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Nurses' Alumnae Association Bulletin - Volume 3 Number 5

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H. J. Knowles

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JEFFERSON MARCHES ON

Constant changes seem to be the order of the day and we of Jefferson are no exception.

Among our new routines we have that of nurses not remaining in the operating room during the operation unless requested to do so by the surgeon. The nurse takes the case to the operating room and remains until anaesthetic is given. She then returns to the floor and, in the case of students, continues with routine work, while a private nurse is requested to put her room in order, get necessary supplies and have her meal, if possible, then she is to return to the O. R.

This routine discontinues the necessity of nurses relieving each other for meals, etc., and allows student nurses to go to class and get routine work and treatments finished on time.

The biggest step in our march forward is the beginning of an 8-hour day for all nurses. It began officially on March 1st.

Student nurses on day duty work a split shift. Nurses on relief work from 2.30 to 11.00 P. M., and night nurses work 11.00 P. M. to 7.00 A. M. Staff hours are also split most of the time.

Private duty nurses work a straight 8-hour shift, shifts beginning at 7.00 A. M., 3.00 P. M. and 11.00 P. M. The patient pays a total of $7.00 per nurse, $6.00 of which is given to the nurse, $1.00 to the hospital for nursing services.

The hospital provides two meals for each nurse only one of which may be eaten on the patient's time.

Each nurse must be willing to accept equal duty on all three shifts and she may work two shifts in 24 hours, as long as they are not consecutive periods.

* * *

CHRISTMAS PACKAGES

There were 144 Christmas packages sent to the girls in service this past Christmas. The packages for the girls overseas contained soap, orange sticks, cold cream, etc. The girls in the states each received a box of air mail stationery.

Many letters have been received by Miss Fielden thanking the association for the packages. We are glad to know that they were received and appreciated by all.

The Alumnae wishes to thank Miss Mary Fielden and her committee for the work they did in getting the packages off on time.
THE UNITED STATES CADET NURSE CORPS AND JEFFERSON MEDICAL COLLEGE HOSPITAL

By Miss E. M. Hopkins, Directress of Nurses

The Bolton Act provides funds for the purpose of producing more nurses for military and civilian needs. In World War I, a special school was set up for the same purpose. The school was known as the Army School of Nursing, and functioned as an individual school with its own standards of organization and administration. After much discussion on the part of national leaders representing the nursing profession, hospitals and nurses training institutions, the United States Cadet Nurse Corps was decided upon, the Surgeon General, United States Public Health Service, is directly responsible for the operation of the Corps.

This legislation is not to be interpreted as an attempt to standardize schools of nursing. Although the Federal government assumes substantial financial responsibility for nurse training, this plan in no way alters the present relationship between the school and the individual student. The student will continue to meet the admission and graduation standards of your school. Students eligible for admission to your school who do not wish to become members of the United States Cadet Nurse Corps are not affected by this legislation either as to its benefits or as to its requirements.*

The statement in the preceding paragraph may clarify some of the erroneous ideas that Cadet Student Nurses are instructed in a different manner than other students in the school of nursing. It has been necessary to accelerate the essential instruction and experience to thirty months instead of the usual thirty-six months, in order that the Senior Cadet may be released to military service for the last six months, if needed.

It is necessary for the school to increase its enrollment if financial support is continued by the allocation of Federal funds. It is possible to give clinical experience to three hundred and fifty students in Jefferson Medical College Hospital School of Nursing, and an attempt is being made to enroll students during the spring and summer to reach this figure. The first and greatest handicap in reaching this goal is inadequate housing and the second is the increased teaching load, for an already over burdened educational staff. A new nurses' home is needed for the present school and is imperative if the student body is increased to meet hospital demands and to satisfy the requirements of the United States Public Health Service. The number on the teaching staff should be doubled to teach the three groups of students admitted in 1943 and the proposed three groups in 1944.

In participating in the program it has been the policy of the School of Nursing of Jefferson Medical College Hospital to maintain its standards of admission and graduation and to continue registration with the New York Board of Regents.

*To meet the emergency of World War II.

ATTENTION

Please enclose By-laws book with your 1944 dues. Save expense for your association and extra work for your treasurer by keeping By-laws book as a receipt for paid dues.

If dues are not paid before annual meeting, you are considered in arrears by your association and sick benefits are void for delinquents.

PROMOTIONS

We wish to extend congratulations to the following girls on their advancement. Kathryn Bastian to rank of 1st Lieut. Marie Shearer to rank of Captain. Miriam Brunner to rank of 1st Lieut. Doris Petteplace to rank of 1st Lieut. Mildred Woodhead to rank of 1st Lieut. Clara Luchsinger to rank of 1st Lieut. Francis Willdinger to rank of Major. Willie Alder to rank of Major.

WELCOME, MISS HOPKINS

Although it may seem a little late, we wish to take this opportunity to welcome Miss Ethel Hopkins as our new directress and to offer her our support in appreciation for accepting this position.

Miss Hopkins graduated from Lakeside Hospital, Cleveland, Ohio, in 1917; following graduation she became head nurse in the Medical Department. In 1918 she entered the Army and served until 1919 at which time she became Instructor of Nurses at the Alliance City Hospital, Ohio. In 1920 she advanced to Superintendent of Nurses of the same hospital. In 1923 Miss Hopkins left Alliance, Ohio, and took the position of Superintendent of Nurses at Guthrie Hospital, Guthrie, Oklahoma, where she remained until 1929. In 1929 she became Superintendent of Nurses at Henrietta Hospital, Oklahoma, where she remained until 1931. In 1933 Miss Hopkins came back East to become Instructor of St. Elizabeth Hospital in Youngstown, Ohio, remaining there until 1936. In 1937 she received her B.S. degree from Columbia University. In 1937 Miss Hopkins came to Jefferson as educational director and in 1943 advanced to Directress of Nurses.
STUDENT NURSE ACTIVITIES

By Margaret Elliott, '41

With the adoption of a modified form of student government the student nurses have been granted some greatly appreciated privileges which heretofore have been lacking.

A late pass, allowing the girls out until 12 midnight one night each week, is given to those whose conduct and general nursing work is approved by the Nursing School office. Overnights, consisting of an afternoon and a morning, are given to those who have obtained permission of their families to be out of the nurses' residence overnight.

Two roller skating parties have been given for the benefit of the annual year book. These were well attended by nurses, interns and their friends.

During the harvest season a dance was held in the Medical College Auditorium also to raise funds for the year book. A Christmas dance was also given. This was a formal affair, with all the girls looking their loveliest. This dance was given for the student nurses by the Women's Nurses' Home Committee. Another dance of equal importance will be held March 18th, also for year book funds.

A student nurses' chorus was organized in the late fall after a discussion in which the staff nurses decided that the relationship between the students and graduates could be improved. Miss Margaret Elliott was asked to take charge. The results have been most pleasing. A Christmas Carol Concert was given in the College Auditorium on December 17th. The attendance was very good and the audience enjoyed singing the carols with the chorus.

Something new was added to the Christmas activities this year. In the early light of Christmas morning, the student nurses and some of the staff congregated in the Sansom Street lobby, and from that point carols were sung to the patients in all wards and also the private floors. Lighted candles guided the singers from floor to floor. This was greatly enjoyed by patients and carolers as well.

The student nurses have also been granted the pleasure of 8-hour duty as prescribed by the Government Nurse Cadet Corps. The Cadet Corps is now in full operation and the girls are anxiously awaiting the time when they will have their street uniforms.

* * *

SCHOLARSHIP

Miss Sally Fritz, Class of '44, who was on the staff for a short time after she finished training, has accepted a scholarship offered by the University of Pennsylvania. We wish Miss Fritz the best of luck.

GIRLS TAKING ANAESTHESIA

Dorcas Butler, '44.
Jean McNitt, '44.
Anne Marie Dean, '43.
Lois Davis, '43.
Geraldine Gearhart, '43.
June Wilson, '44.

OUR OFFICE AND TEACHING STAFF

We have formulated the following list in order to acquaint you with our teachers and office force, some of whom are new to us.

Margaret Jackson, graduate of the School of Nursing of Roxborough Memorial Hospital, Philadelphia, Class of 1919. Miss Jackson was acting superintendent at Roaborough in 1921. She became Superintendent of Nurses in 1922 and remained in this position until 1943 when she came to Jefferson as Assistant Directress to Miss Hopkins.

Gladys Keiper, graduate of Jefferson Hospital, Class of 1942. Following graduation Miss Keiper joined the staff of Ephraim Community Hospital, Ephraim, Pa. Late in 1943 Miss Keiper returned to Jefferson to be in the Nursing School office. She has charge of student health and student nurses case reports.

Dorothy B. Ranck, graduate of Jefferson Hospital, Class of 1939. Upon graduation Miss Ranck became the night supervisor of Thompson Annex. Later Miss Ranck took over the supervision of Star Floor which position she held until 1943 when she joined the staff of the Nursing School office as Assistant Directress.

Janet E. Correll, graduate of Jefferson Hospital, Class of 1942. After graduation Miss Correll attended Cedar Crest College and received her B.S. in Biology. While at Cedar Crest, Miss Correll acted as Assistant Night Supervisor of the Allentown Hospital. She returned to Jefferson in 1945 as Clinical Instructor of Medicine.

Barbara G. Schutt, graduate of Jefferson, Class of 1938. Miss Schutt worked on the staff here at the hospital until 1939 at which time she entered Bethany College, Bethany, W. Va.; here she received her B.S. in Psychology. While attending Bethany Miss Schutt had charge of Student Health Service. She is now working toward her Master's degree in education. Miss Schutt is now Instructor in Surgery and Pediatrics.

Elizabeth B. Wesner graduated from Yale School of Nursing in 1943 with the B.S. and M.N. degrees. She spent a short time in New Haven Hospital and then came here to Jefferson as Instructor of Nursing Arts. Mrs. Wesner is now on leave of absence.

Margaret E. Kinneen, graduate of Hahnemann Hospital School of Nursing, Class of 1934, entered the private duty field upon graduation, serving there until 1936. She became Assistant Instructor in Nursing Arts at Hahnemann in 1938. In 1943 Miss Kinneen received her B.S. degree from the University of Pennsylvania and then came to Jefferson as Science Instructor.

Marjorie Workinger, graduate of Jefferson Hospital, Class of 1925, served as Operating Room Supervisor at Jefferson until 1934, when she went to New York Post Graduate Hospital and took the course in O. R. Technique and Management. Upon completion of course she became head nurse in same hospital. In 1938 Miss Workinger received her B.S. degree from Temple University. From 1940-41 she served as Science Instructor at Frankford Hospital. In 1942 she received her M.S. degree from the University of Pennsylvania. Miss Workinger is Science Instructor.

(Continued on Page 8)
MESSAGE FROM THE PRESIDENT

The nicest thing I have to report this year is the eight-hour day for student, staff and private duty nurses which started March 1st. Many of you realize how many years it has taken to accomplish this progress in nursing in our hospital. The letters to the association are greatly appreciated. Keep them coming. We like to hear what you are doing.

I send my greetings to the nurses in the armed forces, those who have returned to active service during this emergency, and to Alumnae members everywhere.

MARTHA E. RILAND, President.

* * *

NEWS BULLETINS

It was decided at the January Alumnae meeting that a mimeographed bulletin be sent to each girl in the service at specified intervals. These bulletins will contain news of interest, matters discussed at our monthly meetings and answers to questions that might be asked by the girls in writing to the secretary.

In this way we feel we can keep in touch with all of our members and let them know what is going on here in their association. We ask that anyone receiving letters from the girls with news of interest pass the news on to the committee.

We are interested in each one of our members and I'm sure they are interested in each other and in us here at home.

The committee is headed by Miss Anne Alexander, who is assisted by Miss Veronica Owens, Evelyn Dute, Helene Weber.

The first letter was sent out on April 14, 1944.

* * *

CLASS OF 1919
This is Your Silver Anniversary

* * *

CLASS OF 1934
This is Your 10th Anniversary

INFORMATION, PLEASE!
As Received by Miss Hopkins

Dear Sirs:

I would like all information you have on nursing. If possible also send me your hospital bulletin.

I am very much interested in nursing as a career except I still have one year to go to school.

The reason why I sent for nursing information now is because it is necessary for school work.

I have a question to ask so I hope this doesn’t take up any time which could be used for more important things.

Suppose in 9th grade in school you didn’t pass Algebra I and then went to summer school and passed Algebra I. You then took one and one-half more years math and all other subjects required for nursing. At the end of your 12th had a high B average or just a B average, my question is: Would you accept any person for training in hospital if they went to summer school for Algebra I and then passed this and at the end of your 12th had a B average?

Maybe you don't understand what I mean: Would you accept any person for training after they went to summer school for a subject? By summer school I mean not pass the subject the first time, but in summer school they passed.

I ask this because I know a girl that has this trouble. It isn’t that this girl is dumb, but her failure was due to not being able to grasp the way the teacher taught the subject.

Thank you for your trouble.

Yours truly,

* * *

CLASS OF 1934

Return Luncheon Reservations by April 15th, 1944 to

MISS MARGARET ELLIOTT
301 SOUTH ELEVENTH STREET
PHILADELPHIA 7, PA.
OFFICE AND TEACHING STAFF
(Continued from Page 5)

Miss Irene R. Jones, graduated from Jefferson Hospital in September, 1931. Prior to her nursing career Miss Jones taught school in Northampton County, having received her B.A. degree from Ursinus College. She is now instructor of Nursing Arts.

GRADUATE NURSES' CHORUS

The annual spring concert of the chorus will be given on May 9th, 1944, at 8.30 P.M., in the Old Customs House, Philadelphia 7, Pa. Irene Hubbard, 'cellist, will be the guest soloist, accompanied by Ruth Burroughs. There will be a silver offering. Come and give the chorus your support.

* * *

CONDOLENCES

We wish to extend our deepest heartfelt sympathy to Mrs. Emma Gillespie Frigar on the death of her husband.

* * *

EMERGENCY NURSING

Due to shortage of nurses, which has increased with the 8-hour day, a plan is being formulated to have a nurse care for 2 patients when it is possible. The rate of pay will be $9.00 per day. So far the few girls who have done it seem to believe it is entirely possible when you do not have 2 major operative cases the same day.

We feel that we would rather take care of 2 patients for 8 hours than 1 patient for 12 hours, and hope the private duty nurses will give their fullest cooperation to the plan.

COMING EVENTS

April 21, 1944—Regular Meeting of Alumnae at 8.30 P.M., in Amphitheatre.

April 27, 1944—Graduation Exercises at 8.00 P.M., in the Amphitheatre.

April 29, 1944—Alumnae Day—Ritz-Carlton Hotel—Luncheon, 1:00 P.M. Dance, 10 P.M.

May, 1944—Graduate Nurses' Chorus—Spring Concert at Old Customs House, 420 Chestnut Street, at 8.30 P.M.

May 19, 1944—Last Regular Meeting for the Summer, 7.30 P.M., in Amphitheatre.

A new substance with marked antibacterial activity was first brought to the attention of the medical world in October, 1929, by Alexander Fleming, of London, England. It was reported that when a culture plate, seeded with staphylococcus colonies, was accidentally contaminated by a fungus, the staphylococcus colonies became transparent and gradually disappeared. He determined that the fungus is a member of the Penicillium group of molds and that filtrates of broth cultures of it contain the active antibacterial agent, to which he gave the name "penicillin". Fleming tested the activity of the filtrate with various bacteria and found it quite marked against pyogenic cocci and diphtheria bacilli, and ineffective against the typhoid-coli organisms. Upon investigating the toxicity of the substance to animals, he found it innocuous even in enormous doses and then suggested that penicillin might be used therapeutically in humans.

Unfortunately, penicillin was not used clinically during a period of eleven years following Fleming's observations. The first report on its therapeutic use appeared in 1940, contributed by Chain, Florey and other Oxford associates. They reported favorable responses when it was used in ten patients who had staphylococcal and streptococcal infections.

In 1941, Florey came to America through the efforts of the Rockefeller Institute and assisted in establishing experimental production of penicillin in the Department of Agriculture laboratories at Peoria, Illinois. Also in 1941 the Lederle, Merck, Pfizer and Squibb laboratories began research in line of its production. Today there are seventeen manufacturers engaged in large scale production of the drug. Penicillin can be obtained for civilian use at present in very limited quantities through a central commodORIZATION by the National Research Council. Practically all of it is sent to the armed forces but hope is held that sufficient amounts will be on hand in several months to make it commercially available.

Penicillin is formed by a specific strain of the penicillium fungi. This particular strain is called Penicillium notatum. Other members of the Penicillium series fail to produce the anti-bacterial material. Penicillium notatum colonies have been grown with great difficulty and can now be cultured on a synthetic culture medium composed of glucose and mineral salts. After the colonies have grown on the synthetic medium some of the culture fluid is withdrawn at intervals and the active penicillin is then extracted from the culture fluid. The extraction necessitates multiple and complex chemical procedures. Only small amounts of usable penicillin are derived from great quantities of the original culture fluid. The material is very unstable and easily loses its potency in impure solution. These facts intimate the difficulties to be overcome in large scale production of penicillin.

The drug is thought to be a complex, strong, organic acid, but its exact formula is not yet known. Sodium, calcium, and barium salts of the acid can be produced. The calcium salt is slightly irritating to tissues, whereas the sodium salt is not an irritant. The calcium salt is more stable than the latter. Practically all clinical investigations have been done with the sodium salt. It is a light yellow powder and is freely soluble in water, physiologically normal saline solution and 5% solution of glucose in water. The activity of the drug is markedly impaired if its solution is exposed to air or to heat, but it can be stored in a closed container at 5° C for months with no loss of activity. Oxidation by contact with hydrogen peroxide or potassium permanganate solutions is detrimental to its effectiveness.
The mode of action of penicillin differs from that of the sulfonamide drugs. The latter are bacteriostatic, whereas penicillin is both bacteriostatic and bactericidal. It is more bacteriostatic than bactericidal, although the latter quality is definitely proven. The sulfonamides become inactivated in the presence of pus and other tissue products but the activity of the penicillin is not adversely affected by them. Purified penicillin is not toxic to humans, but many severe toxic reactions have been caused by the sulfonamides. Staphylococcal infections, are to a large extent, refractory to sulfonamide therapy but are favorably influenced by penicillin. In general, the gonococcus and meningococcus are most sensitive to the anti-bacterial substance, followed by pneumococcus, hemolytic streptococci, Staphylococcus aureus, and meningococcus viridans. Staphylococcal albus and gram positive rods. The drug exerts no anti-bacterial effect upon the typhoid-colon group of bacteria. As a rule, the gram negative bacilli are insusceptible to its action. It is inert against tubercle bacilli. Penicillin is at least a thousand times more effective than the sulfonamide compounds against gram positive organisms.

Since penicillin acts predominantly as a bacteriostatic agent, favorable results require prolonged administration, as the drug must be in contact with pathogenic bacteria for long periods of time. Most infections must be treated for ten to fourteen days and treatment should continue until several days after the clinical signs have disappeared. Short periods of absence of the drug from the blood stream cause relapses in the course of the disease. This fact is of importance to the nurse, whose duty it is to administer the penicillin solution as scheduled by the attending physician.

Oral use of the drug results in a very bitter taste, poor absorption and an inadequate blood stream concentration. It is thought that the hydrochloric acid of the gastric juice inactivates penicillin because introduction of solutions of penicillin directly into the duodenum through an intraduodenal tube produces rapid absorption and high blood stream concentrations. The solution cannot be administered rectally because the material is inactivated by the feces and is poorly absorbed. It is slowly absorbed after subcutaneous injection and inadequate blood levels are obtained. Rapid absorption and satisfactory concentration in the blood stream result from its injection intramuscularly. Continuous or continuous intravenous injection has proved to be the method of choice in giving penicillin. The most satisfactory, sustained blood levels follow intravenous administration, especially by the continuous drip method. The drug can be successfully applied topically, into wound sinuscs, into the pleural space, intraspinally and into joint cavities. As a dry powder it is unduly irritating to tissues so it must be used as a solution. When it is injected into local areas and cavities it is not absorbed into the blood stream but remains at the site of injection in adequate concentration for long intervals. Penicillin is rapidly excreted from the blood stream via the urine. From 37% to 99% of the amount injected is excreted in the first hour, consequently the continuous intravenous drip method of administration provides the most satisfactory sustained blood stream concentration. Penicillin has been recovered from urine and reinjected with no harmful effect and with good therapeutic results.

Dosage schedules for various types of infections have not yet been clearly established. Doses are measured in terms of the Oxford unit, i.e., that amount of penicillin which when dissolved in 50 cc. of meat extract broth just inhibits completely the growth of a test strain of Staphylococcus aureus. In adults with systemic infections a daily dose of 100,000 Oxford units given during a period of ten to fourteen days has been found adequate. The 100,000 units of penicillin are dissolved into 5000 cc. of intravenous fluid and the solution is given continuously, intravenously, over a 24-hour period, with few or no periods of respite from therapy. Gonococcal infections are the most susceptible to the action of penicillin so that total amounts of 100,000 to 160,000 units given over a period of forty-eight hours have been found adequate to produce cures. Pneumococcal pneumonia also responds readily to the action of the drug and a total of 100,000 units given over a three-day period is at time sufficient. However, some cases may require 60,000 to 90,000 units a day for seven days to obtain a favorable response. A decision to increase the daily or total dose is based upon the clinical response, blood counts, blood cultures, and X-Ray studies, as affected by the dose already given. Treatment must be continued until all clinical signs have disappeared and all cultures are negative. Further trials of a large number of patients will be necessary before clearcut dosage schedules can be outlined. Applied locally, concentrations of 250 to 500 Oxford units per cc. of solution have been found optimal.

Penicillin was first administered to a patient in Jefferson Hospital during the winter of 1942. The patient was a woman afflicted with bilateral staphylococcal pneumonia and multiple pulmonary abscesses. A complete cure was obtained. Another outstanding result of penicillin therapy that we have observed was the complete disappearance of a large mediastinal abscess in an adult male, without surgical drainage being required. An approximate total of forty patients have received penicillin in this hospital and all were attended by favorable results. They included acute and chronic osteomyelitis, pneumococcal and staphylococcal pneumonia, meningococcal, pneumococcal and staphylococcal meningitis, empyema, pyelonephritis, pneumococcal endocarditis, multiple furunculosis, otitis media and carbuncles.

There is one reported case of successful treatment of far advanced gas gangrene. Penicillin was given when the patient was apparently moribund and it so changed the course of the disease that the patient recovered. The results obtained in treating subacute bacterial endocarditis have been encouraging but no definite cures have been proven. Sulfonamide resistant gonorrhea readily disappears when treated with small doses of penicillin. Meningococcal meningitis responds so well to the sulfonamide drugs that only a few such cases have been treated with penicillin. The results suggest, however, that these patients can be cured by the use of penicillin and it can be used in those cases that become sulfonamide fast. When used locally or systematically in cases of infected burns, furuncles, carbuncles and cellulitis, the drug causes rapid regression of these infections. It has a favorable influence on the chance that appears in the first stage of syphilis. There is no reported case of effective treatment of tuberculosis with penicillin.

As it exists today, penicillin is one of the most powerful therapeutic agents thus far discovered, but it must be recognized that the drug has definite limitations. It should be used only with the best of medical and surgical judgment, and the basic principles of these sciences should not be violated. Since penicillin does not affect gram negative bacilli, all decisions for choosing a therapeutic drug in a given case must be preceded by an adequate bacteriological study. The gram negative bacilli in general are responsive to the sulfonamide drugs.

The nurse occupies a definite position in the administration of penicillin. Since the drug must be given continuously or in intermittent doses every two or three hours, almost constant supervision of the patient is a prerequisite to successful therapy. It is important to understand that short periods of disappearance of the drug from the blood stream cause relapses. It is, therefore, the undeniable responsibility of the nurse to be certain that the exact amounts of penicillin ordered are given at the specified intervals of time. When penicillin is given by the continuous intravenous drip method, the flow must be adjusted and maintained so the patient will receive a constant amount of the drug during each period of the specified time of administration. When changing the bottle of intravenous fluids, it is wise to place a hemostat on the rubber tube to prevent reflux and clotting of blood in the needle. The flow should be regulated to 50 to 35 drops per minute, as this rate will deliver exactly 3000 cc. of fluid.
in twenty-four hours. Since the daily total fluid intake will be greater than 3000 cc, an accurate record of the intake and output is needed for intelligent analysis of the patient's state of fluid balance. Penicillin is inactivated in the body by the presence of heat. The saline or glucose solutions should be cool when the drug is dissolved into them and not just recently delivered from the autoclave. When not in actual use, all solutions of penicillin should be stored in a refrigerator in order to preserve their antibacterial potencies.

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ORGANIZED STAFF—1943-1944

OFFICERS
President: MARGARET ELLIOTT
Vice-President: JANIE METZLER
Secretary-Treasurer: GRACE JENNINGS
Executive Committee
ADELE LEWIS
ANN TENARI
MADGE ROBERTS

Meetings of the organized staff are held the first Monday of each month with an average attendance of 25 members.

On September 20 a wiener roast was held along the Wissahickon. Ruth Shater and Doris Jones were responsible for the refreshments. There were 57 present. Games, including handicraft, bowling, dancing, and glee club. The latter has been very successful.

A Christmas party was held in the Nurses' Home on December 17. An invitation was extended to all anaesthetists, including handicraft, bowling, dancing, and glee club. The latter has been very successful.

Grace E. Jennings.

* * *

NEW POSITIONS

Vivian Frankenfield, '44, Supervisor, Men's Special Ward.
Mary Nash, '44, General Duty, 10th Annex.
Jean Creswell, '43, Supervisor, Solarium.
Emily Robinson, '44, Assistant Supervisor, Solarium.
Mina Blizard, '43, Supervisor, Men's Medical Ward.
Marjorie Rutter, '43, Supervisor, Women's Medical Ward.
Berta Baginski, '44, General Duty, 11th floor.
Marjorie Frink, '44, Supervisor, Center and Women's Nervous.
Dorothy Showers, '44, 14th floor Operating Room.
Maureen Sharpless, '44, 3rd floor Operating Room.
Molly T. Radcliffe, '43, Dr. Lemmon's Suture Nurse.

Ruth Painter, '43, Supervisor, Maternity Ward.
Alfreda L. Davis, '44, Dr. Lintgen's office.
Ellen M. Stewart, '43, Dr. W. B. Davis' office.
Anne Cianfrani, '42, Dr. Jaegers' Suture Nurse.
Lois B. Williams, '43, Supervisor, Accident Ward.
Vera Thompson, '43, Dr. Costello's office.
Rhea Moyer, '41, Anesthesia, Bryn Mawr Hospital.
Marjorie Whitehead, '43, Night Supervisor, Operating Room.
Betty Lee, '44, Assistant Supervisor, 6th Floor.
Marjorie Leight, '44, Dr. W. B. Davis' Suture Nurse.
Janet Keeporm, '44, Pine Street, Operating Room.
Thelma Young, '44, N. D., Pine Street.
Mary Snook, '44, N. D., Children's Ward.
Lucille Powell, '44, 3rd Floor Operating Room.
Anne Morgan, '44, General Duty, 11th Floor.
Rose Smith, '44, Staff, Pa. Hospital, Mental and Nervous Diseases.
Jenre Newman, '44, Staff, Pa. Hospital, Mental and Nervous Diseases.
Marie Ecker, '44, General Duty, Star Floor.
Catherine Neary, '44, Assistant Supervisor, Accident Ward.
Anne Frampton, '44, Delaware Hospital, Wilmington, Del.
Emilie Gerin, '44, 4th Floor Operating Room.
Elizabeth Spangler, '44, Lebanon Hospital, Lebanon, Pa.
Katherine West, '33, Federal Reserve Bank, Dispensary.

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NEW ALUMNAE

We wish to welcome the following new members to the Alumnae Association and hope they will cooperate when asked to be of help to the Association.

Caroline Kemmerer, '40.
Ruth Shater, '41.
Mary Lou Gaston, '44.
Angela Clark, '42.
Marion Hahn, '43.
Delores Davis, '43.
Anna Schell, '44.
Geraldine Schreftler, '44.
Nadine Kahlhief, '44.
Mary Meehan, '44.
Mary Elizabeth Thomas, '44.
Anne Lowe, '44.

NEWS OF OUR DOCTORS

With things as they are today we very often find ourselves wondering about people we have known in our association here at the hospital.

We think it only fitting at this time to bring our doctors and their whereabouts to your attention.

We were sorry to hear of Dr. Ulrich's illness, but are glad to know that he is recovering and may soon be back with us.

The sudden death of Dr. R. C. Rosenberger is a great loss not only to the College but to all who knew him.

News has been received of the untimely death of Major Citta in an airplane crash in North Carolina. Major Citta was a flight surgeon in the Army Air Corps. We extend our condolences to his wife, the former Hazel Greenley, Class of 1935.

Every now and then we see a very smartly uniformed figure in our halls and find it to be one of our former doctors back in the old haunts. The other day Capt. Paul Haven, once resident for Dr. Reimann and now attached to our Unit, was here for a visit. He is to be stationed at Yale University.

Dr. Isaac Messmore, intern here in 1941, now a Major, is stationed in Texas.

Capt. John De Tuerk, one time resident for Dr. Shallow, returned from Africa to be stationed in Texas with the Air Corps. He saw for the first time his twin sons.

Dr. Putney, who for a number of years was associated with Dr. Clerf, is now stationed in California. Dr. Putney's commanding officer is Dr. Flick, now Col. Flick, who was in charge of chest surgery preceding Dr. Bradshaw.

Dr. Kenneth Fry, whom we always associate with Dr. Shallow, is now stationed in India.

Capt. Louis Merves, recently a patient at Walter Reed Hospital, spent a day here at Jefferson.

Jefferson Nurses' Alumnae Bulletin
**ARMY NURSE CORPS**

**SECOND LIEUTENANTS**

- Ethel Atteman, '43
- Lillian Baker, '42
- Jeanette Bedford, '38
- Hilda Bell, '31
- Alice Boeht, '42
- Doris Bowman, '42
- Isobelle Bowmaster, '43
- Japhine Bowmaster, '34
- Dorothy Brede, '36

**FIRST LIEUTENANTS**

- Grace Bundy, '31
- Ruth Butler, '37
- Helen Byerly, '39
- Margaret Carey, '27
- Sara Chronister, '42
- Lydia Clarkson, '28
- Margaret Clayton, '34
- Marjorie Cooper, '39
- Marie Coren, '38
- Esther Cronlund, '38
- Charlotte Davenport, '39
- Winifred De Reemer, '41
- Norma Deloiet, '44
- Filomena Di Crescenzo, '41
- Helen Dubler, '23
- Alice Donovan, '41
- Kathryn Duffy, '41
- Ellora Endicott, '40
- Sara Entriken, '39
- Catherine Ericson, '42 (married Lt. McCormack)
- Rebecca Evans, '41
- Anna Ferg, '41
- Edna Fortner, '40
- Mildred Fronling, '42
- Lois Frienym (married Mr. Bastian)
- Mary Lou Gaston, '44
- Louise Goldberg, '28
- Catherine Gray, '42
- Jeanne Greenfield, '38
- Mildred Greenlee, '38
- Dorothy Groff, '37
- Nancy Habeker, '42
- Nellie Haines, '31
- Emma Heits, '31
- Eleanor Henry, '35
- Sylvia Hendrickson, '42
- Leah Hennum, '41
- Sara Herterlen, '41
- Jean Hinsheage, '41
- Catherine Hook, '39
- Olive Hood, '31
- Doris Hyde, '38
- Elaine Kaiser, '44
- Cora Karsteter, '41
- Virginia Kett, '37
- Mildred Kaufman, '42 (married Mr. Sahms)
- Mildred Kulm, '36
- Madeleine Kinch, '42
- Dorothy Lansdell, '37
- Lillian Lindberg, '41
- Ann Lowe, '44
- Mary Jane Lardin, '42
- Janet Lynch, '40
- Lorainia Maciejewiska, '38
- Ruth Mack, '33
- Binnie Manges, '36
- Helen Marrican, '43
- Elizabeth Millard, '42
- Helen Miller, '42
- Jane Miller, '42
- Vivian Moulton, '32
- Kathleen Numan, '38

**MAJOR**

- Mary O'Brien, '38
- Janet Overdorff, '44
- Dorothy Packer, '35
- Elizabeth Stanton Packer, '40 (married)
- Emily Porter, '41 (married)
- Lorraine Pensinger, '39
- Margaret Pozdnyak, '36
- Mabel Prevost, '29
- Margaret Racic, '40 (married)
- Margaret Reakmoen, '40
- Beatrice Raub, '42
- Beatrice Raymann, '42
- Sara Raymer, '32
- Gladys Reed, '41
- Esther Robertson, '34
- Grace Roller, '39
- Gene Roush, '41
- Alice Ripple, '42
- Dorothy Richter, '38
- Dolores Sample, '42
- Geraldine Schrefler, '44
- Beatrice Schlenker, '39
- Helen Schropp, '39
- Julia Smee, '39
- Charlotte Smith, '39
- Alma Snyder, '35
- Hermione Snoddy, '31
- Francis Solys, '41
- Ethel Sparks, '33
- Kathryn Tomasson, '42
- Margaret Taylor, '37 (married Major H. Nelson)
- Mary Taylor, '31
- Francis Trumble, '42
- Madeleine Ulloa, '38 (prisoner of Japan)
- Juliet Umberger, '39
- Hazriet Werley, '41
- Sara Wertsler, '40 (married Mr. Fillard)
- Rowena Wettmore Hampton, '29
- Ruth Williams, '42
- Ruby Willworth, '38
- Elizabeth Wittemoney, '43
- Laura Zukowski, '37

**CAPTAIN**

- Edna W. Scott, '28 (head of Unit)
- Marie Shearer, '32

**MAJORS**

- Willie Alder, '31 (married Capt. Hamilton)
- Francis Willdol, '29

**NAVY NURSE CORPS**

- Ensigs
  - Catherine Boyle, '43
  - Theophilia Borowski, '38
  - Lenore Detweiler, '29
  - Laura Dewitt, '32
  - Malinda Endicott, '36
  - Ruth Fisher, '43
  - Margaret Foote, '40
  - Gladys Hoffman, '40
  - Helen Long, '37
  - Elizabeth Martin, '39
  - Martha Moyer, '41
  - Janet Murray, '41
  - Sigbrit Oliver, '42
  - Lida Pardee, '38
  - Rose Pesci, '42
  - Helen Randwein, '31
  - Emily Smolak, '39
  - Claire Mae Snyder, '41
  - Mary Smith, '41
  - Ella Wilhelm, '29
  - Helen Thomas, '43
  - Lydia Yerkes, '36
  - Anne Welsko, '42

**ENGAGEMENTS**

- Betty Haynes, '43, Menzie McKim.

**MARRIAGES**

- Jean Farrell, '43, Dr. Kehm.
- Elsie Mae Moore, '42, Dr. Ernest Richardson.
- Ellen McGrady, '42, Dr. Robert Stewart.
- Virginia King, '42, Dr. Richard Parry.
- Margaret Taylor, '37, Major Harold Nelson.
- Kathryn Adams, '37, Dr. Robert Lindemann.
- Alfreda Lyle, '44, Dr. Harry Davis.
- Emma Gillespie, '21, Mr. John Friger.
- Belle Thrasher, '12, Mr. J. E. Carr.
- Vivian Zindle, '43, Mr. Bowan.
- Irene Lauver, '42, Mr. Leo Polner.
- Anna Haines, '41, Rev. Harry Heemans.
- Gemma Haug, '35, Mr. Jack Foraker.
- Grace Bell, '42, Dr. Gerald Helden.
Mary Francis Gilbert, ’44, Mr. Rudolph Helden.
Helen Steiner, ’43, Dr. Anthony Tananis.
Lois Beans, ’43, Mr. Earl Williams.
Mary Jo Strong, ’43, Mr. Larkin Lake.
Eleanor Burns, ’43, Mr. James Whelan.
Marion Novak, ’40, Lt. Ronald Ryder.
Dorothy Fraley, ’42, Capt. J. Y. Templeton.
Mary Benedict, ’43, Mr. William Weller.
Virginia Smith, ’41, Mr. Bowman.
Ruth Benninger, ’28, Mr. Ralph Coover.
Marjorie Lambert, ’44, Mr. Swindlehurst.
Evelyn Swink, ’43, Dr. George Houck.
Nellie Schirmer, ’43, Dr. Harold Warshaw.
Viola Cook, ’42, Dr. Jacob Brubaker.
Catherine Crafton, ’39, Mr. Lambert.
Marion Dalplesich, ’42, Mr. Edward Gabuzda.
Virginia Falkenburg, ’40, Mr. N. S. Ritter.
Ethel Hendricks, ’30, Mr. W. P. Krugler.
Theima Wall, ’44, Mr. Zitz.
Dorothy Mccomb, ’39, Mr. Raymond Talbot.
Rhoda Berg, ’42, Mr. Paul Weisz.
Grace Little, ’44, Mr. Ackley.
Dorothy Haupa, ’38, Mr. Joseph Bonsall.
Mildred Kautman, ’42, Mr. Sahms.
Helen Lehonsky, ’41, Dr. Berr Jacobson.
Charlotte Sover, ’44, Mr. Wm. Ellenbagan.

NEW ARRIVALS
Theo Matchen Peterson, ’42—boy.
Betty Calhoun Suttles, ’42—girl.
Ruth Adams Frinch, ’55—boy.
Ethel Heller Todaro, ’41—boy.
Margaret James Wager, ’41—girl.
Gertrude Stone Buckley, ’42—boy.
Grace Simmons Peacock, ’41—boy.
Evelyn Swink Houck, ’43—girl.
Marjorie Baldwin Dore, ’43—girl.
Dorothy Rojal Nifong, ’43—boy.
Clare Maxwell Wallace, ’39—boy.
Helen Pfaff Bedner, ’41—boy.
Rose Selgrath Aragen, ’32—girl.
Marie Hemmer Dunn, ’41—girl.
Virginia Lutz Spaulding, ’42—boy.
Dorothy Kinsbaugh Rumer, ’41—girl.
Mary Strong Lake, ’43—boy.
Elizabeth Taylor Davidson, ’34—girl.
Bertha Bell McCloskey, ’31—girl.
Ethel Lynch Taylor, ’32—twins, girl and boy.
Francis Hamilton Williams, ’36—girl.
Sally McHugh Lacombe, ’42—boy.
Esther Armitage Ebel, ’40—girl.
Margaret Fisher Reed, ’39—boy.
Perma Erhart Davis, ’41—girl.
Marian Neil Levenson, ’38—girl.
Jean Chaapel Freeman, ’35—boy.

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