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By Philip Nimoy and J.D. Kanstoffs

Mr. Frank Lachman is retiring March 31 after working in Jefferson's Daniel Baugh Laboratory for 50 years. He began his association with Jefferson at the old D.B.I. building, located at 11th and Clinton streets, where he was the building manager.

Over the years he has given uncalled for, but much appreciated support to class after class of incoming freshmen. Student regard for him was reminded about the great help he offered blood when he and to him personally.

A~e~ have been many awards as Dr. Pauling received a standing ovation. In 1965, while others do not?" Pauling had to his credit, any more praise is about as necessary as an acting lesson for Sir Laurence Olivier. Yet, Horizon House, a Jefferson-affiliated mental health rehabilitation Institute, has decided to, once again, laud this great help that Frank was to the department and the students.

He will be missed.

Rx For Schizophrenia: 8 g. Ascorbic acid (Vitamin C), 4 gms. of Vitamin B-3, and pyridoxine (Vitamin B-6) for victims of large quantities of vitamin B-3, Pauling, is 4 gms. of Vitamin C, 8 gms. of Vitamin B-3, and pyridoxine

Frank conducts many tours of President for popular medical training at the Primary Care Department.

Since the percentage of the general population, then surely it is the very existence of the Primary Care Physician's role private enterprise and practicing medicine and Louis Kahn.

The fourth, sixth and eighth floors of the CTF (cross-hatched in the architectural diagram of the CTF) will be organized into the various floorspace as well as the fourth, sixth and eighth floors in addition to this saving in cost savings. Because the structural- mechanical grid of the building separated from the primary-care spaces, bidding and construction can begin before the primary-care spaces are programmed. Thus, construction delays and rising prices.

In addition to this saving in initial construction costs, there are substantial savings in the operating rooms and staffed building. Simplified maintenance construction and repair to mechanical systems are beyond because exposed in six of the six staircases.

Finally, proponents of the use of the CTF may be projected: the structure is to be integrated with the Foerdner Pavilion which will provide one of the three "towers" in this complex. Study of a cross-sectional diagram of the CTF will help you conceptualize the organization of services.

The University recognizes the CTF as an exemplary setting for the interaction of superb patient care, the education of many kinds of professionals who must work together throughout their careers, and the clinical application of research results."

Family Medicine Department Begins Under Bruckner's Chairmanship

by David A. Jacoby

On March 1, 1973, Dr. Paul C. Bruckner, the new Professor and Chairman of the newly created department of Family Medicine. A summit cum laude graduate of Muhlenberg College, he took his medical degree at the University of Pennsylvania, interned at LANESON Hospital, a first year residency in Family Practice at Huntington Medical Center, and graduated a second year residency in Internal Medicine at Laneroson Hospital.

Since then he has spent thirteen years in family practice, eight of which were at the medical colleges as the teaching of students from Jefferson, Penn, and Temple for ten of them, and as associate in the Division of Family Medicine here at Jefferson for the last three years.

New Curriculum

He has high hopes for the new department and anticipates that six week clerkships in family practice will be a definite part of the class of 1976's junior year. Hopefully, a solution is available. The Family Physician, as coordinator, should be aware of health-care resources in a particular community.

Primary Care Shortage

The government, which is theoretical, is one of the many factors that potential patients, is well aware of the fact that the percentage of primary physicians is rapidly decreasing. Not only is the number of general pediatricians, and family doctors decreasing, but also their distribution is uneven and even more concentrated in attractive urban areas. This results in an acute shortage of primary physicians in urban and rural areas.

Legislative bodies, medical educators, family practitioners, private enterprise and practicing physicians are concerned and wrestling with this problem. Hopefully, a solution is available. The Family Physician, as coordinator, should be aware of health-care resources in a particular community.

It's emphasis will be on primary outpatient care. The senior year will be devoted to tracts in which further exposure to basic science and didactic teaching will complement the clinical exposure.

Practitioner's Role

Dr. Bruckner sees the Family Practitioner's job as "meeting and taking care of people when they are sick; it is a call that he has first contact with them he must be equipped to give them continuing help or refer them to the proper source for aid. He should be a personal physician who affords a mechanism for readily available, continuous, comprehensive care. Such a mechanism should consider a team approach. The Family Physician, as coordinator, should be aware of health-care resources in a particular community.

To and consult

the fields of science

by Morton A. Klein.

Does Dr. Linus Pauling, the Nobel Laureate and Stanford University Professor who has published over 100 scientific papers, receive more honors and acclaimes bestowed upon him? With as many awards as Pauling has to his credit, any more praise is about as necessary as an acting lesson for Sir Laurence Olivier. Yet, Horizon House, a Jefferson-affiliated mental health rehabilitation Institute, has decided to, once again, laud this great help that Frank was to the department and the students.

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Podiatry: Perspectives Re-emphasized

When you consider that millions of people in America visit a podiatrist each year, someone knows about podiatry. Unfortunately, among those who have little idea of the training and competence of a podiatrist is the physician.

Ask a medical resident, an orthopedic resident, or an orthopedic surgeon, "What do you think of podiatrists doing surgery on the foot?" and you may get any number of answers. One probable answer might be, "He's not allowed to do it." Another could be, "Why should anyone do surgery with only a couple years of education?"

Who is the podiatrist? What are his educational requirements and qualifications?

The podiatrist is not an M.D., though in many ways his manner of diagnosis and treatment is not unlike the M.D. In an article for the New England Journal of Medicine (Mar. 18, 1971 page 588), Richard N. Powell, M.D., wrote, "Although podiatrists do not hold M.D. degrees they share many of the characteristics of physicians, most important of which is the legal and effective right to make and act upon their independent medical judgement. Within the limitations of his specialty the podiatrist, in effect, practices medicine.

A student of podiatry must spend 4 years (post-preceptorial education) in one of five Podiatry Colleges in the United States. The first two years' curriculum is very similar to medical school. In the last 3 years, there are courses in PVD, surgery, general medicine, orthopedics-biomechanics, psychiatry, and community health programs. During the final year, students make ward rounds and visit clinics for dermatology, PVD, and orthopedics. To evaluate the scope of training of a podiatry student as compared with that of a medical student one has only to compare Part I of their respective National Boards.

Besides the scope of training, what is the scope of treatment? Podiatrists treat many conditions in the foot which include (besides corn-callosus-telaion treatment): ulcers, fungal infections, cellulitis, diabetic disease, toenail problems, osteoarthritis, limb mechanical foot problems, leg and hip deformations, congenital foot problems, potential systemic syndromes, and edemas, including that of right-sided heart failure.

Podiatrists are trained to and do recognize the systemic implications of what they see in the foot as well as treat any complications of what they see in the foot as well as treat any...
1014 College, students do history of Jefferson that will providei:i.to students. Coordinated, efficient two groups who will benefit the General Faculty Meeting on Tuesday April 24th. May 15th. Herbut announced the plans at a meeting. It is widely believed that mental illness is a type of...
Speak Out Article Of The Month

Must We Participate in Crisis in Medical Education To Solve the Crisis in Health Care?

Annals of Internal Medicine 76:487-490 (1972)

GEORGE L. ENGEL, M.D., Rochester, New York

I am writing of my concerns that are being made or proposed in both graduate medical education, the consequences of which I fear will be deleterious to the professional competence of future physicians. Limiting my comments to an adequate document here of my claims, but since we all share a common purpose and must, therefore, agree that physicians obtain the highest degree of professional competence - I trust we will serve nonetheless to generate a healthy discussion among us.

In a moment of history when it is difficult to make a series of charges that I think hitherto have been overlooked. Consider the following discussion as well as conclusions.

1. The teaching of the elements of the clinical approach to the sick has not been systematically demonstrated in many medical schools in this country today. Students who are deficient in skills in interviewing and physical examination are often oriented, insensitive to patients as human beings, and excessively dependent on the laboratory as the basis for diagnostic decisions and clinical judgments.

2. Medical educators, especially those with a primary laboratory orientation who have not been involved in interviewing patients, are not particularly interested in how the patient is feeling so as to recognize these deficiencies. Many have not even familiarized themselves sufficiently with the nature of the physician's task, for they are not in the course of preparing their students. That the American Board of Internal Medicine is beginning to recognize the need for adequate interview and physical examination is in itself an important development. It is not clear to me in my view this should be a minimum for the granting of the M.D. degree, not for certification as a specialist in internal medicine.

3. Agencies external to the medical schools, such as making recommendations and decisions that may not only preclude the necessary reforms in undergraduate education but may even provide programs less adequate. I refer here particularly to the AAMC, the ACP, the ACP's Committee on Medical Education, and the Carnegie Commission, not to mention the legislative bodies. For the most part their proposals are defended as being necessary to improve the financial bottom line, the most basic way of increasing medical school enrollments is not to improve the delivery of medical care. But you may question whether this cannot happen in the long run prove more, rather than less, costly to the society if they do not assure sound preparation of the physician in the basic elements of medical profession. Let me cite some of these recommendations and see what seems to be some of the more serious consequences for our schools of education as a whole.

A. It is being urged that the undergraduate house staff is utilized to 3 years. Among the problems this brings up are the following: (1) basic science teaching may become too condensed and able to re-enter the student with the vocabulary and language necessary for their specialty; (2) it is very difficult for students who are not familiar with the basic clinical disciplines for periods long enough to gain the maturity of experience so necessary before entering the internship; (3) the overcrowding of the schedule will reduce elective time and may be of little importance for the student's growth and maturation; it is necessary to fit the piece together; (4) the most critical deficiency in training programs, the limited attention now devoted to interviewing patients. This clinical skills and mastery of their task is very difficult if not impossible to correct to correct because of lack of time. Interviewing skills may decline, at least in part, from lack of time to remain and redesign their courses before they are seriously. I refer to the next new class, which was a serious problem & the accelerated educational process.

B. Some recommend a track system whereby students are encouraged to choose specialty preferences earlier than in the past. It may be merited for a few exceptional students, but for most the possibility that the physician is not making the right decisions is great for those who make the wrong choice.

C. Increase in the size of the student body and reduction in number of years in which they study. At the predental level I am particularly concerned with the growing enthusiasm to offer an opportunity to learn firsthand at a relatively young age of body in gross anatomy and gross pathology because there may be considerable danger in the need for n.s. supervise for appropriate laboratories, and personal situations in some schools in Latin America and Europe. The present trend is for a more serious at the clinical level if medical schools are to be of any use for clinical learning is insufficient and inadequate. Even now most students are being graduated without ever having had even one personal interview or physical examination.

Departure of the intern's intern is virtually decreed. Every medical student makes recommendations and decisions regarding the courses in the first year and then continues on this basis. This is especially so for the intern of the fourth year. I am personally heavily committed to this endeavor, and I consider it important for our students that I demonstrate by no means a low opinion of basic clinical skills applicable to all physicians regardless of their formal initial training. In many of our courses in medicine, from surgery, from psychiatry, from obstetrics-gynecology, from neurology, I demonstrate to some students who speak no English or who are not from the United States that there are physicians who are desperately so, who are overcrowding patients who are desperate and they who are not particularly interested in how the patient is feeling so as to recognize their deficiencies. Many have not even familiarized themselves sufficiently with the nature of the physician's task, for they are not in the course of preparing their students. That the American Board of Internal Medicine is beginning to recognize the need for adequate interview and physical examination is in itself an important development. It is not clear to me in my view this should be a minimum for the granting of the M.D. degree, not for certification as a specialist in internal medicine.

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FRIDAY, MARCH 30, 1973

THROW OFF YOUR ENZYMATIC CHAINS
I WANT YOU

sends UNCLE SAM
(s-adenyl met)
to join the
BROWNIAN MOVEMENT

This is the situation with the enemy
communis extensors rule with iron hand
repression of glycolysis
use of prohibited anti-nissi micelle
forced induction of all enzymes
fascia Gestapo tactics are widespread
local pollicis enforce cruel laws

WHAT WE MUST DO
1. repeal Starling's law
2. shutdown the salvage pathway
3. stop abdication of all humeri
4. reopen hippocampus of poly u.
5. release all: free radicals
liberated phosphates
aponeurotics

JIMBO
ADM. BILLY REUBEN - 401 N. BROAD

Mendelsohn - Lubeck & Co.
Professional Insurance Service To
The Entire Jefferson Community

George H. Lubeck, C.L.U.

PAGE 5

National Bored? Broads? Boards?
(Dedicated to those fearless sophomores and seniors!!)

Testing Spool
Spool by H.S.P.

With every segment of the Thomas Jefferson University
annually as to standing in National Board examinations, I offer the
following examination format that will more fairly prepare one
for the examination of examinations:
the National Boards.

MAIN DIRECTIONS
1. Place your name, social security number, place of birth, date of birth, age, parents' pro-

fession, checking account number, telephone number, course, and HPI on the answer
sheet. Do this now, and block in the appropriate space for each letter on the answer
sheet.
2. There are 473 pages. Count them now (total 15,360 questions).
3. Make your choice to each question by blackening the corresponding space on the "score" sheet. Use only a #2
pencil as our computer contains only #2 pencil box and develops lead intoxication with any other
pencils.
4. If one extra dot is found on this "score" sheet the results will be invalid. Live in mortal fear of
stray or extra marks appearing _
5. Not more than one mark

PART II
A. If the item is associated with A only
B. If the item is associated with B only
C. If the item is associated with both A and B
D. If the item is associated with A or B
E. If the item is associated with A, B, or C
F. If the item is associated with a party other than the recognized

area of the two party system

PART III
Directions: For each five sets of even numbered letters below there are 14 sets of differently
ordered mixtures of the five sets with 72 possible answers. Match number 31 with any four blue
marbles designated with an asterisk. Be sure to circle your answer on the "score" sheet if the associated question has any
clinical significance, however,

PART IV
A. If only L, J, and X are correct
B. If only L and J are correct
C. If only L, J, and X are correct
D. If only J is correct
E. If only X is correct
F. If only J is correct
G. If only X is correct
H. If only D, E, and F are correct
I. If only A and B are correct
J. If none are correct
K. If all of the above are correct
L. If all but one are correct
M. If some are correct and others are not
N. If some are correct
O. If M and N are correct
P. If M and J are correct
Q. If only C is correct
R. If only R is correct
S. If some other combination is possibly correct
T. If you don't want to reveal the answer as it might compromise national security
U. If you don't know about A through J inclusive
V. If you think you know about A through J inclusive and S and want to receive 3.346 + 1 credit
W. If you want to be a doctor
X. If "It's all bullshit, man!
Y. If only Z is correct

A Learning Experience in a Social Atmosphere
Setting Up A Medical Practice

An open invitation to all medical students, interns and residents,
practicing physicians-Saturday, April 9, 1973, 3:30 P.M., Philadelphia
County Medical Society, 3100 Spring Garden Street.

Guest panel: Mr. Lief Buck, M.D., Consulting
For Professionals, Bala Cynwyd; Mr. Elmer Rosen - Alexander Grant Co.
Accounting firm; Mr. Flume Tannall, Jr., C.L.U. - Physical
Planning Service; and Dr. Bernard Zamoreon - chairman.

How do I start a solo practice or join a group?
How do I set up an accounting, record and collection system?
Insurance and Investments - How much? What type?

Cocktail Party follows the open Question and Answer session;
Please bring your wife, a date and a friend.

Free - Private Parking on the premises.
CTF (Continued from page 1)

Note that interstitial floors between patient bed floors may be used for "M.D. offices and Support." This is planned in one CTF tower and is possible because far less "support" space is needed for such facilities, than is necessary for the services (lab, radiology, surgery) in the middle tower. (see sketch)

Other CTF Features

Through the replacement of the Foerderer Pavilion, it will be redevoted to this end from originally projected. The Foerderer Pavilion will be the above plans by the doctors to not be moved from its recently completed site. University not to construct additional floors will be constructed atop the CTF to house the Wills Eye Hospital (not appearing in this sketch). Wills Eye Hospital will be considered a separate unit of the hospital with its own elevator banks and operating rooms, while utilizing many CTF services.

Roadblocks

The three major "political" considerations are land acquisition, an altered Jefferson "community," and approval of the above plans by the doctors who will use the product. The Executive Council has voted approval of the CTF and the plan was presented on March 14, 1973, to the staff physicians.

Because a merger of Pennsylvania Hospital (8th & Spruce Sts.) and Jefferson is under consideration by both boards of directors, any programming for the CTF although detailed in hundreds of pages of published reports, must be considered tentative. Such an action, wrote David M. Cleary in the Evening Bulletin of Tuesday, March 13, would benefit both hospitals.

"For Jefferson, the psychiatric facilities of Pennsylvania Hospital would be a welcome addition. They include the Institute at 8th and Market Sts. and the Hulc-Mercer Clinic at 8th and Locust Sts., expressly designed to function as an outpatient mental hospital."

Pennsylvania Hospital also stands to improve its pediatric services by a merger. Jefferson's department of pediatrics is a small, existing as a branch of the department of obstetrics and gynecology. According to Mr. Norwood, there are outstanding properties on the site of the CTF.

"We are negotiating with the City to secure their cooperation to put together completion of the land parcel."

The Clinic

The "two-door system" of medical care is on the decline and as a result, there will be no distinction made between the "clinical" and "private" patient.

Nurses Eye B-ball Crown

Nurses Eye B-ball Crown

by Janet Welsh

The Thomas Jefferson University student nurses basketball team finished their 1972-73 season with 5 wins, 1 loss, and a sure spot in the quarterfinal games for the championship. Our wins all were by a margin of at least 10 points. Championship games will be played during March at Memorial Hall in Fairmount Park. With the fine coaching of Mr. Sol Koshin, we hope to keep our first-place title for the second consecutive year. (Continued on page 8).
Kaskey's Tips on Platters and Places to Go.

The Tower Theatre: Reminiscent of the old Fillmore East with its no-nonsense elegance, the Tower stands a block away from another upscale structure, the 6th St. Market Street subway station. The crowd is friendly, the acoustics are good. God and Captain Beechheart and the Majic Band, appeared recently. About Good God—well, the Majic Band, appeared recently. and Captain Beefheart and the

nice. The drinks are fairly expensive, so it's better to maintain an already obtained high than to start from scratch. I had the very real pleasure of seeing Doug Sahm and Band perform there. From the age of 7 or 8, Doug Dowd to be Sir Douglas. Doug Sahm has remained true to his Texas roots. Performing Rain, She's About A Mover, Wodestrian Mountain, Ban Antone, Doug showed a remarkable innervation of technical skill, musical ability and a good humor. I don't know why he hasn't played the East since Atlantic City Popoliv, it has been his loss.

The Academy of Music—Perhaps the one institution Philadelphia can be proud of. Bonnie Raitt and Taj Mahal had the place reeling. Bonnie was a little nervous and very high. Taj was just as smooth and natural and beautiful as is possible for a person to be. Like most concerts, you were either there or you missed it. Stay tuned for Doc Watson at the Academy April 1 with John Hartford and David Bromberg.

The Kinks—Existing in a foggy fantasy world populated with all sorts of nightmares, fairies, trolls, Ray Davies minerals through this world showing starting empathy with the persons of everyman. Everyone whose problems are his, his car, his kids, and his varicose veins, who wants to be like motion picture star but has to turn off the evening room light to make it with his ugly lover. At best Mr. Davies can spin Hered with natural and beautiful as is Philadelphia can be proud.

WHAT IS

BRAIN

P syc h o logy , you may qualify.

If a steady salary of $400 a month and paid-up tuition will help you continue your professional training, the scholarships just made pos-

sible by the Infant, Good and Services Health Professions Revitalization Act of 1972 deserve your close attention. Because if you are now in a medical school, dental school, veterinary, podiatry, or optometry school, or are working toward an A in Clinical Psychology, you may qualify. You must meet the following requirements to complete your studies. You've commissioned as an officer as soon as you enter the pro-

gram, but remain in student status until graduation. And, during each year you will be

on active duty (with extra pay) for 45 days. Naturally, if your academic schedule requires that you remain on campus, you stay on campus

—and still receive your active duty pay.

Active duty requirements are few. You must serve one year as a commissioned officer and at the end of that year, you will participate in the program, with a two year minimum. For a scholar-

ship with either the Army, Navy, Air Force, or Marines, that upon entering active duty you'll have rank and duties in keeping with your professional training.

The life's work you've cho-

sen for yourself requires long, hard, expensive training. Now we are in a position to give you some help. Mail in the coupon at your earliest

convenience for more detailed information...
Jazz Comes to Jeff Steve Glinka

The Charlie Byrd Trio performed in the Jefferson Commons on Tuesday evening, February 25th to an audience of about 300. Since a large percentage of the audience consisted of Jeffersonians, apparently not many Jeffersonians were willing to spend 1-1/2 hours for $5.00 to discover a great entertainer.

Byrd was born in 1925 in Virginia and probably in best known as a jazz guitarist. However, he is more than a jazz guitarist for his versatility has carried him in many other fields of music. In 1947 he became seriously interested in classical guitar, and after an audition with Anord Segovia, Byrd was invited by that master to study with him in Italy. Around 1956 Byrd became interested in adapting the classical finger style to playing jazz on unamplified guitar. After Byrd's return from a tour of South America in 1961 he became the first and among the foremost North American exponents of 'bossa nova.'

Lastly Tuesday, the 1972 Charlie Byrd style was a rare treat for the Jeffersonians.

UNIVERSITY HOUR SCHEDULE
Spring Term 1973
Solo-Cohen Auditorium Jefferson Alumni Hall
Wednesday 1:00-3:00 P.M.
April 4- John Glenn- Mereves Distinguished Lecture on the Humanities in Medicine. Topic- America: During to meet the future.
April 11-Over Europe Ensemble. Presenting a program of Renaissance, Baroque and contemporary music.
April 18- Peter Levin, Assistant District Attorney with Criminal Justice and Drug Abuse Unit. Topic: Legal and Medical Aspects of Drug Abuse Problems in Philadelphia.

Image cares about you and your hairs.

Take it from us hairs. We know image really cares about the hairs they cut. To them it's a serious personal business. When they say, "We'll shape the hair on your head to match the image in your mind", they're not kidding. Because they know how important your hair is to you and your well-being. We're sure you'll be glad to know there is a place that treats you and your hair like good friends.

Image Unisex. Hair Styling 1271 Walnut Philadelphia 926-8888