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**Staff Meeting Bulletin
Hospitals of the » » »
University of Minnesota**



**Hospitals Report
1944-45 - 1945-46**

STAFF MEETING BULLETIN
HOSPITALS OF THE . . .
UNIVERSITY OF MINNESOTA

Volume XVIII

Friday, October 11, 1946

Number 2

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William A. O'Brien, M.D.

II.

UNIVERSITY OF MINNESOTA MEDICAL SCHOOL

CALENDAR OF EVENTS

October 12,- October 18, 1946

No. 128Saturday, October 12

- 7:45 - 8:50 Orthopedics Conference; Wallace H. Cole and Staff; Station 21, U.H.
- 9:00 - 9:50 Surgery-Roentgenology Conference; O. H. Wangensteen, L. G. Rigler, and Staff; Todd Amphitheater, U.H.
- 9:00 - 9:50 Medicine Case Presentation; C. J. Watson and Staff; M-515 U.H.
- 10:00 - 12:00 Medicine Ward Rounds; C. J. Watson and Staff; E-221 U.H.
- 10:00 - 12:50 Obstetrics and Gynecology Grand Rounds; J. L. McKelvey and Staff; Station 44, U.H.
- 11:00 Anatomy Seminar; Hypertrophic amphophiles in the anterior lobe of the human hypophysis; A. T. Rasmussen; and Blood vessels of human stellate ganglion; M. A. Schadewald; 226 I.A.

Monday, October 14

- 9:00 - 9:50 Roentgenology-Medicine Conference; L. G. Rigler, C. J. Watson and Staff; Todd Amphitheater, U.H.
- 9:00 - 10:50 Obstetrics and Gynecology Conference; J. L. McKelvey and Staff; Interns Quarters, U.H.
- 12:15 - 1:15 Obstetrics and Gynecology Journal Club; M-435 U.H.
- 12:30 - 1:20 Pathology Seminar; Nesothelioma of the Pleura; Dr. Jack Williams; 104 I.A.
- 12:00 - 1:00 Physiology Seminar; Some Recent Work on Membranes, Part I; Dr. Karl Sollner; 214 M.H.

Tuesday, October 15

- 9:00 - 9:50 Roentgenology-Pediatrics Conference; L. G. Rigler, I. McQuarrie and Staff; Eustis Amphitheater, U.H.
- 12:30 - 1:20 Pathology Conference; Autopsies; Pathology Staff; 102 I.A.
- 2:00 - 3:00 Dermatology and Syphilology; H. E. Michelson and Staff; Veterans' Hospital Bldg. III.
- 3:15 - 4:15 Gynecology Chart Conference; J. L. McKelvey and Staff; Station 54, U.H.
- 3:45 - 5:00 Pediatric Staff Rounds; I. McQuarrie and Staff; W-205 U.H.

- 4:00 - 4:50 Surgery-Physiology Conference; Surgical Treatment in Certain Cardiac Conditions; Drs. Clarence Dennis, Richard Varco, and John Paine; Eustis Amphitheater.
- 5:00 - 5:50 Roentgenology Diagnosis Conference; Drs. Donald Peterson and Oscar Lipschultz; M-515 U.H.

Wednesday, October 16

- 8:00 - 8:50 Surgery Journal Club; O. H. Wangensteen and Staff; M-515 U.H.
- 9:00 - 10:50 Neuropsychiatry Seminar; Staff; Station 60 Lounge; U.H.
- 11:00 - 11:50 Pathology-Medicine-Surgery Conference; Mitral stenosis of the right auricular thrombus; and cerebral and splenic infarcts; E. T. Bell, C. J. Watson, O. H. Wangensteen and Staff; Todd Amphitheater, U.H.
- 12:00 - 1:00 Physiological Chemistry Journal Club; Staff; 116 M.H.
- 4:00 - 6:00 Medicine and Pediatrics Infectious Disease Rounds, W-205 U.H.

Thursday, October 17

- 9:00 - 9:50 Medicine Case Presentation; C. J. Watson and Staff; Todd Amphitheater, U.H.
- 10:00 - 12:00 Medicine Ward Rounds; C. J. Watson and Staff; E-221, U.H.
- 12:15 - 1:15 Pediatrics Seminar; Irvine McQuarrie and Staff; Todd Amphitheater, U.H.
- 12:00 - 1:00 Physiological Chemistry; Dr. David Glick; 129 M.H.
- 4:30 - 5:20 Ophthalmology Ward Rounds; Erling Hansen and Staff; E-534, U.H.
- 4:30 - 5:20 Bacteriology Seminar; 214 M.H.
- 5:00 - 5:50 Roentgenology Seminar; Radiological Institutions in Sweden; Dr. W. K. Stenstrom; M-515.

Friday, October 18

- 9:00 - 9:50 Medicine Grand Rounds; C. J. Watson and Staff; Todd Amphitheater, U.H.
- 9:00 - 9:50 Pediatric Grand Rounds; I. McQuarrie and Staff; Eustis Amphitheater.
- 10:00 - 11:50 Medicine Ward Rounds; C. J. Watson and Staff; E-221 U.H.
- 10:30 - 12:20 Otolaryngology Case Studies; L. R. Boies and Staff; Out-Patient Otolaryngology Department; U.H.
- 11:30 - 1:00 University of Minnesota Hospitals General Staff Meeting; Pilonidal Cyst; William Bernstein; New Powell Hall Amphitheater.
- 1:00 - 2:00 Dermatology and Syphilology; Presentation of Selected Cases of the Week; H. E. Michelson and Staff; W-312 U.H.
- 1:30 - 2:20 Roentgenology-Neurosurgery Conference; H. O. Peterson, W. T. Peyton, and Staff; Todd Amphitheater, U.H.

II. HOSPITALS REPORT -- 1944-45 -
1945-46

UNIVERSITY OF MINNESOTA HOSPITALS

R. M. Amberg
Superintendent

INTRODUCTION

The University of Minnesota Hospitals was established to furnish a means for the University of Minnesota to train medical students in clinical medicine. Training is given in both the Out-Patient Department and Hospitals under the direct supervision and guidance of a competent staff made up of full time and part time physicians. The staff is responsible to the State through the University for both the instruction of the students and the care of the patients. This arrangement has proved satisfactory, not only in the training of medical students, but also as an economical means for the State to care for many of its indigent sick.

It is required that each patient be referred for admission to the Out-Patient Department or the Hospitals by his family physician or by a physician in his local community. This rule avoids the criticism that the Hospitals or its clinics are taking patients away from private practitioners.

Patients are classified according to their ability to pay as County, Per Diem, Teaching and Research, Sixty Fund, Eustis or Private. Except for the private patients there is no distinction made between the various classes in the treatment or privileges afforded.

County patients are those who are totally unable to pay. Their expenses are shared equally by their county and the state. When applying for either out-patient or hospital care, these patients must present county papers filled in by both their physician and their county commissioner (or his representative).

Per Diem patients are those who cannot afford to pay for the services of both a private physician and a private hospital. When applying for either out-patient or hospital care, these patients must present

a special form filled in by themselves and their family physicians. They are required to pay their clinic or hospital expenses only, no charge being made for the professional services of the staff. From the standpoint of money received by the Hospitals, there is no difference between a county patient and a per diem patient; consequently, the services and privileges tendered both are identical.

Teaching and Research patients are primarily destitute unmarried obstetrical patients who are unable to avail themselves of county papers.

The Sixty Fund is a special grant from the State Legislature which is used to hospitalize indigent psychiatric patients for treatment, teaching and research purposes.

The Eustis Fund was set up by William Henry Eustis to care for indigent children under 16 years of age.

Private patients, limited in number, are admitted as a convenience to the senior staff. They are usually referred cases from other doctors in the state. They are afforded the same treatment and privileges as are private patients in any private hospital..

Student Health Service patients are not to be considered as being Hospitals' patients, even though a Hospitals' intern is assigned to that service. The Student Health Service has its quarters in the University Hospitals, but it is not a part of either the University Hospitals or the Medical School. It is a service institution maintained by the University with a director, staff and budget of its own.

IN-PATIENT DEPARTMENT

The number of patients admitted for the year 1944-45 was 8,251 and for the year 1945-46, 9,220--an increase of 969. This increase in the number of admissions was due principally to the increase in Health Service patients from 1,055 to 1,547 and in County patients from 3,101 to 3,300. The total number of days of hospital treatment aggregated

136,858 for 1944-45 and 142,473 for 1945-46. During 1945-46 the largest number of hospital days service in the history of the Hospitals was given. The average number of days per patient stay in the hospital was 16.6 in 1944-45 and in 1945-46, 15.4 days--a drop of 1.2 days average length of stay per patient. Deaths for the past year numbered 421 as compared with 394 for the year 1944-45. This is a mortality percentage of 4.5 for the year 1945-46 as against 4.7 for the year 1944-45 or a decrease of .2% in patient mortality. Post mortems for 1944-45 numbered 295, an average of 75% of deaths, and for 1945-46 the number was 311, an average of 74% of deaths. The daily average number of patients was 375 in 1944-45 and 390 in 1945-46. Surgical operations performed during the year 1944-45 aggregated 5,304 and during 1945-46, 5,695--an increase of 391.

OUT-PATIENT DEPARTMENT

During the year the Out-Patient Department showed an increase in the number of services rendered. New Patient visits in 1944-45 were 15,061 and in 1945-46, 19,572. Total Patient visits for 1944-45 were 69,189 and for 1945-46, 74,110. This increase was due to the discontinuation of gas rationing after V-J Day, and since that time the Out-Patient Department attendance has been considerably increased.

GENERAL REMARKS

The In-Patient service had the largest number of hospital days care in the Hospitals' history, and the Out-Patient Department had an increase of approximately 5,000 visits over the previous year.

The Psychopathic Department of the Hospitals admitted 321 patients during the year 1945-46 as against 260 patients admitted the previous year. The patients in the Psychopathic Hospital used 10,013 days of care during the past year and 9,699 patient days during the previous year. This was the greatest year of performance for the Psychopathic Department having treated more patients and given more patient day care than during any time in its history.

The waiting list of the Hospitals is now at the lowest peak in recent history, there being only 105 patients on the waiting list at this date.

In the Out-Patient Department the cost per patient visit was \$2.77 in 1944-45 and \$2.85 in 1945-46, an increase of 8¢ per patient visit. The cost of operating the In-Patient Department was \$7.90 per hospital day in 1944-45 and \$9.49 in 1945-46 or an increase of \$1.59 per patient day. Adjustments in salaries and wages of all personnel and the increased cost of supplies and expense account for this great increase in the cost per hospital day.

The X-Ray Department also had its greatest year of service. 28,184 services are reported for the year 1945-46 as against 24,205 for the previous year.

The Deep X-Ray Therapy Department reached an all time high for its services during 1945-46, giving 9,140 treatments for that year and 8,648 for the previous year. The superficial x-ray therapy treatments remained at an almost constant figure--2,201 treatments given during 1945-46 as against 2,379 during the previous year.

An increase in patient load on the laboratory services also was shown. The Hospital Laboratory, including Main, Chemistry, Clerks, Blood Bank, Bacteriology, Tissue, and Electrocardiograph and Metabolic laboratories, showed 176,876 procedures during the year 1945-46 as against 150,125 during 1944-45. The Dispensary Laboratory showed 45,068 procedures during 1945-46 as compared with 54,123 during the previous year. The Students Health Service Laboratory procedures increased from 29,725 during the year 1944-45 to 47,175 during the year 1945-46.

There was also an increase in the number of prescriptions compounded and the amount of drugs used in the Hospitals. The pharmacy showed an over-all increase in hospital prescriptions from 76,369 in 1944-45 to 79,556 in

1945-46. There was a further significant continuation of the trend to make more use of the diagnostic and therapeutic facilities of the Hospitals. The increase in laboratory procedures and the continued emphasis on chemotherapy has necessitated an increased number of services in all the service departments involved.

The shortage of personnel continued to handicap the Hospitals, and it was not relieved much by the cessation of the war. All departments have had a severe struggle to keep the hospitals operating at efficiency. At this date the chief lack of personnel is apparent in the nursing and housekeeping departments. Department heads have made every effort to keep their units operating at peak efficiency despite this lack of help and should be given the proper recognition for their services.

During the year the addition of a new cafeteria and remodeling of the kitchens were completed. The addition of the new cafeteria provided a more efficient and pleasant dining room for interns and nurses. The addition to the kitchen provided more facilities and modern working conditions for the preparation of food for general use and special diets for the patients. The addition to the Physical Therapy Department was completed during the year. This provided more space for physical therapy treatment and room for laboratories for the use of physical medicine.

The report of the Social Service Department is attached for your consideration. This department carried on with good efficiency and its usual effectiveness.

The report of Powell Hall is also attached for information. The problems in Powell Hall during the year were considerable and were handled by the administration of Powell Hall with good results.

The administration of the Hospitals wishes to thank the many generous friends who have helped to maintain the services of the Hospitals. To the Citizens' Aid Society for their continued support to the x-ray therapy department; to the University Faculty Women's Club who have continued their generous efforts in behalf of our patients; to the Crippled Child Relief for their assistance; to the Sunshine Club for its contributions; to the Traffic Club who again repeated their performance of giving splendid Christmas entertainment, gifts and cheer to all of our patients; to the many groups of school children throughout the state; to the Camp Fire Girls; to the Girl Scouts and to many other organizations too numerous to mention, the Hospitals expresses its sincere gratitude for their interest in our patients. Appreciation to the Minneapolis chapter of the Red Cross must be made here for its aid to the Hospitals during the war period. The help of the Nurses' Aides, Nutrition Aides and Gray Ladies made it possible for the Hospitals to carry on its function at almost normal tempo. The cessation of their efforts at the end of the war brought to an end an association which was most beneficial to the Hospitals and to the patients and the staff, and too much praise cannot be given to this group. To all members of the professional and service staffs of the Hospitals the Administration wishes to extend the appreciation of the Hospitals for their loyal devotion to duty and considerate care of the patients. Their task could not have been more difficult and the response could not have been better.

Respectfully submitted,

Ray Amberg
Superintendent

COMPARATIVE TWELVE-MONTHS REPORTIN-PATIENT DEPARTMENT

<u>Total Patients Admitted</u>	<u>1944-45</u>	<u>1945-46</u>
Private	1,786	1,934
Per Diem	1,301	1,349
Eustis)	245	201
Teaching &) Free		
Research)	219	218
Charity)	14	3
Staff)	270	357
County	3,101	3,300
Health Service	1,055	1,547
Psychopathic	186	176
Private	33	66
Per Diem	41	69
	<u>8,251</u>	<u>9,220</u>

Total Patients Treated
(Discharged)

Private	1,726	1,883
Per Diem	1,256	1,283
Eustis)	256	220
Teaching &) Free		
Research)	217	227
Charity)	14	3
Staff)	271	357
County	3,184	3,390
Health Service	1,064	1,536
Psychopathic	209	218
Private	31	53
Per Diem	39	50
	<u>8,267</u>	<u>9,225</u>

Total Days Hospital Care

Private	20,707	21,216
Per Diem	21,537	20,782
Eustis)	5,959	6,498
Teaching &) Free		
Research)	3,761	3,670
Charity)	190	64
Staff)	1,287	1,924
County	68,212	71,788
Health Service	5,506	6,518
Psychopathic	7,314	6,061
Private	1,425	2,221
Per Diem	960	1,731
	<u>136,858</u>	<u>142,473</u>

Average Days Per Patient

	<u>1944-45</u>	<u>1945-46</u>
Private	11.5	11.2
Per Diem	16.5	16.2
Eustis)	24.3	29.5
Teaching &) Free		
Research)	17.1	16.1
Charity)	13.4	21.
Staff)	4.7	5.3
County	21.9	21.1
Health Service	5.2	4.7
Psychopathic	39.3	27.7
Private	43.2	41.9
Per Diem	23.4	34.6

Average Length of Stay Per Patient

	<u>16.6</u>	<u>15.4</u>
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Daily Average Number of Patients

Private	56.6	58.1
Per Diem	59.2	56.9
Eustis)	16.3	17.8
Teaching &) Free		
Research)	10.3	10.
Charity)	.5	.1
Staff)	3.5	5.2
County	187.	196.6
Health Service	15.	17.8
Psychopathic	20.	16.6
Private	4.	6.
Per Diem	2.6	4.7

Daily Average Census for Hospital

	<u>375</u>	<u>390</u>
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COMPARATIVE TWELVE-MONTHS REPORTIN-PATIENT DEPARTMENT

Service	Admissions		Patient Days		Average Length of Stay	
	1944-45	1945-46	1944-45	1945-46	1944-45	1945-46
General Surgery	1,147	1,197	21,152	19,369	18.5	15
Urology	617	486	7,492	7,579	12.1	15
Orthopedics	213	217	5,806	6,456	27.2	31
Neurosurgery	213	214	3,841	4,262	18.0	15
Tumor Surgery	274	286	3,817	3,569	13.9	12
Reconstruction Surgery	85	77	2,990	2,328	35.1	29
Total	2,549	2,477	45,098	43,563		
Medicine	1,116	1,116	17,346	18,536	15.5	19
Neurology	390	499	7,986	7,342	20.4	16
Dermatology	149	140	2,166	2,207	14.5	16
Total	1,655	1,755	27,498	28,085		
Psychiatry	263	313	9,911	9,750	37.6	31
Ophthalmology	225	242	3,729	3,798	16.5	16
Otolaryngology	274	382	2,145	3,078	7.8	8
Total	499	624	5,874	16,626		
Gynecology	387	484	4,922	5,991	12.7	14
Tumor Gynecology	95	87	4,522	4,366	47.4	37
Total	482	571	9,444	10,357		
Obstetrics	337	344	5,547	5,345	16.4	15
Newborn Pediatrics	244	260	3,511	3,143	14.3	13
Pediatrics & Specialties	1,157	1,212	23,883	28,203	20.6	22
Health Service	1,055	1,664	5,506	7,051	5.2	4
Ambulatory	10	0	586	0	58.6	0
Totals	8,251	9,220	136,858	142,373	16.6	16

OUT-PATIENT DEPARTMENT

COMPARATIVE TWELVE-MONTHS REPORT

Clinic	New Patients		Revisits		Totals	
	1944-45	1945-46	1944-45	1945-46	1944-45	1945-46
Admissions	3,675	3,530			3,675	3,530
Medicine						
General			16,087	16,995	16,087	16,995
Cardiac	657	596	930	880	1,587	1,476
Chest	249	191	2,303	1,281	2,552	1,472
Diabetic	111	110	863	826	974	936
Gastro-intestinal	662	875	79	230	741	1,105
Metabolism	162	134	418	519	580	653
Neurology	965	947	1,826	1,901	2,791	2,848
Skin						
Allergy		30		29		59
Syphilis	70	68	1,914	1,781	1,984	1,849
Dermatology	841	1,131	2,349	2,964	3,190	4,095
Surgery						
General	895	754	6,822	5,396	7,717	6,150
Genito-Urinary						
Female	134	117	495	433	629	550
Male	362	377	868	969	1,230	1,346
Neurosurgery	108	107	401	446	509	553
Reconstruction	4	3	10	19	14	22
Tumor	309	363	2,334	2,602	2,643	2,965
Orthopedic	445	424	1,165	1,491	1,610	1,895
Ear	313	270	1,028	887	1,341	1,157
Eye						
General	734	818	2,922	3,157	3,656	3,975
Refraction	2	0	674	697	676	697
Nose & Throat	542	442	1,565	1,234	2,107	1,676
Obstetrics	168	124	647	564	815	688
Gynecology	539	503	1,410	1,407	1,949	1,910
Gynecology Tumor	67	56	861	867	928	923
Pediatrics	724	719	3,326	2,533	4,050	3,252
Children's Psychiatric	31	11	377	220	408	231
Speech	12	0	132	16	144	16
Nutrition	27	44	44	59	71	103
Dental	4	3	53	13	57	16
W-212	842	1,642	2,225	4,142	3,067	5,784
Miscellaneous	1,407	5,183			1,407	5,183
Totals	15,061	19,572	54,128	54,538	69,189	74,110

UNIVERSITY OF MINNESOTA HOSPITALS

Statement of Income and Expenditures

July 1, 1944 - June 30, 1946

	<u>1944-45</u>	<u>1945-46</u>
Cash Balance	\$ 63,386.90	32,425.72
County & State Reimbursement	502,152.71	656,195.82
Minnesota Hospital & Home for Crippled Children	40,000.00	49,982.60
Out-Patient & Per Diem	478,578.67	604,751.89
General University Funds	117,309.57	127,735.39
Psychopathic Department	70,000.00	90,000.00
	<u>1,272,308.66</u>	<u>1,561,091.42</u>
Salaries & Wages	668,748.05	837,970.84
Supplies & Expense	534,382.94	611,662.23
Equipment	33,094.57	26,352.34
Buildings & Improvement	2,776.57	2,446.05
	<u>1,239,002.13</u>	<u>1,478,431.46</u>
Obligations at end of year	52,041.26	92,368.09
Free Balance	-19,615.54	-9,703.13
	<u>1,271,427.85</u>	<u>1,561,091.42</u>
Cost of Operation		
Out-Patient Department	191,056.10	211,172.21
In-Patient Department	1,080,371.75	1,350,929.21
Cost per out-patient visit	2.77	2.85
Cost per hospital day	7.90	9.49

PHYSICAL THERAPY DEPARTMENT

COMPARATIVE TWELVE-MONTHS REPORT

Type of Treatment	Number of Out-Patient Treatments		Number of Hospital Patient Treatments		Total Number of Patient Treatments	
	1944-45	1945-46	1944-45	1945-46	1944-45	1945-46
Diathermy (Short Wave)	1,311	900	224	146	1,535	1,046
Ultra Violet	478	375	568	551	1,046	926
Phototherapy - Infra Red	956	864	1,345	840	2,301	1,704
Massage - Muscle Training	3,033	2,789	3,249	3,038	6,282	5,827
Paraffin Bath		7		1		8
Suspension	3			45	3	45
Pool		5				5
Pressure Cuff	334	278	175	97	509	375
Whirlpool	2,235	1,614	706	653	2,941	2,267
Galvanic - Faradic	389	302	225	57	514	359
Hot Packs	71	286	70	410	141	696
Iontophoresis	4				4	
TOTALS	8,714	7,420	6,562	5,923	15,276	13,343
New Patients	358	364	170	217	528	581
No. of Patients Treated	5,300	4,491	3,943	3,773	9,243	8,264

FEVER THERAPY
COMPARATIVE TWELVE-MONTHS REPORT

<u>Diagnosis</u>	<u>Number of Treatments</u>	
	<u>1944-45</u>	<u>1945-46</u>
Arthritis	18	0
Arthritis (G.C.)	11	8
Chorea	10	0
Syphilis	5	15
Syphilis (secondary)		2
Paresis	32	0
Tabes Dorsalis	6	0
Brucellosis	3	0
Interstitial Keretitis	14	0
Gonorrhoea	3	0
Scleroderma	9	0
Still's Disease	9	4
Polio		4
TOTALS	120	33

COMPARATIVE TWELVE-MONTHS REPORT

Main Laboratory

	1944-45	1945-46		1944-45	1945-46
BODY CAVITY FLUID					
Routine	141	160	Bleeding time	791	856
Bilirubin	8	12	Clotting time	835	1,071
Cholesterol crystals	2	2	Clot Retractility	6	20
Urobilinogen	15	0	Fragility	14	14
Urobilinogen (on dressings)	2	0	Hematocrit	705	301
Bile abdominal sinus	4	0	M.C.C.	9	36
Dye presence	2	0	M.C.D.	14	31
Fat extraction	1	0	M.C.H.	9	36
HGA (subgalia)	1	0	M.C.V.	9	36
Pus	3	0	Parasites	11	10
Urobilin	1	0	Platelet Count	104	147
			Prothrombin Rate	1,409	1,617
			Reticulocyte Count	165	139
			Sedimentation Rate	652	809
			Normoblast Count	4	0
			Malaria Smear	0	16
			Sickle cell test	0	2
			Per. sm. for plat.	0	6
			Fragility test	0	1
			Sulfa crystals	0	30
CEREBROSPINAL FLUID					
Routine	1,003	1,050	URINES		
Colloidal Gold	356	0	Routine	11,099	9,675
Erythrocyte Count	219	352	Color	5	0
P.S.P.	0	2	Specific Gravity	5	38
			pH	74	51
			Sugar, qualitative	2,645	3,595
			Acetone	1,509	1,137
			Diacetic Acid	1,257	999
			Sediments	1,626	547
			Albumin	203	959
			Parasites	0	0
			Bence-Jones protein	7	3
			Bilirubin	64	45
			Concentration & Dilution	11	26
			Phenolsulfonphthalein Test	845	531
			Fermentation	0	0
			Prophyrin	1	2
			Protein (Esbach)	41	7
			Sugar, quantitative	2,068	2,333
			Sulfonamide crystals	393	320
			Urobilinogen, qualitative	116	55
			Benzidine	6	0
			Urobilin	1	0
			Urobilinogen, quantitative	2	28
			Glucose tolerance	0	0
			Cystos	0	0
DUODENAL DRAWINGS					
Routine	16	3			
Bile	2	2			
Bile pigments	5	0			
FECES					
Blood, occult	273	498			
Fat	35	68			
Ova-Parasites	53	140			
Pus & Mucous	40	71			
Urobilinogen	2	27			
Stercobilin	0	0			
Hemoglobin	1	5			
Urobilin	1	0			
Mucous	24	0			
GASTRICS					
Routine	419	529			
Blood, occult	64	42			
Boas Test	7	0			
Lactic Acid	29	28			
Bilirubin	2	1			
Urobilinogen	1	2			
pH	0	6			
HEMATOLOGY					
Hemoglobin	13,083	13,324			
Erythrocyte Count	1,839	1,432			
Leukocyte Count	12,335	12,361			
Differential	10,825	10,540			
Dual Fluid	0	0			
Venous clotting time	4	6			

COMPARATIVE TWELVE-MONTHS REPORTMain Laboratory (cont'd)

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
URINES (cont'd)			MISCELLANEOUS		
Sulf., qualitative	0	0	Emesis-Bilirubin	3	0
Urine calcium	0	3	Emesis-Blood	1	1
Urine chloride	0	96	Nasal smear	5	0
Quaiac	0	1	Nasal smear		
Chyle	0	1	eosinophiles	1	0
Body cavity hgb.	0	6	Sputum- micro	1	0
Sperm, ct. & morph.	0	13			
Nasal sm. for eos.	0	3			
Totic PMNO	0	1	TOTALS	67,544	66,317

COMPARATIVE TWELVE-MONTHS REPORTChemistry Laboratory

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
ROUTINE			SPECIAL		
Blood			Blood		
Bilirubin	1,074	620	Amine Acid Nitrogen	7	10
Calcium	496	512	Amylase	60	176
Carbon Dioxide			Bilirubin		
Capacity	2,535	1,942	Tolerance	2	0
Chloride (as NaCl)	3,785	2,549	Biliverdin	35	5
Cholesterol, Total	934	628	Bromsulfalein		
Creatinine	596	719	Tolerance	143	13
Glucose	2,120	2,363	Cholesterol,		
Icterus Index	46	8	Esters	0	0
Phosphorus	331	373	Cholesterol, Free	0	0
Protein, Total	3,610	2,364	Congo Red	22	6
Sulfonamides	3,658	1,895	Fibrinogen	3	9
Thiocyanate	182	241	Galactose		
Urea Nitrogen	5,649	5,213	Tolerance	82	13
Uric Acid	281	236	Glucose Tolerance	134	128
Van den Berg	0	0	Glucose Tolerance		
Cerebrospinal Fluid			(Exton Rose)	2	8
Chlorides	14	32	Glucose Tolerance		
Glucose	695	817	(Micro)	19	20
Protein, qualitative	930	729	Insulin Tolerance	1	17
Protein,			Levulose Tolerance	0	0
quantitative	924	958	Lipase	4	2
Specific Gravity			Phosphates, acid	488	310
(falling drop)	0	0	Phosphatase,		
Cholesterol	12	6	alkaline	577	417
Colloidal Gold	148	272	Potassium	88	132
Sulphonamides	58	10	Protein, ratio		
P.S.P.	0	1	and total	435	445
			Total Base	0	0

COMPARATIVE TWELVE-MONTHS REPORTChemistry Laboratory (cont'd)

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
SPECIAL (BLOOD) cont'd			Miscellaneous		
Vitamin C	92	80	Calculi	39	29
Blood Volume	46	0	Nitrogen	0	17
Cephalin Cholerterol	253	49	Urea Clearance	10	18
Glucose Micro	44	2	Water Test	2	15
Feces			Sulfonamides, free	0	0
Fat	17	21	Sulfonamides, total	0	0
Nitrogen	7	9	Chloride (Bile)	2	0
Urobilinogen	0	0	Chloride (Gastric)	4	0
Dry Weight	1	5	pH	9	8
Urine			Secretin studies	1	1
Calcium	41	96	Trypsin	27	12
Chloride	7	21	Duodenal Amylase	6	23
Creatine	26	22	Pancretic Enzymes	2	5
Creatinine	29	24	Barbiturates	0	2
Galactose Tolerance	4	1	Alcohol	0	9
Glucose, quantitative	0	0	Micro Sugar	0	18
Hemoglobin	0	0	Keto Steroid	0	4
Hippuric Acid	62	45	Blood Creatine	0	1
Non-Protein Nitrogen	0	1	Plasma & hgb.	0	25
Urea	0	37			
Uric Acid	12	5			
Urobilinogen, 2 hour	116	31			
Phosphorus	11	1			
			TOTALS	31,050	24,838

COMPARATIVE TWELVE-MONTHS REPORTClerks' Laboratory

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
FECES			URINES		
Blood, occult		578	Routine		1,410
Fat		16	Color		0
Ova-Parasites		21	pH		1
Pus		17	Sugar,		
Urobilin		18	qualitative		10,348
Urobilinogen		100	Acetone		2,951
			Diacetic Acid		2,951
			Sediments		20
GASTRICS			Bence-Jones		
Blood, occult		7	protein		16
Lactic Acid		1	Bilirubin		83
			Concentration and		
			Dilution		45
HEMATOLOGY			Phenolsulfonphthalein		
Hemoglobin		2,069	Test		98
Erythrocyte Count		611	Protein		
Leukocyte Count		1,974	(Esbach)		13
Differential & Norm.			Sugar,		
Ct.		1,809	qualitative		50
Venour Clotting Time		38	Sulfonamide Crystals		51
Bleeding Time		122	Urobilinogen,		
Clotting Time		95	qualitative		361
Clot Retractility		22	Urobilinogen		
Fragility		6	quantitative		710
Hematocrit		179	Urine Calcium		2
M.C.C.		114	Nasal sm. for		
M.C.D.		100	eos.		2
M.C.H.		114	Sperm Ct. & morph.		7
M.C.V.		114	Gram stain		5
Platelet Count		124	Ziel Neelsen		
Reticulocyte Count		169	Stain		4
Sedimentation Rate		669			
Urine Chlorides		1,241			
Malaria Smears		1			
			TOTAL		29,457

COMPARATIVE TWELVE-MONTHS REPORT

	<u>Blood Bank Laboratory</u>	
	<u>1944-45</u>	<u>1945-46</u>
Blood Groupings	10,087	11,708
Cross Matchings	8,208	11,986
Klines	7,535	8,360
Heterophile Antibody	420	300
Cold Agglutinins	15	
Anti- A Titre	2	
Anti-B Titre	1	
Heterophile A. (Adsb)	14	
RH Factor	53	279
Miscellaneous		107
	<hr/>	<hr/>
TOTALS	26,335	32,740

	<u>Bacteriology Laboratory</u>	
Cultures		
Blood	2,805	2,847
Drug Room	622	661
G. C.	599	663
Nose and Throat	621	806
Stool	70	185
Urine	3,880	4,044
Miscellaneous	1,751	1,573
Smears		
Acid-fast	368	456
G. C.	609	632
Miscellaneous	477	362
Pneumo Typings	124	98
Cerebro-spinal fluids	229	251
	<hr/>	<hr/>
TOTALS	12,155	12,578

	<u>Electrocardiograph & Metabolic</u>	
Basal Metabolic Rates	1,647	1,451
Portables	115	111
Electrocardiographs	3,807	4,160
Portables	932	876
Vital Capacities	126	112
	<hr/>	<hr/>
TOTALS	6,627	6,710

	<u>Tissue Laboratory</u>	
Autopsies	2,114	446
Frozens	156	117
Surgicals	4,144	3,673
	<hr/>	<hr/>
TOTALS	6,414	4,236

COMPARATIVE TWELVE-MONTHS REPORT

Dispensary Laboratory

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
DUODENAL DRAINAGE					
Routine	0	0	Vincent's	5	13
Pepsin	1	0	Miscellaneous	10	0
			Malaria	0	17
FECES			URINES		
Blood, occult	1,075	947	Routine	7,259	6,852
Fat	168	28	Color	0	0
Microscopic	180	38	Specific gravity	52	4
Starch	0	1	pH	835	386
Muscle	0	1	Sugar,		
Mucous	0	3	qualitative	1,570	1,517
GASTRICS			Acetone	958	846
Routine	786	98	Diacetic Acid	955	828
Boood, occult	783	106	Sediment	1,645	1,578
Boas Test	0	1	Albumin	513	421
Lactic Test	0	0	Bence-Jones		
Dye	5	0	protein	6	11
Volume	5	0	Bilirubin	63	35
			Contentration and		
HEMATOLOGY			Dilution	65	100
Routine	0	0	Fermentation		
Hemoglobin	10,680	9,200	Test	3	3
Erythrocyte			Phenolsulfonphthalein		
Count	1,649	1,658	Test	90	129
Leukocyte Count	6,983	5,725	Porphyrin	5	2
Differential	3,830	3,605	Protein		
Bleeding Time	110	90	(Esbach)	1	0
Clotting Time	103	86	Urobilin	2	7
Clot			Urobilinogen	0	5
Retractility	4	12	Urobilinogen,		
Fragility	10	5	qualitative	94	47
Hematocrit	185	258	Addis		
M.C.C.	11	43	Count	0	0
M.C.D.	21	45	Sulkowitch	0	8
M.C.H.	12	43	Sugar,		
M.C.V.	10	44	quantitative	0	5
Reticulocyte Count					
Count	192	164	VENIPUNCTURES	9,639	7,496
Sedimentation					
Rate	3,111	2,110	Heterophil	0	2
Platelet	107	138			
Venous Clotting Time	0	1	TOTALS	54,123	45,068
SMEARS					
Acid fast	196	168			
G.C.	2	2			
Monilia	0	1			
Nasal					
(Eosinophiles)	134	144			

COMPARATIVE TWELVE-MONTHS REPORTStudent Health Service Laboratory

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
DUODENAL DRAINAGE			URINES		
Routine	0	0	Routine	7,157	13,055
FECES			Color	0	0
Blood, occult	39	66	Specific Gravity	0	0
Fat	15	4	pH	0	0
Microscopic	38	31	Sugar, qualitative	21	103
Mucous	0	3	Acetone	36	44
GASTRICS			Diacetic Acid	36	41
Routine	5	9	Sediment	0	2,260
Blood, occult	3	5	Albumin	0	9
Boas Test	1	1	Bence-Jones protein	0	2
HEMATOLOGY			Bilirubin	6	17
Routine	0	0	Concentration and Dilution	3	2
Hemoglobin	8,708	12,246	Fermentation Test	0	0
Erythrocyte Count	594	579	Phenolsulfonphthalein Test	2	3
Leukocyte Count	2,943	3,855	Porphyrin	0	1
Differential	2,567	3,329	Protein (Esbach)	0	0
Bleeding Time	18	24	Sulfonamide Crystals	1	77
Clotting Time	18	24	Urobilinogen, qualitative	8	15
Clot Retractility	0	0	Urobilin	0	0
Fragility	0	3	Sugar, quantitative	1	0
Hematocrit	6	5	Blood Sugar	0	0
M.C.C.	1	0	Sulfas	0	0
M.C.D.	1	0	Agglutination	0	3
M.C.H.	1	0	B.U.N.	0	3
M.C.V.	1	2	Bile	0	2
Platelet	17	19	Icterus Index	0	1
Reticulocyte Count	6	58	VENIPUNCTURES	6,317	9,576
Sedimentation Rate	652	623	Heterophils	0	85
SMEARS			Glucose Tolerance	0	8
Acid fast	8	12	Cephalin Cholesterol Flocculation	0	0
G.C.	253	348	Glucose	0	11
Monilia	0	0	Cholesterol	0	15
Nasal (Eosinophiles)	23	49	Calcium	0	3
Vincent's	82	275	Prothrombin	0	3
Miscellaneous	137	157	TOTALS	<u>29,725</u>	<u>47,175</u>
Malaria	0	109			

COMPARATIVE TWELVE-MONTHS REPORT

PHARMACY

July 1, 1945-July 1, 1946

Month	Dispensary & H.S. Rx	Hospital Rx	Total Rx	Out-Patient Net Sales	Hospital Net Sales	H.S. Net Sales	Allergens Rx	Allergens Cash
July	2,873	6,505	9,421	\$ 1,722.10	\$ 11,470.70	\$ 417.50	282	\$ 295.55
August	2,924	6,812	9,736	1,629.75	12,915.90	404.10	422	414.00
September	2,340	6,077	8,417	1,384.35	11,676.15	286.35	242	262.15
October	4,150	6,784	10,934	1,834.85	12,447.60	896.00	128	127.00
November	4,408	6,704	11,112	1,639.81	12,332.40	952.55	117	134.85
December	3,480	6,755	10,235	1,294.69	11,897.15	697.20	147	181.65
January	4,052	6,823	10,875	1,560.45	13,444.05	886.05	205	238.10
February	3,775	6,350	10,125	1,532.55	13,846.65	840.00	185	224.30
March	3,675	6,466	10,141	1,683.55	13,284.85	705.35	405	500.85
April	4,374	6,707	11,081	1,824.55	13,629.70	988.80	423	499.20
May	4,249	7,307	11,556	1,792.60	16,313.00	1,122.15	470	543.35
June	3,556	6,266	9,822	1,591.15	1,559.00	816.20	267	269.65
TOTALS	43,856	79,556	123,412 3,293* 126,705	19,490.40	144,817.15	9,012.25	3,293*	3,690.65

COMPARATIVE TWELVE-MONTHS REPORT

PHARMACY

July 1, 1944-July 1, 1945

Month	Dispensary & H.S.Rx	Hospital Rx	Total Rx	Out-Patient Net Sales	Hospital Net Sales	H.S. Net Sales	Allergens Rx	Allergens Cash
July	2,966	6,455	9,421	\$ 1,745.30	\$ 8,420.60	\$ 320.15	350	\$ 380.75
August	3,152	6,027	9,179	1,668.10	8,200.50	355.55	315	330.80
September	2,672	5,913	8,585	1,463.75	6,757.80	171.70	295	297.75
October	3,892	5,789	9,681	1,679.95	7,306.35	613.45	166	151.75
November	3,769	5,732	9,501	1,353.75	7,518.10	639.45	102	125.70
December	3,316	6,505	9,821	1,265.10	9,262.25	484.40	118	139.70
January	4,105	7,577	11,682	1,631.65	9,955.25	676.70	94	143.50
February	3,521	5,769	9,290	1,402.00	8,918.45	529.55	282	327.65
March	3,737	6,644	10,381	1,494.75	10,668.55	539.05	503	621.35
April	3,842	6,877	10,719	1,491.45	9,933.35	713.45	326	382.90
May	3,618	6,811	10,429	1,476.05	9,558.50	541.90	317	353.55
June	3,021	6,270	9,291	1,338.15	8,995.80	423.00	277	290.35
TOTALS	41,611	76,369	117,980 3,145* <u>121,125</u>	18,010.00	105,495.50	6,008.35	3,145*	3,545.75

ROENTGENOLOGYCOMPARATIVE TWELVE-MONTHS REPORT

<u>Parts Examined</u>	<u>1944-45</u>	<u>1945-46</u>	<u>Parts Examined</u>	<u>1944-45</u>	<u>1945-46</u>
Abdomen	875	1,076	Pregnancy	11	2
Ankle	186	235	Radius and Ulna	55	70
Bladder	19	16	Ribs	150	145
Bronchography	87	95	Sacrioliac	19	42
Cervical Spine	228	383	Sacrum	28	32
Chest	7,779	10,177	Scapula	0	7
Cholangiography	136	99	Sella Turcica	29	41
Clavicle	14	23	Shoulder	184	217
Coccyx	23	22	Sinuses		
Colon	952	1,007	(Paranasal)	385	307
Cystogram	46	51	Sinuses		
Elbow	121	150	(Paranasal)		
Encephalogram	57	112	Iodized Oil	23	26
Esophagus	175	190	Skull	688	808
Femur	227	269	Sterno-clavicular		
Fluoroscopy	3,448	4,211	joints	4	9
Foot	266	289	Sternum	13	16
Gall Bladder	505	531	Stomach and		
Hand	212	205	Duodenum	1,887	2,199
Heart	312	283	Temporo-mandibular		
Hip	285	444	joint	40	25
Humerus	106	83	Thoracic Spine	280	266
Hyster-			Tibia and Fibula	173	217
salpingography	3	1	Urinary Tract	450	401
Injection of			Urography,		
Fistulae	6	2	intravenous	736	678
Knee	325	296	Urography,		
Liver and Spleen			retrograde	233	162
(Thorotrast)	8	1	Ventri-		
Lumbosacrioliacs	895	824	culography	47	67
Mandible	97	92	Wrist	202	249
Mastoid	109	120			
Maxilla	41	32			
Miscellaneous	238	212			
Myelography	42	26			
Neck and Thyroid	24	19			
Nose	21	23			
Orbits	35	35			
Pelvis	665	564			
			TOTALS	24,205	28,184

X-RAY THERAPY DEPARTMENTCOMPARATIVE TWELVE-MONTHS REPORT

	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
<u>Deep X-Ray Treatments</u>			<u>Superficial X-Ray Treatments</u>		
New Patients Treated	489	538	Out-Patient Treatments	2,229	2,111
Patients Retreated	196	253	House-Patient Treatments	150	90
TOTAL NUMBER OF PATIENTS TREATED	685	791	TOTAL NUMBER OF TREATMENTS	2,379	2,201
Hennepin County Patients	77	111	Philips Contact Treatments		343
Ramsey County Patients	17	24			
TOTAL COUNTY PATIENTS	221	222			
Out-Patient Treatments	5,586	5,763			
House-Patient Treatments	3,062	3,377			
TOTAL NUMBER OF TREATMENTS	8,648	9,140			

COMPARATIVE TWELVE-MONTHS REPORTWaiting List

<u>Service</u>	<u>1944-45</u>	<u>1945-46</u>		<u>1944-45</u>	<u>1945-46</u>
Male Surgery	25	7	Male Medicine	2	1
Female Surgery	21	9	Female Medicine	1	2
Neurosurgery	4	1	Neurology & Psychiatry	1	7
White Surgery	1	1	Dermatology	0	2
Plastic Surgery	19	12	Pediatrics	2	3
Purple Surgery	1	1	Gynecology	0	0
Urology	1	2	Ophthalmology	11	9
Surgical Pediatrics	1	0	Ophthalmology Pediatrics	5	8
Orthopedic Pediatrics	0	1	Oto-Laryngology	6	0
Reconstruction Pediatrics	5	6	Tonsils and Adenoids	22	4
Orthopedics	14	29	TOTALS	142	105

SOCIAL SERVICE DEPARTMENT
UNIVERSITY OF MINNESOTA HOSPITALS
BIENNIAL REPORT 1944-46

The work falls into two interlocking halves--medical social work and psychiatric social work. Miss Charlotte Henry, Chief of psychiatric social work, has prepared the following information regarding psychiatric social work.

Psychiatric Social Work.--Psychiatric social work is a subsidiary part of the total social service program of the hospital and medical school. It has functioned as a sub-unit for three years, but has had a full staff for less than two. Unlike medical social work in general, it is related to only one large medical specialty--neurology and psychiatry.

Two workers serve adult patients and one works with children, The chief psychiatric social worker is consultant and supervisor for the other three. She also assigns and supervises the practice work of psychiatric social work students.

With social service staff changes and the many organizational changes in the Department of Neurology and Psychiatry, the biennium stands out as an era of such transition that tangible achievements are hard to find.

Primarily, we have concentrated on learning to define in practice and theory our social work function in the departmental team. Roughly, the social worker contributes to the diagnostic study of the neuropsychiatric patient facts and impressions regarding his personal environment, social experience, and dynamic relationships. In treatment, as the physician's therapy helps the patient to resolve conflicts, the social worker helps him to find practical use for the new psychological energy thus released. For the patient who must accept permanent and perhaps progressive neurological handicaps, the social worker tries to give emotional support to him and to his family, and to help him find constructive outlets within his restricted design for living. In teaching, she contributes to the understanding of the whole patient by her focus

on the continuity of his life in his own setting, to balance the physician's focus on the diagnosis and treatment of the sick person.

We have functioned for two years as an accepted field work resource for graduate students of psychiatric social work in the University, six students having been assigned to us for the required three quarters of practice work.

Such statistics as we have kept are not revealing for we have thought it necessary to define before we could measure. This is unfortunate because we know without being able to show statistically that the demands on four social workers from all parts of the program are so great that we could select comparatively few cases for the best performance of which we were capable. Like the rest of the department we look forward to the realization of the Mayo Memorial for relief from congested office space, which at present makes maximum efficiency impossible.

Medical Social Work.--The medical social care of patients and teaching have been major functions, but there has been some responsibility for extension of the medical social work program in the hospital, for participation in the development of social and health programs in the community, and for research. Staff turnover in the first year was one out of seven; in the second year five out of seven with obvious resulting losses to the work.

Medical social case work for individual patients rendered by the seven staff members shows the following figures:

<u>Intensive Case Work</u>	<u>1944-45</u>	<u>1945-46</u>
Total number of intensive cases	1011	948
Average monthly case load for the department	313	295
Average monthly case load for each social worker	45	43

Many patients do not need intensive social case work but require one or two minor social services to enable their medical care. The unrecorded social services for this second group of patients was as follows:

<u>Unrecorded Services</u>	<u>1944-45</u>	<u>1945-46</u>
Reports to other social and health agencies	1380	1577
Patients referred to another social or health agency	234	207
Interpretation regarding clinic and hospital expenses	59	82
Clinical advice and interpretation to the patient or family		
By conference	3,165	3,015
By letter	1,255	1,262
By visit	3	0
Discharge arrangements for hospital patients	2,150	1,890
Board and room arrangements	285	308
Nursing home arrangements	638	334
Transportation arrangements	101	74
Interpretation of social data to doctors	83	605
	<u>9,353</u>	<u>9,354</u>

Education.- Medical social work students have continued to be our chief educational responsibility, but there have been lectures to nurses as previously reported, and orientation to hospital librarians and physiotherapists.

As the social component in medical care becomes of increasing concern to the medical profession, and the psychosomatic approach more generally accepted, it is believed that the medical social department should be prepared to make an increasing contribution to the education of medical students. Through the past two years the social service staff has participated in case discussion of selected cases with the staff doctors at which medi-

cal students may be present. We are waiting with interest for the report of the joint committee of the American Association of Medical Colleges and the American Association of Medical Social Workers to learn what recommendations are made regarding the medical social worker's participation in the education of medical students.

Our medical social workers have contributed to committee work and studies at the state and national levels; they have presented several papers at institutes for medical social workers and furnished the program for one meeting a year at the medical staff meetings.

The educational program, as well as services to patients, was made difficult during the past year through loss of staff. Two of the five who resigned were instructors as well as case workers.

Extension of the Medical Social Work Program.- Little has been done in this biennium to expand the work within the hospital, although increased attention has been given to patients with gastrointestinal surgery and to cancer patients on other services than the tumor and gynecological-tumor services.

We have extended the medical social work program to some extent among other social and health agencies of the community, this having been done chiefly through committee work rendered by individual staff members and the department head in participation with these agencies. Institute programs and individual consultations have also served this end. The groups most closely related in this way have been: The Minnesota Division of Vocational Rehabilitation; The Minnesota Division of Social Welfare, with special reference to its services to children, to the aged, and to the blind; the local and state organizations for care of the visually handicapped; organizations caring for the tuberculous, and those serving cancer patients. There has also been a study of the problems of

case work and relief under the Minneapolis Council of Social Agencies; and consideration of the state and local problem of convalescent and chronic care for which this community has a striking lack of facilities.

Research.- No direct research has been undertaken but the department has participated in studies made by two national committees of the American Association of Medical Social Workers.

As the field of medicine expresses increasing interest in the social component in medical care, it seems probable that there will be further opportunities for medical social work to aid in medical research.

Summary.- As the biennium closes, we face the need of an additional psychiatric social worker to meet the expanding program in the Neuro-psychiatric Department; a medical social worker to enable a redistribution of activity of the two social workers on the entire medical service, permitting additional service in recognition of the growing interest in the social component in medical care; and a medical social case work supervisor for staff supervision and for teaching; and increased office space for the staff.

Respectfully submitted,

Frances M. Money, Director
Social Service Department

July 26, 1946

ANNUAL REPORT OF POWELL HALL
UNIVERSITY OF MINNESOTA

I am certain that July 1, 1946 saw the end of the most difficult year in the history of Powell Hall. One short month following the close of the war changed our quiet lobby and living rooms into something resembling a busy hotel lobby. We were fortunate in having at that time a strong student organization. It was most interesting to hear discussions in the council and follow the decisions made by the group and to observe the thoughtful manner in which they went about carrying out their plans for correcting all emergencies. It is gratifying to know that the students as a whole cherish the reputation of Powell Hall and are united in their effort to maintain it at a high level.

I am enclosing a week by week outline of the census of Powell Hall. Notations and changes occur on Sunday. We have no janitorial nor maid service from Saturday noon until Monday morning. The effect of which is self-explanatory. You will note on the outline that on September 29, 66 University students registered in Powell Hall. The number has varied from 88 in November to 58 at the present time. We were unable to segregate the University students from the nursing staff and the combination of a study group and a service group living on the same corridor brought problems and adjustment was difficult at times.

University students registering for room only has complicated life in Powell Hall. It is not unusual to find University students preparing whole meals in our small kitchens depriving student nurses and staff the privileges for which the kitchens were built.

In August 1945, the new building was opened increasing the capacity by 178 beds (87 double rooms and 4 single). We are still waiting for such things as drapes, bed covers, kitchen equipment and lounge furniture.

Recreation

We have had a strong chairman of activities the past year -- one who has been interested in sports on the campus. She has successfully organized teams in Powell Hall. Small groups have joined sleigh ride parties and afternoon and evening dances scheduled from the Union. The hobby course on the campus attracted a surprisingly large group.

Social

The attendance at the weekly coffee hour has increased. It is strictly informal. Students drop in on their way off or on duty, bring a guest if they wish and do not feel obligated to stay. The coffee hour is planned and carried out by students even to the writing of the requisition for food.

Five dances were given during the year -- Three for residents of Pioneer Hall, one for returned veterans and the last a date dance at the Radisson Hotel. Especially successful was the dance to which invitations were issued through the Veterans Club on the campus.

Christmas festivities are planned weeks ahead and consist of the Christmas tree trimming and the culminating event -- the Christmas party. All residents are invited.

Each monthly house meeting ends with a party for new groups who have registered in Powell Hall the previous month.

Big Sister Programs

Again the effectiveness of the program depends upon the choice of the chairman. Last year mixers were planned by the Big Sister group not only for new students entering Powell Hall at the beginning of each quarter but for all groups rotating from the Miller and General Hospitals and affiliates from other hospitals in Minneapolis. The Big Sister chairman is responsible for the appointment of a big sister for every new

student. The following is a copy of the sample slip given to each new student:

"Dear Affiliate:

Welcome to the University Hospitals and Powell Hall. Your room number is _____.

One of us will call for you at 6:30 a.m. tomorrow to take you to breakfast and introduce you to the head nurse on your station.

Miss _____, your counselor, will visit you soon. Her room No. is _____; please feel free to go to her room meanwhile if you wish. We sincerely hope you will enjoy your stay here."

Counselors

The crowning accomplishment of the year has been the appointment of six counselors. Although the counseling system has been functioning only five months, I have seen and Powell Hall has felt the effectiveness of the program.

We are looking forward to the appointment of a head counselor to supervise and coordinate the counseling group. Following is a copy of the monthly report of one of the counselors:

"In my work with the girls of the January and March, 1945 Class, I have tried to do the following:

1. Meet all the girls and chat with them for a few minutes in their rooms about their home towns, studies, etc, and tell them where I was and that I would be glad to help in any way.
2. I have tried to keep track of which girls were rotating between hospitals and which ones were going on vacations.
3. To keep the girls informed of outstanding recreational and cultural

facilities at the campus, week by week.

4. Go with the girls to the free Tuesday night movies.
5. To visit the girls who are ill and report back to the office concerning their condition.
6. To have informal chats with the girls walking to and from the hospital and classes.
7. To eat with the girls in the cafeteria whenever it seemed the natural and normal thing to do.
8. To chat with the boys as they waited in the Lobby for their dates and to make them feel at home.
9. To make the girls feel that they had an understanding friend who was eager to help them feel at home in Powell Hall.

Constance B. Nelson"

Recognition Assembly

The recognition assembly was as is always the outstanding event of the year. It followed the same pattern as the previous years. Odney Swenson was elected the outstanding citizen.

May I take this opportunity of thanking Mr. Amberg, Dean Williamson and Mr. Foley for their assistance in furthering the social program and for their helpful advice when problems have arisen.

Mrs. Dorothy Kurtzman
Director, Powell Hall

POWELL HALL RECORD OF WEEKLY ROTATIONS AND ADMISSIONS
July 1, 1945 - July 1, 1946

Date	Central Sch. Stud.	Affiliates	Dietitians	Anaesthetists	Interns	Powell Hall	Telephone	Dorm. Proct.	Counselors	Misc.	Graduates	Total	Remarks
7-1-45	256	50	12	15	0	2	5				17	347	
8	254	49	12	14	1	2	5				17	354	
16	259	49	17	14	1	2	5				17	364	
23	260	49	17	14	1	2	5				17	365	
30	255	49	13	14	1	2	5				18	357	
8-7-45	254	48	13	13	1	2	5			1*	18	355	V.Alex- ander
15	260	48	14	14	1	2	5			1	18	363	
20	259	48	14	14	1	2	5			1	18	362	
27	262	48	14	13	1	2	4			1	20	365	
9-2-45	258	48	12	13	1	2	4				21	359	
9	252	49	12	13	1	2	3				21	353	
17	254	49	19	13	1	2	3				20	361	
24	258	45	19	13	1	2	4	1			28	371	R.Mor- rison 66 U. Stud.
10-1-45	330	43	20	14	1	2	5	1			35	451	
8	338	43	20	14	1	2	5	1		2	34	459	
15	341	43	21	15	1	2	3	5			34	464	
22	342	43	20	15	1	2	3	5			34	465	
29	345	43	20	15	1	2	3	4			35	468	
11-4-45	342	43	20	16	1	2	3	4			37	472	
12	344	44	21	15	1	2	3	4			38	469	
26	340	44	21	15	1	2	3	4			40	470	
12-3-45	333	44	21	15	1	2	2	4			39	461	
10	326	45	21	15	1	2	2	4			40	456	
17	319	45	17	14	1	2	2	4			39	443	
24	242	46	13	13	1	2	2	3			39	365	
31	235	45	18	13	1	2	2	3			38	357	
1-7-46	310	45	18	12	1	2	2	4			41	436	
14	309	45	19	12	1	2	2	4			41	435	
21	311	45	19	11	1	2	2	4			40	435	
28	309	45	18	11	1	2	2	4			37	429	
2-4-46	309	45	18	11	1	2	2	4			37	429	

Date	Central Sch. Stud.	Affiliates	Dietitians	Anaesthetists	Interns	Powell Hall	Telephone	Dorm. Proct.	Counselors	Misc.	Graduates	Total	Remarks
2-11-46	309	45	18	10	1	2	2	4			37	428	
18	307	44	17	10	1	2	2	4			38	425	
3-4-46	300	44	18	12	1	2	2	4			40	421	
11	299	48	18	11	1	2	2	4			42	427	
18	291	47	19	11	1	2	2	4			43	420	
4-1-46	299	47	22	13	1	2	2	5			44	435	
3-25-46	286	47	20	12	1	2	2	5			43	418	
4-8-46	308	47	22	13	1	2	3	3	3		46	448	
15	309	47	22	13	1	2	3	3	3		45	448	
22	304	47	22	14	1	2	2	3	3		46	444	
29	303	47	22	13	1	2	2	3	4		47	444	
5-6-46	303	47	22	13	1	2	3	3	4		46	444	
13	301	47	21	13	1	2	3	3	4		47	442	
20	303	47	20	13	1	2	3	3	4		48	444	
27	302	46	19	14	1	2	4	3	4		49	444	
6-3-46	296	47	16	13	1	2	4	3	4		41	437	
9	291	47	16	13	1	2	4	3	4		51	432	
16	310	47	15	13	1	2	3	2	5	3	52	453	
24	306	46	15	14	1	2	3	2	5	2	53	450	
7-1-46	302	46	19	13	2	2	3	2	5	3	55	451	

III. GOSSIP

Staff Meeting got off to a good start. Unfortunately the period which follows has been assigned to Freshman clinic which makes it necessary for us to start our luncheon at 11:30, our meeting at 12, and be out at 1....The University of Minnesota guests for next week include Josef Warkany (Congenital Anomalies), October 14 and 15; Henry F. Helmholtz (Urinary Tract Infections), October 15; Arild Hansen (Nutritional Needs in Childhood), October 16 and 17; Allan M. Butler (Fluid and Electrolyte Balance), October 18 and 19. Program details can be found on departmental bulletin boards or the Office of Postgraduate Medical Education, M-332...Temporary buildings will be erected on the campus as soon as they are made available by the Navy through a special federal project. Additions to the Medical School, Hospital, Health Service, Union, Library, Arts College, and others are planned....Minnesota is now fourth largest in size, ranking behind California (1) with its three campuses, and New York (2), and Columbia (3). Large numbers of students sit on the grass and on the floors between classes and one wonders what will happen when cold weather drives them all indoors. ...If your parking permit tag is not in good order, you had better secure a duplicate from the Superintendent's Office as the Police Department is active again...On Wednesday, October 2, I spoke in Duluth for the Extension Division before a large audience in the Duluth Chamber of Commerce. The group was interested in Disease of the Eye and Sight Conservation. This was one of a series of similar meetings on health subjects which have been held in Duluth for some years. Over 750 persons attended the cancer meeting last year. The Gopher Limited which leaves at 5 and arrives in Duluth at 8 is still minus its diner. This was one of the good trips to make because of the convenience of leaving at the end of the day and eating enroute.... E. A. Meyerding, Executive Secretary, Minnesota Public Health Association is sponsoring a 3-day course at the Center for Continuation Study, October 22, 23, and 24, on Tuberculosis Control....A cancer conference will be held at the Center Thursday, Friday, and Saturday, January 2, 3, and 4, 1947 for 200 physicians from

North and South Dakota, and Minnesota. Meeting will be sponsored by the American Cancer Society and the Minnesota Cancer Society....The University of Minnesota will sponsor a one-day conference on Polio myelitis, Friday, November 15, following the American Public Health meeting in Cleveland...I received a letter today from Bjarne Pearson, Professor of Pathology and Chairman of the Department, University of Vermont, College of Medicine, Burlington. Bjarne who got his start here and at L.S.U. and Tulane has gone far. While a student at St. Olaf he wrote the Rise and Fall of the Roman Empire, 350 times for students who were too lazy to write their own themes....Ray Allen, the new president of the University of Washington at Seattle has made a good start, according to Margaret Grytbaek who visited the hospital this week....This week the mighty hunter William Thomas Peyton goes forth on an expedition to lay up food for the Peytons for the winter. We hope he does better than he did on his fishing jaunt to Montana this summer, when it is alleged he almost caught one fish. He is so hunting minded that he wears a tie with little flying ducks on it..... Plans for the Mayo Memorial Building are being developed in Superintendent R. M. Amberg's Office by the various staff members as they are called into consultation. The new building will extend from the steps of the Elliot Memorial Hospital to the steps of the Medical Science Building down through the flower bed. The new entrance to the hospital will face East and a large underground parking garage is being considered. Approximate floor space of the unit proper will be 50 x 250 and it will be 18 stories in height, 15 above and 3 below ground. When the building is completed, the auditorium will be located on the Medical Sciences side and every part of the medical school and hospital will be connected except for the gap in the Anatomy Building....The Heart Hospital will extend from the Pediatric side of the Hospital down to the river road and I am told that one of its unique features will be a completely equipped small theater where the latest motion pictures will be shown and radio and motion picture celebrities will be booked....The Graduating Senior Class will have a 6-month vacation which they hope to profitably use for graduate study, assistantships, internships, etc