2 issue of the Bulletin of the Los Angeles County Medical Association.)

A great deal has been written and said as to whether the patient, under the King-Anderson Bill, will have freedom of choice of physician, hospital, nursing home, etc. A great deal also has been written and said regarding Federal control.

The Bill immediately states that it will not authorize control, and that free choice by the patient is guaranteed. Yet in the paragraph following the prohibition of control, it immediately indicates that only hospitals **"with which an agreement is in effect"** may participate in the program. Thus, if a hospital does not enter into an agreement with the Federal government, it may not participate in the care of the elderly.

Will this really permit freedom of choice?

There are many statements in the Bill, itself, which specifically spell out government control. Here are a few:

On page 16, it states: **"(4) The Secretary of HEW shall . . . promulgate the average per diem rate for in-patient Hospital services, etc."**

Page 22, Paragraph 2, reads: **"(8) meets such other conditions of participation under this section as the Secretary may find necessary, etc."**

And, in the last paragraph on Page 40, it is stated that **"The Secretary shall periodically determine the amount which should be paid to each provider of services, etc."**

Then on Page 49, under the heading, **"Regulations,"** it says in part, the term **"regulations"** means **"regulations prescribed by the Secretary."**

Is this free choice? Or is it government control?

Also within the Bill, there is created a Hospital Insurance Benefits Advisory

Council for the purpose of advising the Secretary on matters of general policy. This Advisory Council is . . . **"appointed by the Secretary, without regard to civil service laws."** The same paragraph also says **"The Secretary shall, from time to time, appoint one of the members to serve as chairman."**

Former Representative Aime Forand, father of the medical care program through Social Security, has stated, **"If we can only break through and get our foot inside the door, then we can expand the program after that."**

The final paragraph of the Bill states, in part, **"The Secretary of Health, Education and Welfare shall carry on studies and develop recommendations to be submitted from time to time to the Congress relating to . . . (3) the feasibility of providing additional types of health insurance benefits, etc."**

It is a lie, a half-truth, or a fact, that there would be no government control and that the King-Anderson Bill provides freedom of choice?

King-Anderson Bill Copies Available

Copies of H.R. 3920, the King-Anderson Bill ("Hospital Insurance Act of 1963") are available at Society headquarters upon request.

Also available are several informative folders and pamphlets on the subject of health care for the aged, suitable for distribution to patients. There is no charge for this literature, and physicians may obtain copies in any desired quantity.

For further information, or sample copies, call or write the Multnomah County Medical Society, 2164 S.W. Park Place, Portland, CA 8-4175.

Letter-Writing Proves Effective In Communicating to Congressmen

One of the most effective means of combatting the socialistic King-Anderson bill (H.R. 3920) is to write your Congressman and Senators. A sincere and consistent number of letters from constituents can—and does—have an important effect on a lawmaker. This is true even on measures to which he or she already is pre-committed.

Keep these things in mind:

1. Be sincere, brief and courteous. A nasty letter carries no weight.
2. Give one or two reasons for your views. Avoid emotion. Use your own words.
3. Urge a "no" vote on the King-Anderson Bill, H.R. 3920.

Following are several reasons for opposing the King-Anderson Bill:

1. There is no demonstrated need for such legislation. Laws already exist to care for those who are in need of help.
2. Help should be given to those who need it, but not to those who are able to take care of their own needs.
3. It would seriously lower the quality of medical care.
4. It would result in the overcrowding and overutilization of hospitals by those who could be better cared for at home.
5. It would limit the patient's free choice of a hospital to only those which have written agreements with the Government, and to physicians who practice in these hospitals.
6. Most of our aged citizens are presently covered by voluntary health insurance and prepayment plans, and more are being covered every day.
7. The total cost of such a program would be staggering.
8. It would lead to the decline, if not the end, of voluntary health insurance programs.
9. It would produce a system which inevitably would be expanded into a full-fledged program of socialized medicine for everyone.
10. It would mean a further cut in take-home pay, because of a substantial increase of social security taxes—which would undoubtedly multiply as the program were expanded.
11. It offers no freedom of choice or alternative for those who would prefer to invest the money in private, more comprehensive health insurance.
12. The Social Security System is not insurance—as defined by the U.S. Supreme Court. It is a tax. Present taxpayers have no guarantee that they will receive benefits in the future, because the present income is, and will be, needed to pay current beneficiaries.

Letters are needed, not only from physicians, but also from their wives, friends and others who believe in preserving the American system of quality medical care and the ability of private insurance to handle the decreasing number of America's senior citizens who are not already covered.

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Dr. David Renamed To AMA Council

Norman A. David has been reappointed to the American Medical Association's Council on Drugs for 1964, it was announced last month by F. J. L. Blasingame, AMA executive vice president.

Two other members of the Multnomah County Medical Society also serve on key Councils of the AMA. They are Max H. Parrott who is on the Legislative Council, and Melvin W. Breese, who was elected last year to a five-year term on the Council on Medical Education.

Here Are the Addresses Why Not Write Today?

Oregon's Senators, and their addresses, are:

Senator Wayne Morse
United States Senate
Washington 25, D. C.
Senator Maurine Neuberger
United States Senate
Washington 25, D. C.

The Congresswoman for Oregon's 1st District (Multnomah County) is:

Hon. Edith Green
House of Representatives
Washington 25, D. C.
(Dear Mrs. Green:)

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Doctors' Exchange Hits New High in Telephone Calls

The Doctors' Official Telephone Exchange hit a new high in the volume of incoming calls last year, with a 10% increase over 1962.

There were 202,356 recorded calls processed in 1963, in contrast to 180,672 the previous year. Recorded calls are those for which a written record is made.

The Telephone Company, through its monitoring system, has revealed that the Exchange receives approximately five general calls for every call that must be recorded on paper by the operators. Based on these estimates, the Exchange handled more than 1,200,000 incoming calls during 1963.

Serves 550 Physicians

The Exchange was founded by the Multnomah County Medical Society more than a quarter of a century ago. Its volume in the past 10 years has doubled, and today it serves 550 physicians, 23 dentists and six special subscribers in the Portland area. Its largest special subscribers are the Multnomah County Medical Society and the Oregon Medical Association, which use the CA 8-4175 Exchange number.

The Exchange, which operates around the clock, seven days a week, is located in the basement of Society headquarters, at 2164 S. W. Park Place, Portland.

Low Rates

Its subscriber rates, by actual comparison with similar medical society-operated and commercial exchanges, are among the lowest in the country.

Physicians with "secretarial line" service (direct line) pay \$11 per month for their Exchange service. Rates for the "referral line" service are \$8.50 per month.

Twelve operators, some of whom work part-time shifts, plus a supervisor, part-time secretary and part-time book-

keeper are employed by the Exchange.

"Salaries alone will exceed \$50,000 in 1964," predicted Mr. Robert H. Elsner, general manager. Other expenses, such as telephone service, taxes, employee fringe benefits, rent, office supplies and accounting fees will account for another \$20,000 this year.

Membership on the Doctors' Official Telephone Exchange is open to all members of the Multnomah County Medical Society.

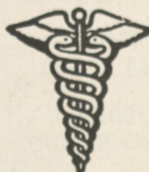
Massar, Surrurier, Nash 1964 Exchange Officers

J. Clifton Massar was re-elected president of the Medical Society Telephone Service, Inc., at the corporation's annual meeting of the Board of Directors this month.

Laurence R. Serrurier was re-elected vice-president, and George A. Nash is the new secretary-treasurer, succeeding William H. Thayer. Earlier, at the annual stockholders' meeting this month, Dr. Nash had been elected to a three-year term on the Board of Trustees.

The Medical Society Telephone Service, Inc., operates the Doctors' Official Telephone Exchange.

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Lois Lucas—Director
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Physicians Urged to 'Carry Prescription Pad'

Narcotic investigators and law enforcement officers recommend that physicians carry their prescription pad in their pocket, to deter the addict-thief from stealing the blanks.

The Multnomah County Medical Society has been warned that a problem exists in this area. An addict needs only a couple of seconds to steal a prescription pad from a physician's desk top. These blanks are worth money—signed or not—to narcotics users.

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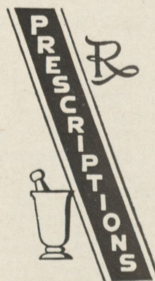
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'Winning Ways' PR Booklets Available

Copies of the booklet, "Winning Ways with Patients," were sent out last month to all member-physicians' offices by the Multnomah County Medical Society.

The 20-page booklet is a public relations aid for doctors' receptionists, secretaries and medical assistants. It is published by the American Medical Association, and offers a number of valuable tips and suggestions which will "make more friends for the doctor's aide, the doctor, and the medical profession as a whole."

Additional copies are available upon request from the Multnomah County Medical Society, 2164 S.W. Park Place, Portland. There is no charge for the informative booklet.



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Destroy Those Disposable Needles

Disposable needles and syringes are gaining in popularity. They prevent transmission of infection and relieve office personnel of sterilization chores.

But, throughout the country, they are also proving popular with narcotic addicts and experimenting juveniles. Law enforcement officers often find persons in possession of hypodermic syringes and needles which had been retrieved from trash containers adjacent to medical offices and buildings. In many instances the plastic, or disposable syringe-needle units are discarded without any attempt to destroy their usefulness. And many enterprising addicts have been known to weld on new needles when the original needle is broken off from the syringe, or is merely bent.

Every medical office should establish a mandatory routine to make disposable syringes and needles unusable before being discarded. Some heavy metal tool, such as a hammer or pliers, can accomplish this.

Discarding disposable needles and syringes without breaking them is an open invitation to the narcotic addict to visit your office or building trash container.

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LEAH WOLFE, C.R.N.A. Administrator

Physicians Urged to Watch for Emergency Medical ID Symbol

Physicians are urged to become familiar with the universal emergency medical identification symbol, devised last year by the American Medical Association. The person who displays it carries information which should be known to anyone helping him in event of an accident or serious illness.

The symbol means "Look for medical information that can protect life."

Offered freely by the AMA to manufacturers and distributors of emergency medical signal devices and the publishers of medical identification cards, the symbol is being used more and more. The AMA neither manufactures nor distributes signal devices.

Many signal devices of metal or plastic will bear the symbol on one side, with a few words of vital information on the other. Or the symbol alone may suggest that one needs to look elsewhere, in purse or pocket, for important information.



The star of life symbol (or the asterisk of reference), bearing the snake entwined staff of Aesculapius, may appear in any size or color. It is most likely to be found on the wrist, about the neck, or in some prominent location.

Recognizing it as the universal symbol of emergency medical identification will help locate information that may protect life in an emergency.



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NURSING HOMES

The following Homes have requested physician referral and meet the standards established for advertising in THE BULLETIN. All are under R.N. supervision and all invite inspection at any time by members of the Society.

Allison

CA 6-6341

Northwest Portland at 1111 N.W. 25th
Anabel T. Allison, President (12 yrs. exp.)
Intermediate Care Facility
20 beds, 12 employees

Hazelwood

AL 2-2427

Northeast Portland at 13007 N.E. Glisan
Glenn L. Allen, Administrator (9 yrs. exp.)
Intensive Nursing Care Facility
119 beds, 60 employees

Bide-A-Wee

656-1646

Gladstone, Ore., at 340 First
Frank and Dorothy Gilman, Owners (10 yrs. exp.)
General Convalescent Care
70 beds, 40 employees

McMinnville Convalescent Home

472-5012

McMinnville, Ore., at 421 S. Evans
Fred D. Stabler, Owner (17 yrs. exp.)
Accredited Skilled Care Facility
70 beds, 38 employees

Colonial Manor PR 4-8526

Southeast Portland at 6821 S.E. 112th
Mr. and Mrs. Paul G. Conroy, owners (9 yrs. exp.)
Specializing with Elderly Confused
56 beds, 30 employees
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Sandy Boulevard AT 8-5869

Hollywood District at 1954 N.E. 45th
Anabel T. Allison, President (12 yrs. exp.)
Intermediate Care Facility
28 beds, 13 employees

Columbia Manor AL 4-5535

Monta Villa District at 10135 S.E. Stark
Zena A. Ewing, Administrator (32 yrs. exp.)
Mr. and Mrs. Herman Wolfe, owners
General Convalescent Care
60 beds, 30 employees

Selby

PR 1-2335

Southeast near Holgate at 10435 S.E. Cora
Mr. and Mrs. Wm. V. Selby, Owners (15 yrs. exp.)
General Nursing Care, 1 floor modern bldg.
60 beds, 27 employees

Franklin

OL 6-7353

Gladstone, Ore., at 220 E. Hereford
Mr. and Mrs. C. L. Franklin, Owners (7 yrs. exp.)
Specializing in heavy bed care
50 beds, 27 employees

Wallway

AL 3-0707

Gateway Area at 9750 N.E. Glisan
Mr. and Mrs. O. G. Wallway, Owners (16 yrs. exp.)
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Physician's Datebook

February, 1964

MCMS JUDICIAL AND BUSINESS COMMISSION

February 3; Luncheon 12:15 p.m. Society Headquarters

PORTLAND ACADEMY OF PEDIATRICS

February 3; Social Hour 6 p.m., Dinner 7 p.m. Society Headquarters

MULTNOMAH COUNTY ASSN. OF MEDICAL ASSISTANTS

February 3; Training Session 7:30 p.m. Providence School of Nursing
"Anatomy and Physiology" (Also Meets February 10 and 24)

MCMS MEDICAL SERVICE COMMISSION

February 10; Luncheon 12:15 p.m. Society Headquarters

MCMS PROFESSIONAL RELATIONS AND COMMUNITY AFFAIRS COMMISSION

February 11; Luncheon 12:15 p.m. Society Headquarters

OREGON RADIOLOGICAL SOCIETY

February 12; Dinner 6:30 p.m. University Club

MCMS PUBLIC HEALTH COMMISSION

February 17; Luncheon 12:15 p.m. Society Headquarters

MULTNOMAH COUNTY ASSN. OF MEDICAL ASSISTANTS

February 17; Dinner 6 p.m. Timber Topper, Washington Hotel

OREGON SOCIETY OF INTERNAL MEDICINE

February 18; Social Hour 6:30 p.m., Dinner 7 p.m. Society Headquarters

MCMS PUBLIC RELATIONS AND PUBLIC POLICY COMMISSION

February 24; Luncheon 12:15 p.m. Society Headquarters

OREGON ACADEMY OF OPHTHALMOLOGY AND OTOLARYNGOLOGY

February 25; Dinner 6:30 p.m. Aero Club

PORTLAND SURGICAL SOCIETY

February 25; Social Hour 6:30 p.m., Dinner 7 p.m. University Club

MCMS 4TH ANNUAL OFFICER-COMMISSION CONFERENCE

February 28, 29 and March 1; Village Green, Cottage Grove

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- BELLET, SAMUEL—**Clinical disorders of the heart beat.** 2d ed. Philadelphia, Lea & Febiger, 1963.
- BICKERSTAFF, E. R. — **Neurological examination in clinical practice.** Philadelphia, Davis, 1963.
- BLAND, J. H.—**Clinical metabolism of body water and electrolytes.** Philadelphia, Saunders, 1963.
- BOURNE, G. H.—**Medical and biological problems of space flight.** New York, Academic Press, 1963.
- BOURNE, G. H. **Muscular dystrophy in man and animals.** New York, Hafner, 1963.
- BRANWOOD, A. W.—**Modern concepts of the pathogenesis of coronary atherosclerosis.** Edinburgh, Livingstone, 1963.
- BRYAN, W. J.—**Legal aspects of hypnosis.** Springfield, Ill., Thomas, 1962.
- CIBA FOUNDATION STUDY GROUP No. 14—**Intestinal biopsy.** Boston, Little, Brown, 1962.
- CUSUMANO, C. L. — **Malpractice law dissected for quick grasping.** New York, Medicine-Law Press, 1962.
- DACSO, M. M.—**Restorative medicine in geriatrics.** Springfield, Ill., Thomas, 1963.
- ECKMANN, LEO — **Tetanus, prophylaxis and therapy.** New York, Grune & Stratton, 1963.
- FLATT, A. D.—**The care of minor hand injuries.** 2d ed. St. Louis, Mosby, 1963.
- FREEMAN, H. E.—**The mental patient comes home.** New York, Wiley, 1963.
- KOONTZ, A. R. — **Hernia.** New York, Appleton-Century-Crofts, 1963.
- KUPPERMAN, H. S.—**Human endocrinology.** Philadelphia, Davis, 1963.
- LYMAN, F. L. — **Phenylketonuria.** Springfield, Ill., Thomas, 1963.
- NEUSTADT, D. H. — **Chemistry and therapy of collagen diseases.** Springfield, Ill., Thomas, 1963.
- OSGOOD, C. E. — **Approaches to the study of aphasia.** Urbana, Univ. of Illinois, 1963.
- SERVIT, ZDENEK — **Reflex mechanisms in the genesis of epilepsy.** Amsterdam, Elsevier, 1963.
- SHERMAN, A. I.—**Cancer of the female reproductive organs.** St. Louis, Mosby, 1963.
- WIENER, A. S.—**An Rh-Hr syllabus.** 2d ed. New York, Grune & Stratton, 1963.
- WINTER, C. C. — **Radioisotope renography.** Baltimore, Williams and Wilkins, 1963.
- WISCONSIN UNIVERSITY — **The abdominal compression reaction.** Baltimore, Williams and Wilkins, 1963.
- ZWEIG, GUNTER—**Analytical methods for pesticides, plant growth regulators, and food additives.** New York, Academic Press, 1963.

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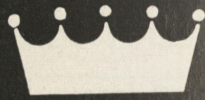
In the recently-conducted national examination conducted by the American Association of Medical Assistants, only one candidate out of 107 qualified for certificates in both the clinical and administrative categories.

That high honor went to a Portlander!

Bernice M. Beutz has been recommended as a Certified Medical Assistant, Administrative and Clerical.

In the rigid examinations, given last fall, only 9 received the administrative certificate, and 16 earned clinical certificates.

Miss Beutz is employed by Portland physician Ralph M. Ray. She was the first president of the Multnomah County Association of Medical Assistants when the group was organized in 1958.



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Hospital Service Charges Increase

The average daily service charge for a hospital bed in the United States increased by one dollar last year, rising from \$18.40 to \$19.40 from the previous year, the American Hospital Association has reported in a survey.

A wide range in charges in various parts of the country and between metropolitan and nonmetropolitan areas was indicated in the survey. For instance, the charge for a bed in a two-bed hospital room was \$10.60 in rural Mississippi and \$29.00 in the San Francisco-Oakland area.

The wide range of charges reflects to a large extent fluctuation in labor costs, differences in complexity of service, and variation in items included in the daily service charge.

The daily service charge is defined as the charge made by the hospital for all commonly used services and supplies provided in relatively equal quantities to all patients. It includes room accommodation, meals, routine nursing care, and minor medical and surgical supplies. It does not include operating room, X-ray, laboratory, or special drugs and supplies.

Hospitals may have significant variations in the number and kinds of services included in the daily service charge. They make additional itemized charges for special services provided to meet each patient's individual need.

Larger hospitals generally have higher charges because they usually are located in metropolitan areas where labor costs are highest and they normally maintain more equipment and facilities.

Rates cited in the survey were those charged by 4,953 short-term nonfederal hospitals registered by the AHA. These hospitals admit patients with all types of illnesses or injuries.

Hospitals included in the survey contained 577,158 beds, regularly assigned for patients requiring the usual hospital

services. The survey does not show statistics for maternity homes, hospital units of institutions, industrial, welfare, or children's hospitals, or for special care beds in general hospitals.

Two-bed hospital rooms accounted for nearly 48% of the total beds available. Single-bed units accounted for 21.5% of the beds, four-bed rooms for 14.4%, five-bed for 2.4%, and six or more bed units for 7.9%. Three-bed rooms accounted for 6.1%, a slight increase over the previous year.

The charges are established according to the number of beds in a room—the more beds, the less floor area and maintenance required for each bed. The national average charge for a single-bed was \$22.00 in 1962. The charge for a bed in a two-bed unit averaged \$19.30; three-bed, \$18.10; four-bed, \$17.80; and five or more, \$17.50.

States in the Pacific Coast area averaged the highest charges for beds, with a bed in a two-bed room costing \$26.50. New England was second with an average rate of \$24.20.

Here are the average service charges for care in a two-bed room in hospitals located in 20 of the top metropolitan areas in the United States:

New York, \$26.90; Chicago, \$23.20; Los Angeles-Long Beach, \$28.90; Philadelphia, \$20.10; Detroit, \$23.40; Baltimore, \$22.00; Houston, \$14.70; Cleveland, \$29.90; Washington, D. C., \$20.70; St. Louis, \$18.70; Milwaukee, \$22.90; San Francisco-Oakland, \$29.00; Boston, \$27.60; Dallas, \$16.40; New Orleans, \$16.30; Pittsburgh, \$21.90; Miami, \$17.70; Minneapolis-St. Paul, \$26.30; Seattle, \$29.20; and San Diego, \$26.60.

In addition to Mississippi's \$10.60 rate, other average charges in nonmetropolitan areas of various states include: New Hampshire, \$20.70; New Jersey, \$21.30; Indiana, \$16.00; Kansas, \$13.20; North Dakota, \$15.80; Missouri, \$13.30; Colorado, \$14.80; Texas, \$11.50; Georgia, \$10.90; and Oregon, \$21.00.

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Long Step . . . Endless Road

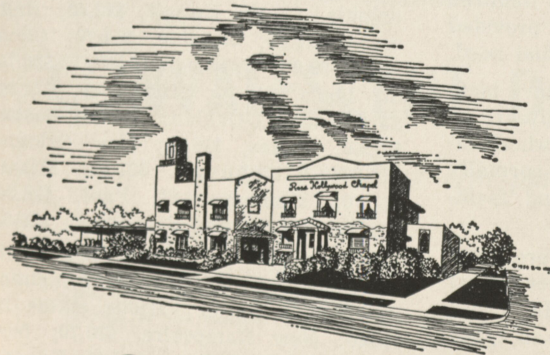
"The King-Anderson plan is a long step in a long and probably endless road. While piously stating that control of hospitals and doctors is not involved, the plan contains elaborate provisions for supervision and for making of specifications by the Secretary of HEW. If this does not involve control, we may say that Bismarck's hand was feeble, that a Marine drill sergeant has no control or authority over recruits."

—Raymond Moley

(who served as adviser on public policies to Franklin D. Roosevelt, 1932-35)

Senate Attempt on Fedicare Predicted

Reports from Washington, D. C., indicate that another attempt might be made to attach a health care program under Social Security in the Senate to a previously-passed House bill. Although all tax revenue measures are required to originate in the House, a maneuver in the Senate might be forthcoming.



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714 N.W. GLISAN PORTLAND, 9

Dr. Littlehales Named

Charles T. Littlehales has been appointed medical director of Standard Insurance Company, it was announced by Mr. Garrett E. Cannon, president.

Dr. Littlehales succeeds Ernest L. Boylen, who is retiring as medical director, but will continue his private practice in Portland. Cannon also announced the appointment of Wayne R. Rogers as alternate medical director.

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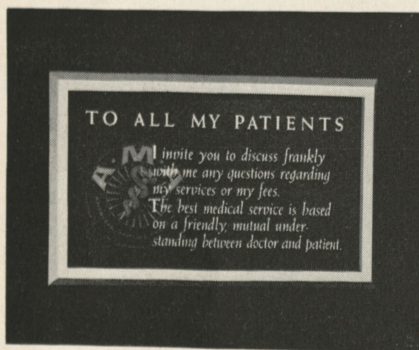
Phone: OLive 6-2901

Hagmeier, Dobson Serve

As a member of the American Society of Anesthesiologists' House of Delegates, Clarence H. Hagmeier of Portland attended the group's annual business and scientific meetings, November 2-6, in Chicago. Donald P. Dodson, also of Portland served as an alternate delegate.

Fee Plaques Available For Physicians' Offices

New "To All My Patients" plaques are now available for physicians' offices from the Multnomah County Medical Society at \$1.25 each. Much easier to read than the previous plaques, the new ones come with an attractive frame and the printing is white on a dark background. The inscription reads:



(Please use order form below)

Don't Use 'X-33 Water Repellent' Warns FDA

The Food and Drug Administration has warned against use of "X-33 Water Repellent," an extremely flammable masonry water proofer. FDA Commissioner George P. Larrick urged consumers who have purchased the product to return it unopened to their dealers immediately because of the extreme risk of flash fires and explosions.

Mr. Larrick also warned against trying to destroy or dispose of the product without first consulting the local fire department.

The Commissioner said that the X-33 product as manufactured up until about two months ago has a flash point (point of ignition) at a temperature below -40 degrees F. The product manufactured since then has been changed and has a flash point of 73 degrees F.

However, Mr. Larrick said, since the labels on the cans do not indicate which product is which.

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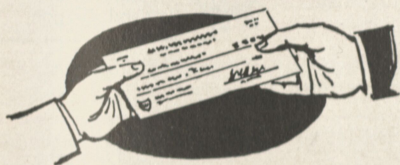
Enclosed is my check for \$1.25. Please send me a
"To All My Patients" fee plaque.

Name (please print) _____

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City and State _____

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For the First Time: No Polio in County!

For the first time on record, there were no cases of polio in Multnomah County last year.

This is quite a contrast to 1959, when 73 cases and three deaths were recorded here. In 1955, there were 110 cases and one death in the county. Ten years ago, in 1953, 99 cases and two deaths were recorded.

The County's freedom from the once-dreadedcrippler is attributed to the Salk and Sabin immunization programs. The mass oral immunization here, co-sponsored by the Multnomah County Medical Society in 1962, was a major factor in the number of polio cases declining to only two that year.

Dr. Hansen Elected

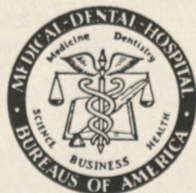
Robert M. Hansen of Portland last month was elected first vice-president of the American Rhinologic Society.

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CLASSIFIED ADS

MEDICAL ASSISTANTS

RECEPTIONIST-BOOKKEEPER position desired by mature woman with 9 years banking experience. East Multnomah County preferred. Mrs. Lois Dunkin, Corbett. FR 5-2334.

WOMAN WITH 22 YEARS' experience in medical offices wishes temporary employment as office helper. Experience in billing, filing, dictation, reception of patients, etc. MI 4-0549. Miss Wilma Tuttle.

OFFICE SPACE

TWO MODERN SUITES for lease in building now occupied by internist and 2 dentists. Lynn Park Medical Dental Bldg. at S.E. Powell and 127th. Ample parking. Inquire about rental plan. Call G. H. Fraser or W. W. Wyse, CA 8-8545, CH 4-7858, PR 1-2030.

GENERAL SURGEON has office space. Would like to share. Albert M. Lewis, M.D. 222-1703.

WELL-ESTABLISHED medical office adjacent to U.S. Post Office in fast-growing area 9 miles south of Portland in North Clackamas County. Approx. 1,100 square feet. Well-planned, like new, 3 examination rooms, 1 x-ray room, darkroom, consultation room, waiting and reception room. For information, write Frank Lee, P.O. Box 196, Oak Grove, Oregon, or call OL 4-4441.

PRACTICE OPPORTUNITIES

SWEET HOME, OREGON: General practice, immediately available due to death of physician; 80% insurance claims; excellent practice; fully-equipped office. Terms flexible. Charles O. Porter, 858 Pearl Street, Eugene, Oregon. Telephone 342-1218.

PRACTICE FOR SALE: Southwest Washington. For a GP or OB. Furnishings and equipment for sale in new, rented office building. Former doctor practiced in locality for 30 years. Draws from wide range of possibilities for expansion. Contact widow of former owner. Box 458, Castle Rock, Washington.

EMPLOYMENT WANTED—MALE

PRE-MED University sophomore with 3 summers' full-time work experience desires summer employment this year. Available June 7 to September 1. CA 7-2832.

MEDICAL PHOTOGRAPHY

MEDICAL-SURGICAL movie photography. CA 7-7087.