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Sam Markind, and Kevin Hardy
**The Duke's Magic**

by Rich Freeman

"May there be with you", a familiar litany around exam time, asks for a favorable curve to be conjured by the wizard of statistics, Dr. Hyman Menduke. The magical mysterious process of grade adjustment, often bittersweet to the student, is the quintessential art for whom death seems imminent, compels this intrepid explorer towards the Emerald City of statistics in order to learn more about "the Duke" (and to ask for a break). Dr. Menduke took to his office, two in the morning, after earning his BA in Math and his MA and PhD in Economic Statistics, and sitting in Eco-Statistics, "only there because there were no other programs in this field". After all, his full name is Hyman Menduke. For several years, Dr. Menduke was the light of hope, the top of the first Micro-Pharm note pocket and found none. Never before had NS '83 withheld notes. The primary reason for the decision to withhold notes from those who had not paid for them was that NS '83 found itself low on funds. Several factors led to the situation: unexpected bills at the end of the Spring Pathology block eliminated most of last year's surplus; Note Service officers received minor salary increases in their second year; the second year note service traditionally orders supplies for both itself and the first year note service, then bills them for whatever they use; finally, because of the asynchrony of the first and second year academic schedule, the first year class can't always pay immediately when ordering the supplies. As a consequence of these factors, the Class of '83 Note Service found itself faced with an increased demand for cash and a tight cash flow at the year's end.

In addition to the tight cash flow, social pressures and apparent abuse of the note service were involved in the decision to hold the notes. Last year, when money was not as tight, people were given the benefit of the doubt when they presented excuses for not being able to pay for their subscription. When the excuses drooped into the office, Dr. Menduke says, "I'd say there were assumptions that certain people had been bragging at not paying for their notes since the Cell and Tissue block of Freshman year NS '83 officials decided that this was abusive and should be stopped. All told, about 25 people were in debt, most of these owing money for one or two blocks, and only a couple who had been behind in payment since Biochem.

The timing of the decision to withhold the notes was a function of the academic calendar. Made during the Fall Pathology course; it was not immediately implemented for fear of possibly placing people in academic jeopardy. The beginning of the Micro-Pharm block was a convenient time to act since everyone would have fair notice, and the distribution lists could be more conveniently amended.

The effect of the announcement was dramatic; normally it takes three to four weeks to collect most of the subscriptions, this time 90% of the class had renewed by the end of the first week and a half. Only two people decided that they did not need the notes, everyone else is up to date.

Concerning the present cash flow of NS '83, Tim Heilman assures that there is "no reason to think that straitlaced won't be paid or that there isn't money in the account. We have enough for the entire block with, hopefully, some surplus". He plans to run the note service accounts in the black until the end of the Clinical Medicine block. In the event of a surplus there will be a choice between a party or refunds. In the previous year, Class of '82 decided on a party. (See related story on p. 8)

When the Notes Didn't Come Out

by Hugh Gelsobe and Martin Getzow

In an unprecedented and somewhat surprising move, Tim Heilman, the treasurer of the Second Year Note Service (NS '83) announced during the first days of the Microbiology-Pharmacology block that no notes would be distributed to people who were not up to date in their payments. Quite a few members of the Class of '83 were shocked to find their mail boxes empty when they searched for the first Micro-Pharm note pocket and found none. Never before had NS '83 withheld notes.

The primary reason for the decision to withhold notes from those who had not paid for them was that NS '83 found itself low on funds. Several factors led to this situation: unexpected bills at the end of the Spring Pathology block eliminated most of last year's surplus; Note Service officers received minor salary increases in their second year; the second year note service traditionally orders supplies for both itself and the first year note service, then bills them for whatever they use; finally, because of the asynchrony of the first and second year academic schedule, the first year class can't always pay immediately when ordering the supplies. As a consequence of these factors, the Class of '83 Note Service found itself faced with an increased demand for cash and a tight cash flow at the year's end.

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**Student Representation?**

by Laureen Thorton

Members of the medical school classes of 1983 and '84 recently had the opportunity to voice their opinions regarding student representation on the medical college student Promotion Committee, in the form of a questionnaire distributed to every student. The Promotion Committee, headed by Dr. Frank Group, is composed of 12 faculty members, one from each of the six basic sciences and six clinical departments. Dr. Robert Mackowiak represents the Dean's office, and other faculty members are invited to most of the meetings, used to discuss policies and other related topics. Any student receiving a notice from the Committee is entitled to a hearing before the Committee, should he or she desire one.

Presently, the two student representatives to the Committee are invited to most of the Committee meetings and are involved with and free to speak on matters regarding general policy. However, they are asked to leave when matters concerning individual students are discussed, and they have no voting power, unlike their counterparts on the admissions and curriculum committees.

According to junior representatives Lorraine Palos, Drs. Gray and Mackowiak have considered the possibility of asking for a change in the role of the student representatives, but it would be helpful to know the general feeling among faculty members about the matter before proposing a radical change in the by-laws of the medical college. These faculty members do not permit student representatives to vote on Committee decisions. Their overriding concern is that such a change might reduce the level of confidentiality which now exists on the Committee, since the student with an academic problem on an individual basis. On the other hand, the hope is that increased involvement of the students by the Committee would provide a healthy and varied perspective on the cases, as well as a more comfortable atmosphere for a student coming before the Committee. In addition, it is reasonable that junior and senior medical students should be respected and deemed trustworthy enough to maintain confidentiality in matters related to fellow students.

Lori Palos designed the questionnaire, along with student council vice president Ron Brackman (also a junior). The format was short and simple, yet the response rate from the first and second year medical students was a very disappointing 10% return. Of those who did respond, 10% firmly wished not to have a voting student representative on the Promotion Committee. 90% were in favor either of having a student with voting power on the committee at all times or of having the option left to the committee.

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POLITICS & MEDICINE UNDER THE GOP

by Lenny Gessner and Paul Walton

This year's Republican landslide ushered in the first GOP senator in 25 years, and a president-elect with a clear public mandate for a more conservative government. Defeated in the 1980 election were many democratic politicians who were powerful in federal health care planning. Among the senators defeated were Warren Magnuson (D-Wash), Herman Talmadge (D-Ga), Birch Bayh (D-Ind), and Russell Long (D-La), all members of the senator appropriating subcommittees on health. The defeated house members included Al Ullman (D-Ore), John Brademas (D-Ind), and Andrew Maguire (D-Ni). The Republican Party platform called for no comprehensive national health insurance, and a

marked decrease in federal regulation of hospital cost containment programs. President elect Reagan instead has called for increased private sector health insurance, particularly for an extension of coverage to include those currently uninsured. Under the Carter administration, the Department of Health, Education, and Welfare has been restructured to the Department of Health and Human Services, while retaining Patricia Harris as Secretary. Reagan is expected to announce Mr. Harris' replacement, along with the other cabinet appointees, in the next few weeks.

Mr. Reagan has a big job ahead, and the attention that health care receives will probably go mainly to

dismantling federal regulation of the health care industry. There is some indication that a federal catastrophic health plan has a better chance of being enacted before the election, because labor groups and Senator Kennedy now realize there is no hope for a comprehensive plan in the next four years. This may lead them to support a catastrophic plan as a best alternative. Also, Senator Bob Dole (R-Kan) who will become the new chairman of the Senate Finance Committee, has stated recently that he plans to push for catastrophic coverage.

Mr. Reagan has made it clear in recent interviews that he considers national health insurance a polite euphemism for "socialized medicine," and therefore is strongly opposed to any form of it. Reagan was notably the only major candidate opposed to abortion, and in favor of traditional family values. The important impact of these political stands will be apparent when appointments are made for the Supreme Court. The well known power of judicial review is likely to be flavored by the new judges' particular values, reflecting those held by Mr. Reagan.

There is much speculation about the upcoming administration's policies and effectiveness. We would be most grateful if our next president and his administration, as they have promised, would interfere less with the practice of medicine and delineate the importance and power of the federal bureaucracy over the lives of the American people.

The next Ariel will present a more detailed account of what the federal catastrophic health insurance involves and how it will affect the average citizen.

New Commons Policies

by Saul Hefting

Since the beginning of the academic year, the Commons Governing Board (CGB) has taken a new direction by focusing attention on student needs. As Chairman of the Board, Dr. Harry Smith has worked hard to open up the governing body to student input. In addition, the Board selected a committee of 22 representatives consisting of fourteen students and eight faculty members. Mark Rubin (JMC '80) was chosen as committee president. The function of the committee is to make policies for the Commons and auxiliary services, including housing and parking. Recent actions of this committee include the redefining of Commons membership and the updating of the Board's constitution. Of interest to many people is the Board's action of initiating a fee for the gym towel service. In the past it has cost the Commons $14,000 per year to provide a free towel service to Commons members. Now, in an effort to encourage members to bring their own towel to use, the Commons charges 25 cents per towel. Special towel cards are available in the Commons Office (M-63) for those who use the service a lot.

The CGB did vote to discontinue a deposit charge imposed for towels and weight pins due to the decline in towel usage and the suggestions made by those who currently use a Commons towel. As a result of the Board's action, towel usage has decreased to only 20% from previous years. With a reduced usage and a 25c towel fee, the savings to the Commons is evident. Membership feedback to this action will be highly appreciated, in addition, it will play an important part in the reconsideration of the towel policy.

In an effort to return control of Commons' activities back to the student body, the CGB has created the Student Commons Activity Committee (SCAC) which will be responsible for all Commons events including TG's, Coffeehouses, Cushion Concerts, films, recreation and special services (trips, travel and ticket discounts). The SCAC is currently in the organization phase with the Chairman, Saul Hefting (JMC '83), working with Commons cont'd on p. 5

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MORE FROM

DR. MENDUKE

cont'd from p. 1

As for grading procedures, Dr. Menduke claims he is less than all powerful. "Not every department comes to me," he explains, "with some depart-
ments, what you earn is what you get." He also indicated that some depart-
ments do their own grade adjustments and do not consult him. Those departments that do
take advantage of his services only do so to make sure that any
adjustment is mathematically defensible. Dr. Menduke stressed
"the course coordinator establishes what is a minimal
performance and my job is to respond to course coordinator's
questions and to set up scores
that are mathematically consistent with the coordinator's
decision." These adjustments
must be just indications of each
row score recorded. Calculation
of the Standard Error of
Measurement (SEM) is done
strictly by formula for each exam
given. The result is returned to the
department that prepared the
test; it is at this stage that any
department may object. Dr. Menduke
discussed the use of the SEM at
Jefferson. "I would think twice
about any student who earned a
68 in Biostats, however, courses
with large numbers of questions
on each exam may have such
policy." SEM's that even a 69
doesn't pass," I am opposed," argues the Duke, "to the way the
SEM is used at Jefferson. I think it
puts the burden of proof on the
faculty, to demonstrate that a
student doesn't know enough to
pass. A much better case can be
made for putting the burden on
the student to demonstrate
beyond reasonable doubt, even to
two SEM's above the mean,
that he or she has a possible
command of the material." When
questioned about how often a
student is "saved" by the present
SEM policy, Dr. Menduke replied,
"I don't know but, I do know that
the formula is very specific, you
can't fake it." I am for the au-
crical grading system," continues the Duke, "I
think it's to the student's
advantage." He believes that the
pass/fail system does not tell the
student enough about where he
or she stands. Says he, "as a
former student, it was important
for me to know where I stood." In
addition to the above duties, Dr.
Menduke is Director of
Sponsored Programs. In this
guide, Dr. Menduke oversees all
grants and funds derived from
outside the University. All
faculty research projects, 
educational programs, and
activities not solely funded by
Jefferson pass under his scrutiny.
Data on each project is collected
and compiled by his office and
made public in the yearly report
to the Dean. This report is a good
place for students to start looking
if they are interested in summer
research. Dr. Menduke invites
anyone interested in borrowing
his copy of the report to stop by
his office (there is also one
available in the Library). Presently, Jefferson has a five
year grant from the NIH to
subsidize 24 first or second year
students per summer in various
research projects. Faculty
members are requested to submit
proposals for student work, each
is evaluated and only those which
are well conceived for a short
term project, manageable for one
student to complete in one
summer, are chosen. Then
students can select from these
accepted proposals. Last year,
the first for this grant, every
interested student received a
spot, however, this year, demand
may be greater than supply. This
may cause a student selection
process which will select students
with some previous research
experience or those with some
special reason for being
considered. In addition, some
individual faculty members may
have positions available in their
own ongoing projects. Traineeships are also available in Psychiatry and Radiation
Therapy. All of this information is
obtainable from Dr. Menduke
and he is most willing to assist.

Finally, the good Duke discussed Jefferson and its
evolution. "I think the Jefferson
Education is good. It provides
a complete education, more
complete than some give us credit
for. Jefferson's reputation is for
turning out good solid practicing
doctors, but there are many other
things that Jeff does well." The
Duke may not be a wizard, and he
doesn't have the power to
give us a diploma (like another
wizard did) but he is genuinely
concerned for students and
welcomes those who seek his
guidance.

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Ariel: The phase-out of the Diploma Nursing Program at Jefferson is not an isolated event, but a reflection of dramatic trends today. What trends are currently affecting nursing and how have they come about? How have the Diploma Nursing Programs changed?

Ms. Bowman: I think, in the first place, we’re in a degree-bound society. Many students graduating today from high school expect to enroll in a college for a Baccalaureate degree, so that programs granting less than a Baccalaureate degree face a declining pool of applicants. There’s more financial aid available for the student who at one time might have chosen to attend a diploma college for a degree. In addition to this, our own professional nurse’s association, the American Nurse’s Association, recommend- ed that by 1985 all professional nurses hold the Baccalaureate degree. Unfortunately, the recommendation was circulated to high school counselors who, in turn, informed various counselors that there was no recommendation. For example, there was nothing in the recommendation which indicated that according to the recommendation, if one of the graduates would still have a place in nursing but would be identified by a different title. This has led to high school administrators advising students that Diploma schools were closing and that, in the future, they should be attending colleges for a Baccalaureate degree. Therefore, we were not getting the same response from the qualified applicants in the Diploma program as we had in the past.

Q: Could you briefly describe how the decision to phase-out the Diploma Nursing Program at Jefferson was made?

A: As I mentioned, we had a depleted pool of qualified applicants for the Diploma program and in addition to the various repercussions from those (ANA) recommendations, we had the Dean of Nursing faculty, to review the situation and to come up with the recommendation that we phase-out the program by 1982. I’m not sure that our recommendation would have been made quite so simply if we had not had another professional nursing program on campus – that is, the Baccalaureate Nursing Program, which is more costly, and rather costly and not necessary to have on one campus two programs in nursing.

We then recommended to the Dean that our program be phased out by 1982. The recommendation, then submitted to the President and subsequently to the Board of Trustees, was approved by the Board.

Q: What is happening to other Diploma Nursing Programs nationwide?

A: Other Diploma programs have faced the same problems we have. Some are remaining open to satisfy the nursing service needs of their own institutions; some are including more college credits, thus affording with degree granting institutions, to give their students more opportunity for career advancement; and others have closed. The Diploma schools are on the decline and showing no rate of growth, while the Associate degree and the Baccalaureate degree (programs) are showing an increase in numbers. I wouldn’t be surprised, however, if we see a decline in Associate degree programs in view of the 1983 proposal that only the Baccalaureate degree be identified as the professional nurse and that this (degree) be the requirement for entering the profession.

Graduates of all three programs are now considered professional nurses and they all take the same State Board examination. However, there is every indication that the graduates of the Associate program, as well as of the Diploma program, will not be identified as professional nurses in the future. For years they’ve been trying to label our graduates as technical nurses in spite of the very loud opposition to this term.

Q: Will Baccalaureate nurses be able to assume all of the functions of Diploma nurses or will there still be a place for the Diploma nurse? A: Organizations such as the National League of Nursing and the American Nursing Association, as well as the federal government’s Department of Health, Education, and Welfare, have indicated that there’s a need for professional nurses at all levels in the future (Diploma, Baccalaureate, and Associate degree graduates). The movement toward the Baccalaureate degree as the entry level requirement by 1985 merely spells out the entry level requirement for the professional nurse, and therefore these recommendations are much less clear about the roles and the titles of the graduates of the three programs. While the need is identified by these various groups and we all know that a nursing shortage exists now in many sections of the country, I think the greatest task in solving the current dilemma is to clarify how the graduates of the other three programs will be identified, what their functions will be as a result, and how they will be licensed. After this is identified the acceptance by these groups of the titles given to them is going to be another problem.

Ariel: Nursing is presently in a state of significant transition. Here at Jefferson, the phase-out of the Baccalaureate Nursing Program seems to be indicative of change in nursing education. What changes in health care delivery are responsible for these changes in the practice of nursing and in nursing education?

Mrs. Naylor: I think there are several responses to that question: one is the acute care settings; advanced technology has resulted in the fact that we are now dealing with patients with very complex health care problems. Advanced technology has allowed them to live longer and therefore the nursing needs of these patients have proportionately increased in complexity. With Medicare, Medicaid, and the Utilization Review, the average length of patient stay in the hospital has increased and the degree of acuity has increased which is, again, creating a need for additional nurses to deal with increasingly complex patient needs.

In addition, there has been a movement away from the curative measure, from consumers themselves. Employers, government agencies, and the American Medical Association, among other agencies, are saying that patients receive much higher quality care (and you need to have nurses here) if patients are going to get their needs to focus on their total needs. No longer are we talking about making sure sick and so-does-dressing is taken care of; we’re now talking about making sure patients are not just that the problem is fully informed about his problem, his regime, etc., and we participate very actively in that.

As patients are discharged from hospitals in an earlier stage of care because of the need for a sophisticated type of home-care nursing. We’re not talking about nursing care in the home as it was a few years ago, we’re talking about patients with increasingly complex problems in the home setting.

And I think society’s investment in the promotion of health and prevention of disease and illness has resulted in a dramatic increase in the need for health care providers who focus on primary care, keeping people healthy. And nursing is a large segment of those health care providers.

Q: Has the woman’s movement had any effect upon nursing? A: I think that it has had a definite impact on nursing. Women now have more career options – very attractive career options – from which to choose. In the past, the nursing professions were rather narrow in their women’s position (as was teaching) but now we’ve moved into a situation where, with women having access to multiple options, nursing is not viewed as attractive. A recent study shows that the roles and opportunities for nurses are increasing significantly, to increasing the amount of authority that they have in decisions relating to patient care.

I really think that we have to do a real promotion business so that we become a viable alternative in what is now an absolute poppurtui of choices for women.

Q: In view of the fact that the Baccalaureate Programs at Jefferson are closed, can you compare the educational programs to those of Diploma Programs?

A: Before discussing the clinical skills component, I’d like to focus on first what the Baccalaureate Nursing Programs do. I think that the Baccalaureate Nursing Program maintains a very good balance between scientific knowledge and humanistic practice. In attempting to maintain that balance, we are very sure at the fact that we need to have an excellent foundation in the arts and sciences. We also need to provide students with the opportunity to learn about all of the nursing roles in both health care settings (Baccalaureate program) and long-term care settings. Here, we do provide the emphasis on the type of knowledge that students will need in knowledge and clinical skills to become really effective practitioners. I believe it’s unrealistic, however, to assume that upon graduation from the Baccalaureate Nursing Program we have finished products; we are talking about beginning practitioners. Research has shown, in comparing Baccalaureate programs with three year Diploma programs, that the Diploma graduates do have more adeptness in clinical skills upon graduation. But it has also been shown through research that a period of time after, the Baccalaureate graduates have had to get acclimated to the environment, they’re just as adept in these skills and have an added emphasis upon decision making.

Q: What role should nursing education play in fostering greater collaboration between nurses, physicians, and other health professionals?

A: I think that nurses need to take a very active role, many times we’re in a degree-bound society, assuming increasing responsibility in decision making authority, and attempting to gain more authority as it relates to patient care, should really reflect the fact that we’re trying to improve the quality of care delivered to people. The fact remains that there are many individuals in our society that are receiving no health care at all, that there are pockets of people for whom health care is minimally available. The fact is, I really think that we’re talking about it as working as a member of a health team to provide the best quality of care that we can. Nursing education, I think, is the base upon which we should be looking toward building collaborative relationships with physicians and with other health professionals. There ought to be shared educational experiences at the nursing student-medical student-professional level. There ought to be sharing of resources. Faculty from the College of Medicine ought to be invited to department meetings with faculty from the Nursing Department and sharing what is going on in the medical school and endeavors even to the point of teaching each other. I think that these kinds of sharing are very important to promote the attitude of interdependence. The fact is that the patient is dependent upon us and that we, each as a professional, have something unique to offer but there is interdependence in that we must work together to provide the patient with the best care.
Four days out of a year doesn't seem like much but those four days can mean a lot to a handicapped child. It takes about four days of your time to volunteer as a surrogate parent for a child who needs a parent, when natural parents are deceased or unavailable, right now, there are 198 handicapped children in Philadelphia waiting, and the volunteer list is exhausted.

What is a surrogate parent? It's someone 17 years or older, who reviews the educational program planned for a handicapped student, and helps to decide if the plan is written in the student's best interest. Usually, this is the role a parent would play, making sure that the school was doing its best for the child. But, sadly, there are many handicapped children in the city whose parents have died, or are unknown, or who are unavailable because of serious illness or some other circumstance. They have no one to be solely responsible for reviewing their educational program, to make sure it's exactly what they need.

TAKE THE CASE OF RALPH, A SPECIAL CHILD. BECAUSE OF A BIRTH DEFECT, HE CAN'T WALK LIKE OTHER CHILDREN, AND HE HAS AN ABNORMALLY LARGE HEAD. EVEN THOUGH HE'S 11 YEARS OLD, HIS VOCABULARY IS THAT OF A FIRST GRADER. RALPH CAN PRINT HIS NAME, BUT HE'S LIMITED IN ACADEMIC SKILLS. RIGHT NOW, RALPH LIVES IN AN INSTITUTION. HE RECEIVES HIS EDUCATION IN A PHILADELPHIA PUBLIC SCHOOL, BUT, SINCE HE'S ONLY 11, HE HAS THE RIGHT TO NINE MORE YEARS OF EDUCATION. RALPH'S NATURAL PARENTS ARE CON'D ON P. 7.

ACADEMY

The Academy of Music will resound in song with the "Hallelujah Chorus" when music lovers join the 4th Annual Messiah Sing-In Thursday, December 18 at 8 p.m. Participants in the Messiah Sing-in may bring their own "Messiah" scores or they may purchase them at the door the evening of the performance. Tickets are $7.25 and $9.00 and are available at the Academy of Music Box Office, Broad and Locust, Philadelphia.

COMMONS

"A Omega Gamma"

New Members

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Ray Maynard
Malcolm McNichol
Michael J. O'Leary
John S. Rodomsky
Michael S. Remetz
Barry Rinker
Ann Rosenberg
Richard Rybarczyk
John F. Schilling
Stephen Schuster
John H. Skibbe
Craig L. Stabler
Lori A. Staffaroni
Vanessa Tranfiglia
John E. Wagner
Leon P. Wugowski
Andrew J. Zaicek

ULTIMATE

The Jefferson Ulimate Frisbee Club finished out the fall season with a loss to the Trenton Disc Devils in a tournament held at Bucknell University. The 11-10 final score barely tells the story as the Trenton team had to come from behind with the weather conditions being at their worst. A steady cold rain persisted throughout the game making play very difficult. Still, Jefferson's Nick lead could not hold.

The loss added to a season of losses (0-7) for the Jefferson team. (The last two being at the hands of Haverford and Swarthmore Colleges). However, most of the games were quite close and the team is still encouraged considering that most of the players were rookies this fall.

Come spring, the frisbee season starts again. Hopefully, the wins will come too!
Christmas Concert Today

by Kevin Hardy

The Thomas Jefferson University Choir will open its second decade of performance with a Christmas Concert at 8 p.m. on December 12th in McClellan Hall, 1025 Walnut Street. The Choir is under the direction of Robert Sataloff, M.D., an instructor in Neurosurgery. Dr. Sataloff’s return has revitalized the choir and he has put together a sparkling Christmas program for the enjoyment of everyone. The pieces range from simple, well-known carols, such as “Joy to the World” and “Silent Night” to more intricate works such as the medieval French “Aiton Gay Bergmeister” and Handel’s “Hallelujah Chorus.” The choir’s repertoire will also include several a capella melodies by the Jefferson Chamber Choir (a small group of selected choir members), and Bach’s “Magnificat” featuring soloists Marjory Watson, Kittsey Reinhard, Marcy Gordon, Beth Price, Carol Feaster, Helen Egner, Donald Myers, and Rich Kaoch.

For those interested in extending the holiday spirit beyond the concert, there will be a pre-concert cocktail party at AXK Medical Fraternity at 7 p.m. (11th and Clinton Streets), and a combination Wassail Party/Commons Christmas Party in Thomas Edicks Lounge, Jeff Hall following the concert (jacket and tie required).

The choir has a busy year ahead. Accompanists Jeff Eschleman, Mike Hendrickson, and Seth Adelman will be kept quite busy as the choir prepares a spring concert and the Jefferson Chamber Choir prepares to go on stage at the Academy of Vocal Arts at the Walnut Street Theatre in May. The choir would like to remind everyone that any member of the TJU community is welcome to join.

No auditions are required and rehearsals are held in McClellan Hall each Thursday at 7:00 p.m.

Penneatta Sale
To Benefit TJU Choir
December 18
8:30 a.m. to 5:30 p.m.
TJU New Hospital
11th Street Lobby

- Homemade Spaghetti or Ravioli with Meatballs, Sausage, Mushroom or Oil and Garlic Salad and Desert Plus 1/4 Litre of Wine

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CHEERS
Here’s a Christmas wish from all of us to all of you for lots of joy, love, and much happiness!

The Schiltz Rainbow Round-Up is underway!
College students across the country are rulin’ up empty 12 oz. Schiltz Brewing Company cans and bottles and redeeming them — where permitted by law — for prizes such as television sets, pool tables, microwave ovens, video cassette recorders, computer and stereo systems and more.

The Rainbow Round-Up, which runs through April 30, 1981, gives enrolled students the chance to win prizes from four categories by simply collecting Schiltz, Erlanger, Schlitz, Old Milwaukee, Old Milwaukee Light and Schlitz Malt Liquor empties and returning them to local Schiltz wholesalers for Prize Point Certificates worth one point. Erlanger classic bottles, Schiltz, Schlitz Light or Schlitz Malt Liquor toppled bottles are worth two points.

“An organization selects as its goals one of the four prize color categories,” said Peter Dong, Schiltz manager of college and young adult marketing. “Each category, designated by a color of the rainbow, is the point total needed to win, contains four prizes. Once the point total for the category has been achieved, the group picks the prize desired and sends in its Prize Point Certificate.”

Dong said all student organizations, fraternities, sororities, sports clubs, dormitory units and independent groups are invited to enter. “The great thing about the Schiltz Rainbow Round-Up is that everyone can win,” he said. “The groups compete only against the goal they set for themselves and all winners can enter more than once.”

Additional information about the Schiltz Rainbow Round-Up may be obtained by calling toll free (800) 245-6663.

CLASSIFIED

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Philadelphia Health Professionals for Human Rights
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1. To create a network of physicians and students to be available to address the special problems of gay and lesbian patients and their families.

2. To improve health services in the gay and lesbian community.

3. To serve the health care communities in the special problems of gay and lesbian patients and their families.

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Call 735-6258

HOT LINE OPEN MONDAY TO FRIDAY FROM 7 P.M. TO 9 P.M.
Note Service

cont'd from page 8. Chose the Class of '84 officers in
union.

The positions of recorder and corrector are appointments made by the coordinator on the basis of intent to attend all
classes, and willingness to correct the notes, respectively. Scribing,
typing, and printing are open to all those who consider themselves
competent and want to participate. All persons involved in the production of the notes are
salaried, and unlike some other
notes printed at the University, handwriting
and art classes, and unison.

Some consequences of this oral
tradition tradition are that inaccuracies
can be perpetuated and further
distorted. What little knowledge of
correctness is progressively distorted from year to year. One case in
point is the operation of the printing. According to Hank Smith:
"We never knew how to
really operate the machines until
this year. In fact, we didn't even
have an owner's manual, until we
got the guys who repair the
machines to give us one and show
us how to operate them."

Pay scales

The weekly pay scales of the note service varies with the jobs:
the coordinator gets $20 (raised from $19), the scribe uber $100
(raised from $18), the
treasurer $20 (raised from $17),
and the recorder $15. The
corrector is paid $10 for each
week that there are corrections. Scribes work for a flat fee of $15
for each lecture. The typists receive an average of $1 per page
and are paid by the scribes
who hire them. The printers are organized into teams, and each
team is paid for the packet it
prints: $10.00 per single sided
page, $15.00 per double sided
page.

Duties and Responsibilities

It is the responsibility of the coordinator to organize and
schedule the printer teams, to keep inventory, to order supplies, to
appoint the recorders and the
corrector, to ensure the proper
maintenance of note service equipment, to order new equipment if needed, and to
make sure that all notes are
printed. Hank Smith, the
coordinator of the Class of '83, is also
responsible for addressing the
needs of the faculty, and
arranging the delivery of the notes to the mail room.

The function of the
scribe master is to organize and
distribute the scribes, assigning
one to each lecture, conference or
reading whenever necessary. Marcelle Sipilä, the scribe master
of NS '83, also maintains a list of
typists, finds old exams for
inclusion in the note packets, and
tries to make sure that there is a
scribe at each lecture.

The treasurer of NS '83 is Tim
Heilman who is responsible for
managing the note service's
financial affairs from drawing
the paychecks for supplies
and maintenance of the
equipment. He also estimates the
cost of notes for each block. In
drawing up this estimate he
accounts for the number of
lectures, the cost of scribing these
($15 each), the cost of ink (about
$3/6 per block), the cost of
stencils ($about $37 per month),
and the cost of the paper ($about $350
per month) the weekly salaries,
and an extra $400 to $1000 to
cover emergencies. This is added
updated, divided by the number of
students in the class, and
rounded off.

The responsibility of the
recorder is that each assigned
lecture or conference be
recorded. Thus, Boris Karahan and Deon Sloan, who work
alternate weeks, must ensure that
these are sufficient tapes, and that
the tape recorders are
working.

The job of corrector has
evolved over the last year.
Initially, the corrector sought
errors in the notes and printed
these in each note packet.
Presently NS '83 corrector, Mary
White, receives and compiles the
corrections submitted by the
scribes, or anyone who notices
errors, and prints these as the
need arise.

The duties of scribes include
taking notes on the lectures,
offering a copy of their notes to
the lecturer for correction, and
making sure that a copy of their
lecture notes is typed on a stencil
delivered to the note service
mail box. Most scribes also use the
tape recording of the lecture
tape in the gaps in their notes,
once finished with the tapes, the
scribes are supposed to return these
to the recorders. Some
scribes also make use of typists in
order to save time, although this
is at their own expense.

The printers are in charge of
collecting the stencils of the
lecture notes, printing, numbering
and assembling the note packets
and delivering the notes to the
mailroom. University mailroom
personnel place the notes in the
mail boxes.

As evidenced by this
evaluation, the note service of the
Class of '83 has improved
substantially over the past year.
The note service management
are to be commended for these
positive changes. However, if it
were not for the scribes and
printers whose efforts for surpass
their compensation, the notes
themselves would never reach
these inns.

The note service of the Class of '83 despite its minor
difficulties, has become an integral and
beneficial part of our medical education.

Handicapped Children

cont'd from p. 5. dead, so the administrator of the
institution acts as his guardian. But
the Administrator has forty
other handicapped children in his
care, too. Ralph needs someone
else...someone who will focus
attention just upon him, and who
will work to make sure he gets an
appropriate education. Ralph
needs a surrogate parent.
If you are willing to serve as a
surrogate parent, please call the
School District. A training session
is provided for all volunteers, to
acquaint them thoroughly with the
role and responsibilities of a
surrogate parent. Then, if you still
want to be a volunteer, a special
child will be assigned to you.

The Surrogate Parent
Coordinator will take you to the
child's school, introduce you to the
teacher and the child, and
will help you become
acquainted with you, so the right decisions can be
made. If you're not sure if you
want to participate, the
Coordinator can put you in touch
with other volunteers, so you can
ask questions and find out how
other volunteers fulfill their
responsibilities.

A brochure about the
Surrogate Parent program is
available upon request. Call the
Division of Special Education
341-6188. Say "YES" I'm
interested in becoming a
surrogate parent."

Handicapped Children

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NOTE SERVICE: Trials and Tribulations

by Hugh Gelber and
Martin Getzow

What had been a purely disfullament with the note service during the 79-'80 academic year broke into open dissatisfaction at the beginning of the 80-'81 academic year when the early note packets were again behind schedule. And it was only one of the printing machines that was working. The Sophomore Student Council representatives took up the matter with NS '83 officers on September 26 in a meeting which addressed the following problem: students and printers were not showing up for their jobs; the printing of notes was being accomplished at the rate of two packets in a week; and, of course, the quality uneven; old exams were being printed at the eleventh hour and were thus useless as study aids. Furthermore, the student council representatives wanted information concerning the purchase of new tape recorders (which would involve some student council money), and the treasurer that some notes packets were not delivered because of its, and still one finds occasional blank pages in some note packets because the collator cannot identify and call them on its own.

The quality of the tape recording of lectures and the management of the supply of tapes remain problems which NS '83 has yet to solve. To date, no decision has been made regarding the purchase of new tape recorders. Problems regarding the durability of the tapes have been corrected by the present system, and the company that produces the tapes is now print more frequently.

Changes have also been forthcoming in the management of printers. Formerly, Hank Smith would draw up a list of printers and their assignments, and post them on the class bulletin board. With this method, however, printers frequently did not show up on schedule either because the scribes were being notified, and also because of the less reliable scribes have been assigned to the position.

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The first machine didn't return until later in the summer, but the company that holds the service contract delayed doing so until very late in the summer. During this time Hank had been calling the repair company, and they had been reassuring him that the machines would be back by September 2. The first machine didn't return until later. Not until the third week of September did the note service actually have two properly working machines.

Since the meeting with the student council representatives, the organization and scheduling of scribes and printers has also changed.

Formerly scribes were assigned by Marion Goheen, who posted their assignments on the class bulletin board about two to three weeks before they were due to make their first print. Many scribes, however, failed to check the bulletin board and did not show up for the performance of their duties. The present means of notifying the scribes is by printing in the first note packet a list of scribe assignments for half of the teaching block. The new system is set to work better because the scribes are being notificted, and also because of the less reliable scribes have been dropped out of the scribe roster.

The scribes have also been forthcoming in the management of printers. Formerly, Hank Smith would draw up a list of printers and their assignments, and post them on the class bulletin board. With this method, however, printers frequently did not show up on schedule either because the scribes were being notified, and also because of the less reliable scribes have been assigned to the position. The scribes are assigned as teams, and they are notified of their assignments at the beginning of the academic year. This has eliminated those who were not really interested in printing and has given the remaining printers more experience with the machines, and the potential of making more money since they now print more frequently. Thus, together with the new knowledge of how to optimally operate the printing machines, and the heightened state of repair of the machines has generally improved the quality of the printing. Finally, the acquisition of a collating machine has helped speed up the printing process, making the job more palatable to the printers. The incorporation of the collator itself has caused some problems, and in particular some notes packets were not delivered because of its, and still one finds occasional blank pages in some note packets because the collator cannot identify and call them on its own.

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There is nothing contrived by man which so much happiness is produced as by a good tavern or inn.

Boswell (1760).