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Staff Meeting Report

University of Minnesota Hospitals Annual Report 1965-66*

Gertrude M. Gilman†

*A*dvancement in the multiple endeavors of teaching, research and service have marked the 56th year of operation of University Hospitals. The number of beds has now reached a combined total of 804 in 13 units. Serving to educate students in various medical and paramedical disciplines, Hospitals staff members are responsible to the State of Minnesota through the University for the teaching of students and the care of patients. More than 2,100 employees helped provide care in 1965-66 for the 15,200 patients admitted to University Hospitals and the patients who made more than 119,999 visits to the Outpatient Clinics. The University Health Service, located adjacent to University Hospitals, provided inpatient care through the Hospital Staff to 1,400 patients, using one nursing station in the Hospitals.

The expansion in number of beds and services has been accompanied by refinements in operating systems and procedures, as well as planning for anticipated needs of the future.

Revision and refinement of portions of the Hospitals operating procedures progressed with the enrollment of the University Hospitals in a cooperative electronic data processing project for business office systems. Combining with seven other Twin Cities hospitals to share a central computer facility, programming is now being done which will allow the University Hospitals the conversion to electronic data processing by December of 1966.

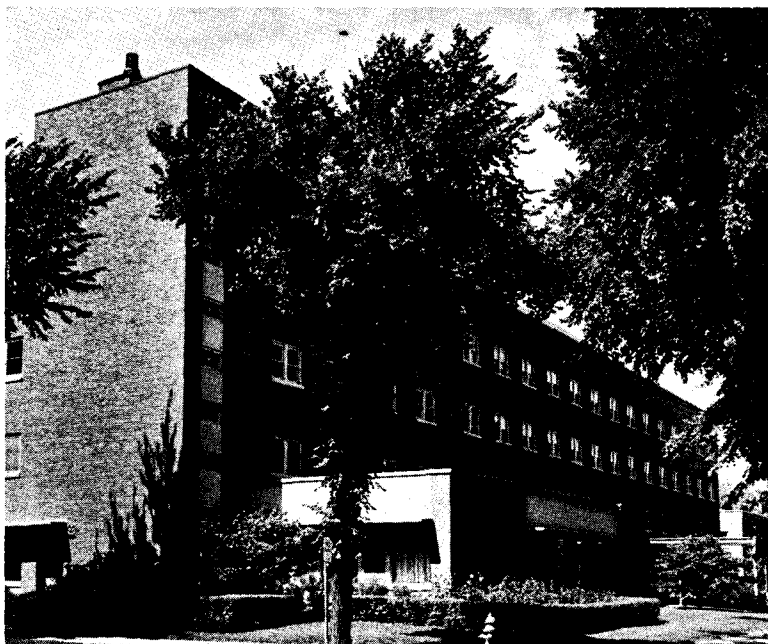
In other areas of Hospital operation, the assistance offered through the Department of Industrial Engineering to Hospital Department Heads has resulted in revision of portions of the supply and distribution systems from Pharmacy and Central Supply, and related departments. It is anticipated that refinements will continue throughout the coming year.

Several construction projects previously begun have been finished or are nearing completion. Since November the Meditation Room—gift of an anonymous donor—has provided a haven

*From a report to the Staff Meeting of University Hospitals on Sept. 30, 1966.

†Professor and Director, University of Minnesota Hospitals.

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Expanded Masonic Memorial Hospital

of simple dignity and quiet warmth for all who may wish to come there. The Meditation Room is easily accessible yet removed from the busy activity of the Hospitals.

The second phase of the \$688,000 remodeling project for the remaining nursing stations in the Todd and Christian Wings is now complete. This phase, like the first one, provided for the replacement of all plumbing and wiring to conform to present day requirements. Also included was the provision of new nursing stations, treatment rooms, drug rooms, and general redecorating of patient rooms and corridor areas.

The nursery has received a new look. This project, costing approximately \$249,000, now provides space for instruction of students as well as a glassed-in corridor to provide a view for parents. In addition to being supplied with new plumbing and electrical requirements, the entire Obstetrics Nursing Unit has been remodeled and air-conditioned. Progress on the elevator modernization program continues with the completion of the North Clinic elevator. It follows the prior installation of a new elevator in the Eustis Wing and fourth elevator for the Mayo Tower. Construction work is continuing on the \$1,800,000

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Southwest courtyard expansion. This will provide additional facilities for the Clinical Laboratory as well as a new area for the Hospitals Admissions Department and the Business Office. This project is expected to be completed before the first of the year.

The MASONIC MEMORIAL HOSPITAL, primarily for patients in phases of chronic illness which require hospitalization, provided 28,844 patient days of care to 1,136 patients. The occupancy increased from last year in spite of the fact that some rooms were not continuously available because of construction activity. The construction of the two-floor \$1,100,000 addition will provide 40 more beds for patient care and a complete floor for research laboratories. Upon completion the expanded Masonic Memorial Hospital will contain 120 beds. Many will remember the ceremony marking the progress of the partnership between the Masons of Minnesota and the University. On April 19, 1966 more than 2,000 Masons and friends of the Masonic Hospital gathered in Northrup Auditorium where University officials were presented a solid gold check for \$1,100,000, symbolic of the Masons' financial support of the expansion. A documentary film about the Masonic Hospital prepared by WCCO-TV was viewed in the auditorium and telecast simultaneously to the Upper Midwest.

The VARIETY CLUB HEART HOSPITAL provided 22,477 days of care to 2,110 patients last year. This hospital is also undergoing expansion. A gift of \$500,000, a substantial portion of



Cardiac Clinic in Variety Club Heart Hospital addition

the \$1.1 million needed for construction, has been contributed by the Variety Club of the Northwest. The expansion will provide additional facilities for diagnostic and therapeutic procedures for cardiac patients. Nearing completion, this two-story addition to the Variety Club Heart Hospital was scheduled to be dedicated on September 27, 1966.



All projects involving construction have been carried out without interruption of the daily operations of the University Hospitals. We are especially grateful to each person who worked to maintain good patient care and service throughout the temporary relocations and inconveniences which accompany projects of such scope. The spirit of cooperation from all those involved has been instrumental in the expansion and improvement of facilities and services.

ADMISSIONS POLICY AND PROCEDURE

All patients, except emergency and obstetrical patients, are admitted to University Hospitals only by referral of their private physicians. Adherence to this policy enables the staff to coordinate the care of patients with that provided by their doctors in their home communities. It tends to insure availability of care for patients who will benefit most from specialized services; provides the Hospitals and the Outpatient Department with patients necessary for teaching; and insures that the staff of the University Hospitals is not in competition with the private physicians of the State.

Approximately 35% of our patients have the cost of their care paid by various governmental welfare programs. It is important to note the *Medicare* program which began July 1, 1966 is expected to influence greatly the kinds of arrangements which Minnesota counties will make for the provision of hospital services, including the use of University Hospitals.

"Pay" patients — also referred to as "per diem" patients are those not able to afford both a professional fee and a hospital bill. They are not charged any professional fees for the services of the medical staff but are expected to pay for their hospital

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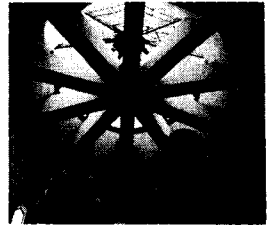
care. During the past year about 25% of our patients were "Pay" patients. The remaining 40% of the patients at University Hospitals pay both hospital charges and physicians fees. Since the Federal *Medicare* program includes payment of professional fees it is expected that the number of patients paying the full costs of their care will increase. Patients are not segregated according to their ability to pay. All are accommodated in single, double, three bed or four bed rooms. It is a policy of the Hospital that all patients be teaching patients. This policy is one which seems to be very well accepted by our patients.

STATISTICS AND OUTLOOK

The number of days of patient care provided — 226,830 — in 1965-66 was only slightly less than that of the previous year. The number of patients admitted was 15,288, a decrease of 694. The average length of stay per patient increased from 14.2 to 14.8 days. The average length of stay has risen more than one



The Meditation Room was built through the generosity of a friend, who wishes to remain anonymous. In behalf of everyone who will be helped by this generous gift, the University Hospitals expresses its heartfelt gratitude.



—Minneapolis Tribune Photo

full day during the past three years, undoubtedly reflecting the greater use of expanded University Hospitals facilities for rehabilitation and care of chronic disease patients. The referral of more patients with very complicated medical problems, such as patients for the organ transplant service, also contributed to the increased length of stay.

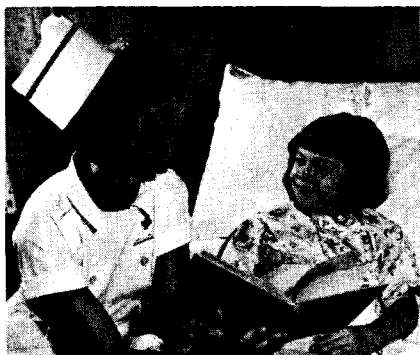
There was a decrease of 3,244 outpatient visits. The previous year there were 123,056 visits to the Outpatient Clinics, in contrast to 119,812 visits this year. (This represents an average of 460 visits per day.) There were 701 deaths in University

Hospitals during the past year, a mortality of 4.6%. Of these deaths, 95 occurred within 48 hours after admission to the Hospitals. Autopsy was obtained on 81.3% of all Hospital deaths.

University Hospitals operated from January 1, 1966 as a participant in the Medical Assistance Program of the State of Minnesota. On July 1 of 1966 the "Medicare" portion of the legislation, which provides payment for hospital services to those 65 and over, began. The effect of both Titles 18 and 19 of this legislation is important to University Hospitals because there will undoubtedly be a decrease in the number of patients here on State-County Authorizations.

The County Welfare Boards of Minnesota have, in the past, usually been able to provide care to their needy residents at less cost here at University Hospitals than elsewhere. This will no longer be true, in most instances, for those patients 65 and over whose prior care has been provided by State-County Authorization. Another important feature of the new legislation is the guarantee of free choice of physician. These changing concepts about financing care for the medically indigent emphasizes the need for us to be continually concerned about the quality of care, the efficiency of care and the cost of care. University Hospitals will need to "compete" with other health care institutions on all three of these aspects. We believe the presence of a teaching program to be of value in providing good care; our concern about the effects on the teaching program is lessened by our faith in the tradition of understanding and support from the patients and physicians of the State of Minnesota.

Another national concern which is reflected here at University Hospitals is the shortages of personnel occurring within most health care professions. This has been particularly evident in Nursing Service. In contrast to the previous two summers of operation at full capacity, the shortage of professional nursing staff has made it necessary to decrease the number of beds on our Medicine, Surgery, and Obstetrics-Gynecology services



during the summer of 1966. Despite more intensive recruitment, it has been harder to fill vacant nursing positions this year than for the past several years. The situation may ease somewhat this Fall because of the seasonal aspects of nurse recruitment. However, growing demand for professional nurses because of

increases in hospital beds and services nationally, along with new demands generated by other sectors of the health care field (nursing homes, home care programs, etc.), strongly indicate that the problems seen this year will continue to be with us for the foreseeable future.

Some progress toward the reallocation of portions of nursing activities to permit more direct patient care by nurses has been achieved through the establishment of a Central Transportation Service and by furnishing nursing units with increased services and support from other departments, such as Housekeeping and Pharmacy. Studies to define and reallocate responsibility for supportive activities will be continued in an effort to provide the best use of both professional and non-professional staff.

Last year's report mentioned the appointment by President Wilson of the Committee for the Study of Physical Facilities for the Health Sciences. The preliminary report on roles, objectives and purposes embracing a long range plan for University Hospitals has been completed. This report, together with similar reports for all other units of the Medical Center, is expected to be invaluable in our future guidance. The Clinic Director's Outpatient Planning Report should be similarly helpful. While it is not possible to single out each person who contributed, the work of all who assisted in preparing of these studies is gratefully acknowledged.

While our total patient days of hospital care and outpatient care decreased slightly, our total services to patients, as measured by departmental statistics, continue to mount. The Hospitals' staff values the opportunity to participate in the education of students in the Health Sciences, and in the exciting developments of medical research. Our continued growth has contributed to better health care for patients in our own state

COMPARATIVE TWELVE-MONTHS REPORT

Out-Patient Department, cont'd.

Service	New patients		Revisits		Totals	
	1964-65	1965-66	1964-65	1965-66	1964-65	1965-66
<i>Ear, Nose and Throat</i>	1,196	1,201	3,162	3,484	4,358	4,685
Audiology	1,542	1,232	913	1,127	2,455	2,359
<i>Gynecology</i>						
General	260	262	916	1,170	1,176	1,432
Gynecology-Tumor	120	76	1,949	1,890	2,069	1,966
<i>Obstetrics</i>	422	381	3,028	2,782	3,450	3,163
<i>Pediatrics</i>						
General	952	774	2,570	1,085	3,522	1,859
Allergy	10	6	124	175	134	181
Cardiac	445	369	1,233	1,218	1,678	1,587
Endocrine	3	12	522	491	525	503
Fibrocystic	12	42	513	498	525	540
Hematology	1	—	1,092	827	1,093	827
Muscle Disease	1	—	65	32	66	32
Neurology	90	128	1,301	1,227	1,391	1,355
Renal	51	39	629	623	680	662
Rheumatic	44	71	734	692	778	763
Child Development Study	—	—	1,887	1,852	1,887	1,852
Well Baby	1	—	999	1,319	1,000	1,319
<i>Child Psychiatry</i>	336	291	1,534	1,902	1,870	2,193
<i>Tumor</i>	109	120	1,240	1,456	1,349	1,576
<i>Emergency</i>	4,225	4,400	14,428	15,119	18,653	19,519
<i>Nutrition</i>	1,597	1,482	2,086	1,349	3,683	2,831
<i>Dental</i>	950	896	598	502	1,548	1,398
<i>North Clinic</i>	2,578	2,254	14,602	14,515	17,180	16,769
<i>Physical Medicine and Rehabilitation</i>	1,621	1,390	3,160	2,499	4,781	3,889
TOTALS	24,957	23,764	98,099	96,048	123,056	119,812

COMPARATIVE TWELVE-MONTHS REPORT
Hospital Laboratories

<i>Laboratory</i>	<i>Number of Determinations</i>	
	1964-65	1965-66
Abel		202
Bacteriology	53,483	63,076
Blood Bank	251,783	264,056
Cancer Detection	26,692	28,307
Chemistry	171,418	211,872
Clerks	3,803	4,195
Electrocardiography and Basal Metabolism	14,094	15,097
Electroencephalography	2,436	2,525
Heart Catheterization	8,273	8,461
(Heart Catheterization Cases)	(494)	(490)
Heart Hospital	23,365	25,766
Hematology	144,763	165,445
Hematology, Special	3,457	3,232
Medical Genetics	250	294
Medical Genetics, Chemistry		366
North Clinic	5,671	4,934
Out-Patient	51,239	50,855
Parasitology	764	786
Serology	7,749	7,878
Tissues		
Specimens		
(Autopsy)	(601)	(587)
(Surgical)	(4,978)	(4,719)
(Surgical, Gross Only)		(131)
Blocks		
Autopsy	14,815	14,645
Surgical	15,481	15,318
Cytology	3,672	3,865
Tissues		
Special Stains	315	398
Extra Slides	1,754	1,885
Frozen Sections (Case)		850
Frozen Sections (Total)	1,040	477
Cornification Count	38	36
Urinalysis	37,326	40,125
TOTALS	843,681	934,946

COMPARATIVE TWELVE-MONTHS REPORT
X-ray Department

<i>Radiographic Examinations</i>	1964-65	1965-66
Abdomen	2,767	2,885
Bones and Joints (excluding spine and pelvis) . . .	6,612	6,701
Cardio-Respiratory		
Chest	28,946	29,653
Bronchogram	45	62
Heart	2,437	2,248
Heart Catheterization	84	26
Kymogram	15	11
Cine Examination	591	306
Gastro-Intestinal		
Esophagus, Stomach, Duodenum	4,990	4,177
Small Bowel	561	559
Colon	2,751	2,424
Gall Bladder	883	555
Cholangiogram	335	309
Head and Neck		
Skull	3,646	3,505
Sinuses, Mastoids	590	735
Sinus Tract Injection	33	37
Encephalogram	249	287
Ventriculogram	31	29
Thalamotomy	47	20
Teeth	1	—
Sialogram	16	7
Obstetrics and Gynecologic Radiology		
Pelvimetry	199	201
Placentogram	6	1
Hysterosalpinogram	48	57
Vaginogram	—	14
Spine, Pelvis and Hips	7,132	7,073
Myelogram	416	412

COMPARATIVE TWELVE-MONTHS REPORT
X-ray Department, cont'd.

<i>Radiographic Examinations</i>	1964-65	1965-66
Urological Radiography Examinations		
Cystogram, Urethrogram	866	852
Intravenous Urogram	3,647	3,607
Urinary Tract (KUB only)	981	830
Urogram (Retrograde)	317	227
Cine (Cysto) .....	...	193
Miscellaneous	36	169
Vascular Radiography		
Angiocardiogram	67	70
Aortogram	114	104
Cerebral Angiogram	425	456
Peripheral Arteriogram	234	347
Special Vascular Study	52	59
Venacavagram	29	32
Venogram	39	51
Hypogastric Catheterization	7	—
CO ₂ Study	12	13
Lymphangiogram	60	112
Mammogram	26	69
Needle Biopsy	2	5
Phlebogram	9	—
Planigram	613	579
Splenoportogram	18	4
Ventriculogram and Aortogram (Retrograde) ...	947	866
Miscellaneous .....	...	53
TOTAL RADIOGRAPHIC EXAMINATIONS ...	<u>71,932</u>	<u>70,992</u>
Patients Examined		
In-Patients	32,043	26,904
Out-Patients	<u>20,844</u>	<u>27,179</u>
TOTAL PATIENTS EXAMINED	<u>52,887</u>	<u>54,083</u>

COMPARATIVE TWELVE-MONTHS REPORT
X-ray Therapy Department

<i>Type of Treatment</i>	<i>1964-65</i>	<i>1965-66</i>
<i>Deep X-ray Treatment</i>		
Out-Patient Treatments	4,402	4,741
In-Patient Treatments	9,036	7,952
Total Treatments	13,438	12,693
Total Patients Treated	840	848
Average Treatments per Patient...	15.9	15
<i>Superficial X-ray Treatments</i>		
Out-Patient Treatments	193	301
In-Patient Treatments	11	11
Total Treatments	204	312
Total Patients Treated	43	41
Average Treatments per Patient...	4.7	7.6
<i>Radium</i>		
Total Treatments	181	157
New Patients Treated	176	151
<i>Strontium (Beta Ray)</i>		
Total Treatments	63	26
New Patients Treated	16	5
<i>Radioisotope Laboratory</i>		
<i>Radioiodine</i>		
New Tracer Studies	457	464
Repeat Tracer Studies	166	198
Total Studies and Treatments	623	662
Total Patients Treated	28	35

COMPARATIVE TWELVE-MONTHS REPORT
X-ray Therapy Department, cont'd.

<i>Type of Treatment</i>	1964-65	1965-66
Urinary Excretion and Conversion Ratio Studies	8	7
T-3 Studies	89	62
Miscellaneous	13	4
Total Studies	110	73
 Radiophosphorous		
Eye Tumor Diagnosis Studies	14	20
Thyroid Nodule Studies	7	2
Chromic Phosphate p ³² Therapy .....	..	1
Total Studies	21	23
Total Patients Treated	6	3
RIHSA Blood Volume Studies	159	58
Radioactive Chromium Red Cell Survival Studies	91	92
Radioactive Gold Liver Scans	93	135
Cobalt 57-B-12 Studies	260	234
 <i>Special Diagnostic Studies using Radioactive Iodine, Selenium and Mercury</i>		
Brain Scans using Hg-203, Hg-197 and RIHSA	557	990
Liver Scans using I-131, Rose Bengal and I-131 Colloidal Albumin	96	152
Lung Scans using I-131 .....	..	153
Renograms using I-131 Hippuran	1,042	995
Echogram	241	1,038
Miscellaneous*	166	209

*Including Rose Bengal Clearance, Differential Diagnosis, Tests for Jaundice; Renoscans using Hg-203 and Hg-197; Rb-86 Coronary Flow; Sr-85 Scans; Heart Scans using Hippuran I-131 and Cholografin; Pancreas Scans using Se-75.

COMPARATIVE TWELVE-MONTHS REPORT

Operating Room

	<i>Major</i>		<i>Minor</i>		<i>Totals</i>	
	1964-65	1965-66	1964-65	1965-66	1964-65	1965-66
<i>Department of Surgery</i>						
General	2,126	1,941	577	572	2,703	2,513
X-ray (Diagnostic)	...	...	149	88	149	88
Pediatrics and Medicine (Research)	...	...	22	17	22	17
Neurosurgery	573	563	56	43	629	606
X-ray (Diagnostic)	...	...	98	128	98	128
Urological Surgery	310	295	30	26	340	321
Orthopedics	520	492	179	120	699	602
Casts (on Operatives)	...	...	178	186	178	186
Casts (on Non-operatives)	...	...	310	358	310	358
X-ray (Diagnostic)	...	...	3	1	3	1
<i>Department of Gynecology</i>	209	223	410	364	619	587
<i>Department of Otolaryngology</i>						
Otolaryngology	443	438	477	435	920	873
Dentistry	28	30	14	9	42	39
X-ray	...	...	12	27	12	27
Casts	...	...	1	...	1	...
<i>Department of Ophthalmology</i>	486	670	83	98	569	768
Neurology	...	...	2	...	2	...
Pediatrics	...	...	4	1	4	1
X-ray (Diagnostic)	...	...	439	478	439	478
X-ray Therapy	...	...	19	28	19	28
Anesthesiology	...	...	...	1	...	1
Physiology	...	...	1	3	1	3
TOTALS	4,695	4,642	3,042	2,983	7,737	7,625
<i>Cytoscopy Department</i>						
TURS and Operative Procedures	147	175	...	...	147	175
Minor (without X-ray)	...	...	2,164	2,139	2,164	2,139
Minor (with X-ray)	...	...	564	1,057	564	1,057
X-ray	...	...	1,083	1,006	1,083	1,006
TOTALS	147	175	3,811	4,202	3,958	4,377
COMBINED TOTALS	4,842	4,817	6,853	7,185	11,695	12,002
<i>Summary</i>						
	1964-65	1965-66				
Majors	4,842	4,817				
Minors	6,853	7,185				
TOTALS	11,695	12,002				

Table 1
 PHYSICAL MEDICINE AND REHABILITATION
 Summary of Physical Medicine and Rehabilitation Services

	1954-55			1964-65			1965-66			Percent Increase Over 1954-55
	Out-Pt.	In-Pt.	Total	Out-Pt.	In-Pt.	Total	Out-Pt.	In-Pt.	Total	
Patients Treated	415	1,612	2,027	783	4,118	4,901	810	4,362	5,172	155
Patient Visits	6,822	33,018	39,840	9,400	53,297	62,697	9,890	62,017	71,907	80
Total Treatments	14,045	49,602	63,665	29,977	125,336	153,313	27,430	136,248	163,678	157
Treatments by Sections:										
Physical Therapy	11,516	19,685	31,201	17,950	75,178	93,128	16,568	69,334	85,902	175
Occupational Therapy*	1,174	28,318	29,492	3,798	46,944	50,742	4,523	63,117	67,640	129
Speech Therapy	723	339	1,062	2,026	895	2,921	2,446	1,757	4,203	296
Prevocational	93	503	596	3,410	1,854	5,264	2,839	1,263	4,102	588
Vocational Counseling	539	775	1,314	793	465	1,258	1,054	777	1,831	39
*Occupational Therapy (Sub-totals):										
Rehab. Center Units	1,174	8,382	9,556	1,423	21,210	22,633	1,213	30,130	31,343	228
Special Service Units		19,936	19,936	2,375	25,734	28,109	3,310	32,987	36,297	82

Table 2
 PHYSICAL MEDICINE AND REHABILITATION, Cont'd.

<i>Occupational Status of Patients Discharged from Rehabilitation Center</i>	
Resumed previous educational or occupational activity	2,410
Started on a new occupation or training	126
Further vocational services required	92
Unemployable or retired	151
Deceased	71
Discharged temporarily or transferred	369
No treatment	163
TOTAL	3,382

Table 3
Comparative Report of Patients Discharged from the Rehabilitation Stations

	1964-65	1965-66		Total
	Total	Adult	Children	
Total days of treatment in Rehabilitation Center	4,979	4,198	3,438	7,636
Average days of treatment per Patient	27	32	46	37
Census				
Male	107	74	41	115
Female	81	58	34	92
TOTALS	188	132	75	207

Table 4

PHYSICAL MEDICINE AND REHABILITATION, Cont'd.

Categories of Disease or Disabilities of Patients Admitted for Treatment by Physical Medicine and Rehabilitation Service

	1965-66		Total
	Adult	Children	
Infection diseases	23	31	54
Neoplasms	968	137	1,105
Allergies, endocrine, metabolic and nutritional diseases	94	69	163
Blood dyscrasias	36	86	122
Mental, psychoneurotic and personality disorders	506	141	647
Diseases of the nervous system and sense organs	413	360	773
Diseases of the circulatory system	170	63	233
Diseases of the respiratory system	38	33	71
Diseases of the digestive system	44	48	92
Diseases of the genito-urinary system	64	207	271
Diseases of the skin	94	33	127
Diseases of the bone and organs of movement . .	333	122	455
Congenital malformations	21	251	272
Symptomatic and ill-defined conditions	42	55	97
Accidents, poisoning, and traumatic injuries . .	252	66	318
Adults and Children			
A. Amputations	54	2	
B. Fractures	59	29	
C. Sprains, strains	91	1	
D. Lacerations	10	9	
E. Burns	13	21	
F. PNI	25	4	
Speech disorders	18	32	49
TOTAL	3,115	1,734	4,849
<i>Age Classification of Patients Admitted 1965-66</i>			
5 and under		566	
6 to 15		1,154	
18 to 51		1,853	
52 to 64		799	
65 and over		477	
TOTAL		4,849	

SOCIAL SERVICE DEPARTMENT

1965-66 Report

Medical Social Work Cases

Medicine	1,646	
Surgical Services	923	
Pediatrics	739	
Pediatric Neurology and Pediatric Community Service	439	
Obstetrics and Gynecology	1,181	
Physical Medicine and Rehabilitation	923	
Neurology	884	
Heart Hospital	955	
Masonic Hospital	762	
Other Services	1,156	
Total Medical Social Work Cases		9,608
<i>Psychiatric Social Work Cases</i>		4,943
TOTAL CASES		14,551

COMPARATIVE TWELVE-MONTHS REPORT

Variety Club Heart Hospital

<i>Department</i>	<i>1964-65</i>	<i>1965-66</i>
<i>Out-Patient Service</i>		
Clinic Attendance		
Adult	1,901	1,733
Pediatrics	3,123	2,938
TOTALS	5,024	4,671
Heart Hospital X-ray Procedures	5,474	5,723
Heart Catheterizations	1,215	1,069
Laboratory Procedures	23,365	25,766
<i>In-Patient Service</i>		
Admissions	1,672	1,635
Transfers (In)	683	485
Transfers (Out)	667	504
Discharges	1,607	1,498
Deaths	96	99
Patient Days	23,016	22,447
Average Census	63.1	61.5
Occupancy (Percent)	84.8	82.6
Average Length of Stay (Days)	13.8	13.8

THE MEDICAL BULLETIN

COMPARATIVE TWELVE-MONTHS REPORT
Masonic Memorial Hospital

<i>Department</i>	1964-65	1965-66
<i>In-Patient Service</i>		
Admissions	541	566
Transfers (In)	532	570
Transfers (Out)	188	228
Discharges	749	774
Deaths	128	131
Patient Days	21,683	28,844
Average Census	59.4	65.3
Occupancy (Percent)	74.3	81.6
Average Length of Stay (Days)	20.3	21.0



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1966 - 67

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Malvin J. Nydahl

Clinical Associate

Professor Emeritus

Carl C. Chatterton

Clinical Associate Professor

Walter Indeck
Richard H. Jones
Harvey O'Phelan

Assistant Professor

William Kane
Robert F. Premer

Clinical Assistant Professor

Paul M. Arnesen
Frank S. Babb
Lester W. Carlander
Paul O. Gustafson
Edward H. Kelly
Sheldon M. Lagaard
Donald R. Lannin
D. Keith Millett
Richard E. Reiley
Frederick G. Rosendahl
Wayne Thompson
Robert Winter

Instructor

Soli J. Lam

Clinical Instructor

Robert M. Barnett
John J. Beer
Michael Davis
Frederick E. Drill
Evans S. Ellison
David Florence
Paul H. Gislason
Meyer Z. Goldner
Richard D. Granquist
Ramon B. Gustilo

John A. Hartwig
 Richard J. Hohnson
 William R. Leslie
 Donovan L. McCain
 Donald C. Meredith
 David J. Nelson
 George E. Nelson, Jr.
 Roland F. Neuman
 Theodore A. Peterson
 Edward L. Salovich
 Elmer R. Salovich
 Irwin F. Schaffhausen
 Ivan Schloff
 Joseph M. Tambornino

**DIVISION OF
 PROCTOLOGY**

William C. Bernstein
 Clinical Professor and
 Director
Clinical Associate Professor
 Howard M. Frykman
 Charles A. Neumeister
 Lloyd F. Sherman
Clinical Assistant Professor
 Loren E. Nelson
 William T. Smith
 Robert J. Tenner
Clinical Instructor
 Stanley M. Goldberg

DIVISION OF UROLOGY

C. D. Creevy
 Professor and Director
Clinical Professor Emeritus
 Theodore H. Sweetser
Clinical Professor
 Baxter A. Smith
Associate Professor
 Colin Markland
 George T. Mellinger
Clinical Associate Professor
 Samuel S. Beirstein
 Richard S. Rodgers
Assistant Professor
 Emile Maltby, Jr.
 Ali Hakim
Clinical Assistant Professor
 David M. Anderson
 Bruce E. Linderholm
 Hugo E. Miller
 William E. Price
 Milton P. Reiser
 Edward J. Richardson
 Edgar A. Webb
Clinical Instructor
 Clyde Blackard
 William H. Card
 John P. Cooper
 David J. Dunlap
 Robert A. Flynn

George L. Garske
 Robert W. Geist
 Paul R. Hartig
 Gerald W. Koos
 Gerald D. McEllistrem
 Harold A. Reif
 Ragnar T. Soderlind
 Gordon W. Strom
 Theodore H. Sweetser, Jr.
 Joseph E. Twidwell

Ira D. Miller
 Allan Moberg
 Ernesto Molina
 George Motsay
 Samuel Movsas
 Charles Murray
 Richard Orahood
 Frank Quattlebaum
 Wallace P. Ritchie, Jr.
 Waid Rogers
 Juan Sanchez-Marle
 Michael Shea
 V. Subramanian
 Ushio Takahashi
 Susumi Tanaka
 Tawfik Tamimi
 David Todd
 Ming-Shiung Tsung
 Luis Urdaneta

**MEDICAL FELLOWS
 IN SURGERY**

University Hospitals

General Surgery
 Kitipan V. Arom
 Costas Assimacopolous
 Manucher Atai
 John Aust
 Aydin Bilgutay
 Jack Bloch
 Raymond Bonnabeau
 John Breen
 Raymond Buchin
 Henry Buchwald
 Robert G. Carlson
 D. Scott Clark
 Paulo DaSilva
 Ronald Dietzman
 Serge Dos
 Richard Edlich
 James Engle
 Edward Etheredge
 John Feemster
 Randolph Ferlic
 Ronald Fischer
 John Foker
 Paul Gannon
 Robert Gilsdorf
 Peter Goldman
 Robert Goedale
 Daniel Goer
 Claude Grondin
 Patrick Hagihara
 Thomas Hennessy
 Carlos Ibarra-Perez
 Yasuo Idezuki
 Robert Indeglia
 Peter Jochimsen
 B. R. Kalke
 K. Kumar-Vadlamudi
 Arnold Lande
 William Lee
 William Lindsay
 Gary Lyons
 Arthur Madsen
 William Manax
 Emil Mantini
 Stephen Martin
 Martin McKneally
 Frederick Merkel

Neurosurgery

Michael Carey
 David Danoff
 Donald Erickson
 Robert Maxwell
 A. Mohandas
 Edward Seljeskog
 John Seymour
 John P. Wissinger

Orthopedic Surgery

Wilton Bunch
 James House
 David Kettleston
 Rudolph Klassen
 Charles Lai
 Lowell D. Lutter
 Joel Mack
 Harvey Mininberg
 Richard Neumann
 Paul Patterson
 James Valuska

Proctology

Emmanuel Balcos

Urology

Laurence D. Hildebrand
 Richard McKinley
 Daniel C. Merrill
 Myron Smith

Hennepin County

General Hospital

General Surgery

Robert C. Andersen
 Orm Arnar
 Daniel B. Baker
 Richard C. Baker
 Thomas F. Coulon
 James F. DeVinck
 William L. Engle
 Donald L. Foss
 Michael D. Goldman
 Hovald K. Helseth
 Tonu M. Kiesel

THE MEDICAL BULLETIN

Lawrence O. McGovern
Joseph H. Merickel
Charles H. Miller III
Alfonso Morales-Zuniga
Glen David Nelson
Rodney T. H. Nixon
Ernest Ruiz
Lee A. Simso
John A. Soucheray
Braden Stevenson
Roger W. Strand

Urology

Philbin R. R. Tackoor
Everette Duthoy

Mount Sinai Hospital

General Surgery

Alex de Asis Bernas
Ernesto B. Eusebio
Necito L. Montaniel

St. Paul-Ramsey Hospital

General Surgery

Roberto Barja
Roger J. Benjamin
James A. Collinge
James DeMeules
Bernard Feldman
Gerald Freedman
Charles W. Hauser
Philip J. Keizer
Rolf Larson
Suhail Nasiri
Daniel Murphy
Fordyce Stivers

Urology

Nasser Javadpour

Minneapolis V.A. Hospital

General Surgery

Gordon Addington
Martin Beard
Helmut Behling
Thomas Carlson
John Carothers
Charles Ehlen
Cassius Ellis
Thomas Greene
Sergio Grossling
Aivar Kalnins
David Larson
Martin Loeb
Carl Manz
Charles Nelms
George Nemanich
Khrisna Rao
Albert Reid
Sheldon Segal
Alexander Vajcner
David Van Nostrand
Alan Velander
John Wedge

Gerhard Yonkman
Wilbur Zike

Orthopedic Surgery

Robert Cairns
James Chambers
Alfred Daly
John Dittrich
Thomas Litman
Thomas Lowe
John McMahon
Richard Mulvania
Rodney Peterson
John Wilson
Peter Wirtz

Urology

Stanley Antolak
Allen Hartzell
Rodger Lundblad
Alexander McBride
John Ochsner
Rudolph Skogerboe
Frank Walerko
Albert Walonick

UNIVERSITY HEALTH SERVICE

Donald W. Cowan
Director

Ruth E. Boynton
Professor and
Director Emeritus

Phillip D. Kernan
Assistant Director
(Special Services)

Kenneth P. Malvey
Assistant Director
(General Medical Services)

Full-Time Physicians

Wallace R. Anderson
Edward J. Bardon
Murray Bates
Elaine M. Benthack
Helen P. Dahl
Donald C. Deters
Thomas E. Dredge, Sr.
Edward M. Drissen
Joyce L. Funke
Helen L. Haberer
Robert G. Hincley
Philip W. Hursh
Donald F. McGavisk
Myron G. Messenheimer
Thomas W. Millroy
Nicholas F. Musachio
V. George Nagobads
Lydia I. Neiberghs
Mary Helen Pennington
Stella H. Sikkema
Hugh J. Thompson
Sabina S. Zimering

Part-Time Physicians

Richard D. Benjamin
Herbert R. Billman
Catherine Burns
Sonja M. Flory
Rollin M. Hansen
Mildred S. Hanson
George C. Hottinger
Irvine M. Karon
Robert L. Koller
Wendla E. Leinonen
Richard R. Lund
William E. McNally
John E. Middlebrook
Orville E. Ockuly
Charles D. Officer
E. Harvey O'Phelan
Raymond L. Page
Kurt Pollak
Frank S. Preston
R. L. Schmidtke
John T. Smiley
George V. Tangen
Robert J. Tenner
Joseph W. Teynor
C. Gordon Vaughn

Interns at the University of Minnesota Hospitals (1966-67)

Medicine

John H. Bond, Jr.
Univ. of Pennsylvania
Richard F. Branda
Harvard Univ.
Donald L. Brown
Ohio State Univ.
John E. Franklin, Jr.
Cornell Univ.
Russell F. Hanson
Univ. of Minnesota
Roger A. Johnson
Univ. of Minnesota
Richard R. Nelson
Northwestern Univ.
Joseph G. Perpich
Univ. of Minnesota
Neil J. Peterson
Yale Univ.
Stephen C. Schoenbaum
Harvard Univ.
John W. Schott
Harvard Univ.
Richard W. Smith
Harvard Univ.
John E. Stevenson
Harvard Univ.
Dean F. Young
Harvard Univ.

THE MEDICAL BULLETIN

Pediatrics

Henry H. Balfour, Jr.
Columbia Univ.
Thomas F. Boat
Univ. of Iowa
Paul F. Dvorak
Univ. of Illinois
John J. Fangman
Univ. of Iowa
Jon O. Flom
Univ. of Minnesota
Freeman M. Ginsburg
Univ. of Colorado
Gary W. Goldstein
Univ. of Chicago
Jack S. Resnick
Univ. of Minnesota
Stacy A. Roback
Tulane Univ.

Robert C. Seeger
Univ. of Oregon
Dan A. Sewell
Washington Univ.
Surgery
Robert A. Ersek
Hahnemann Med. Coll.
Stephen N. Fisher
Univ. of Illinois
Raul R. Garcia
Univ. of Puerto Rico
R. Wayne Hurt
Baylor Univ.
Kenneth A. Johnson
Johns Hopkins Univ.
Howard H. Kaufman
Columbia Univ.
Phys. and Surg.
David A. Krant
Harvard Univ.

David M. Lichtman
S.U.N.Y. - Downstate
Michael D. Lieberman
Chicago Med. Sch.
Robert Mueller
Univ. of Minnesota
Lloyd G. Phillips, Jr.
Meharry Med. Coll.
William R. Rassman
Med. Coll. of Virginia
Zachary Rosenberg
Chicago Med. Sch.
Jon H. Scarpino
Tufts Univ.
Norval M. Simms
Univ. of Calif.
Gerald J. Vosika
Univ. of Minnesota

REMEMBER THE
MINNESOTA MEDICAL FOUNDATION
IN YOUR WILL.

Medical School News

MEDICAL SCHOOL INCREASES ENROLLMENT

On Monday, September 26, 167 students – the largest entering freshman medical class in the history of the University of Minnesota Medical School – began their studies in the four-year curriculum leading to the M.D. degree. The class is composed predominantly of Minnesota state resident (approximately 90%), with a large proportion of the non-Minnesotans claiming residence in adjoining states of the Upper Midwest region.

The large 1966 entering Freshman Class represents an increase of 14 students over the freshman medical class of a year ago, and an increase of about 17 students over the average class size of 150 of the past several years. The Medical School's last previous major increase in number of entering students was in 1959.

This important but temporary step of increasing the entering class size for the 1966-67 academic year is tangible evidence of the Medical School's awareness and deep concern for the pressing health manpower supply situation in Minnesota and the Upper Midwest. The University of Minnesota has recently presented to legislative committees a long range plan requesting support for expansion to accommodate an entering class of 200 students as soon as feasible. The present class enlargement anticipates that the expansion program will become a reality and represents an effort by the University to advance the dates when additional medical graduates, beyond the present level of physician production in Minnesota, will receive the M.D. degree and enter hospital internship in preparation for medical practice.

The temporary enlargement for Fall 1966 and the entire long range Medical School expansion program represent University recognition of its role and responsibility in helping to meet the health care needs of the state and of the Upper Midwest region. The basis for these needs was recently reported in an extensive study by the Health Manpower Study Commission, sponsored by the Louis W. and Maud Hill Family Foundation of St. Paul. (To be reported on soon in the University of Minnesota MEDICAL BULLETIN.)

In emphasizing the temporary nature of the move, Medical School spokesmen pointed to limitations of both staff and physical facilities. The staff increases necessary for the additional students this coming year will be provided from funds from non-state sources available only for the coming one-year period. Physical facilities, already utilized well beyond intended capacity, will be crowded still further to accomplish this immediate objective. This should only be looked upon as a short-term expedient, they emphasized.

Alumni Notes

◆ 1931

Corrin H. Hodgson, a member of the Mayo Clinic Staff since 1944, has been appointed medical director of the 3M Co., St. Paul, Minn., effective October 1, 1966. He has been a professor of clinical medicine in the Mayo Graduate School, and has been a trustee and former president of the Minnesota Medical Foundation.



Corrin Hodgson

◆ 1932

Mary Karp lives at 2068 Windy Hill La., Highland Park, Ill., and is an associate professor of anesthesiology at Northwestern University. She was chairman of anesthesiology for 30 years at Chicago Wesley Memorial Hospital until resigning earlier this year, and remains on the senior staff. She has a 21-year-old son.

◆ 1935

Harold G. Scheie, Philadelphia, Pa., is co-author of a new book titled *A History of Ophthalmology at the University of Pennsylvania*. The 388-page volume traces the treatment of eye disorders from Benjamin Franklin's invention of the bifocal to the present. Publisher is Charles C Thomas, Springfield, Ill.

◆ 1954

Emery H. Johnson is new chief of the Office of Program Services, Division of Indian Health, U.S.P.H.S., in Washington, D.C. He was formerly stationed in Billings, Mont., and is a career public health medical officer.

◆ 1957

"I rarely see any news of the Class of 1957," writes **Arthur M. McGuire**, who has just opened an office for practice of surgery at 715 Sheridan Ave., Cody, Wyo. He served two years with the Army in Alaska and then spent five years in residency at Hennepin County General Hospital, Minneapolis. Arthur and his wife, Peggy, have a son, Scott, 18 mos., and "another on the way shortly."

Donald A. Shumrick is now professor of otolaryngology and director of the department at the University of Cincinnati School of Medicine. He was formerly on the faculty at Iowa, Minnesota, and Washington Universities.

◆ 1961

John C. Scott completed a four-year residency this year and is now an instructor in gynecology and obstetrics at Marquette University Medical School. He lives with his wife, Beth, and

two children at 7930 W. O'Connor St., Milwaukee, Wis. John is an American Cancer Society Fellow, and is active in the Planned Parenthood Association.

Allan Belden writes that he is "currently serving my 'stint' with the National Institute of Mental Health, Washington, D.C., as a program development specialist. Our family has expanded to three tow-headed and tigerish boys, with everybody interested in camping and skiing." Bud's address is 44 Randolph Rd., Silver Spring, Md.

◆ 1963

Edward C. Maeder, Jr. writes that he is in military service and headed for a year's duty in Vietnam under the MILPHAP program. He will be working in a provincial hospital treating Vietnamese civilians.

Clarence E. Henke reports that he joined the Maryland State Health Department in July, 1966, to work at Annapolis and Baltimore as a fellow to complete the P.H. residency requirements. He has completed two years of epidemiology with the U.S.P.H.S., and has attained the rank of lieutenant commander. Clarence was hospitalized in March for major knee surgery following an accident.

◆ 1964

Donald S. Asp is now in general practice with the Henry Clinic, Milaca, Minn., in association with **Dr. Joseph E. Henry** (Med. '46).

Larry Jones visited the Medical School in August from his present solo general practice in Harlowton, Mont. Larry has taken up flying and is one of several recent graduates of the Medical School who were pharmacists before becoming physicians.

Capt. Bill Hagen writes from Air Force duty overseas: "*Am enjoying my tour of duty in England . . . so much to see and do, and easy to get flights to the continent.*" Bill will remain in the Air Force until July, 1968. He sends greetings to the Class of '64, and invites you to look him up at the R.A.F. base, Upper Heyford, 14 mi. north of Oxford, England. His mail address is Box 58, 7514 USAF Dispensary USAFE, APO New York 09194.

◆ 1965

Lt. Jon Wogensen entered the Navy this month and expects to be on duty for the next two years at the Naval Amphibious Base Dispensary, Norfolk, Va. Jon and his wife, Betty, have a 21-months-old daughter, Dawn.

Donald J. Soll, who interned at Memorial Hospital, Long Beach, Calif., has joined the Tyrol Clinic, 5250 Wayzata Blvd.,

Minneapolis, Minn., in association with Alton C. Olson (Med. '33) and Richard E. Anonsen (Med. '54).

Charles Benjamin began general practice in July with the Lee Clinic in Glenwood, Minn.

C. Roger Herbrandson is now in general practice in Vermillion, S.D.

Timothy Nealy began general practice in Blooming Prairie, Minn. last summer.

Alumni Deaths

◆ 1897

Dr. Albert H. Moore, Lake San Marcos, Calif. Died June 18, 1966, following a stroke. He was 92 years old and had been disabled for several years. Dr. Moore was one of the oldest living graduates of the Medical School. He is survived by his widow, Mrs. Evelyn B. Moore, 900 La Fiesta La., Lake San Marcos, Calif.

◆ 1902

Dr. Nellie O. Barsness, St. Paul, Minn. Died May 12, 1966. She resided in St. Paul for 60 years and was a member of the 50-year Club of the Minnesota State Medical Association. She is survived by her son, Dr. Harry Simmonds (Med. '43) of St. Paul.

◆ 1903

Dr. John J. Catlin, Macomb, Ill. Died August 20, 1966, at the age of 85. He was formerly of Buffalo, Minn., where a son, Dr. T. J. Catlin (Med. '32), is in practice. Dr. John Catlin was active in Minnesota Medical Association circles and was head of the Wright County Tuberculosis Association.

◆ 1906

Dr. Carl R. Butturff, Freeborn, Minn. Died April 1, 1966, age 82 years. He was a graduate of the Minneapolis College of Physicians and Surgeons.

◆ 1908

Dr. George B. Eusterman, Rochester, Minn. Died July 11, 1966 following a heart attack. He was 84 years old and a pioneer Mayo Clinic physician, specializing in intestinal disorders. He was credited with founding the Clinic's Section of Internal Medicine.

◆ 1924

Dr. George M. Tangen, Taylors Falls, Minn. Died July 23, 1966 of a heart attack while working in the yard of his home. Dr. Tangen was an ENT specialist and practiced in Canby, Minn. and Minneapolis before retiring. He was on the clinical

faculty of the Medical School. Among the survivors is a son, Dr. George V. Tangen (Med. '56) of Minneapolis.

◆ 1928

Dr. Willis H. Thompson, Chanhassen, Minn. Died July 24, 1966, aged 66 years. Dr. Thompson was on the faculty of the Medical School until 1941, when he began the private practice of pediatrics in Minneapolis. He had retired in 1965.

◆ 1934

Dr. Evelyn V. Johnson Bock, Phoenix, Ariz. Died April 7, 1966, age 55 years, of cerebral hemorrhage. She formerly practiced in Minneapolis and was on the clinical faculty of the Medical School.

◆ 1937

Dr. Elwyn Raymond Hudec, Echo, Minn. Died March 10, 1966, aged 55 years, of leukemia.

◆ 1941

Dr. Sidney C. Blackmore, Biwabik, Minn. Died July 3, 1966, the result of coronary thrombosis. Dr. Blackmore had been in general practice for many years with the East Range Clinic in Biwabik. Two of his three sons — Gary and Ronald — are students at the Medical School. Also surviving is his wife, Eleanor, Biwabik, Minn. The family suggests memorials to the *Dr. Sidney C. Blackmore Endowment Fund for Medical Scholarships*, c/o the Minnesota Medical Foundation, 1342 Mayo Bldg., University of Minnesota, Minneapolis, Minn. 55455.

MEMORIALS

The Minnesota Medical Foundation acknowledges with gratitude recent contributions made in memory of:

Mrs. Roger Acker St. Paul, Minn.	Andy Dregseth Eldred, Minn.
Robert Adler St. Paul, Minn.	Tommy Kasper Excelsior, Minn.
Mrs. John Baird Excelsior, Minn.	Marie D. O'Brien Minneapolis, Minn.
Dr. Sidney C. Blackmore Biwabik, Minn.	Mrs. James E. Pruitt Sioux Falls, S.D.
Mrs. Eugenia Burgess St. Paul, Minn.	Robert Ripatti Delano, Minn.
Mrs. Lyman Clayton, Sr. Wolf Point, Mont.	Dr. George Tangen St. Croix Falls, Minn.