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Minnesota University Hospitals.
Bulletin of the



University of Minnesota Hospitals and Minnesota Medical Foundation



Hospitals Report 1951-1952

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BULLETIN OF THE
UNIVERSITY OF MINNESOTA HOSPITALS
and
MINNESOTA MEDICAL FOUNDATION

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Friday, October 3, 1952

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Greetings to the Staff:

Today we begin a new series of meetings which mark the start of another academic year. The care of patients, medical teaching, and research continue the year round, but each fall we make a new start--reappraise our accomplishments, re-plan our program, and evaluate our activities and efforts for the year ahead.

On the medical campus we have seen the completion and the start of operation of the new Variety Club Heart Hospital. The Mayo Memorial is well under way, and the new laboratory building of the College of Medical Sciences is beginning to show above ground. Before another year passes the work will be much farther along on these two new units, and in the following year we hope to occupy both of these structures. We hope that their completion will make your work more pleasant and more effective and that they will mark the realization of a long dream.

To the new members of the staff, we extend a hearty welcome! Most unique of the qualities of our College of Medical Sciences, of which the University Hospitals is a part, is the teamwork which prevails, not only within departments, but between departments. Those of you who are newcomers we welcome as members of this team and assure you that we will enjoy working with you, and we hope that you will enjoy your work here and be gratified by your achievements and personal advancement.

Several former members of the staff have gone elsewhere and we wish them luck. I am sorry to have these fine members of our group leave but am happy for the opportunities that have been presented to them elsewhere.

To all the staff we are glad that you are back again. The College of Medical Sciences has been proud of your achievements in the past and looks forward with anticipation to your success in the future.

Harold S. Diehl, Dean

I. HOSPITALS REPORT - 1951-52

UNIVERSITY OF MINNESOTA HOSPITALS

Ray Amberg, Director

The University of Minnesota Hospitals was established to furnish a means for the University of Minnesota to train medical, nursing and other students in the medical auxiliary field in the disciplines of 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 members. 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 students but also as an economical means for the state to care for many of its indigent sick.

For years the Minneapolis General Hospital and the Ancker Hospital in St. Paul were the principal teaching hospitals of the University of Minnesota, but in 1911, through the generosity of the family of Dr. Adolphus S. Elliot, Elliot Memorial Hospital was erected. This was a general hospital of 200 beds. Since the establishment of Elliot Hospital a service building has been added by the University of Minnesota. The relatives of Dr. Frank C. Todd and other citizens donated funds to build Todd Hospital for the care of ear, eye, nose and throat cases. This unit was opened in 1924. The Citizens Aid Society of Minneapolis contributed funds for the establishment of a cancer institute. Another unit was added to the hospital later which includes the Eustis hospital for children, the Health Service for students, a unit for women--including obstetrical patients--and an out-patient department. A psychiatric unit was provided by the legislature in the year 1937. Together these units make up a series of hospitals known as the University of Minnesota Hospitals and have a rated capacity of 450 patients.

The Variety Club Heart Hospital was opened to patients during the year, and

the first patients with heart disease were admitted on March 18, 1951. The hospital is an integral part of the University of Minnesota Hospitals, and patients are admitted through the Main Hospital Admission Office. Both pediatric and adult patients are given complete physical examinations before referral to the Heart Hospital for special care. Cardiac patients may be treated on an out-patient basis or may be referred to one of the in-patient services. All patients admitted to the Heart Hospital are referred by the family physician in the same manner as other patients referred to the University Hospitals.

The Out-Patient Department has a waiting room, eight examining rooms, a fluoroscopic room, laboratory, ECG and BMR rooms. The Minneapolis School Heart Clinic is a part of the out-patient clinic service for children. Adult clinics are held on Monday, Wednesday and Friday.

Approximately eighty patients can be accommodated in the Heart Hospital, and complete in-patient services are available including occupational therapy, social service and a patients' library.

The Variety Club Theatre is a part of the Heart Hospital facilities and can be used to show full length movies, and on its completely equipped stage other types of entertainment are offered patients.

The Variety Club Heart Hospital was made possible by funds provided by the Variety Club of the Northwest, the United States Public Health Service and the University of Minnesota. The fourth floor of the Heart Hospital provides facilities for research and study in the causes, prevention and treatment of rheumatic fever and heart diseases, especially those affecting children. This program is sponsored by the American Legion and Women's Auxiliary, Department of Minnesota. The Clark Professorship provides for research in cardiac and cardio-vascular diseases are related to the older age groups.

A new child psychiatric unit, event-

ually to provide patient space for twenty-four patients and an out-patient service, will be opened on October 1, 1952. Funds have been provided by the legislature for the operation of this unit on a limited scale for the year 1952-53, and hopes are strong that a complete unit will be made available for the next biennium.

After several years of planning and some delays due to the advance in costs of construction, the Mayo Memorial is now on its way to becoming a reality. The Mayo Memorial Medical Center will provide much needed space for an expanded research and teaching program, in addition to providing for approximately 170 beds to become part of the in-patient service. A physical rehabilitation center will occupy two floors in the tower of the building. Facilities will also be available to the School of Public Health, Department of Bacteriology, Department of Continuation Medical Education, Mayo Foundation offices and the administrative offices of the dean of the College of Medical Sciences, and also other departments of the Medical School. With these expanded facilities the University of Minnesota Medical School will be able to make a greater contribution to the health needs of the citizens of Minnesota in addition to making its professional contribution to the general medical field.

Often the question arises, "Just how big should the University Hospitals be?" The university and the faculty of the medical school I think are in pretty good agreement that the Hospitals should be large enough to do its job of teaching and investigation and research, and--no larger. The Hospitals should have the support of the medical profession in the state so that enough patients are sent to it by physicians in the home communities to assure a well rounded clinical service in both the in-patient and out-patient, as well as the special, services.

The University Hospitals assumes the responsibility for providing the clinical laboratory facilities for undergraduate students in medicine, graduate students

in medicine, postgraduate students in medicine, graduate students in nursing, undergraduate students in the degree course in nursing, practical nursing, and practical nursing and homemaking, undergraduate students in nutrition and dietetics, undergraduate students in physical therapy, occupational therapy, social service, pharmacy, medical technology and others.

The number of students involved in training programs such as accomplished by the groups listed above requires that there are many contacts with patients that do not usually occur in most hospitals. Because all clinical training is based upon preceptorship ideals and standards, performance of patient care must be of the best. No one would be interested in having a training program in which the best care or the best methods of teaching were not involved.

The University Hospitals presents a great competitive unit for the funds of the state that are available for education. The attitude of the General University is that unless it were for the training program of professional personnel for the care of the sick they would rather not be in the hospital business. This is easily understandable. The University Hospitals studiously avoids competition with private practice, having the feeling that it is not fair to train a physician to take care of the ill of the state and then unfairly compete with him. The staff, I am sure, is aware of this attitude and cooperates whole-heartedly.

UNIVERSITY HOSPITALS ADMISSION POLICY

In applying for admission to the Hospitals, it is required that the patient be referred 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. This same policy holds true for patients admitted to the Heart Hospital.

Patients are classified according to

their ability to pay as County, Per Diem, Teaching and Research, Sixty Fund, Eustis, Private, and, in the case of the Heart Hospital, the Variety Club of the Northwest Fund. 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 outpatient 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 outpatient 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 Child Psychiatric Fund is a special grant from the state legislature which is used to hospitalize indigent children with psychiatric problems 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.

The Variety Club of the Northwest Fund is a special annual gift from the Variety Club to assist in the care of patients from any of the communities in the Club area, which includes Minnesota, North Dakota, South Dakota, parts of Wisconsin or any other area indicated by the Club. Patients may be admitted for care on this fund on the usual recommendation of a physician. The Variety Club itself may at times wish to indicate and request service for certain patients in which they have a special interest, care to be paid for through this fund. No charge will be made for the professional services of the staff--only for clinic or hospital expenses.

Student Health Service patients are not considered as being Hospitals patients even though a Hospitals intern is assigned to that service. The Student Health Service has its hospital quarters in the University Hospitals but 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. The new Student Health Service is located on Church Street west of the Hospitals. This provides outpatient care only. The infirmary occupies the fourth floor of the North wing of the Hospitals as in the past.

IN-PATIENT DEPARTMENT

The number of patients admitted for the year 1950-51 was 10,831, and for the year 1951-52, the number was 11,444--an increase of 613. The total number of days of hospital treatment aggregated 142,885 for 1950-51 and 153,224 for 1951-52, the largest number of hospital days in the history of the Hospitals. The average number of days per patient stay in the hospitals was 13.3 in 1950-51 and 13.4 in 1951-52. Deaths for the past

year numbered 479 as compared with 459 the previous year. This is a mortality percentage of 4.1 which is the same as that for the year 1950-51. (The figure for deaths includes stillbirths and coroner's cases). Post mortems for the year 1950-51 numbered 341, an average of 81% of deaths, and in 1951-52, the number was 363, an average of 81%. Regarding autopsies, I wish to quote the following from a letter from the American Medical Association, dated September 22, 1952: "According to our records, University of Minnesota Hospitals maintained an autopsy record of 81% for the last reporting period. On this basis, it will be included in the list of the twenty nonfederal hospitals with the highest autopsy rate of those approved by the Council for intern training. This list will be published in the Internship and Residency Number of The Journal in the September 27 issue. The efforts of the hospital staff and administration in establishing this record are most commendable. In behalf of the Council, I should like to extend congratulations on your achievement. Signed, Edward H. Leveroos, M. D., Associate Secretary".

The daily average number of patients was 391 in 1950-51, and in 1951-52 the number was 418. Surgical operations performed during the year 1950-51 aggregated 7,783 and during 1951-52, 7,441, a decrease of 342.

OUT-PATIENT DEPARTMENT

The number of new patient visits in 1950-51 was 16,113 and in 1951-52, 18,902. Total patient visits for 1950-51 were 100,656 and for 1951-52, 99,501.

GENERAL REMARKS

The In-Patient service showed an increase of 10,339 patient days over last year, and the Out-Patient Department showed a decrease of 1,155 visits.

The Psychopathic Department of the Hospitals admitted 287 patients during

1950-51 and 290 in 1951-52. The patients in the Psychopathic Hospital used 9,738 patient days in 1951-52 as against 9,605 during 1950-51. Please note that the figures from the Admission Department are used rather than those from the Bookkeeping report. The difference is accounted for by the fact that patients transferred to another service may still be housed on Station 60, and the Bookkeeping Department carries them on the psychiatric service.

The waiting list of the Hospitals showed 152 patients on July 1.

In the Out-Patient Department the cost per patient visit was \$4.09 in 1950-51 and \$4.35 in 1951-52, an increase of 26¢ per patient visit. The cost of operating the In-Patient Department was \$18.86 in 1950-51 and \$21.74 in 1951-52, an increase of \$2.88 per patient day.

The X-Ray Department reports 62,968 procedures for the year 1951-52 as against 65,670 for the year 1950-51.

The Department of Deep X-Ray Therapy gave 8,031 deep therapy treatments during 1951-52 as against 7,494 in 1950-51. There were 1,113 superficial therapy treatments given in 1951-52 and 1,126 in 1950-51.

The number of hospital prescriptions filled was 109,430 in 1951-52 and in 1950-51, the number was 112,058. For the Health Service and Out-Patient Department the year 1951-52 showed 34,562 prescriptions filled as against 35,570 for the previous year.

The Hospital Laboratory made 402,416 determinations during the year 1951-52 as against 411,344 the previous year.

The Physical Therapy Department reports 23,825 treatments for the year 1951-52 and 25,194 treatments for 1950-51.

The specific department reports will be presented at the time of their staff meeting assignments.

The administration of the Hospitals wishes to thank the National Foundation for their assistance in connection with poliomyelitis. The administration also wishes to thank the Variety Club for their support to the Variety Club Heart Hospital; the University Faculty Women's Club who have continued their generous efforts in behalf of our patients; the Crippled Child Relief, the Minnesota Society for Crippled Children and Disabled Adults, the State Division of Social Welfare and the County Welfare Boards for their assistance; the various Nursing Homes for their cooperation; the Traffic Club who year after year continue to provide entertainment, gifts, and cheer to our patients at Christmas;

the Sunshine Club for their contributions; the Camp Fire Girls; the Girl Scouts; the Needlework Guild, the Junior League, the Federated Church Women, the Gilfillan Fund of the Mayo Clinic. The Hospitals sincerely appreciated the interest of these various organizations in our patients. We wish to thank the many people throughout the state who have contributed to the Heart Fund and the Cancer Fund during the past year. 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.

UNIVERSITY OF MINNESOTA HOSPITALS

Statement of Income & Expenditures

June 30, 1952

INCOME

County & State Reimbursement	\$ 1,953,020.81	
Pay Bed	1,072,544.11	
Minnesota Hospital & Home for Crippled Children	55,000.00	
Psychopathic Hospital	216,956.00	
Out-Patient Department	105,800.36	
University Funds	159,433.00	
Student Health Service	56,727.83	
Variety Club Heart Hospital	25,000.00	
Other Funds	<u>113,689.15</u>	\$ 3,758,171.26

EXPENDITURES

Salaries and Wages	\$ 2,376,414.02	
Supplies and Expense	<u>1,387,954.24</u>	<u>\$ 3,764,368.26</u>
OVERDRAFT - June 30, 1952		<u>\$ 6,197.00</u>

COST OF OPERATION

<u>Year</u>	<u>Out-Patient Dept.</u>	<u>In-Patient Dept.</u>	<u>Out-Patient Visit</u>	<u>Hospital Day</u>
1946-47	\$ 263,389.11	\$ 1,740,182.00	\$ 3.14	\$ 12.02
1947-48	334,800.00	2,232,041.50	3.72	16.31
1948-49	330,285.63	2,470,630.55	3.43	17.56
1949-50	393,924.24	2,613,295.32	3.82	18.56
1950-51	411,346.29	2,695,796.40	4.09	18.86
1951-52	433,190.27	3,331,177.99	4.35	21.74

COMPARATIVE TWELVE-MONTHS REPORT

IN-PATIENT DEPARTMENT

	1950-51	1951-52		1950-51	1951-52
<u>Total Patients Admitted</u>			<u>Average Days per Pt.</u>		
Private	2,696	2,728	Private	9.	8.1
Per Diem	1,899	2,330	Per Diem	12.6	12.2
Eustis	162	162	Eustis	14.8	13.
Teaching & Research	171	143	Teaching & Research	12.3	9.6
Staff	107	89	Staff	4.3	5.3
County	4,259	4,838	County	17.3	17.4
Health Service	1,085	843	Health Service	4.	3.7
Psychopathic	156	155	Psychopathic	34.9	29.2
Private	93	58	Private	26.8	30.1
Per Diem	52	79	Per Diem	35.5	48.4
Variety Heart Hospital			Variety		25.5
Fund	151*	19			
	<u>10,831</u>	<u>11,444</u>			
<u>Total Patients Treated (Discharged)</u>			<u>Average Length of Stay per Patient</u>	13.3	13.4
Private	2,617	2,652			
Per Diem	1,834	2,163	<u>Daily Average Number of Patients</u>		
Eustis	182	183	Private	65.	58.9
Teaching & Research	181	145	Per Diem	63.5	72.8
Staff	107	85	Eustis	7.4	6.5
County	4,406	4,980	Teaching & Research	6.1	3.8
Health Service	1,083	843	Staff	1.2	1.2
Psychopathic	171	199	County	208.8	237.7
Private	84	65	Health Service	11.9	8.6
Per Diem	46	50	Psychopathic	16.3	13.2
Variety		24	Private	6.2	5.3
	<u>10,711</u>	<u>11,389</u>	Per Diem	4.4	6.6
			Variety		1.6
<u>Total Days Hospital Care</u>			<u>Daily Average Census for Hospital</u>	391	418
Private	23,726	21,536			
Per Diem	23,207	26,578			
Eustis	2,709	2,395			
Teaching & Research	2,230	1,404			
Staff	467	452			
County	76,241	86,868			
Health Service	4,370	3,167			
Psychopathic	5,977	5,828			
Private	2,252	1,961			
Per Diem	1,635	2,422			
Variety	71	613			
	<u>142,885</u>	<u>153,224</u>			
*This figure represents transfers to the Heart Hospital which were carried as Admissions in Bookkeeping Report					

COMPARATIVE TWELVE-MONTHS REPORT

IN-PATIENT DEPARTMENT

Service	Admissions		Patient Days		Av. Length of Stay	
	1950-51	1951-52	1950-51	1951-52	1950-51	1951-52
Surgery (inc. general, tumor, reconstruction, chest)	1,911	1,908	26,400	25,033	14	13
Urology	815	868	10,437	9,657	12	11
Orthopedics	203	211	5,407	5,312	27	25
Neurosurgery	409	438	4,680	4,956	11	11
Totals	3,338	3,425	46,924	44,958		
Physical Medicine		2		18		9
Medicine	1,316	1,789	21,469	29,592	21	21
Neurology	628	578	9,009	7,983	17	16
Dermatology	112	153	2,284	2,915	22	20
Totals	2,056	2,522	32,762	40,508		
Psychiatry	287	290	9,605	9,738	34	30
Ophthalmology	204	167	3,012	2,389	15	14
Otolaryngology	269	252	2,211	1,927	9	8
Totals	473	419	5,223	4,316		
Gynecology	355	382	2,792	2,741	8	8
Gynecology Tumor	332	498	4,125	5,896	11	11
Totals	687	880	6,917	8,637		
Obstetrics	661	615	5,809	4,577	9	8
Newborn Pediatrics	501	479	4,428	3,726	9	8
Pediatrics & Specialties	1,670	1,915	26,861	33,475	16	18
Health Service	1,158	899	4,356	3,289	4	4
Totals	10,831	11,444	142,885	153,224	13	14

COMPARISON OF LENGTH OF STAY

Service	1941-42	1942-43	1943-44	1944-45	1945-46	1946-47	1947-48	1948-49	1949-50	1950-51	1951-52
General Surgery	15.9	15.7	18.4	18.5	15	14	15	14	14	14	13
Urology	11.1	11.8	11	12.1	15	13	12	12	11	12	11
Orthopedics	34.3	27.4	27.5	27.2	31	39	22	28	24	27	25
Neurosurgery	15	16.3	20.1	18	15	16	12	13	12	11	11
Tumor Surgery	10.4	8.6	11.6	13.9	12	10	12	10	12	Included in General Surgery	
Reconstruction Surgery	24.9	20.9	31.1	35.1	29	41	23	19	25		
Chest Surgery	32	--	--	--	--	--	--	24	25		
Physical Medicine	--	--	--	--	--	--	--	--	--	--	9
Medicine	16.3	14.7	16.3	15.5	19	21	18	17	18	21	21
Neurology	12	14.7	14.8	20.4	16	16	17	14	16	17	16
Dermatology	13.6	16	23.5	14.5	16	18	19	21	21	22	20
Psychiatry	34.3	35.2	37.3	37.6	31	35	32	29	26	34	30
Ophthalmology	12.1	16.3	13.5	16.5	16	16	15	15	12	15	14
Otolaryngology	5.7	6	7.2	7.8	8	7	7	8	8	9	8
Gynecology	9.5	11.9	11.3	12.7	14	11	11	8	11	8	8
Tumor Gynecology	45.1	31.6	37.6	47.4	37	57	35	18	19	11	11
Obstetrics	13.3	12.6	15.8	16.4	15	14	12	11	10	9	8
Newborn Pediatrics	11.2	18.5	12.6	14.3	13	10	11	9	9	9	8
Pediatric Spec.	21.5	23.5	24.6	20.6	22	18	16	14	14	16	18
Ambulatory	1.5	3.4	2.4	--	--	--	--	--	--	--	--
Health Service	4.2	4.9	5.2	5.2	4	4	4	4	5	4	4
Tbc. Surgery	64	--	--	--	--	--	--	--	--	--	--
TOTALS	15	14.6	15.6	16.6	16	15	14	13.2	12.7	13	14

COMPARATIVE TWELVE-MONTHS REPORT

OUT-PATIENT DEPARTMENT

Service	New Patients		Revisits		Totals	
	1950-51	1951-52	1950-51	1951-52	1950-51	1951-52
Medicine						
Polio & Polio Exam.	5		305	191	310	191
General	3,783	3,410	15,907	13,677	19,690	17,087
Cardiac (adult)	412	468	1,793	2,052	2,205	2,520
Chest	127	73	649	535	776	608
Diabetic	142	116	1,322	1,275	1,464	1,391
Gastric Expression	302	248	583	291	885	539
Metabolism	124	109	1,030	957	1,154	1,066
Neurology	590	510	1,900	1,689	2,490	2,199
Psychiatry	524	415	2,021	1,962	2,545	2,377
"L" Clinic	12	21	121	68	133	89
Dermatology	462	454	2,994	3,622	3,456	4,076
Surgery						
General	956	807	6,203	5,427	7,159	6,234
Genito-Urinary						
Female	204	167	755	706	959	873
Male	501	447	1,936	1,637	2,437	2,084
Neurosurgery	123	81	558	577	681	658
Reconstruction	56	33	444	397	500	430
Tumor	379	336	4,033	3,658	4,412	3,994
Orthopedics	482	434	1,344	1,073	1,826	1,507
Proctology	246	273	902	753	1,148	1,026
W-212	1,280	1,828	8,843	9,443	10,123	11,271
Ear	351	339	1,215	1,390	1,566	1,729
Eye						
General	1,032	880	4,336	4,004	5,368	4,884
Refraction	6		774	864	780	864
Squint			239	253	239	253
Nose & Throat	520	482	1,482	1,698	2,002	2,180
Obstetrics	195	207	1,198	1,094	1,393	1,301
Obstetrics (Night)		5		11		16
Gynecology (Tumor)	42	53	1,077	1,068	1,119	1,121
Gynecology	534	485	1,645	1,586	2,179	2,071
Pediatrics	1,082	1,116	4,446	5,137	5,528	6,253
Pediatrics (Psych)	6		379	158	385	158
Pediatrics (Heart)	34	411	146	1,263	180	1,674
Nutrition	132	159	62	3	194	162
Dental	279	184	1,671	1,922	1,950	2,106
Miscellaneous (Inc. North Clinic)	1,190	4,351	12,230	10,158	13,420	14,509
TOTALS	16,113	18,902	84,543	80,599	100,656	99,501

COMPARATIVE TWELVE-MONTHS REPORT

NORTH CLINIC

Clinic Attendance	New Patients		Revisits		Totals	
	1950-51	1951-52	1950-51	1951-52	1950-51	1951-52
Medicine	924	731	1,615	1,459	2,539	2,190
Neurology	227	197	446	284	673	481
Skin	2	3	1	17	3	20
Surgery	668	655	3,097	3,336	3,765	3,991
Urology	3	250	16	762	19	1,012
Neurosurgery	306	364	412	413	718	777
Deep X-Ray	33	35		29	33	64
Anesthesia	4		6		10	
Orthopedic	1	24		55	1	79
Physical Medicine	8	31	13	24	21	55
Ear			1	2	1	2
Eye	4	1		1	4	2
Nose & Throat	1	2			1	2
Obstetrics	220	192	1,912	1,826	2,132	2,018
Gynecology	304	321	974	1,213	1,278	1,534
Pediatrics	293	318	697	724	990	1,042
Children's Psychiatric	1	6	1	10	2	16
Speech	12		8		20	
Miscellaneous	1		1		2	
Dental		4		3		7
Totals	3,012	3,134	9,200	10,158	12,212	13,292

CASH SUMMARY

	<u>1950-51</u>	<u>1951-52</u>
Admissions	\$ 5,483.59	7,275.06
Laboratory	16,723.75	21,137.12
X-Ray	831.80	1,428.60
Physical Therapy	1,351.05	1,666.25
Miscellaneous	532.25	62.15
Canes	3.00	
Photo.	1.00	
Drugs	242.15	334.91
Bandages	25.75	92.55
Treatments	232.80	1,335.50
	<u>\$25,427.14</u>	<u>33,332.14</u>

COMPARATIVE TWELVE-MONTHS REPORT

HOSPITAL LABORATORY

Laboratory	Number of Determinations	
	1950-51	1951-52
Dispensary	64,836	57,287
Hematology	65,860	61,313
Hematology (Special		1,261
Urinalysis	76,039	105,883
Chemistry	49,540	45,734
Liver Functions	6,604	6,019
Liver Functions (T & R)	---	87
Heart Hospital	400	3,291
Clerks'	48,443	18,695
Blood Bank	43,721	43,191
Bacteriology	20,286	26,056
Electrocardiography & Metabolism	9,118	7,525
Heart Catheterization		270
Tissues	5,808	5,332
Tissue Blocks	18,602	18,522
Serology, Parasitology	<u>2,087</u>	<u>1,950</u>
TOTALS	411,344	402,416
Cancer Detection	18,582	19,806
Electro-Encephalography	1,096	872
Student Health Service	55,182	48,804
Heart Hospital	2,403	17,588
North Clinic	3,917	7,299

COMPARATIVE TWELVE-MONTHS REPORT

PHARMACY

Month	Out-Patient Department, Health Service, Heart Hospital Rx		Hospital Rx (Including Heart Hosp.)		Total Rx	
	1950-51	1951-52	1950-51	1951-52	1950-51	1951-52
July	3,157	2,796	9,597	8,640	12,754	11,436
August	3,470	3,050	8,962	9,204	12,432	12,254
September	2,722	2,603	8,775	7,748	11,497	10,351
October	2,919	3,106	8,608	8,975	11,527	12,081
November	2,957	2,759	9,957	9,168	12,914	11,927
December	2,579	2,589	9,510	9,289	12,089	11,878
January	3,048	3,012	9,836	9,016	12,884	12,028
February	2,611	2,770	8,903	8,671	11,514	11,441
March	2,778	2,992	9,667	10,567	12,445	13,559
April	3,059	2,996	9,147	9,639	12,206	12,635
May	3,211	3,012	9,735	9,626	12,946	12,638
June	3,059	2,877	9,361	8,887	12,420	11,764
TOTALS	35,570	34,562	112,058	109,430 Allerg. Rx	147,628 1,381 <u>149,009</u>	143,992

COMPARATIVE TWELVE-MONTHS REPORT

OPERATING ROOMS

Service	Major		Minor		Totals	
	1950-51	1951-52	1950-51	1951-52	1950-51	1951-52
<u>Main Operating Room</u>						
General Surgery	861	724	389	409	1,250	1,133
Gastric	254	241	7	1	261	242
Colon	202	140	4	---	206	140
Comb. Abd. Perin. Resection	47	32	---	---	47	32
Esophagectomy	4	25	---	---	4	25
Super Radical Mastectomy	13	5	---	---	13	5
2nd Looks	15	1	---	---	15	1
Stomach	6	3	---	---	6	3
Colon	6	3	---	---	6	3
Rectum	3	4	---	---	3	4
Neck	115	90	32	21	147	111
Cardiac	68	105	---	---	68	105
Thoracic	94	106	6	6	100	112
Plastic Surgery	57	39	70	144	127	183
Proctology	7	5	98	90	105	95
Neurosurgery	383	407	108	75	491	482
Urology Surgery	205	266	29	50	234	316
Orthopedics	2	22	6	28	8	50
Fractures	---	1	2	5	2	6
Casts	1	---	10	11	11	11
Gynecology	17	28	1	10	18	38
Otolaryngology	2	2	20	9	22	11
	<u>2,362</u>	<u>2,249</u>	<u>782</u>	<u>859</u>	<u>3,144</u>	<u>3,108</u>
<u>Cystoscopy Department</u>						
Cystoscopies	---	---	966	909	966	909
Transurethral Resection & Operative Procedures	500	467			500	467
Minor Non-Cystoscopies	---	---	609	396	609	396
X-Rays	---	---	575	629	575	629
	<u>500</u>	<u>467</u>	<u>2,150</u>	<u>1,934</u>	<u>2,650</u>	<u>2,401</u>
<u>West Operating Room</u>						
Orthopedics	71	94	92	118	163	212
Casts on Non-Operatives	---	---	107	76	107	76
Casts on Operatives	54	98	---	---	54	98
Fractures	65	69	37	37	102	106
Gynecology	201	190	203	230	404	420
	<u>391</u>	<u>451</u>	<u>439</u>	<u>461</u>	<u>830</u>	<u>912</u>
<u>East Operating Room</u>						
Ophthalmology	179	168	121	98	300	266
Otolaryngology	165	140	549	487	714	627
Dentistry	12	14	22	24	34	38
Plastics	62	37	49	52	111	89
	<u>418</u>	<u>359</u>	<u>741</u>	<u>661</u>	<u>1,159</u>	<u>1,020</u>
<u>SUMMARY</u>						
Major					3,671	3,526
Minor					4,112	3,915
					<u>7,783</u>	<u>7,441</u>

COMPARATIVE TWELVE-MONTHS REPORT

PHYSICAL THERAPY DEPARTMENT

Type of Treatment	Number of Out-Patient Treatments		Number of Hospital Patient Treatments		Total Number of Patient Treatments	
	1950-51	1951-52	1950-51	1951-52	1950-51	1951-52
Diathermy (Short Wave)	1,134	1,234	170	231	1,304	1,465
Ultra Violet	490	190	464	536	954	726
Radiant Heat - Infra Red	1,387	745	810	1,151	2,197	1,896
Massage-Muscle Training	2,068	1,882	904	1,579	2,972	3,461
Exercise	4,265	3,385	7,602	7,552	11,867	10,937
Fever (Short)	70	27	4	---	74	27
Paraffin Bath	517	183	116	119	633	302
Blood Pressure & Hypo	349	135	8	---	357	135
Whirlpool	1,086	780	410	722	1,496	1,502
Galvanic-Faradic-Sine	331	263	152	84	483	347
Hot Packs	463	454	1,114	1,614	1,577	2,068
Polio Clinic	303	183	---	---	303	183
Consultations in Clinic	977	776	---	---	977	776
TOTALS	13,440	10,237	11,754	13,588	25,194	23,825
New Patients	302	313	450	379	752	692
No. of Patients Treated	5,918	4,521	8,089	7,846	14,007	12,367

COMPARATIVE TWELVE-MONTHS REPORT
X-RAY REPORT

Parts Examined	1950-51	1951-52
Abdomen	1,992	1,524
All. Vascular Radiography (cerebral, venous, arterial, cardiac)	314	308
Ankle and Foot	528	555
Arm, Forearm, Elbow	501	477
Bronchogram	159	98
Chest	13,832	14,584
Cholangiogram	152	142
Colon	2,684	2,475
Cystourethrogram & Cystogram	229	247
Encephalogram	240	193
Facial Bones	277	180
Gall Bladder	886	656
Heart Catheterization	---	86
Heart	1,441	2,487
Hip Nailing	---	15
Hysterosalpingogram	---	7
Miscellaneous	262	99
Pelvimetry	80	144
Pelvis & Hip Joints	1,958	1,945
Planogram	103	170
Ribs & Sternum	185	238
Shoulder Girdle	395	326
Sinuses, Paranasal & Mastoids	484	569
Skull, Orbits, Sella Turcica	1,797	1,821
Small Bowel	172	130
Spine	2,318	2,239
Spinogram	---	132
Stomach, Duodenum, Esophagus	5,178	5,681
Thigh, Leg, Knee	1,026	1,195
KUB	969	875
IVP	1,326	1,234
Urography, Retrograde	395	319
Ventriculogram	83	67
Wrist & Hand	482	499
TOTAL RADIOGRAPHIC EXAMINATIONS	40,448	41,717
<u>PHOTOFLUOROGRAPHY</u>		
Students' Health Service	4,278	---
Employees	1,601	1,574
Admission Cases	7,077	7,099
	12,956	8,673
<u>FLUOROSCOPY</u>		
Out-Patient Routine	1,654	1,018
Diagnostic	10,612	11,560
	12,266	12,578
TOTAL DEPARTMENTAL PROCEDURES	65,670	62,968
<u>PATIENTS</u>		
Cancer Detection Center	2,141	3,627
Hospital	10,496	11,491
Variety Club Heart Hospital	433	3,388
Out-Patient Department	13,056	9,519
Students' Health Service	1,472	593
Private	4,424	4,137
Miscellaneous	1,050	533
	33,072	33,288

COMPARATIVE TWELVE-MONTHS REPORT
X-RAY THERAPY DEPARTMENT

TYPE OF TREATMENT	1950-51	1951-52
<u>Deep X-Ray Treatments (400,200 KV)</u>		
New Patients Treated	462	479
Patients Retreated	160	174
TOTAL NUMBER OF PATIENTS TREATED	622	655
Hennepin County Patients	81	106
Ramsey County Patients	41	34
TOTAL COUNTY PATIENTS	303	334
Out-Patient Treatments	4,339	4,070
House-Patient Treatments	3,155	3,961
TOTAL NUMBER OF TREATMENTS	7,494	8,031
Average No. Treatments per Patient	12	12.2
<u>Superficial X-Ray Treatments</u>		
140 KV	212	148
100 KV		
Out-Patient Treatments	1,083	1,051
House-Patient Treatments	43	62
TOTAL NUMBER OF TREATMENTS	1,126	1,113
<u>Phillips Contact Treatments</u>	54	18
<u>Radium</u>		
Total Number of Treatments	202	189
New Patients Treated	157	154
<u>Radon</u>		
Total Number of Treatments	233	108
New Patients Treated	25	17
<u>Radioactive Iodine</u>		
Total Number Tracer Studies & Treatments	708	789
Number New Patients Given Tracer Study	510	589
Number Patients Given Repeat Tracer Study	198	145
Number New Patients Given Treatment	46	33
Number Patients Given Retreatment	76	55
Total Number Millicuries Used for Treatment	2,722.6	2,762.5

SOCIAL SERVICE DEPARTMENT

Statistical Report

Total Number of Cases Handled by the Department.....11,939
 Medical Social Service Cases.....10,264
 Psychiatric Social Service Cases..... 1,675

Classification of Cases

	<u>Medical</u>	<u>Psychiatric</u>
Recorded.....	844	1,675
Summarized.....	5,628	
Courtesy.....	3,792	
Total Average per Worker (Medical).....	1,140	
Total Average per Worker (Psychiatric).....		335

Staff

Total.....	20
Director.....	1
Chief Psychiatric Social Worker.....	1
Supervisors.....	2
Medical Social Workers.....	9
Psychiatric Social Workers.....	5
Stenographer.....	1
Clerical.....	2

Students (From Oct. 1, 1951 to June 10, 1952)

Medical Social Work.....	3
Psychiatric Social Work.....	6

July 1, 1951 - June 30, 1952

TYPES AND FREQUENCY OF DISEASES TREATED IN OCCUPATIONAL THERAPY

CARDIAC, CIRCULATORY, AND HEMATOLOGIC CONDITIONS

Anemia	59
Arteriosclerosis	11
Bleeding Tendency	32
Carditis	49
Congenital Heart Anomaly	14
Hematoma	43
Hemophilia	45
Hodgkins Disease	47
Hypertension	4
Leukemia	113
Lymphosarcoma	6
Multiple Myeloma	7
Rheumatic Fever	57

DERMATOLOGICAL

Burns	148
Cellulitis	18
Dermatitis	77
Dermatomyositis	12
Eczema	34
Lupus Erythematosus	41
Mycosis Fungoides	27
Pemphigus	22
Plastic Surgery	87
Skin Lesions	49

EAR, EYE, NOSE, THROAT, RESPIRATORY

Asthma	30
Blindness	46
Bronchiectasis	141
Cataract Removal	5
Cleft Palate	58
Ear Injury	4
Eye Injury	47
Malignancies	48
Mastoiditis	19
Meniere Syndrome	7
Otitis Media	16
Otosclerosis	2
Pneumonia	15
Ptosis of Lid	25
Pulmonary Lesions	2
Retinoblastoma	26
Strabismus	8
Tonsillectomy	34
Tuberculosis	18

GASTRO-INTESTINAL-UROLOGICAL-ENDOCRINE

Addisons Disease	23
Appendicitis	17
Bladder Surgery	108
Cancer and Tumor	286
Contagious Diseases	7
Celiac Disease	1
Cirrhosis	15
Colostomy (Closed)	48
Congenital Malformations	15
Diabetes	396
Digestive Disturbances	104
Endocrine Disturbances	151
Fistula	46
Glomerulo-Nephritis	126
Hepatitis	18
Hermaphrodite	23
Herniotomy	44
Kidney Lesion	108
Malignancies	57
Obstetrics	62
Orchiopexy	31
Splenectomy	7
Ulcer	77
Ulcerative Colitis	62

NEUROLOGICAL CONDITIONS

Ataxia	9
Brain Tumor	162
Cerebral Palsy	95
Craniotomy	7
C. V. A.	16
Encephalitis	10
Guillain-Barre's Disease	61
Hemiplegia	378
Meningitis	34
Multiple Sclerosis	51
Muscular Dystrophy	52
Observation	7
Paraplegia	85
Parkinsonism	37
Peripheral Neuritis	75
Poliomyelitis	333
Quadriplegia	96
Seizures (Convulsive)	128
Spinal Cord Injury	31
Sydenham's Chorea	18
Tetanus	1
Tranverse Myelitis	5
Venereal Disease	15
Head Injury	30

ORTHOPEDIC CONDITIONS

Amputee	104
Arthritis	708
Congenital Malformation	89
Fractures	465
Hand Injury	1
Lacerations	15
Legg-Perthe's	2
Malignancies	21
Osteomyelitis	71
Shoulder-Hand Syndrome	29
Slipped Epiphysis	9
Spina bifida	14

PSYCHIATRIC CONDITIONS

Agitated Depression	52
Conversion Hysteria	19
Evaluation and Observation	4,738
Hydrocephaly	14
Mentally Retarded	61
Psychoneurosis	151

BLANKET REFERRALS 103

RESERVED FOR OBSERVATION 409

Total.....12,196

July 1, 1951 - June 30, 1952

STATIONS FROM WHICH PATIENTS WERE REFERRED TO OCCUPATIONAL THERAPY

<u>Department</u>	<u>Station</u>	<u>Number of Referrals</u>
Health Service	56	11
Medicine (General)	30	30
" "	31	15
" "	32	56
Medicine (Urology)	40	10
" "	41	3
" "	42	3
Neurology (Including Swedish Hospital Polio)	50	80
Orthopedics	44	81
"	46	3
Out-Patient Department		60
Pediatrics (Isolation)	33	25
"	43	318
"	53	225
Psychiatry	60-61	372
Surgery	21	10
"	22	9
Obstetrics	54	<u>13</u>
Total.....		1,324
Total number of in-hospital treatments		11,156
Total number of out-patient treatments		1,040
Total number of Heart Hospital treatments (Pediatric-2,861 - Adults-1,691)		<u>4,552</u>
Total.....		16,748
<u>Total number referring physicians</u>		
Psychiatric.....		20
Heart Hospital.....		39
GMS/O University Hospitals.....		<u>54</u>
Total.....		113

COMPARATIVE TWELVE-MONTHS REPORT
WAITING LIST

Service	1945-46	1946-47	1947-48	1948-49	1949-50	1950-51	1951-52
Male Surgery	7	16	88	106	20	46	18
Female Surgery	9	14	43	61	26	39	11
Neurosurgery	1	0	8	0	2	4	2
White Surgery	1	5	10	2	3	0	0
Plastic Surgery	12	9	1	4	8	3	0
Purple Surgery	1	0	10	6	12	0	0
Yellow Surgery	0	0	0	9	7	0	0
Blue Surgery	0	0	0	0	4	0	0
Urology	2	20	65	60	34	37	28
Tumor	0	0	0	0	0	8	2
Orthopedic Pediatrics	1	4	8	13	7	12	3
Reconstruction Pediatrics	6	6	8	0	0	0	3
Surgery Pediatrics	0	0	8	12	4	1	0
Urology Pediatrics	0	0	2	0	0	1	3
Orthopedics	29	21	18	0	14	14	17
Chest	0	0	0	0	1	0	0
Medicine	3	6	7	2	12	12	1
Medicine (Pediatrics)	0	0	0	0	0	0	1
Neurology	0	0	58	47	105	47	30
Neurology (Pediatrics)	0	0	0	0	1	1	1
Psychiatry	7	22	2	10	12	11	7
Psychiatry (Pediatrics)	0	0	0	16	3	0	0
Dermatology	2	20	4	14	0	15	24
Pediatrics	3	6	6	6	6	1	0
Ophthalmology	8	11	0	0	0	0	0
Ophthalmology (Pediatrics)	9	0	0	0	0	0	0
Tonsils & Adenoids	<u>4</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1</u>
	105	160	346	368	281	252	152

ANNUAL REPORT OF THE
MEDICAL RECORD DEPARTMENT

In this report we will attempt to evaluate the progress that has been made this past year in the Medical Record Department.

Twenty sections of Visi Shelves were added to our filing equipment, giving us approximately forty percent more filing space. This has been of great help in solving some of our filing problems since our space is so limited. We have had to orient our staff in the use of these files because shelf filing is a comparatively new type of filing. Out clinic "Out Cards" have been re-designed to the regular chart size so they can be inserted in the files when charts are withdrawn. Heretofore, our cards were of a smaller size, and were being lost in the process of pulling charts.

This past year this department has pulled approximately 166,850 charts. These were divided into the following groups:

Servicing of Out Patient Clinic (this includes clinic trans- fers and failed appointments)	123,249
Studies and Research	17,550
Laboratory, x-ray and Miscellaneous	22,230
Insurance blanks (Blue Cross, Blue Shield, and industrial commission reports)	3,821

Recently more miscellaneous reports have been filed on the patients charts while the patients are still in the hospital. We have also had a greater number of laboratory reports coming to the Record Room. The number of insurance blanks has greatly increased over the past three years.

The number of insurance blanks handled per month was as follows:

July	80
August	153
September	152
October	117
November	136
December	168
January	230
February	166
March	198
April	144
May	189
June	221

The charts of 10,073 discharged and expired patients have been assembled and a report has been kept on the surgical deaths.

We have cooperated with the various departments of the hospital this past year by giving talks on contents, uses, and ethics of the medical record to the following groups of students; hospital administration, post graduate nurses, and physical medicine.

In addition to our other duties, we have been, as in the past, responsible for taking charts that have been subpoenaed to court.

With the addition of another Medical Record Librarian, Miss Bertha Pfenninger, Miss Carlson has been able to devote more of her time to the cross-index and studies.

Miss Carlson recently attended an institute of Medical Record Personnel at the University of Tulsa, Tulsa, Oklahoma, which was sponsored by the American Hospital Association and the American Association of Medical Record Librarians. This institute was very stimulating because the greatest amount of time was spent on the New Standard Nomenclature of Diseases and Operations. This institute was extremely beneficial since our

department is going to begin using this new nomenclature on July 1st.

The number of charts being pulled for studies has greatly increased. Charts for between fifteen to twenty-three studies are being pulled constantly. We have been able to record and punch cards on all corrected, or additional diagnoses which have been brought to our attention by members of the staff. An excellent example of this is the study which is being carried on at the present time, on Strangulation, Obstruction of Intestines, and which we have found to be included under forty-three different code numbers. This has enabled us to add a large number of diagnoses to our cross index which heretofore were unable to be cross indexed. We plan to continue this practice; thereby having more complete studies. A study file has been set up for permanent records of all case studies done. This includes the numbers of the charts so that any doctor may have a complete list to draw from, and he can also refer to any of the studies he has done in the past.

The record committee, with Dr. Charles May as chairman, held three meetings during the year. Several problems were discussed and some recommendations, were made. Topics discussed included the following:

1. The proposed addition of Cardineer as a new and improved method of indexing disease and operations.
2. The problem of indexing the charts of Out Patients.
3. Microfilming
4. The installation of Addressograph in the Admitting Department.
5. Public relations with special emphasis on letters to referring doctors.
6. Regulations governing the use of hospital charts for case studies.

A meeting of the Administrative Committee was held on May 13, 1952. This committee was composed of Dean Diehl, Miss Gilman, Mr. Skinner, the Record Committee, Divisional Department of Heads, and Miss Pfenninger, Medical Record Librarian. The Record Committee which had been appointed to survey the Record and Stenographic Departments, made its final report. The Record Librarian presented a report on the progress that had been made in the two departments. To date a new record committee has not been appointed.

During the past year, a five month course in medical terminology was presented under the auspices of the Medical Record Department. This course was attended by personnel from the X-ray, Stenographic, Record, Admitting, and Anatomy Departments.

We would like to recommend that we do a daily analysis of discharged patients charts when the budget will allow us to have the necessary personnel for this job. By doing this, we would greatly improve the quality of our records.

Respectfully submitted,

Alice Carlson

Alice R. Carlson, R.R.L.
Medical Record Librarian

Bertha Pfenninger

Bertha Pfenninger, R.R.L.
Principal Record Librarian

NUTRITION SERVICE ANNUAL REPORT

FISCAL YEAR 1951 - 1952

RAW FOOD COST:	July	August	September	October	November	December
Patients	12,629.11	12,380.52	11,950.18	13,028.34	12,871.04	13,218.48
House	9,284.56	8,798.07	8,719.32	10,094.95	9,669.84	9,458.74
Total	\$ 21,913.67	\$ 21,178.59	\$ 20,669.50	\$ 23,123.29	\$ 22,540.88	\$ 22,677.22
MEALS SERVED:						
Patients	36,468	34,292	33,048	37,126	38,537	37,885
House	25,265	25,719	22,868	31,615	29,054	27,344
Total	61,733	60,011	55,916	68,741	67,591	65,229
<u>DISTRIBUTION OF RAW FOOD DOLLAR IN PERCENT:</u>						
Patients						
Staples	1.9	1.6	1.7	1.7	1.7	1.8
General Diet	30.9	30.6	31.4	31.1	30.6	31.9
Special Diet	17.3	16.9	16.8	15.1	16.1	16.4
Milk Lab	.8	1.1	.7	1.3	1.0	1.0
Floor Orders	6.8	7.4	6.7	7.0	7.4	7.1
Parties		*			*	*
Total	57.7%	57.6%	57.3%	56.2%	56.8%	58.2%
House:						
Nurses & Internes	41.6	41.7	42.0	42.2	41.5	39.8
Oper. Rm. Nour.	.7	.7	.7	.7	.7	.7
Staff Lunch				.9	1.0	.7
Parties	*					.6
Classes						*
Total	42.3%	42.4%	42.7%	43.8%	43.2%	41.8%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
<u>PER CAPITAL COST:</u>						
Patients per day	\$ 1.038	\$ 1.083	\$ 1.086	\$ 1.050	\$.999	\$ 1.044
per meal	.346	.361	.362	.350	.333	.348
House per day	1.101	1.026	1.143	.957	.996	1.035
per meal	.367	.342	.381	.319	.332	.345
<u>RAW CLASSIFICATION (%):</u>						
Meat, Chse, Eggs	45.4	43.5	47.7	42.8	41.7	41.6
Can Goods, Frt & Veg	20.5	21.8	18.8	18.9	20.1	19.2
Milk & Cream	19.1	19.1	18.3	21.2	21.2	22.1
Fats & Oils	4.6	4.4	4.7	4.8	4.8	5.0
Miscellaneous	10.4	11.2	10.5	12.3	12.2	12.1
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

* less than 1/10 of 1 percent

NUTRITION SERVICE ANNUAL REPORT

FISCAL YEAR 1951 - 1952 (Continued)

January	February	March	April	May	June	Totals	Averages
13,783.83	13,300.97	14,108.74	14,006.39	13,950.53	13,233.65	158,472.08	13,206.01
10,406.11	10,036.72	10,214.98	10,650.95	11,328.19	10,056.56	118,718.99	9,893.25
\$ 24,189.94	\$ 23,337.69	\$ 24,323.72	\$ 24,657.34	\$ 25,288.72	\$ 23,290.21	\$ 277,191.07	\$ 23,099.26
38,426	36,565	40,188	37,819	39,992	36,688	447,034	37,253
30,406	28,079	29,783	30,952	30,497	27,202	340,784	28,399
68,832	64,644	69,971	68,774	71,489	63,890	787,818	65,652
1.4	1.4	1.5	1.2	1.5	1.4	4,281.80	1.6
31.2	31.1	30.7	31.1	29.3	30.7	85,506.57	30.8
16.1	17.2	17.1	17.1	17.0	17.2	46,364.28	16.7
1.2	.7	1.8	1.3	1.1	.9	2,961.54	1.1
7.4	6.6	6.7	6.4	6.4	6.7	19,083.29	6.8
					*	274.60	.2
57.3%	57.0%	57.8%	57.1%	55.3%	56.9%	\$158,472.08	57.2%
41.5	41.5	40.7	41.7	43.3	42.1	114,909.33	41.5
.6	.6	.7	.6	.6	.6	1,825.02	.7
.6	.9	.8	.6	.8	.4	1,674.27	.5
						208.18	.1
						102.19	*
42.7%	43.0%	42.2%	42.9%	44.7%	43.1%	\$118,718.99	42.8%
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	\$277,191.07	100.0%
\$ 1.074	\$ 1.089	\$ 1.053	\$ 1.119	\$ 1.044	\$ 1.080		\$ 1.063
.358	.363	.351	.373	.348	.360		.354
1.026	1.071	1.029	1.032	1.113	1.104		1.062
.342	.357	.343	.344	.371	.368		.354
41.0	41.0	39.5	40.1	42.6	40.3	116,662.24	42.2
21.0	21.0	21.0	20.5	20.5	23.3	57,133.92	20.5
22.0	23.0	24.0	23.6	22.1	21.4	59,658.19	21.3
5.0	4.0	5.3	4.9	4.5	4.4	13,108.13	4.7
11.0	11.0	10.2	10.9	11.3	10.6	30,628.59	11.3
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	277,191.07	100.0%

Gertude Thomas

REPORT OF THE DENTAL SERVICE
UNIVERSITY OF MINNESOTA HOSPITALS
for the period
July 1, 1950 to June 30, 1951

- A. Staff
- B. Teaching Activities
 - 1. Undergraduate
 - 2. Graduate
- C. Service Function
- D. Progress Reports
 - 1. Cleft Palate Problem
 - 2. Accreditation by American Dental Association
 - 3. Health Service Relationship
 - 4. Equipment
- E. Summary
- F. Statistics

Holland, Mellor R., D.D.S., M.S.D.,
Assistant Professor

Holte, Norman O., D.D.S., Clinical
Instructor

Kennedy, Donald R., D.D.S., Teaching
Assistant

Tam, Joseph C., D.D.S., M.S.D., Assistant
Professor

Tornstrom, C. H., D.D.S., Teaching
Assistant and P.M.S. and T.

Watson, Arthur S., D.D.S., Teaching
Assistant

Westerberg, Milton L., D.D.S., Teaching
Assistant

Wilkinson, Charles L., D.D.S., M.S.D.,
Clinical Instructor

Submitted August 30, 1952

Henry B. Clark Jr.
Chairman

Report of the Hospital Dental Service
July 1, 1950 - June 30, 1951

A. Staff

The following persons have served
actively in the Hospital Dental Service
during the past year:

Antonsich, Mrs. Marjorie, G.D.H.,
Hygienist

Brannin, Dan E., B.S., D.D.S., Teaching
Fellow

Clark, Henry B. Jr., M.D., D.D.S., Prof.
and Chairman, Division of Oral Surgery

Cohen, Joseph T., D.D.S., Professorial
Lecturer

Dostal, Donald W., D.D.S., Clin. Asst.
Prof.

Gehrig, John D., D.D.S., Teaching
Assistant

B. Teaching Activities

1. Undergraduate

The admissions clerkship, inaugu-
rated in 1948-49, was continued, but the
amount of time spent in this activity was
reduced to two half-days. It is the feel-
ing of this reporter that the unpopular-
ity of this activity has been due to
paucity of staff to supervise and work
with the dental clerks. There is a great
opportunity to start good interprofession-
al relations on the student level in
enterprises such as this. Unfortunately
it has not been possible to see the de-
velopment of much more than the nodding
acquaintance type of relationship.

The Hospital Tours were continued
as before, each senior student receiving
ten half-days of this indoctrination.
During the past year tours were held in
morning periods only, in response to stu-
dent sentiment through questionnaires
that afternoon activity in the Hospital
was at a low ebb.

A further change, certainly for
the better, was to spread these tours
over four days of the week instead of two.
This permitted observation of a wider

range of types of operations, including more of the head, neck, and jaw areas.

A moderate increase in the amount of operating room surgery by our dental staff (35 cases as against 28 for the previous year) afforded opportunities for the dental students to see more extensive mouth and jaw operations than formerly. While this type of demonstration teaching is always appealing to students, the staff are quite aware of its limitations. The overall survey of activity in the room is observed, but details of operative technic simply cannot be seen by one seated in an observer's rack five or six feet away. The now universally accepted medium of motion pictures fills the gap very satisfactorily, and rapid strides are being taken to document many types of major oral surgical procedures on movie film. Other visual aids such as lantern slides have helped to supply needed details of technic not visible to the observer.

During the period July 1, 1950 to June 30, 1951, the photography department under Mr. Rothenberger, with the assistance of Mrs. Tachibana in the slide library, have provided the following additions to the oral surgery collection:

Colored slides	258
Black and white slides	44
Motion picture film	1885 feet

It must, at length, be conceded that the principal gain in hospital activity for the dental student is simply getting him into the hospital, under some type of planned program. The effects are difficult to define but none the less important. The enhanced impression of patients being treated as a whole is a much needed phase of the modern dentist's training. So much of his dental education is highly specialized, centering around individual tooth units or even parts of teeth, that it is essential he be given practical demonstrations of the effects of bodily health on the oral cavity, and vice versa.

Sincerest thanks are again extended to all medical and other hospital

personnel who gave so generously and cheerfully of their time and energy to continue these essential projects.

2. Graduate

In last year's report it was mentioned that while intermittent hospital periods were valuable for graduate students in oral surgery, an uninterrupted residency or fellowship would be far more suitable.

With this year, then, the policy was established which would provide for all hospital experience to be gained during the final year of the man's program.

The first candidate to begin his course of study under this plan was DR. DAN E. BRANNIN, who enrolled September 16, 1950. Any evolutionary phase between one plan and another must, of course, be attended with some inconsistencies and unplanned practices until the transition is complete. To assist in this change-over a better man than Dr. Brannin could not have been found. His tireless energy, lively interest, and zest for hospital procedures resulted in his virtually covering the in-patient service, while continuing his classroom studies at the same time. The contact gained with many unusual and interesting surgical problems enabled him to study and write up a goodly number and variety of case reports. When he comes to serve his residency he will be already indoctrinated in the ways and means of working in a hospital.

Continuing under the old plan of "mixed" activity was DR. JOHN D. GEHRIG who not only participated in the daytime activities while carrying on his studies and research, but also lived in the hospital and answered the bulk of the night calls. He received the degree of Master of Science in Dentistry, Major: Dentistry (Oral Surgery), Minor: Physiology, on June 16, 1951. His thesis: "Studies of Some of the Effects of Thiopental Sodium on the Syrian Hamster."

DR. DONALD R. KENNEDY, as another

man on Teaching Assistant status, likewise assisted in carrying on the duties of the Hospital Dental Service. Dr. Kennedy received the degree of Master of Science in Dentistry, Major: Dentistry (Oral Surgery), Minor: Bacteriology, on December 21, 1950. His thesis: "Results of Experimental Introduction of Streptococci into the Root Canal of the Rhesus Monkey."

DR. MILTON L. WESTERBERG started his graduate activity March 16, 1951, having been in practice in Wenatchee, Washington, three years. His dental alma mater was Washington University, St. Louis. He plans to make Pathology his minor.

DR. NORMAN O. HOLTE, Clinical Instructor in oral surgery, who has played a leading role in all the dental activities in the hospital, plans to begin a limited program of graduate study, beginning with the summer of 1951.

It is evident from these accounts of the contributions from graduate students, that Dentistry is developing a long traditional lines which have proved so successful in her sister profession of Medicine. Undergraduate instruction, graduate training, and the care of patients are inextricably interwoven to form a pattern of educational experience in keeping with the spirit of a great university.

C. Service Function

The Hospital Dental Service, through its staff and graduate student manpower, continued to render needed dental service to hospital patients as heretofore. The statistical summary of tasks performed is given on page 32 of this report.

This year, again, there are moderate to sizeable increases in numbers of services rendered in all categories but two, and these were nearly the same as in the preceding year. The number of fractured jaw cases is always unfortunately rather small, averaging around one a month. This year there were fifteen, and

a fairly high percentage were complicated cases requiring open reduction in the operating room. The number of patients for extraction of teeth could undoubtedly be increased if interns or residents were on the service for training. Much of this material is referred to the School of Dentistry for care at the present time. Yet the number of patients, 170, is a 20 per cent increase over last year.

The number of night emergency services increased from 41 to 68 this year, and much of this unpleasant but vitally important work was done by Dr. Gehrig. We wish to again stress, as we have in previous reports, that the proper functioning of this night time and week end professional coverage does much to augment and round out the mission of the oral surgery clinic in the dental school, for every patient may be reassured that he may find emergency care night and day through the Hospital Dental Clinic. Not a few of these calls are from the Students' Health Service, and these out-of-hours treatments are cheerfully done, under the new working arrangement which was described in last year's report.

D. Progress Reports

1. Cleft Palate Problem

Following last year's round table discussion no overt project has been formed nor has any new organizational structure arisen to improve the handling of these patients. However there have been some subtle but none the less significant developments in the form of gradual changings of attitudes of those who see and are called on for consultation concerning cleft palate individuals.

The possibility that overzealous effort to close all palates in the first two years of life might result, in at least some cases, in deformity of the maxilla due to interference with growth centers is now firmly established and taken into account by most plastic surgeons.

The field of Orthodontics, once felt by many to be the means of rehabilitating all manner of jumbled dentitions, has now been more justly appraised as a fertile source of information and scientific study of the growth and development aspect, with considerable limitation on the treatment possibilities.

Prosthetic dentistry has assumed a more major place in the list of types of treatment most likely to fulfill the average patient's needs, whether he has a cleft incapable of closure by surgery or a closed palate but mutilated dental mechanism. Surely from the aspects of cost and man-hours of labor it scores much higher than the orthodontic route, if in a given instance both modes of treatment could be used.

2. Accreditation by American Dental Association

At long last, on October 26, 1950, following three and a half years of correspondence and controversy, inspection and approval of our Hospital Dental Service were secured by the Council on Hospital Dental Service of the American Dental Association.

A suitable embossed certificate for display has been promised for an early date but had not been received at the time of this report, June 30, 1951.

3. Health Service Relationship

Arrangements were made on July 26, 1950, to have the Division of Oral Surgery of the School of Dentistry care for in-patient care of Health Service patients as well as night and week-end emergencies. This constituted essentially an administrative clarification but made for better feeling all around. As a matter of actual fact, very little actual patient care has resulted from this plan but it does open the way for additional patient material for teaching and training, and is in keeping with

the policy of other departments in the hospital.

4. New Equipment

Late this year the Business Office of the hospital was approached on the possibility of purchasing some new equipment and refinishing other items that had become unsightly from chipping and soiling due to long use. A request was submitted, after careful study and discussions with the staff, and it is probable that these needed improvements will be forthcoming from special funds under the control of the President.

E. Summary

1. The Hospital Dental Service has continued to perform teaching functions at both the undergraduate and graduate level.

2. Service functions rendered during the past year have continued as heretofore, with definitive care being rendered on the wards, in the dental clinic of the hospital, in the operating rooms, and through referrals to the School of Dentistry.

3. Progress in the care of cleft palate patients and in the new relationship with the Health Service is reported.

4. Approval of the service by the Council on Hospital Dental Service of the American Dental Association was achieved.

F. Statistics

A statistical breakdown of services rendered during the year July 1, 1950, to June 30, 1951, appears on the following page.

HOSPITAL DENTAL REPORT JULY 1950 - JULY 1951

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	Total
No. pts. seen in Dental Clinic	141	155	145	180	160	135	178	146	175	164	172	185	1936
No. of pts. seen on Wards	70	65	75	58	101	56	47	56	62	51	48	63	752
No. pts. referred to S. of D.	19	14	1	12	16	9	21	15	10	18	13	27	175
Full mouth x-rays	12	7	9	20	21	18	12	10	19	23	20	15	186
Partial mouth x-rays	14	6	10	18	17	13	21	13	11	6	4	12	145
Patients for extractions	17	5	15	17	22	14	12	11	25	16	9	7	170
Patients for fillings	7	12	28	27	16	18	19	24	8	10	13	9	191
Prophylaxis	45	20	27	28	42	25	28	31	30	41	36	54	407
Oral Hygiene Instructions	50	40	61	33	51	36	53	27	23	39	19	57	489
Fractured Jaws	4	1	2	1	1	1	0	0	2	0	1	2	15
Operations in O. R. by Dental Staff	2	0	2	1	3	4	7	4	2	5	3	2	35
Assistance with other services in O. R.	0	0	1	0	1	0	0	1	0	1	0	0	4
Night Calls	4	0	5	7	1	1	3	5	4	13	8	17	68
Day Emergencies	1	3	4	5	0	0	7	4	3	6	7	8	48
Treatments	2	4	5	9	7	5	2	17	12	18	3	3	87
General Anesthesia Cases in Clinic	1	1	1	1	1	3	1	4	4	1	3	2	23

II. MEDICAL SCHOOL NEWS

Coming Events

- October 7-8 Continuation Course in Clinical Chemistry for Medical Technologists
October 16-18 Continuation Course in Treatment of Diseases of the Chest for General Physicians
October 20-25 Continuation Course in Gastro-Intestinal Roentgenology for Radiologists
October 30-31 Continuation Course in Medical Economics for Physicians
Oct. 31-Nov. 1 Special Homecoming Program for Physicians (See announcement below)

Greetings

The opening of the academic year is always a stimulating experience -- the memories of a pleasant and refreshing summer, the campus once again filled with students, and the lovely Minnesota Fall season all serve to invigorate us for the year ahead.

It is fitting at this time to extend our sincere greetings to students, faculty members, and friends of the Medical School. In particular we should like to greet those students entering medical school this fall. The four years ahead will, indeed, be busy ones for them. Although they will be discouraged at times, they will find, we are sure, that the study of medicine is the most fascinating and most satisfying of pursuits.

We would also like to extend a special welcome to the new members of our academic staff. We believe that our institution ranks favorably among institutions of medical learning, and we are certain that our new colleagues will find pleasure in joining us in the task of advancing medical science.

Although slowed temporarily during the summer by the steel strike, construction activity on the Mayo Memorial Building is once again taking place at a gratifying rate. Erection of the steel for the tower is under way. We are still hoping for completion of the structure in 1954.

The Minnesota Medical Foundation continues to expand its activities. It plays an increasingly important role in support of student activities and medical research. Thursday, October 2, was Foundation Day, and a complete report of the day's activities will appear in the next issue of the Bulletin. At this time we should like to extend a most cordial invitation to all persons interested in the advancement of science to join the Minnesota Medical Foundation.

Homecoming Program

The University of Minnesota in conjunction with the Minnesota Medical Alumni Association has planned a Homecoming Program for physicians which will be of interest to all practitioners. A one-and-a-half day continuation course in MEDICAL ECONOMICS will be presented on Thursday, October 30, and on Friday morning, October 31, in the Auditorium of the Museum of Natural History which is adjacent to the Center for Continuation Study. Following completion of this course the Homecoming Program itself will get under way at noon on Friday, October 31. At that time Dr. Charles G. Sheppard of Hutchinson will speak at a special UNIVERSITY HOSPITALS STAFF MEETING on "The Medical School in Relation to Medical Practice in the State." This meeting will take place in the Powell Hall Recreation Lounge starting at 11:45 a.m., and the hospital will provide luncheon for all who attend.

(Continued on next page)

HOMEcomings CLINICS will be held on Friday, October 31, from 2:00 to 4:30 p.m. and on Saturday, November 1, from 9:00 to 11:30 a.m. in the University Hospitals. Interesting and instructive surgical, medical, pediatric, gynecological, and dermatologic cases will be presented and discussed by the staffs of the various departments. THE MINNESOTA MEDICAL ALUMNI ASSOCIATION will hold an important meeting at 11:30 a.m. on Saturday.

Another outstanding feature of the program will be a special lecture by Dr. James R. Fox entitled, "Inside the British Health Plan." Dr. Fox has recently returned from a three-month stay in Great Britain during which time he participated in the national health plan as a practicing physician. His observations based on this unique experience will be well worth hearing. His talk will be presented at 4:30 p.m. on October 31 in Owre Amphitheater.

We urge all physicians, regardless of whether or not they are Minnesota alumni, to attend this program.

Symposium on the Metabolism of Potassium

On September 22, 23, and 24, the University presented a Symposium on the Metabolism of Potassium. The sessions were held in the Museum of Natural History Auditorium. This symposium, the third annual program of this type, was an outstanding success, attested by the fact that more than 400 physicians from all areas of the United States registered for it.

The program was conceived and planned by Dr. Irvine McQuarrie, Professor and Head of the Department of Pediatrics, and the faculty included such outstanding investigators as Dr. Allan M. Butler, Professor of Pediatrics at Harvard Medical School, Dr. Paul R. Cannon, Professor of Pathology at the University of Chicago, Dr. Daniel C. Darrow, Professor of Pediatrics at Yale University School of Medicine, Dr. Wallace O. Fenn, Professor of Physiology at the University of Rochester School of Medicine, Dr. John P. Peters, Professor of Medicine at Yale University School of Medicine, and a host of other well-known research workers that cannot be listed individually due to the limitation of space in the Bulletin.

We have been exceedingly pleased to be able to present another symposium, and we are happy to acknowledge the generous financial support of the M and R Laboratories of Columbus, Ohio, which made this one possible.

Continuation Courses

The University of Minnesota will present a course in Clinical Chemistry for Medical Technologists at the Center for Continuation Study on October 7 and 8, 1952. Emphasis will be placed on methods for the determination of electrolytes and the clinical application of these methods. The use of radioactive isotopes in medicine will also be discussed. Miss Pauline M. Hald, Assistant Professor, Department of Internal Medicine, Yale University School of Medicine, will be the guest faculty member for the course. The program will be presented under the direction of Dr. Gerald T. Evans, Director, Hospital Laboratories, and the remainder of the faculty will include members of the staff of the University of Minnesota Medical School. This course is being sponsored by the Minnesota Society of Medical Technologists.

A continuation course on Treatment of Diseases of the Chest will be presented by the University of Minnesota in conjunction with the American College of Chest Physicians and the Minnesota Chapter of the American Trudeau Society at the Center for Continuation Study on October 16-18. The course is intended primarily for phy-

(Continued on next page)

sicians engaged in general practice, and emphasis will be placed throughout the course on the treatment of the various types of pulmonary diseases. Two outstanding guest speakers will participate: Dr. Arthur J. Vorwald, Director, The Trudeau Foundation and The Saranac Laboratory, Saranac Lake, New York, and Dr. Paul A. Bunn, Professor, Department of Medicine, University of New York, Syracuse. Dr. Vorwald will also address the American Trudeau Society on the evening of Friday, October 17, on the subject, "The Effects of BCG Vaccination in Silicotic Animals." The remainder of the faculty for the course will include members of the clinical and full-time faculty of the University of Minnesota Medical School and the Mayo Foundation.

The University of Minnesota and the Minnesota State Medical Association have again joined forces this fall in the presentation of a series of regional seminars in various centers throughout the state. Most of these seminars consist of eight weekly sessions of two hours each. Various members of the clinical and full-time faculty of the Medical School are participating as faculty members for these regional seminars. The seminars, which began in mid-September and will conclude in early November, are being held in the following areas: Albert Lea (Therapeutics); Fergus Falls (Therapeutics); Hibbing (Gastroenterology); Mankato (Obstetrics); St. Cloud (Therapeutics); Willmar (Obstetrics); and Worthington (Therapeutics).

New Appointments and Promotions

Among the new members of our faculty whom we welcome at this time are: Dr. B. J. Kennedy, Assistant Professor of Medicine, Doctors Richard B. Raile, Jack Wallinga, and Lewis W. Wannamaker, Instructors in Pediatrics, and Dr. Kenath H. Sponsel, Instructor in Surgery.

Several members of our staff received promotions in academic rank during the summer months. These include: Doctors Howard L. Horns and Samuel Schwartz, who became Associate Professors of Medicine; Doctors F. John Lewis, George E. Moore, and Lyle A. French, who became Associate Professors of Surgery; Dr. Robert B. Howard, who became an Assistant Professor of Medicine; Dr. Roy G. Holly, who became an Assistant Professor of Obstetrics and Gynecology; Dr. Richard Magraw, who became an Assistant Professor of Psychiatry and Medicine; Doctors Robert A. Ulstrom, Floyd W. Denny, Spencer F. Brown, Ray C. Anderson, who became Assistant Professors of Pediatrics; and Doctors Claude R. Hitchcock, Yoshio Sako, Allen B. Dobkin, who became Instructors in Surgery.

We extend our congratulations to these individuals and our best wishes for continued success in their academic careers.

Faculty News

Dr. Wesley W. Spink, Professor, Department of Medicine, is spending approximately two months in Spain under the auspices of the World Health Organization for the study of the brucellosis problem. The European trip will also take him to Switzerzlerland, France, and Great Britain. On October 27 he will address the medical students and faculty of Oxford University on "The Biological and Clinical Significance of Intracellular Parasitism in Brucellosis." He and Mrs. Spink will stay at Oxford as the guests of Sir Howard Florey.

* * *

III.

UNIVERSITY OF MINNESOTA MEDICAL SCHOOL
WEEKLY CALENDAR OF EVENTS

Physicians Welcome

October 6 - 11, 1952

Monday, October 6

Medical School and University Hospitals

- 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; W-612, U. H.
- 10:00 - 12:00 Neurology Rounds; A. B. Baker and Staff; Station 50, U. H.
- 11:30 - Tumor Conference; Doctors Kremen, Moore, and Stenstrom; Todd Amphitheater, U. H.
- 12:15 - Obstetrics and Gynecology Journal Club; Staff Dining Room, U. H.
- 12:30 - 1:30 Physiology Seminar; 214 Millard Hall.
- 1:30 - 2:30 Pediatric-Neurological Rounds; R. Jensen, A. B. Baker and Staff; U. H.
- 4:00 - Seminar on Fluid and Electrolyte Balance; Todd Amphitheater, U. H.
- 4:30 - Public Health Seminar; 15 Owre Hall.
- 5:00 - 6:00 Urology-Roentgenology Conference; C. D. Creevy, O. J. Baggenstoss, and Staff; Eustis Amphitheater.
- 4:30 - 6:00 Physiology 114A and Cancer Biology 140 -- Research Conference on Cancer, Nutrition, and Endocrinology; Drs. Visscher, Bittner, and King; "Diet and Growth vs. Life Span," Y. C. P. Lee; 129 Millard Hall.

Minneapolis General Hospital

- 10:30 - 12:00 Tuberculosis and Contagion Rounds; Thomas Lowry; Station M.
- 11:00 - Pediatric Rounds; Franklin H. Top; 7th Floor.
- 12:30 - Surgery Grand Rounds; Dr. Zierold; Sta. A.
- 1:00 - X-ray Conference; Classroom, 4th Floor.
- 1:30 - Pediatric Rounds; Robert Ulstrom; 4th Floor.

Ancker Hospital

- 8:30 - 10:00 Chest Disease Conference.
- 1:00 - 2:00 Medical Grand Rounds.

Monday, October 6 (Cont.)

Veterans Administration Hospital

- 8:00 - 9:00 Neuroradiology Conference; J. Jorgens, R. C. Gray; 2nd Floor Annex.
9:00 - G. I. Rounds; R. V. Ebert, J. A. Wilson, Norman Shriffter; Bldg. I.
11:30 - X-ray Conference; J. Jorgens, Conference Room, Bldg. I.
2:00 - Psychosomatic Rounds; Bldg. 5.
3:30 - Psychosomatic Rounds; C. K. Aldrich; Bldg. I.

Tuesday, October 7

Medical School and University Hospitals

- 9:00 - 9:50 Roentgenology-Pediatric Conference; L. G. Rigler, I. McQuarrie and Staff; Eustis Amphitheater, U. H.
9:00 - 12:00 Cardiovascular Rounds; Station 30, U. H.
12:30 - 1:20 Pathology Conference; Autopsies; J. R. Dawson and Staff; 102 I. A.
12:30 - 1:30 Physiology 114D -- Current Literature Seminar; 129 Millard Hall.
4:00 - 5:00 Pediatric Rounds on Wards; I. McQuarrie and Staff; U. H.
4:30 - 5:30 Clinical-Medical-Pathological Conference; Todd Amphitheater, U. H.
5:00 - 6:00 X-ray Conference; Presentation of Cases by Veterans Hospital Staff; Eustis Amphitheater, U. H.

Ancker Hospital

- 8:30 - 9:30 Medical-Roentgenology Conference; Auditorium.
1:00 - 2:30 X-ray - Surgery Conference; Auditorium.

Minneapolis General Hospital

- 8:00 - Pediatric Rounds; Spencer F. Borwn; 5th Floor.
10:30 - 12:00 Medicine Rounds; Thomas Lowry and Staff; Station F.
11:00 - Pediatric Rounds; Erling S. Platou; 7th Floor.
12:30 - Grand Rounds; Fractures; Sta. A; Willard White, et al.
12:30 - Neuroroentgenology Conference; O. Lipschultz, J. C. Michael and Staff.
12:30 - EKG Conference; Boyd Thomes and Staff; 302 Harrington Hall.
1:00 - Tumor Clinic; Drs. Eder, Cal, and Lipschultz

Tuesday, October 7 (Cont.)

Minneapolis General Hospital (Cont.)

1:00 - Neurology Grand Rounds; J. C. Michael and Staff.

Veterans Administration Hospital

- 7:30 - Anesthesiology Conference; Conference Room, Bldg. I.
8:30 - Infectious Disease Rounds; Dr. Hall.
8:45 - Surgery Journal Club; Conference Room, Bldg. I.
9:00 - Liver Rounds; Drs. Nesbitt and MacDonald.
9:30 - Surgery-Pathology Conference; Conference Room, Bldg. I.
10:30 - Surgery Tumor Conference; L. J. Hay, J. Jorgens; Conference Room, Bldg. I.
2:00 - 2:50 Dermatology and Syphilology Conference; H. E. Michelson and Staff; Bldg. III.
3:30 - 4:20 Clinical Pathological Conference; Conference Room, Bldg. I.

Wednesday, October 8

Medical School and University Hospitals

- 8:00 - 8:50 Surgery Journal Club; O. H. Wangenstein and Staff; M-109, U. H.
8:00 - 9:00 Roentgenology-Surgical-Pathological Conference; Paul Lober and L. G. Rigler; Todd Amphitheater, U. H.
11:00 - 12:00 Pathology-Medicine-Surgery Conference; Medicine Case; O. H. Wangenstein, C. J. Watson and Staff; Todd Amphitheater, U. H.
1:30 - 3:00 Physiology 114B -- Circulatory and Renal Systems Problems Seminar; Dr. M. B. Visscher, et al; 214 Millard Hall.
5:00 - 5:50 Urology-Pathological Conference; C. D. Creevy and Staff; Eustis Amphitheater, U. H.
8:00 - 10:00 Dermatological-Pathology Conference; Review of Histopathology Section; R. Goltz; Todd Amphitheater, U. H.

Ancker Hospital

- 8:30 - 9:30 Clinico-Pathological Conference; Auditorium.
2:00 - 4:00 Medical Ward Rounds;
3:30 - 4:30 Journal Club; Surgery Office.

Wednesday, October 8 (Cont.)

Minneapolis General Hospital

- 8:00 - Pediatric Allergy Rounds; Lloyd Nelson; 4th Floor.
10:30 - 12:00 Medicine Rounds; Thomas Lowry and Staff; Station D.
11:00 - Pediatric Rounds; Franklin H. Top; 7th Floor.
12:30 - Pediatric Conference; Specific Antibacterial Therapy; Sidney Finegold; 4th Floor Annex.
1:30 - Pediatric Rounds; E. J. Huenekens and Robert Ulstrom; 4th Floor.
2:00 - 4:00 Infectious Disease Rounds; 8th Floor.
4:00 - 5:00 Infectious Disease Conference; Classroom, 8th Floor.

Veterans Administration Hospital

- 8:30 - 10:00 Orthopedic X-ray Conference; E. T. Evans and Staff; Conference Room, Bldg. I.
8:30 - 12:00 Neurology Rehabilitation and Case Conference; A. B. Baker.
7:00 p.m. Lectures in Basic Science of Orthopedics; Conference Room, Bldg. I.

Thursday, October 9

Medical School and University Hospitals

- 8:00 - 9:00 Vascular Rounds; Davitt Felder and Staff Members from the Departments of Medicine, Surgery, Physical Medicine, and Dermatology; Heart Hospital Amphitheater.
9:00 - 11:50 Medicine Ward Rounds; C. J. Watson and Staff; E-221, U. H.
11:00 - 12:00 Cancer Clinic; K. Stenstrom and A. Kremen; Todd Amphitheater, U. H.
1:30 - 4:00 Cardiology X-ray Conference; Heart Hospital Theatre.
4:00 - 5:00 Physiology-Surgery Conference; Todd Amphitheater, U. H.
4:30 - 5:20 Ophthalmology Ward Rounds; Erling W. Hansen and Staff; E-534, U. H.
5:00 - 6:00 X-ray Seminar; Report of American Roentgen Ray Society Meeting; Eustis Amphitheater, U. H.
7:30 - 9:30 Pediatric Cardiology Conference and Journal Club; Review of Current Literature 1st hour and Review of Patients 2nd hour; 206 Temporary West Hospital.

Ancker Hospital

- 4:00 - Medical Pathological Conference; Auditorium.

Thursday, October 9 (Cont.)

Minneapolis General Hospital

- 8:00 - Pediatric Rounds; Spencer F. Brown; 5th Floor.
- 8:30 - Neurology Rounds; William Heilig; 4th Floor.
- 10:00 - Psychiatry Grand Rounds; J. C. Michael and Staff; Sta. H.
- 11:00 - Pediatric Rounds; Erling S. Platou; 7th Floor.
- 1:00 - Fracture - X-ray Conference; Dr. Zierold; Classroom.

Veterans Administration Hospital

- 8:00 - Surgery Ward Rounds; Lyle Hay and Staff; Ward 11.
- 8:00 - Surgery Grand Rounds; Conference Room, Bldg. I.
- 11:00 - Surgery-Roentgen Conference; J. Jorgens; Conference Room, Bldg. I.

Friday, October 10

Medical School and University Hospitals

- 8:30 - 10:00 Neurology Grand Rounds; A. B. Baker and Staff; Station 50, U. H.
- 9:00 - 9:50 Medicine Grand Rounds; C. J. Watson and Staff; Todd Amphitheater, U. H.
- 10:30 - 11:50 Medicine Rounds; C. J. Watson and Staff; Todd Amphitheater, U. H.
- 10:30 - 11:50 Otolaryngology Case Studies; L. R. Boies and Staff; Out-Patient Department, U. H.
- 11:45 - 12:50 University of Minnesota Hospitals Staff Meeting; Von Gierke's Disease and Galactosemia; Robert A. Ulstrom, Irvine McQuarrie, and Mildred R. Ziegler; Powell Hall Amphitheater.
- 1:00 - 2:50 Neurosurgery-Roentgenology Conference; W. T. Peyton, Harold O. Peterson and Staff; Todd Amphitheater, U. H.
- 3:00 - 4:00 Neuropathological Conference; F. Tichy; Todd Amphitheater, U. H.
- 4:00 - 5:00 Physiology 124 -- Seminar in Neurophysiology; Ernst Gelhorn; 113 Owre Hall.
- 5:00 - Urology Seminar and X-ray Conference; Eustis Amphitheater, U. H.

Ancker Hospital

- 1:00 - 3:00 Pathology-Surgery Conference; Auditorium.

Minneapolis General Hospital

- 11:00 - Pediatric Rounds; Franklin H. Top; 7th Floor.

Friday, October 10 (Cont.)

Minneapolis General Hospital (Cont.)

- 11:00 - Pediatric-Surgery Conference; Dr. Wyatt, Forrest Adams; Classroom, Sta. I.
- 12:00 - Surgery-Pathology Conference; Dr. Zierold, Dr. Coe; Classroom.
- 1:00 - 3:00 Clinical Medical Conference; Thomas Lowry; Classroom, Station M.
- 1:30 - Pediatric Rounds; Robert Ulstrom; 4th Floor.

Veterans Administration Hospital

- 10:30 - 11:20 Medicine Grand Rounds; Conference Room, Bldg. I.

Saturday, October 11

Medical School and University Hospitals

- 7:45 - 8:50 Orthopedic X-ray Conference; W. H. Cole and Staff; M-109, U. H.
- 9:00 - 10:30 Pediatric Grand Rounds; I. McQuarrie and Staff; Eustis Amphitheater.
- 9:00 - 11:50 Medicine Ward Rounds; C. J. Watson and Staff; Heart Hospital Amphitheater.
- 9:15 - 10:00 Surgery-Roentgenology Conference; L. G. Rigler, J. Friedman, Owen H. Wangenstein and Staff; Todd Amphitheater, U. H.
- 10:00 - 11:30 Surgery Conference; Todd Amphitheater, U. H.
- 10:00 - 12:50 Obstetrics and Gynecology Grand Rounds; J. L. McKelvey and Staff; Station 44, U. H.

Ancker Hospital

- 8:30 - 9:30 Surgery Conference; Auditorium.

Minneapolis General Hospital

- 8:00 - Pediatric Rounds; George Lund; 5th Floor.
- 11:00 - 12:00 Medical - X-ray Conference; L. Lipschultz, Thomas Lowry, and Staff; Main Classroom.
- 11:00 - Pediatric Clinic; C. D. May and Floyd Denny; Classroom, 4th Floor.

Veterans Administration Hospital

- 8:00 - Proctology Rounds; W. C. Bernstein and Staff; Bldg. III.
- 8:30 - 11:15 Hematology Rounds; Drs. Hagen, Goldish, and Aufderheide
- 11:15 - 12:00 Morphology Dr. Aufderheide

IV. STAFF LIST -- 1952-1953

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Howard L. Horns,
Assistant Dean of Medical Sciences

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Gertrude M. Gilman, Assistant Director

Donald F. Smith, Assistant Director
in Charge of Service and Supplies,
and Manager of the Heart Hospital

Charles Skinner, Assistant Director
in Charge of Admissions and
Information

Gertrude I. Thomas, Director of
Hospital Nutrition Service

Margaret Filson, Director of Nursing
Services

Irene Foster, Director of Volunteer
Services

Hallie Bruce, Chief Pharmacist

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Lemen J. Wells

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J. Francis Hartmann
W. Lane Williams

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Roland D. Meader
Robert Premer
Maria Ryzen
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G. Albin Matson
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Ellis S. Benson, Assistant Director

Newell R. Ziegler, Director of Blood
Bank

Elizabeth Frame, Hospital Chemist

Dorothy Sundberg, Hospital Hematologist

Franklin Wallace, Associate Professor
of Zoology, Consultant in Para-
sitology

John D. MacCarthy, Medical Fellow

Ruth Hovde, Instructor, Senior Advisor
in Medical Technology

Instructor and Student Technology
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Esther F. Freier
Lorraine Gonyea
Doris M. Hansen
Jeanette Powell
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Clinical Psychologist

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and Director

Chief Psychiatric Social Worker
and Assistant Professor

Fred Gross

Medical Social Work Supervisor

Helen Kretchmer

Psychiatric Social Work Instructor

Ruth Haugen

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Lorraine Baker

Frances Boone

Betty Brooks

Elfriede Danziger

Betty Foley

Louise Koch

Patricia McGraw

Audrey E. Niemi

Rose Snyder

Gertrude Tennant

Psychiatric Social Workers

Katherine Murphy

Betty Mellor

Gertrude Shiely

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H. Douglas Lamb

Myron G. Messenheimer

Stella H. Sikkema

Hugh Thompson

Ramona L. Todd

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Donald R. Lannin

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N. Logan Leven
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Harry B. Zimmermann

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C. Walton Lillehei
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N. Kenneth Jensen
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Frank Quattlebaum
Francis Stutzman
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John K. Grotting
Berton Mitchell
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Jacob Strickler

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John Muller
Hazen Hankinson
Herbert Warden
Lloyd MacLean
Morley Cohen
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