Spring 1968

Jefferson Alumni Bulletin – Volume XVIII, Number 3 Spring 1968

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REUNION ACTIVITIES

Wednesday, May 29

9:30 Class Day Clinics, Hospital Auditorium
1:00 Dean's Luncheon, McClellan Hall

and from 6:30 P.M. Class Reunions
50th for class of '18, Dinner, Benjamin Franklin Hotel
45th for class of '23, Dinner, Barclay Hotel
40th for class of '28, Dinner Dance, Bellevue-Stratford Hotel
35th for class of '33, Dinner, Barclay Hotel
30th for class of '38, Dinner, Barclay Hotel
25th for class of '43, Dinner Dance, Marriott Motor Hotel
15th for class of '53, Dinner Dance, Marriott Motor Hotel
10th for class of '58, Dinner Dance Warwick Hotel
5th for class of '63, Dinner Dance, Bellevue-Stratford Hotel

Thursday, May 30

10:00 Orientation Lecture and Guided Tours of Jefferson Hall
2:00 Class Day, McClellan Hall
6:00 Class Cocktail Parties, Benjamin Franklin Hotel
6:00 Cocktail Hour, Benjamin Franklin Hotel
6:00 Faculty Wives Club Dinner, Garden Terrace, Benjamin Franklin Hotel
7:00 Alumni Banquet, Benjamin Franklin Hotel

Friday, May 31

10:30 Commencement Exercises, Academy of Music
12:30 Luncheon, McClellan Hall, Parents, Graduates and Guests
IN THIS ISSUE

Recent recipient of the Alumni Achievement Award and cover subject for this issue of the ALUMNI BULLETIN is Dr. Victor Heiser 1897, the man through the years. The scenes and people are: 1) Dr. Heiser in 1929 with the Rockefeller Foundation; 2) Members of the W. W. Keen Society at Jefferson, Dr. Heiser, President, 2nd from right; 3) Third from left, Dr. Heiser with Lankenau interns in 1897; 4) Dr. Heiser as he is today; 5) The Alumni Achievement Award; 6) Dr. Heiser, a re-enlisted medical officer during the 1918 flu epidemic; 7) Attending his 50th Class Reunion at Jefferson, Dr. Heiser at far left; 8) In 1954, Dr. Heiser, center, with Mrs. and Dr. Fuchs, the latter a famed ophthalmologist; 9) Gen. Leonard Wood, 2nd from right, visits the Philippines; Dr. Heiser, right, hosts; 10) Dr. Heiser and Filipino friend. For details of a unique life, see page 2.

Credit: Cover design, Lou Day

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NANCY S. GROSECLOSE, Editor
ELINOR DONAHUE, Assistant Editor
Published four times a year, Fall, Winter, Spring, Summer

The Alumni Association of Jefferson Medical College
1025 Walnut Street, Philadelphia, Pennsylvania 19107
“People at 95 are not supposed to be capable of much accomplishment; but instead of sitting down in the shade in Florida, I'd like to see if I can do something useful.”

Dr. Victor Heiser isn’t much like people at 95 are supposed to be. Seated behind a large mahogany desk in his skyscraping Manhattan House apartment, Dr. Heiser glances out the window to the city of New York. There is a freshness about the rooms—an almost obvious absence of antiquity. Curios from around the world accent the living room, most are tokens of appreciation from heads of state, and colorful plants line the mantlepiece. “I like to look at something besides buildings once in a while,” he explains. Stature erect, complexion ruddy, face full, movements sure, Dr. Heiser nods his white-fringed head and speaks with a thrust while his broad hands animate. “Sometimes I can hardly believe I've done it all.” “It all” spans nearly a century and includes seventeen trips around the world (in the days before air travel), adventures in more than 45 countries, transport via coolie and elephant, encounters with kings, presidents and pariahs, intrigue, epidemic and disaster, collaboration with the day’s best medical minds, and achievement of the near impossible. Incredible is the word; but the man has left his mark to prove it all. One more mark of his exceptional performance is the Alumni Achievement Award, presented April 25, 1968.

“Movement, change, flux have governed the pattern of my life for many years.” Dr. Heiser said that more than 30 years ago in his best-selling autobiography, An American Doctor’s Odyssey. In 1968 Victor Heiser is still moving with the times and in the same unconventional pattern. He was introduced early to the extraordinary as a way of life. At age sixteen he saw his parents and his home town destroyed by the Johnstown flood of May 31, 1889. Some experimenting followed; Heiser became plumber, carpenter and mechanical engineering student. Medicine won, however, and the young Heiser entered Jefferson and finished the course three years later in 1897. Internship at Lankenau Hospital determined the shape of many years to come for Dr. Heiser. From his observations there he decided against private practice. “A retail effort,” he considered it. “The prevention of disease
on a wholesale basis appealed to me far more.” So it seems, as he has spent his life at just that task. While a Lankenau intern, he passed the entrance examinations for the Marine Hospital Service, which later became the U.S. Public Health Service. This was the feat that launched his odyssey. As a Federal Officer assigned to the medical examination of immigrants, Dr. Heiser saw the world arrive and depart from such foreign points as London, Paris, Berlin, Rome, Naples, Alexandria and Manila.

The Philippines was more than a stopping point for Dr. Heiser. The year was 1903; his post there: Chief Quarantine Officer and, later, Commissioner of Health. “When I first looked over the situation I estimated that we could save 50,000 lives a year. I was wrong. It turned out to be at least 100,000. Of course, this was at a time when you could enact health measures without having to consult the whole populace about it.” Imbued with superstition and tradition and entrenched in ignorance and poverty, Filipinos suffered needlessly from smallpox, plague, cholera and leprosy. The pull of Dr. Heiser’s energy, his skill and in no small measure his ingenuity, was responsible for a veritable health revolution in the Philippines, Methods? Making persuasion do the work of fear, a chapter title in the Odyssey reveals. Persuading, demonstrating, treating, calculating, cajoling, but if required, instilling the right amount of fear. The Heiser name became a byword and the Heiser word, an order. Results? Establishment of a Health Service, thousands of lives saved and a new freedom from disease, founding of a leper colony, passage of the first patent medicine law, halting the flourish of useless, expensive and often habit forming drugs by a credulous populace. Perhaps the most immediately effective of the Heiser efforts was the smallpox vaccination campaign. At a time when the merits of vaccination were much debated, Dr. Heiser insisted on its importance. The campaign penetrated all corners of the Islands. Smallpox deaths were reduced from 40,000 to 700 annually, and that 700 mainly in districts too remote to reach with vaccine. The smallpox menace was almost completely obliterated, an achievement which Dr. Heiser finds one of the most satisfying of his career in the Philippines. On the subject, Dr. Heiser recalls Dr. William W. Keen, “one of the finest surgeons to serve at Jefferson, comparing with the great Dr. Samuel D. Gross. He took a tremendous interest in promoting smallpox vaccination while many of his contemporaries were against it.”

If the eradication of smallpox in the Philippines was the most satisfying experience there, the most challenging was the organization of a leper colony at Culion Island. The Philippines' 30,000 lepers had to be isolated from the general populace. The problems of building not only a medical center but also community facilities posed itself: streets, houses, wharves, a sewer system, a post office and banking facilities were the essentials. The plan took four years to become operational, but ultimately every recognizable leper in the Philippines was at Culion.

On to the East

Nineteen fourteen, and Dr. Heiser decided that his work in the Philippines had been accomplished. “The
great pestilences had been brought under control. . .
The Filipinos, who had been a nation of invalids, were well advanced in convalescence. A permanent health organization had been established." With this behind him, Dr. Heiser looked to the many offers he had received. One was from the Governor of Massachusetts for the position of State Health Officer. But the unstructured and unusual called again, this time in the form of the newly created Rockefeller Foundation. "Nobody had any clear idea of exactly where any of us were to fit in." "Where" turned out to be the entire Eastern hemisphere. The aim was to disseminate medical knowledge for the benefit of mankind. An idiosyncracy of John D. Rockefeller shaped Dr. Heiser's activities with the foundation. Rockefeller wanted to attack a disease that medicine could cure in 100% of the cases, yet which was still plaguing large numbers of people. The Rockefeller scientists came up with the answer: hookworm. "We carried the hookworm campaign to every country in the Eastern hemisphere," Dr. Heiser says, a little amazed himself. His capacity was Director of the East for the International Health Board of the Rockefeller Foundation. "For twenty years I traveled furiously on my mission, peddling my line of ideas." His line of travel followed the sun: Vancouver, Hawaii, Japan, to China. China was familiar territory. Dr. Heiser had been there in 1901 to organize a health service in South China. "When I first went there, the country was not interested in health and had no idea of preventive medicine beyond devoting enough graft money to enable medical officers to attend international conventions," Dr. Heiser reported in a 1937 Saturday Evening Post article. His custom was to cultivate an understanding of the native mind and gear his approach accordingly. "During the sea voyages I would study the history of the country and the people I was going to visit." In China, practices such as acupuncture and pulse taking (used to diagnose every disease) presented some competition for modern medicine. The greatest obstacle, however, was the native pessimism. Its grip is reflected in the reply of a taotai (town official) to Dr. Heiser's suggestion that plague-carrying rats in the seaports be killed. "Better for the people to die quickly than to starve slowly."

Inculcating in the minds of the people the rudiments of public health began with demonstrating to the coolie that staying alive was worthwhile. Dr. Heiser preached that "healthy coolies would produce increased revenue," that coolies who eat unpolished rather than polished rice don't get beriberi, that coolies who wear shoes don't get hookworm, and if coolies use latrines, hookworm, typhoid, dysentery and other intestinal diseases can be avoided. It was a long term project. The continuing supply of doctors needed for the work was assured with the opening of the Peiping Union Medical College. The China Medical Board of the Rockefeller Foundation had the job of raising standards of medical education in China. By buying out the Medical College at Peiping and replacing it with Peiping Union Medical College, sending staff members to America for further education and building a group of medical school buildings, it largely accomplished this. The admission of women into the curriculum was a first, and an easier task than changing the idee fixe that no male physician should examine a woman.

From China to Ceylon, where Dr. Heiser set up district health units to carry out hookworm eradication; to Australia where (in a vociferous discussion with the later-contrite Prime Minister of Australia) he prompted acceptance of a much-disputed Ministry of Health under the Rockefeller Foundation; on to the Fiji Islands, still a cannibal haven in its remoter areas; to Japan, to see the ravages of the great earthquake which had occurred the year before, to see homes of friends destroyed and they unaccounted for, to work on the founding of the Health Institute there, to be entertained by the Japanese Cabinet in the land of "the most hospitable people in the world." Then the return to Manila, scene of many traumas and triumphs. The emotions it aroused now were as mixed as they were upon Dr. Heiser's departure in 1914.

The Health Service which he had worked so many years to establish had decayed in the hands of politics. The outspoken Dr. Heiser didn't hesitate to tell the entering President of what was then the Philippines Commonwealth about it and elicit his help. Dr. Heiser surveyed the needs of the Health Service and obtained for it legislative and financial support. Be-
before his departure this time, he saw the regeneration taking hold. In Siam the story was similar. Dr. Heiser was granted a rare interview with the King. When asked what he thought of the Royal Medical School at Bangkok, Dr. Heiser evaded and pleaded out. Finally he was forced to tell the King: “I have visited medical schools all over the world, West as well as East. I regret very much to say that your Majesty’s Royal Medical School is the poorest I have ever seen.” Outraged, the King demanded, “Where is there a better one?” Dr. Heiser pointed to the Medical College in the Philippines, operating on an equally limited budget. Immediately the King sent a member of the Royal family to study the Philippine School. On the envoy’s return to Siam, the Royal Medical School in Bangkok was restructured and modernized. And for his interest, and no less his honesty, Dr. Heiser was decorated with the Order of the White Elephant by the King of Siam.

“And so I might have gone mile after mile, year after year, crossing one ocean after another, from one land to the next, trudging through rains and snows, sometimes basking in the sunshine of a delightful country, sometimes sweltering in the intolerable heat of the jungle, encountering everywhere odd, interesting, and congenial personalities, many of them engaged in the same endeavor as myself. But everything must end, and I had seen enough of the world.” The odyssey had come full circle. Just how significant it had been was assessed by John D. Rockefeller when he commended Dr. Heiser with “profound satisfaction in the work that you have done in your relation with the Foundation. And the best of it is that on the foundations which you have so well laid, there will continue to be built through the years superstructures that will render a continuing and increasing service to the health and well-being of the peoples throughout the world.”

**After the Odyssey**

With this Dr. Heiser closed an odyssey and an autobiography, but not a career. It was 1935 and he was in his sixties; not the time of life one usually begins a new job. Only the extraordinary applies here,
however. Dr. Heiser now shifted focus from the health problems of primitive society to those of the most sophisticated: American industry. As Advisor on Occupational Medicine for the National Association of Manufacturers, Heiser worked in this field for twenty-five years until 1963. The interest was in seeing how industrial accidents and deaths could be reduced. As a result of research in this area, Dr. Heiser says, “Now you are much safer in a factory than you are in your own kitchen.” To demonstrate what modern medicine can do for industry in terms of dollars, Dr. Heiser saved U.S. Rubber the cost of double expansion of a hospital in Sumatra. When the Company wanted to increase their employees in Sumatra from 10,000 to 20,000, they consulted Dr. Heiser on the possible need to double the size of the 200 bed hospital. Rather, Dr. Heiser recommended that each employee be given a plot of ground to have his own garden and grow fresh and balanced foods. This was done—and 200 beds proved more than adequate.

Along the way numerous posts and honors have come to Dr. Heiser: four honorary degrees, from Jefferson, Rutgers University, Thiel College and Temple University. The expanse of his activities has included being Director of the American Museum of Health, Chairman of the National Malaria Committee, the Medical Advisory Committee on the World’s Fair (1939), and U.S. Delegate and President of the International Leprosy Conference in Cairo, 1930, and President of the International Leprosy Association, from 1931 to 1938.

Between all this Dr. Heiser has sandwiched in writing of three books, the first, *An American Doctor’s Odyssey*. “It came out at the same time as *Gone with the Wind*. We were great rivals for top place in the best seller charts in 1936. One week they would be ahead and the next week we would be ahead.” The book is still selling. In *Toughen Up, America*, and *You’re the Doctor*, Dr. Heiser counsels on how to live longer and like it. “A question often asked me is, ‘How do you get to be 95?’” Nobody really knows the answer, but I can’t help but believe that moderation and eating the right foods have an important part in building the kind of body that resists the ravages of old age.” Dr. Heiser is one who should know. But there is a touch of luck and a large dose of common sense involved, too. The narrow escapes prove it. Dr. Heiser recalls a singular incident which occurred on a one night stopover in Guatemala, en route to Honduras. “After a hot dusty ride to get to the departure point in Guatemala, I checked into a hotel and looked out the window at a very inviting blue Pacific. I got my bathing suit on, went down and took a dive in. I was out in the water a ways when I glanced ashore and noticed about a hundred people who had gathered there, shouting, ‘sharks, sharks.’” Dr. Heiser took a look about and, surely enough, was surrounded by sharks. “It didn’t look like I was ever going to get out of that mess,” he laughs now. In the attempt, however, he used the same method to get ashore as he did to get into the water—a slow overhand stroke. “I could see the faces on the pier—expecting me to be swallowed. I figured the most valuable thing I owned then was my right hand.” Dr. Heiser reached the pier with a convoy of sharks, but without a scratch. The story tells something of the man’s personality. Dr. Heiser thrives on the impossible and the unpopular. Much of his work has been carried out in its midst, in underdeveloped countries, provincial areas and inimical environments. His approach is always logical; his effect, consequently, natural and commanding. The name Victor seems to have been portentous.

It is several years since Dr. Heiser’s voyages and exotic adventures, but he still finds excitement in a day’s work. “My consuming interest now is leprosy. I’m very sad to see a surge of leprosy in the U.S. There are now 2,000 cases here. We’re trying to bring the disease under control, though we still don’t know how it gets from one person to another. We do know that if you vaccinate against tuberculosis, the subject seems to be immune to leprosy also.” The disease is brought here from an outside source, Dr. Heiser says, and with an emphatic and anxious voice, adds: “I’m horrified that the boys who go fight America’s battles not only fight her battles but also bring diseases back.”

Victor Heiser is still looking ahead. Asked to look back at what he might have left undone, Dr. Heiser can say, “No, I can’t think of anything.”
A Curricular Evolution

by Robert P. Gilbert, M.D.

In September 1967 a curricular evolution began at Jefferson. The planning had extended back for three years and will be continuing. The program is a measured response to the needs of today, but should not be regarded as definitive. Further changes based on experience and evaluation will be needed each year, barring the unexpected attainment of perfection. So far, it gives the student time for elective courses, effects a modest cut in the hours of scheduled work required of all students (core curriculum); calls for interdepartmental collaboration to plan this coverage; and institutes a quarter system with credit hours for each course, whether required or elective.

The forces calling for a remodeled curriculum are not unique to Jefferson or America, but to our time. The basic one, of course, is the exponential growth of knowledge. This has required specialization and has in turn caused further specialization. The volume of facts and conceptual material for any special field is enormous. Basic science materials must be carefully selected for relevance and for value as general principles which will serve to make future developments understandable. The curriculum, then, cannot possibly teach all of medicine to everybody. It does not make sense, therefore, to require a 100% identical course of study for each student.

Specialization also has reduced the availability of primary or personal physicians at a time of increasing population and growing demand for the benefits of medical science. This, too, must be considered in curriculum planning. In addition, the science of teaching has finally been receiving some much needed attention in medical schools. This, too, is obviously relevant to curriculum planning.

Active and regular discussions about a new curriculum for Jefferson began in 1965. Two task forces reported on curriculum revision to the Executive Faculty in September 1965. The Curriculum Committee of the Executive Faculty from that time devoted all of its efforts to this project, reporting back to regular Executive Faculty meetings but also to special meetings in July 1966 and March 1967. At this last meeting, which was a Faculty retreat, the Executive Faculty voted approval of the new curriculum after some changes, and authorized that it be started in September 1967 for freshmen, sophomores and juniors. The class of '68 would have to finish in the old style.

The relatively short interval from March until "C Day" made the Curriculum Committee work even harder to finish the detailed planning, and iron out beforehand as many rough spots as possible. Letters were sent out to students by the Dean's Office, and the main outlines of the plan were explained at class meetings. Dean William F. Kellow, starting his new duties

Dr. Gilbert, Associate Dean and Associate Professor of Medicine, was appointed to the Jefferson faculty in the fall of 1965. He came to the College from Northwestern University Medical School where he held similar rank and was Director of Research and Education at Evanston Hospital.
on July 1, must have had some uneasy moments as he first contemplated the work to be done by September. He supported the plan enthusiastically, and with the hard work of Miss Jane Lutz, the Acting Registrar, the plan went into action as scheduled.

The Curriculum Committee did not aim for instant perfection, but wanted to effect some important improvements which could then be molded or added to in the light of continuing experience. They stated the goals for the undergraduate curriculum as follows:

"The Medical College curriculum is designed to help the student acquire the basic knowledge, skills and attitudes of the physician. It also exposes him to enough of the nature of several medical fields and careers, so that he may choose intelligently whether to be, for instance, a general physician, clinical specialist or academician.

To accomplish its purposes the curriculum is directed toward these goals:

1. Present to the student certain core materials which underlines all medicine. This includes not only factual knowledge but also skills to handle clinical problems, based on a broad understanding of human biology and behavior. 2. Afford the student time to pursue relevant studies of his own choosing and to engage in research. 3. Enhance the student-physician's qualities of compassion, integrity and responsibility. 4. Present a sound understanding of the scientific method and the principles of research, enabling the student to evaluate evidence critically and objectively. 5. Develop a scholarly attitude in the student toward the study of medicine, so that he will continue to learn and to keep himself informed, and will think and function effectively throughout his entire professional career."

The Committee realized that attainment of these goals depends more on the dedication, attitudes, and skill of the faculty than on the curricular framework per se. With these goals in mind, however, and after consideration of new curricular developments at a number of other medical schools, the Committee hammered out changes for Jefferson which can be summarized rather briefly. They are designed to make allowance for differences of interest and approach among students, to stimulate interdepartmental cooperation in teaching, and to view the medical student as a responsible graduate student.

A Core Curriculum. Whether the future plans of the student are to enter family practice, ophthalmology, research, or some other medical field, there is certain central or "core" material that he should know. This is needed to qualify for licensure and to provide the breadth necessary for proper understanding of his own field. The new curriculum has cut the number of scheduled contact hours for four years from 6058 to 4338. It is likely that by judicious selection of what is important and by greater efficiency of teaching that students will learn as much factual material as they have in the past. The big hope is that they will learn more of the basic principles of medicine and of the scientific approach to clinical problems.

Subject Committees. These have been set up to further define what the core curriculum should include, and as a practical method by which a large medical college such as Jefferson can use some of the strengths of interdepartmental teaching. There are nineteen subject committees, one for each of the following fields: Cell Biology; Development, Nutrition, Growth, Aging; Emotional and Behavioral Maturation; Reproduction; Cutaneous System; Neuro-Sensory Systems; Musculo-Skeletal Systems; Cardiovascular System; Respiratory System; Alimentary System; Hematopoietic-Lymphatic-Immunologic System; Urinary System; Endocrine-Metabolic Systems; Chemical and Physical Agents; Biologic Agents (Mechanisms of Infection); Medicine and Society (History, Economics, Ethics, Organization of Medical Care); Neoplasia; Genetics; Approach to Clinical Medicine.

The Committees are made up of a representative from each department concerned with a given subject. For example, the Alimentary System Committee has representation from Anatomy, Biochemistry, Medicine, Microbiology, Pathology, Pediatrics, Physiology, Preventive Medicine, Psychiatry and Surgery. There is a curriculum committee representative to work with each subject committee.

The specific functions of these key committees are to: 1. Plan logical sequences; 2. Prevent unplanned overlapping; 3. Look for omissions; 4. Divide subject responsibilities among departments; 5. Uncover talent from one department for use in another; 6. Look for opportunities to commence interdepartmental teaching (sequential presentation by different departments,
goes from 8 A.M. to 3 P.M., Monday through Friday. After the first four weeks of the freshmen winter quarter, Wednesday is free from 11 A.M. except for an optional 1-2 P.M. convocation hour for the entire school. Elective courses are open Wednesday afternoon to sophomores.

The third year consists of four quarters starting in the fall. The student spends one quarter in Medicine, one in Surgery and Psychiatry, one in Obstetrics, Gynecology and Pediatrics, and one in elective work. Didactic lectures have been concentrated (and compressed) into Wednesday and Saturday mornings, so as not to break into clerkship time every day. In the senior year there will be an elective quarter, a surgical subspecialty quarter and a medical subspecialty quar-

**8. Promote interchange of material and ideas between preclinical and clinical departments.**

These are ongoing committees which should maintain a continuing surveillance and appraisal of the curriculum, suggest changes and develop better methods. The success of the committees is crucial to the success of the new curriculum.

**Introduction to Clinical Medicine.** This is an interdepartmental course in the second year. It has its own subject committee. The relations of basic science and clinical medicine will also be developed in a weekly interdepartmental correlation hour during the first and second years.

**Electives.** Elective courses are offered to enable the student to learn more in those subjects which are of particular interest to him, to give him the chance to pursue a topic in depth, to sample from those fields which he is considering for a career, and to start building for the career he may have chosen.

This year about 200 elective courses are available. Some are one to three hour lectures, seminars or laboratory courses scheduled for Wednesday afternoons. Others extend for a solid block of time and may be chosen during an elective quarter (*vid. inf.*). Most of these full-time electives are in research under a preceptor, or in a clinical clerkship. While elective courses are all elective, a minimum amount of elective time (40 credit hours) is required for graduation. Student counseling opportunities are being increased to aid students in choosing the elective courses best adapted to their interests and plans.

**Credits and Scheduling.** A system of twelve week quarters has been started. Quarter credit hours are assigned to each core or elective course on the basis of: one hour of lecture every week for twelve weeks is counted as one credit; two to three hours of laboratory or clerkship per week for 12 weeks is counted as one credit.

The normal academic load is 18 credits for one quarter. The student may also elect up to 3 elective course credits, so that 21 credits is a maximum for any quarter. Graduation requires 209 credits from the core curriculum and 40 elective course credits.

The weekly schedule for freshmen and sophomores
Junior and senior quarter scheduling is set forth in the following chart.

In addition to free quarters in the third and fourth years, summer quarters after freshmen and sophomore years are available for elective work. So, there are a total of four elective quarters, one between first and second years, one between second and third years, one in the third and one in the fourth year. Since as many as 21 credits may be earned in one quarter and since there is opportunity to earn 2-3 elective credits on Wednesdays, it is not necessary to gain the required 40 credits, that the student spend more than one or two full quarters in elective work. It would be theoretically possible to earn a hundred elective credits.

The new curriculum is operating successfully. There have been problems and there surely are more to come. Hence, the program must be subject to continuing assessment by the Curriculum Committee and subject committees.

The students are greatly interested. With the encouragement of the Curriculum Committee and Executive Faculty they have set up a special study group of men from each class. The group meets with the Curriculum Committee at intervals to bring in student ideas and suggestions.

Office of Educational Science. To further build in the capacity for flexibility and rational improvement, and to take advantage of the increasing body of knowledge concerning the learning process, the College hopes to create a small Office of Educational Science. This will not relate to any single department but will help all. It will be directed by an individual with special background and expertise in educational methods as related to medicine. The Director will report to Assistant Dean Joseph Gonnella, who is not only an internist but also has spent a year in the Center for the Study of Medical Education at the University of Illinois. More specifically the Office of Educational Science would be active in: (1) Evaluating the effectiveness of the curriculum in various departments and in the school as a whole; (2) Helping to plan needed improvements; (3) Increasing faculty members' understanding of the learning processes; (4) Studying current student evaluation procedures and helping to develop better ones; and (5) Helping to plan new areas of the curriculum. It is also hoped that members of this department will work actively in research related to education in medicine. It will provide much-needed staff work as well as consultation to the Curriculum Committee of the Faculty.

In summary, Jefferson has made a measured start in strengthening the undergraduate curriculum. The core material essential to all medical graduates has been conserved, though it will need further definition. At the same time, elective opportunities have been offered to suit the needs and interests of students headed into a wide variety of medical fields. Emphasis has been given to the development of interdepartmental cooperation through subject committees and to the great need for continuing evaluation and improvement. Success of this venture really rests with the entire faculty and student body. We think it will work.

Members of the Curriculum Committee, left to right, Dr. Joseph S. Gonnella, Dr. E. Harold Hinman, Dr. Robert I. Wise, Chairman, Dr. Andrew J. Ramsay, Dr. Gilbert, Dr. William F. Kellow, Dean. Not shown, Dr. Julius M. Coon, Dr. Floyd S. Cornelison and Dr. Roy G. Holly.
Clinical Research: A Man’s Mission

by Nancy M. Sobolevitch

O. Dhodanand Kowlessar, M.D., is passionate about research. It’s not just a profession with Dr. Kowlessar, it’s a way of life. Since his Oxford University days, where he graduated with honors in Literature in 1945, he has been convinced of the importance of research orientation. He went on to Carthage College (Carthage, Illinois) for another baccalaureate degree (Magna Cum Laude) and then to the University of Iowa for a Master of Science in Biochemistry. He had acquired all of the above by 1950 along with a real taste for scientific investigation.

Realizing the necessity for an even broader education in order to pursue his interests, he enrolled at the University of Rochester School of Medicine and Dentistry where he acquired a medical degree with honors in 1955. At that time, Rochester was far advanced in its appreciation of academic medicine and research. At least 60% of Rochester graduates moved on to teaching and research—a very high rate.

Dr. Kowlessar, right, confers with a colleague in the Clinical Research Center.
Miss Mary Ellen McDonald, head nurse of the Clinical Research Center, mans the Nurses' Station.

Identical twin sisters, one a kidney donor and the other the recipient, are allowed free activity while renal function is monitored.
even by today's standards. The consensus at Rochester was that each physician should be enabled to practice medicine and conduct research simultaneously, that this was the optimum situation for the physician and that students should be encouraged in this direction. Of his five years in medical school, one was spent solely on research—a "vacation" heartily supported by the University. It was during this period that Dr. Kowlessar served as a Fellow with the Atomic Energy Commission at Rochester and published six papers on the effects of ionizing radiation on deoxyribonucleic acid activities of various body fluids.

During his internship at the New York Hospital, Cornell Medical Center, he began to focus on metabolic studies as his special field of interest. While a member of the house staff there, he participated in the care of an eminent Cornell gastroenterologist who was then head of the Department of Medicine at Bellevue. His influence led Dr. Kowlessar to decide finally upon gastroenterology as his specialty. He feels that there is no other field in greater need of specialization and research, no field so wide open for investigation at the molecular level. Obviously, his training in biochemistry and radiation biology lend vital support to his convictions.

Since the completion of his fellowship in Gastroenterology and Endocrinology, he has published twenty-seven papers on topics ranging from "The Diagnostic Value of Serum Enzyme Determinations in Pancreatic Disease" to "The Effect of Wheat Proteins in Celiac Disease." This latter topic is currently occupying Dr. Kowlessar's time and energies in an effort to isolate the toxic peptides from a peptic-pancreatic digest of gliadin in both children and adults with celiac disease.

He became an Instructor in Medicine at Cornell University Medical College in 1959, Assistant Professor of Medicine in 1960. In 1963, he accepted an Associate Professorship of Medicine and Directorship of the Division of Gastroenterology at Seton Hall College of Medicine, now the New Jersey College of Medicine. In 1966, he came to Jefferson as Professor of Medicine, Director of the Division of Gastroenterology and Director of the Clinical Research Center.

Characteristically, Dr. Kowlessar is as enthusiastic about his colleagues' projects in the Clinical Research Center as he is about his own. His excitement is contagious when he talks about the accomplishments to date and plans for the future. His fondest dreams for the Center's program include having it serve as an elective segment for medical students. He is staunch in his conviction that the Center can serve every specialty at Jefferson and can be particularly valuable in inter-departmental projects.

The facility of which Dr. Kowlessar became Director a year and a half ago is one of Jefferson's most prized possessions. It is located on the fifth floor of the Main Hospital Building and was officially opened on February 3, 1964. The development of research interest and programs at Jefferson can best be illustrated by the following comparative data:

<table>
<thead>
<tr>
<th>RESEARCH EXPENDITURES</th>
<th>1951/52</th>
<th>1960/61</th>
<th>1965/66</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research Grants</td>
<td>$206,231</td>
<td>$1,107,954</td>
<td>$2,999,224</td>
</tr>
<tr>
<td>Public Health Service</td>
<td>$246,642</td>
<td>$573,627</td>
<td>$822,161</td>
</tr>
<tr>
<td>All Other Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$452,873</td>
<td>$1,681,581</td>
<td>$3,821,385</td>
</tr>
</tbody>
</table>

Over the course of the next seven years, the Public Health Service will grant Jefferson's Clinical Research Center more than $5.5 million for the operation and maintenance of the facility alone. In addition, of course, individual investigators who have protocol in the Center will be working on their own project grants from either the Department of Health, Education and Welfare or private sources.

There are many Clinical Research Centers scattered throughout the United States, each with its special orientation and capabilities. Jefferson has set as the objective of its Center, the conduct of research which would be actually or practically impossible without the Center and the encouragement of high precision research designed to utilize the information available from the intensive observational control of human subjects.

These objectives will be accomplished in a number of ways. The high ratio between skilled and specially trained nursing and dietetic staffs and the number of subjects being studied is of utmost importance. This high ratio is partially exemplified in the difference between the Hospital's $46.00 per diem cost and the Center's $61.83 figure. Private laboratories located
beside the patient rooms for the use of the research physician during the tenure of his study reflect the conviction that the facility should serve as the investigator's workshop so that he can maintain the closest possible control of his study material. In addition, the Center houses a “Special Service” laboratory containing expensive radioactive counting equipment which can be used by the researcher when none is available elsewhere.

The Center includes in its list of objectives the utilization of the Single Case Study to assist in answering a specific problem of sufficient import to warrant protocol and publication. Inherent in all of these objectives, of course, is the provision of a setting in which medical students, pre-doctoral and post-doctoral fellows, dietitians, nurses and other auxiliary personnel can become acquainted with the techniques and concepts of medical research.

A truly unique and farsighted program being undertaken on a continuing basis in the Center is the development of a Biologic Data Registration and Re-recording System. This project was originally inaugurated by the Center's first Director, Dr. Laurence G. Wesson, Jr., who continues with Dr. Michael Simenhoff, the Assistant Director, to work on it along with their other research on the diurnal cycle of renal function and electrolyte excretion in pathological states and the physiological and biochemical studies of isolated intestinal loops in man.

To date, there is no effective commercial system for the long-term monitoring of the chronically ill and ambulatory patients. Since precise information of such modalities as temperature, pulse, respiration, blood pressure and electrocardiogram are needed in many physiologic studies, the investigators feel that the perfection of such a system will provide important information.

All present and future studies on the development of an ideal system must be based on the experience derived from using the patients as test subjects. Such devices depend upon the patient's acceptability as well as the safety of the monitoring procedures. Since there is no standard safety code in medical electronics and engineering, the research team has developed their own in collaboration with the American Heart Association, Underwriters Laboratories and the Ministry of Health, Hospital and Technical Memoranda.
of Great Britain. Interest for this project focuses on a series of pilot studies with emphasis on the practical rather than the theoretical applications, namely, the measurement and recording of vital signs and metabolic processes as depicted by the chemical values of the blood and other biological fluids as well as the requirement of a particular study being undertaken in the Center.

The availability of such a monitoring system and expert advice on its application have played a significant part in the education of postgraduate and nursing personnel. The role of such a system in both present and future medical thinking at Jefferson may be of inestimable value in view of the advances being made in medical electronics in solving problems and planning clinical investigations.

Currently, the equipment is geared to measure the aforementioned temperature, blood pressure, pulse rate and EKG simultaneously. Such measurements are recorded even while the patient is ambulatory by means of a special belt and tether which gives maximal mobility and facilitates the use of rapid on-off snap connections when the patient should want to temporarily disconnect himself to attend to his bodily functions. Plans for the future development of this system include the provision of real-time visual read-outs of customary and derived data, video monitoring of patient beds including magnetic recording correlated with time of day, telemetering for ambulatory patients, applicability of wearable tape recorders for recording of out-of-hospital patients, “memory” in the form of a magnetic tape recorder for maintaining past phenomena (EKG, respiration) for 24 hours and computer data analysis.

Dr. Kowlessar is particularly pleased that there are now 19 approved protocols for the Center. A number of these have been expanded within the last year to include consultants from other areas. Occupancy has risen to approximately 80% during the past year with an average length of stay of just under two weeks. Responsible in great measure for the success of the total program is, the Director feels, the outstanding nursing and dietary services. Implicit with the concept of high precision clinical research is the dedication of the supporting staff to the rigors of each individual investigation. Sheer numbers are not enough. Obviously, there can be no sloughing of responsibility. If every specimen must be collected immediately and sent forthwith to such and such a lab, then, that’s what must be done every time. If the investigation requires the reversal of the patients sleeping cycle, then the diet kitchen must have lunch for him at midnight.

Clinical Research Center nursing and dietetics have become specialized arts. Just as there are now training courses for nurses in the care of cardiac patients, there will undoubtedly be some formalized program for Clinical Research Center nursing. Those who have already learned through experience are devoutly loyal to this specialty.

There is a strong feeling in the Center among physicians and supporting personnel alike. They very consciously want Jefferson’s to be the best in the country and they work very hard towards this end. It is definitely the consensus that Dr. Kowlessar generates their excitement. New ideas and experimentation are commonplace on the fifth floor. The dietitians are continually searching journals as well as popular magazines for new products and new ways of preparing food for patients on specialized diets. The nursing staff contributes practical solutions to streamline procedures or increase the patient’s comfort.

It is indicative that a mother, who was recently in the Center for evaluation as a possible kidney donor for her daughter, very much wanted the latter to be accepted at Jefferson. The young girl had been in and out of several hospitals over the past three years but none of these had the same esprit de corps, the same atmosphere as did Jefferson. Patients do respond to the Center’s program. Most are cooperative and sincere in their desire to be as helpful as possible. Of course, there are a few whose temperaments turn out to be unsuitable for clinical research. For instance, there was the patient whose problem was malabsorption. His room had to be “shaken down” at least daily to locate the boxes of chocolate candy secreted in unlikely places. But, these are exceptions and fortunately few and far between. The individualized care is naturally conducive to patients who are as happy and cooperative as their condition permits.

By-products of research are another facet of the program which is particularly interesting. Because of frequent conferences and simple physical proximity, informal consultation can often lead to useful results.
When Dr. James E. Clark conducted his jejunal loop dialysis investigations at the Center, a tremendous amount of material became available on the function of the intestinal mucosa which has been extremely valuable to gastroenterologists in their activities.

The structure of the jejunal loop has permitted study of the kinetics of water and electrolyte transport using labelled water (tritium) and sodium, a study that is obviously difficult to approach with direct techniques in man. The preliminary observations have documented a higher rate of water turnover than hitherto calculated. The other electrolytes are being studied with similar radioisotope techniques.

Other significant contributions which have been achieved through the use of the Center include the treatment of patients with Billroth II operations. It has been noted that fat excretion occurs in approximately 50% of patients subjected to Billroth II partial gastric resection. This degree of malabsorption is usually not very crippling. However, a small percentage of the patients develop massive steatorrhea with accompanying weight loss, cachexia, anemia, avitaminosis and electrolyte imbalance. Some of these patients have been treated with intermittent antibiotics in the broad spectrum range while others have benefited by conversion of the Billroth II to a Billroth I anastomosis.

Utilizing a technique described by Henley, Drs. C. Wilmer Wirts, John Y. Templeton, Charles Fineberg and Franz Goldstein interposed a loop of the jejunum isoperistaltically between the gastric stump and the duodenum. Eight of the nine patients treated in this manner had markedly improved fat absorption, returned to normal B12 absorption (3 or 4 patients), striking weight gain and correction of secondary nutritional deficiencies. It is felt by the investigators that this procedure should be used on all patients with Billroth II operations who fail to improve on antibiotics. The operation is not associated with morbidity nor mortality and the striking improvement of the patients’ appearance and clinical states speaks for itself.

Also of interest is the technique developed by Dr. Nicholas T. Zervas. He has performed stereotaxic transnasal hypophysectomies for carcinoma of the breast, carcinoma of the prostate, and diabetic retinopathy by ablating the pituitary gland with radio frequency power. This technique has no mortality and minimal morbidity. Furthermore, some of the patients with metastatic disease experienced objective remission, had prolonged pain free periods, and some of them experienced no progression of their skeletal lesions. Early improvement in visual acuity and the arrest of devastating diabetic patients’ retinopathy has occurred in those so treated. Further physiologic, metabolic and renal function tests in patients with diabetic retinopathy and nephropathy before and after this form of hypophysectomy have shown that it may well prove to be a dramatic breakthrough in handling these severe complications.

Dr. Robert J. Wise and his colleagues, Drs. William C. Frayer and Theodore T. Tsaltas, have studied the lipoprotein lipase levels in patients with Weber-Christian Disease. They have recently shown that when patients are treated with intravenous heparin, the severity of the symptoms is changed and, in some instances, there has been prolonged abatement. The mechanism of this interesting observation in terms of therapy and the lipoprotein lipase levels is now under intensive multidisciplined studies.

Drs. John Capelli and Herbert Cohn have studied the renin-angiotensin system in anephric patients prepared for renal transplantation in the Clinical Research Center. Anephric subjects were studied at various times following bilateral nephrectomy and serum/tissue renin quantitated by bioassay technique. Further characterization was performed by chromatographic and enzyme kinetic studies confirming the presence of renin in anephric patients, the amount of renin in anephric patients, the amount of renin increasing in the period following nephrectomy. In one patient who came to autopsy just before transplantation could be done, significant amounts of renin were found in the uterus. No renin was found in the single male studied but it was too early to draw any conclusions. The work is not yet complete. The future significance may lie in two areas: uterine physiology and the part played by angiotensin in uterine blood supply and muscle contraction; and, secondly, the role of extrarenal renin on sodium metabolism.

Current theories on the mechanism of salt hemo-

stasis revolve around the renin-angiotensin-aldosterone system. Because of experimental inconsistencies
A patient enjoys the change of scene in the lounge area.

The monitoring equipment for patients in the Clinical Research Center—a technician does some testing.
in the full application of this system to day-to-day salt balance, Drs. Wesson and Michael Simenhoff investigated Addisonian patients (with no endogenous aldosterone) where one important parameter was absent and the others could be controlled or constantly monitored by continuous measurement. In this way, they have demonstrated that changes in salt metabolism occur in the absence of changes in aldosterone and despite unchanged or disassociated patterns in renal hemodynamics (renal plasma flow and glomerular filtration rate). This suggests a different or additional control system which is currently being investigated.

These are but a few of the significant clinical investigations being conducted at Jefferson. Other protocols include such diverse subjects as the pathophysiology of rheumatoid synovitis, food processing for N, K and Na content as effected by cooking and EEG and respiration during light sleep.

Dr. Kowlessar feels strongly that a clinical research approach can be used by most physicians in practice. He frequently and patiently explains to medical students that the basic aspects of compiling a history, doing a physical examination and making a diagnosis represent an individual research project. He wants each medical student to recognize the excitement of clinical research and the great benefits it can provide. From even a brief glance at the Center's program, it is obvious that the multidisciplined approach is a modern necessity. He also urges physicians in private practice to contact investigators in order to discuss a particularly perplexing problem.

Donning his administrative hat, Dr. Kowlessar sees a financial crisis in the future expansion of research activities. He feels that although the Federal Government will continue to support medical research, it will not be able to do so at ever-increasing levels. Third party payments are a fact of the present and foundations and individuals must be convinced in the near future of the value of research. The greatest untapped source, he feels, is American industry. Here may lie the promise for medical research in the decades ahead.

In general, however, Dr. Kowlessar feels the future looks exciting. He and his colleagues, after all, are men whose energies and vision will always be directed towards the horizon.
fathers' day 1968


Nearly everybody reads the ALUMNI BULLETIN—two sophomore fathers do the same.

Program planners, Dr. Daniel W. Lewis '44 (left), and Dr. Abraham E. Rakoff '39, take time out.

Off to tour the campus, senior guide leads the way.
In the Clinical Research Center, Dr. Kowlessar demonstrates operations.

Dr. Keiserman explains use of equipment.

Dr. Irving J. Olshin (left) takes the group through Pediatrics.

Dr. Joseph Keiserman hosts a group of fathers on a preview of the new accident ward.

Hospital Director Dr. Francis J. Sweeney, Jr., '51, shows fathers the accident ward auditorium and its dual function as projection area and patient demonstration room. Area is site of old pit.
making the most of a leap year

during the day

February 29, that odd leap year day, doesn't come very often; when it does, Jefferson makes the most of it. On the alumni calendar two annual events, Fathers' Day and the Annual Business Meeting, shared the date.

For 95 fathers of sophomores, it was a day in the life of a medical student. They took the opportunity to see first hand the workings of a medical school. The fathers moved from the classroom scene, through the laboratory, to the hospital floor, forming a new awareness of what their sons and daughters were doing as sophomores at Jefferson. Administration and faculty members added to the clarity of the impression. At luncheon host Dr. Abraham E. Rakoff, Chairman of the Fathers' Day Committee, brought out some of the facts and the informals that go into becoming a physician. Witnessing a transformation, the evolution into an M.D., was how Dr. John H. Hodges saw it. Dr. Hodges, The Ludwig A. Kind Professor of Medicine and faculty spokesman on the occasion, was chosen for his close association with sophomores. Acquainting his audience with some short history of medical education, his theme was “change.” “The word ‘change’ may be defined as a transformation into something different. The basic plan of the Medical World, however, in unchanging. There has always been sickness and the suffering patient with his attentive family; there have always been those who aid the sick and those who teach others their successful methods. Paradoxically, each day sees a new change in medicine . . . but that part of medicine which has not changed from antiquity to the present was well expressed . . . by the Greek physician Hippocrates. ‘Where there is love for mankind, there is love for the art of Healing.’ Parents, we thank you, for continuing this gift to humanity.”

Dr. Peter A. Herbut had some points on Jefferson to make also. Dr. Herbut knew well both his subject and his audience, since prior to his appointment as President of Jefferson, he taught the sophomore course in pathology as Professor of Pathology and Head of the Department. Dr. William F. Kellow, Dean, concentrated his remarks on the medical profession—its place, its image and its problems in today's society. Representing the alumni was Dr. Elmer H. Funk, who took office that evening as President of the Alumni Association. Dr. Funk traced some alumni history. Last and center of it all was the sophomore class with its spokesman, Class President Richard Nemiroff.

A walk in the rain across Walnut and Locust Streets, and the fathers were in—into Jefferson Hall, that is, and one of the first groups to have a preview of the new basic science-student commons center. The building will serve its first students next September. The tour passed auditorium, reading room, cafeteria, basketball court, swimming pool and study area, and found its way to the Locust Street doorway again to wind up the day. Ninety-five fathers had come, seen and left with a more refined knowledge of what medical education means.

that evening

By evening the rain became snow, a tradition for the Annual Business Meeting and Dinner. Weather was no deterrent for more than 100 alumni who filled the Barclay Hotel for cocktails followed by dinner in the Crystal Ballroom. The Association is nearing a century and showing no signs of age. The 98th annual review of the year's business covered some important changes in 1967. The year had brought the announcement of Jefferson's drive toward university status, establishment of the School of Allied Health Sciences, the inauguration of a new president and a new dean. Outgoing Alumni President Dr. Vincent T. McDermott, chairing the meeting, recalled these events and the alumni part of Jefferson life. Chairmen of the Standing and Special Committees, and officers Drs. Warren R. Lang, Secretary, and John B. Atkinson, Treasurer, reported on specifics. As Chairman of the Special Committee on the Alumni Achievement Award, Dr. John H. Hodges announced the presentation of the award to Dr. Victor G. Heiser, class of 1897. At 95 years of age, Dr. Heiser was unable to make the trip from his home in New York to Philadelphia. An engraved silver tray was presented

Continued on page 24
Faculty, students and fathers at McClellan Hall luncheon.

A family of Jeffersonians, Dr. John Martzolf '44, son, John, and John's grandfather, Dr. Philip F. Martzolf '15.

Dr. John H. Hodges '39, faculty spokesman.

Richard Nemiroff, class president, with grandfather, Henry N. Levine, and father, Dr. Nathan W. Nemiroff.

Fathers enter Jefferson Hall for afternoon tour following a wet walk across the new campus.
The evening session was held at the Barclay Hotel.

Dr. Elmer H. Funk, Jr., presents gavel to retiring president Dr. Vincent T. McDermott, right.

Mr. James M. Large, Board Chairman.

Dr. Peter A. Herbut, President.

Mr. D. Hays Solis-Cohen, board member, left, chats with Dr. Paul A. Bowers.

Dr. John H. Hodges, left, Dr. Benjamin Haskell, center, and Dr. Paul J. Poinsard.
to him at the April 25th dinner meeting for New York alumni. (See Heiser story, page 2.)

The speaker of the evening reflected alumni achievement both personally and in his capacity as alumni trustee. Dr. Henry L. Bockus '17, educator and renowned gastroenterologist, with Dr. Francis J. Braceland '30, was the first of Jefferson's alumni trustees. Completing a three year term of office, Dr. Bockus addressed the business meeting in his "swan song," paradoxically titled in view of its extraordinary vigor. Driving tones carried Dr. Bockus's reflections on the past three years to an engrossed audience. When it was all said, the response was a spontaneous standing ovation. Reaction from Board Chairman James M. Large was another ovation for Dr. Bockus. "Tremendously important," he termed Dr. Bockus's contributions. In his reluctance to see him go, Mr. Large admitted to an ulterior reason: the cigar he had become accustomed to receiving from Dr. Bockus at each Board meeting. The Chairman's brief remarks, more projective than reflective, included announcement to the alumni of Jefferson's recent affiliation with the Franklin Institute. "Not a merger, an affiliation," he called the move, "bringing Jefferson into the relatively new field of biomedical engineering." News also was the appointment of E. D. Rosenfeld of New York and James J. Souder of Los Angeles to serve as hospital consultants in Jefferson's long range planning, and the selection of Harbeson Hough Livingston and Larson as architects.

President Peter A. Herbut came to the podium next, but felt that any attempt to follow the eloquent oratory of Dr. Bockus would be anticlimactic. He left his prepared speech undelivered. Instead he only expressed appreciation to the Board of Trustees and to that "great booster of Jefferson, Dr. Henry L. Bockus."

This was the first Business Meeting for Dean William F. Kellow. Looking from the administration's point of view, he saw the past year as a very productive one. Next year's freshman class will be the largest in the College's history (192), and its calibre, outstanding. The new curriculum takes a very positive approach, he reported, with a more elective offering. Emphasis is on not only the case method, "but also on the social and psychological problems that have been associated with illness." The attainment of fifth place by Jefferson sophomores in the National Boards the Dean called "one of the most exciting things that has happened in the past year." The challenges have not run out by any means, Dr. Kellow stressed, with one of the most difficult problems the obtaining and retaining of good faculty because, "there is no further resource to tap."

Back to the business of alumni business, Dr. Benjamin F. Haskell, Chairman of the Nominating Committee, announced the new officers of the Alumni Association as follows: President, Dr. Elmer H. Funk '47; President-Elect, Dr. Abraham E. Rakoff '37; Vice Presidents, Dr. Herbert A. Luscombe '40, Dr. Paul A. Bowers '37, Dr. Paul J. Poinsard '41, Dr. Thomas F. Nealon, Jr., '44S; Treasurer, Dr. John B. Atkinson '48; Secretary, Dr. Gonzalo E. Aponte '52. The outgoing President, Dr. McDermott, closed his year as President with mention of its great enjoyments and rewards. For his trophy case there was a momento, the gavel of the President's office, presented to him by Dr. Funk. With that, Dr. Funk assumed the presidency. His first official duty: adjourning the meeting. With a thump of the gavel, it was done.
the bockus report

This is my swan song. Last year at this time, we enjoyed listening to that thoughtful address of my esteemed colleague and friend, Dr. Francis Braceland, giving his impressions of Jefferson's activities, gleaned from his years of service on the Alumni Advisory Committee, and as your representative on the Board of Trustees. I am in complete accord with his comments and suggestions, so will avoid reiteration in the interest of time.

It has been a great pleasure to sit with this distinguished Board. They are nice people—bankers, jurists, industrialists, manufacturers, corporation executives, financiers, master merchants, educators, scientists—chaired in exemplary manner by Banker Jim Large. They are kind, smart, friendly, human and above all humane, otherwise they would not be devoting much of their time, talent and thinking to this institution that is concerned primarily with the alleviation of human suffering. I know of no similar body that is superior or even the equal of the Board of Jefferson. I have gained much, but contributed little by my association with them. Nevertheless, Alumni representation has been an important step—a substantial improvement in communications so necessary in a great institution like ours.

During these three years, I have observed the wheels of the Jefferson machine in rapid motion—an activity that has been responsible for what has been, in all likelihood, the most productive period in the history of this old institution. The accomplishments under the administration of a great president and dean—the team of Bodine and Sodeman, with the yeoman support of faculty and trustees, are now manifest. The tremendous expansion of the physical plant is approaching completion. Plans for educational expansion were on foot. Then followed the regime of Herbut—the union with Lankenau, the establishment of the School of Allied Health Sciences with its new dean (Dr. John Goldschmidt), the Graduate School, soon to have its separate dean, and now the Thomas Jefferson University. In addition, plans are being formulated for a close association with other scientific non-medical institutions to further broaden Jefferson’s scope of medical training and research, e.g., the recently announced affiliation with the Franklin Institute. Jefferson is fast assuming leadership in the area of medical science and education in its fullest sense. Herbut has had great vision, i.e., he has become presbyopic but certainly not in a senile way. And how fortunate he is to have at his side William Kellow, our new dean, who already has proved a worthy successor of Bill Sodeman, a not easy assignment.

Yes, this has been a thrilling experience. All Jefferson alumni may be proud of their Alma Mater.

I wonder if many of you realize the magnitude of the task ahead—do we appreciate what in many quarters is being asked of our medical schools? I shall mention a few items:

(1) Participation in community health problems; (2) Running poverty clinics; (3) Knitting together the health education of a geographic area with health-care delivery; (4) Being the focus for the “heart disease-cancer stroke complex”; (5) Providing continuous postgraduate education; (6) Assuming the major burden of medical research; (7) Trainingparamedical personnel; (8) Providing faculty to serve on committees, study sections, and commissions in Washington; (9) And in addition to all of these, training an ever increasing number of medical students.

So let us have mercy on our president, deans, faculty and trustees—but also let us hope they continue to maintain a proper balance of activities, and I am sure they will, keeping first things first—so that Jefferson will continue to turn out the “complete physician.”

One of the requisites for continued success and growth is that of assuring adequate communication between the separate divisions of the school. Until recently, one envisioned five such divisions or units in our institution, comprising:

(1) Administration: the president, deans, hospital and economic administrators—we can be proud of their achievements; (2) Educators and scientists (the faculty), the backbone of Jefferson—we have a dedicated faculty family; (3) Board of Trustees: expert overseers and directors of all activities—not the least of these, keeping us solvent; (4) Alumni Body: the product of past endeavors—salesmen of their Alma Mater; (5) Student Body: the target of our broadsides—(recent examinations attest to their superiority).

Now one must add two additional functional units: (a) School of Allied Health Sciences and (b) The Graduate School.

One of the great problems in our troubled world lies with communication—too often faculty, incomplete and absent. This is true in a medical family as it is elsewhere. Humans are sensitive—even physicians. Friction, discontent and dissipation of esprit de corps may be avoided often if all concerned in any activity, recent or old, are thoroughly informed.

At times, I wonder whether someone in the official family should be designated as communications officer
amongst these seven important divisions of the school—some one who could be in attendance at important councils of the various bodies referred to—some one who could be called upon to explain or communicate important actions and decisions and the reasons for them, someone to listen to gripes as they occur in the student body or elsewhere. These seven units are not competing—but their activities will surely overlap in many areas. However, they are members of the same team with the same objectives. For esprit de corps to be retained, good communication between groups is essential. Such does not exist in many large institutions. As we grow, let us continue to work together, let us not relinquish the family spirit—the feeling of loyalty to Jefferson.

I feel convinced that all of you feel strongly, as I do, that Jefferson's principal function will continue to be the creation of the “complete physician.” The complete physician, I believe, has five inherent qualities or attributes: the first two of these, I suspect, are inborn, i.e., the desire to alleviate suffering and to promote the spirit of brotherhood among men everywhere as well as to preserve the dignity of man. The third is the acquiring of clinical acumen, i.e., the achievement of clinical discipline and efficiency. The fourth is the love for and facility in, the teaching of the art and science to others. And finally the complete physician wishes to contribute to the discovery of new facts and phenomena, whether in the laboratory or at the bedside. These briefly are the attributes we should have ever in mind so that our graduates may indeed become “complete physicians.” To achieve this end a careful balance must be attained in curricular activities. A basic science faculty should continue to be intent upon teaching, as well as productive in research. A clinical faculty should comprise those who are steeped in the clinical disciplines of Sydenham and Laennec with talent and interest in teaching, as well as those who are primarily concerned with research. On the clinical side this is best achieved, I believe, by a continuing balance between absolute full-time, geographic full-time, and part-time faculty members. Our dean and faculty committees are now at work studying these important interrelationships.

A word to my colleagues of the Alumni. What Dr. Braceland said here last year concerning great care in the selection of faculty chairmen applies equally to the selection of the Alumni representatives on the Board of Trustees. These gentlemen of the Board are keen—they will appreciate hearing the Alumni point of view from knowledgeable persons. The Alumni body are concerned not only with the raising of funds, which they do exceedingly well, but they constitute a most important sales force for the institution. They should be kept fully informed. I should like to con-gratulate those who are responsible for the production of the Alumni publication. They are doing a superb job. The executive committee of the Alumni and their administrative personnel in the Alumni office deserve a vote of thanks and appreciation. I know of no more devoted Alumni group anywhere.

These have been a few of the thoughts that could be expressed within the limits of time, that have occurred to me, as I have returned to Jefferson from another campus. I suspect that what all of us are striving for day by day as individuals is the leading of useful and productive lives, hoping that as we near the home stretch we can feel satisfied that we have done our best; and it is hoped in so doing, we have preserved our sense of humor, in spite of handicaps and obstacles that beset us day by day, as did Richard Cardinal Cushing who recently expressed it this way:

I live out in Brighton, close to B. C.
And I'm just as healthy as I can be,
I have arthritis in both my knees and
when I speak, then I talk with a wheeze.
My pulse is weak and my blood is quite thin, but
I'm awfully well for the shape that I'm in.
I need arch supporters to strengthen my feet
My ankles are swollen, I'm white as a sheet.
I toss in my bed without sleep every night, no
wonder each morning I look like a sight.
My memory is failing, my head's in a spin, but
I'm awfully well for the shape that I'm in.
Diverticulitis is a word hard to spell, but
it's a disease from which I'll never get well.
Ulcers that keep me on a diet with Maalox
prevent me from resting in a funeral box.
The length of my sermons brings yawns or a grin,
but I'm awfully well for the shape that I'm in.
The moral is, friends, as this tale I unfold
that for you and for me who are fast growing old,
It's better to say "I'm fine" with a grin, than
to let people know the shape that we're in.

Or perhaps you may wish to hear the swan song in a more serious vein, as written by a graduate of Jefferson, Class of 1850:

I know the nite is near at hand
The mists lie low on hill and bay,
The autumn sheaves are dewless, dry.
But I have had the day.
Yes I have had, dear Lord, the day
When at thy call, I have the nite
Brief be the twilight as I pass
From light to dark, from dark to light.

That was "Vespera," written in anticipation of death by none other than Silas Weir Mitchell—who incidentally lived for twenty years after "Vespera" was written.

Silas Weir Mitchell — patrician, poet, novelist, physiologist, psychiatrist, neurologist, physician — one of the most illustrious graduates of Jefferson. May we continue to train the Mitchells.

So my friends, I have had the day—this appointment has enriched my life—I thank you for it.
1967—1968

1895—William E. Richards, December 31, 1967
1897—S. Ira McDowell, February 6, 1968
1900—Walton C. Swindells, May 5, 1967
1901—Benjamin F. Giesy, June 9, 1967
1902—Alvin J. Kistler, May 31, 1966
Harry S. Middley, October 2, 1967
1903—Ferdinand F. Fledderjohann, June 15, 1967
1904—Hunter H. Turner, January 18, 1967
1905—Sidney A. Conney, March 2, 1967
George F. Doyle, March 22, 1967
1906—George E. Boyer, June 9, 1967
William W. Cutter, January 22, 1967
George H. Gale, November 10, 1967
1907—James J. Crawford, April 8, 1967
William M. Johnston, February 5, 1967
1908—Augustine C. Luhr, April 1, 1967
Howard C. Millick, February 1, 1968
Harry W. Zech, January 20, 1967
Oscar L. Zelle, July 9, 1967
1909—Harold L. Foss, August 11, 1967
L. Samuel Sica, March 21, 1967
James H. Wilson, November 8, 1966
1910—Isaac Alexander, May 10, 1967
Clement A. Fogerty, January 19, 1967
Hamilton W. McKay, July 7, 1967
Harry H. Southwick, July 10, 1967
1911—J. Elmer Croop, September 5, 1967
Leslie H. Ewing, October 25, 1967
Sidney A. Quinn, December 2, 1967
1912—Albion E. Brant, October 2, 1967
Daniel Hunt, January 12, 1968
Thomas F. Mullen, November 12, 1967
Charles C. Ryan, April 20, 1967
1913—Roscius I. Downs, May 6, 1967
Warren W. Inkrote, February 27, 1967
1914—Charles J. Martin, June 22, 1967
1915—William K. Allsup, March 1, 1967
Melvin M. Hunt, October 13, 1967
1916—Henry B. Boley, October 22, 1967
Israel Jay Carp, April 5, 1967
George H. Faggart, August 18, 1967
George P. Meyer, May 6, 1966
John E. Newhouse, July 21, 1967
Rocco M. Nittoli, February 10, 1968
Denis E. Szabo, September 24, 1967
1917—James F. Carrell, August 30, 1967
Charles A. Hensley, April 10, 1965
George M. Huff, March 7, 1967
William C. Johnson, May 2, 1967
W. Harvey Perkins, October 22, 1967
Albert N. Redelin, January 23, 1968
William J. Thudium, March 6, 1967
Junius R. Vann, Jr., January 18, 1967
1918—Duncan W. Holt, December 16, 1967
1919—Dwight C. Hanna, Jr., August 4, 1967
Emery C. Herman, September 16, 1967
Harry W. Weest, January 24, 1968
Royal W. Williams, August 4, 1967
1920—Ralph E. Brooks, November 11, 1967
V. Earl Johnson, March 13, 1967
Henry B. Moore, April 29, 1966
1921—Bruce L. Fleming, May 21, 1967
David Haussmann, April 7, 1967
Walter S. Love, October 11, 1967
George B. Morrison, June 22, 1967
Leo D. O’Donnell, December 6, 1967
E. Lester Small, October 7, 1967
Paul P. Warden, December 13, 1966
1922—Hayward J. Blackmon, February 6, 1967
Andrew P. Newcomb, October 26, 1967
Ralph M. Tandowsky, January 8, 1968
1923—Graham B. Barefoot, September 11, 1967
Louis W. Cofrances, December 6, 1966
Adolph Finn, March 17, 1967
Henry Poiril, October 27, 1967
1924—Jean L. E. Brindamour, March 24, 1967
Ray I. Frame, July 25, 1967
Albert C. Haas, July 21, 1967
John S. Silvis, Jr., June 11, 1967
1925—John H. Dugger, February 3, 1968
1926—Charles Hyman, April 3, 1967
Bernard A. Hirschfield, July 7, 1967
Wilbur H. Miller, July 11, 1967
Arno E. Town, December 12, 1967
1928—William M. Fliegel, June 1, 1967
Charles L. Luckett, January 20, 1968
1929—Leo Hymovich, October 23, 1967
Benjamin Luka Li, April 17, 1967
Ralph J. Petrucci, January 19, 1968
1930—John F. Blatt, November 26, 1967
Samuel Candel, August 13, 1967
Charles L. Munson, January 21, 1968
1931—Walter J. Hendricks, January 25, 1967
James M. Lyerly, February 6, 1967
Eugene M. Patella, January, 1966
1932—Webster H. Brown, May 5, 1967
Claude C. Dodson, May 21, 1967
Francis E. Goodman, March 3, 1967
George C. Hohman, November 24, 1967
1933—Michael R. Denny, April 17, 1967
Ralph E. Fennell, February 4, 1967
Leo Koretsky, January 2, 1968
1934—Stanley J. Sutula, August 18, 1967
1935—Bernard I. Sherman, February 23, 1967
1936—John S. Fetter, August 26, 1967
William L. Share, December 12, 1967
1937—Eugene L. Anchors, May 5, 1967
Joseph A. Ralston, April 9, 1967
1938—Curtis F. Henning, September 26, 1967
Leonard K. Supple, July 31, 1967
Harry B. Underwood, January 1, 1968
1939—Walter S. Price, August 10, 1967
Joseph T. Salvatore, January 18, 1968
1940—John H. Morrison, August 13, 1967
1941—Oscar Creech, Jr., December 23, 1967
Joseph L. Nosal, June 14, 1967
William C. F. Smith, November 19, 1967
William L. Welch, November 14, 1967
1943—Thomas J. Langan, November 25, 1967
1949—Robert W. Taylor, September 19, 1967
1951—David M. Robinson, September 17, 1967
1952—Bert W. Brooks, May 18, 1967
William R. Crawford, August 23, 1967
1957—John P. Ferri, Jr., September 1, 1967
1958—John A. Craig, June 1, 1967
1959—Louis B. Swisher, Jr., February 13, 1968
1962—Norman Lindenheim, Jr., December 1, 1967
Slim, gray suited Elmer H. Funk, Jr., walks into a room with a command of the scene. His brisk manner, never brusque, exudes a vigorous efficiency. Apply this to the coming year for the Alumni Association and you can expect some action. "I think Jefferson's role in and its contributions to the future health of our country and to the medical profession often are underestimated. In the past and today Jefferson has assumed a greater responsibility for educating physicians than has any other American medical school," Dr. Funk says. "I am confident that the plans for Jefferson's future, including that of becoming a medical university, will assure that she continues her leadership in medical education."

Dr. Funk came to Jefferson with a B. S. from Haverford College and earned his M. D. in 1947. After a rotating internship at Bryn Mawr Hospital he began a residency in internal medicine and then in cardiology at Pennsylvania Hospital at Eighth and Spruce Streets in Philadelphia. A portion of this time was spent at the United States Army Hospital at Fort Campbell, Kentucky, as a Ravdin Plan Resident. His final year and a half on the house staff at Pennsylvania Hospital was as a Stroud Fellow in Cardiology. An academic appointment as Coordinator of Clinical Research with Dr. Leandro Tocantins at Jefferson came the following year. Dr. Funk currently is Assistant Professor of Clinical Medicine on the faculty.

Clinical research and administration in the pharmaceutical industry have been the focus of Dr. Funk's professional attention since 1953. He started as a staff member in the Medical Division of Wyeth Laboratories in Radnor, Pennsylvania, and in 1957, became Medical Director of the Ives Cameron Company. He came to Merck Sharp & Dohme Research Laboratories in 1959 and is now Associate Director of Advanced Clinical Research in Medical Affairs there.

Dr. Funk has been Chairman of the Publication Committee of the Alumni Association for the past two years and a member of the Executive Committee since 1952.

A member of eleven professional societies, Dr. Funk enjoys non-professional pursuits also. These range from dwarf fruit trees to old patent medicine bottles, but figure skating, and in particular, ice dancing, is his favorite recreation. He was a familiar figure at the United States Figure Skating Championships last winter, not on the ice this time, but assisting with public relations and music for the competition.

Dr. Funk is the son of Jefferson alumnus Dr. Elmer H. Funk, class of 1908. Dr. Funk, Sr., was Sutherland M. Prevost Professor of Therapeutics at Jefferson and in 1931, was President of the Alumni Association. The new President is married to the former Martha McComb Snader. They have a daughter, Ellen.
Abraham E. Rakoff, M.D., '37
President-Elect

Herbert A. Luscombe, M.D., '40
Vice President

Paul A. Bowers, M.D., '37
Vice President

Paul J. Poinsard, M.D., '41
Vice President

Thomas F. Nealon, Jr., M.D., '54
Vice President

John B. Atkinson, M.D., '48
Treasurer

Gonzalo E. Aponte, M.D., '52
Secretary

Dr. Rakoff is Professor of Obstetrics and Gynecology and Professor of Medicine at Jefferson. He has served the Alumni Association as Chairman of the Fathers' Day Committee since the program's inception five years ago. Dr. Rakoff belongs to eleven professional societies, is co-author of two books, and is a past President of the American Society of Cytology.

Dr. Luscombe, Professor of Dermatology and Head of the Department at Jefferson, joined the faculty in 1949 and by 1959 had progressed to the Dermatology Chair. In the Alumni Association, Dr. Luscombe has served as Vice President, Treasurer, Class Agent and member of the Executive Committee. Son Herbert J. Luscombe becomes a Jefferson M.D. on May 31.

Dr. Bowers has been practicing obstetrics and gynecology in Philadelphia since 1946, and is an Associate Professor at Jefferson. In 1959 he received the Alumni Achievement Award of Bucknell University. As a Jefferson alumnus, one post has been as Chairman of the Special Committee for Nomination of an Alumni Trustee during the present election.

Dr. Poinsard is in the private practice of psychiatry and psychoanalysis. Clinical Professor of Psychiatry at Jefferson, he directs the Postgraduate Seminars in Psychiatry. Last year Dr. Poinsard served as President of the Philadelphia Psychiatric Society. He is a former Chairman of the Commission on Mental Health of the Pennsylvania Medical Society.

Dr. Nealon made news about a year ago when he and some colleagues, including Dr. John H. Gibbon, Jr., '27, discovered a process for extending the shelf-life of collected blood. Before coming to Jefferson in 1949 (he is now Professor of Surgery), he was Director, Service Section, Medical and Scientific Department of the National Office of the American Cancer Society.

Dr. Atkinson enters his third term as Treasurer. A former faculty member at Jefferson, he is now at Hahnemann Medical College as Associate Professor of Clinical Medicine. Dr. Atkinson is an internist specializing in hematology and is Director of Hematology Clinics at Lankenau, Fitzgerald Mercy and Misericordia Hospitals. He edited the 1948 CLINIC.

Dr. Aponte, new Secretary, is also Chairman of the Publications Committee and Class Agent for 1952. He is at Jefferson as Professor of Pathology and Head of the Department and has received the Lindback Award for Distinguished Teaching. In November 1967 he was named Clinical Scientist of the Year by the Association of Clinical Scientists.
Jefferson Medical College and Medical Center has affiliated with The Franklin Institute. Under the cooperative agreement, the laboratories, personnel, instruments and equipment of both institutions will be pooled, providing a broader base for scientific research for both graduate and undergraduate education. The agreement was effective with the announcement on February 27.

James M. Large, Chairman of Jefferson's Board of Trustees, and Dr. Wynn Laurence LePage, Chairman of The Franklin Institute's Board of Managers, issued a joint statement pointing out that combining Jefferson's facilities in life and health sciences with Franklin's research and education facilities in the physical sciences will strengthen both institutions. The affiliation will bring into being a new science resource with the capabilities for advanced medical and scientific research. "A national model," Dr. LePage termed the affiliation, "perhaps to be emulated by other physical and life science institutions in other metropolitan areas." Graduate studies leading to Master of Science and Doctor of Philosophy degrees and the education of students in medicine, physical sciences and in the paramedical field will be undertaken by the affiliation. On this Mr. Large remarked, "Graduate degrees in biomedical engineering are structured to make for easy and exact communication between the medical scientist and the physical scientist who must understand each other and cooperate to meet the increasing demands of instrumentation in medical care." Until Franklin may issue its own degrees, all undergraduate and graduate degrees for work done on joint programs will be granted by Jefferson. Commenting on the agreement, Dr. Peter A. Herbut, President of Jefferson, had this to say: "An affiliation... will enable the combination to become a leader in the rapidly burgeoning, extremely important, newly emerging, hybrid specialty commonly referred to as Bio-medical Engineering... In today's technologically complex world, graduate education is the backbone of every progressive nation. Jefferson has had a Graduate School leading to a Master of Science and a Doctor of Philosophy degree since 1949... The addition of chemistry, engineering, mathematics, and physics by The Franklin Institute will enable Jefferson to broaden its scope in graduate education to include not only the physical sciences listed but to combine these with the medical sciences into the aforementioned Bio-Medical Engineering program." The affiliation is a step toward attainment of university status for Jefferson by its provision of the basic natural sciences and accompanying library facilities. Community reaction was heard in an editorial in The
Philadelphia Inquirer, which praised "this evidence of continued intellectual vigor and pioneering leadership among members of its scientific community. There is every reason to believe that the new relationship will be enduring and incalculably productive."

Jefferson and Franklin are two of the nation's oldest science institutions, each dating from 1824. Under the affiliation separate lines of management, operation and financial obligations will be maintained. There will be an exchange of one trustee by the Boards of each institution and academic cross appointments will be encouraged.

The Franklin Institute has as its purpose the promotion of the mechanical arts in honor of Benjamin Franklin. A non-profit organization, its educational activities are centered in the Institute's Science Teaching Museum and Fels Planetarium. Research activities are conducted at the new $5 million Research Laboratories in Philadelphia and at the Bartol Research Foundation in Swarthmore, Pa. The Institute's Science Library is one of the most complete collections in the world.

library grant
Announcement came in February that Jefferson has been allotted $1.7 million in federal funds toward the construction of the Scott Library-Administration Building. Administered by the National Library of Medicine of the Department of Health, Education and Welfare, the grant comes from $10 million allocated for medical library construction by the Budget Bureau. Jefferson applied for $1.7 million of these funds. With a high priority, it was assured the full amount requested. Total cost of the building will be $4,003,599. The financing of the remaining portion of the cost will be through Jefferson's building fund drive and a bequest from the late Samuel Parsons Scott, after whom the building is named.

The structure will serve the dual function of library and administration headquarters. Its seven stories will occupy the space on the south side of Walnut Street, opposite the present College building. Nearly complete is its neighbor to the east, the Orlowitz Residence Hall.

children and youth center
Jefferson is concerning itself with the medical care of children living in the urban environment. January 13 marked a tackle on the problem with the opening of the Jefferson Medical College and Medical Center Children and Youth Center. Located at 1322 Fitzwater Street in South Philadelphia, the Center will serve between 1,000 and 1,500 children and youth under 19 during its first year. In the future the number will likely reach 4,000.

The Children and Youth Center fits into a cooperative comprehensive continuing health project in which the five Philadelphia medical colleges are exchanging information. Hahnemann, Temple University, University of Pennsylvania and Woman's Medical College have a program directed from the pediatrics department. Dr. Robert L. Brent, Professor of Pediatrics and Head of the Department, serves Jefferson in this capacity. Commenting on the project, known as Comprehensive Care for Children (Comcare), The Evening Bulletin in an editorial noted: "It is fitting that Philadelphia, one of the great medical centers of the world, should be the national leader in this important phase of raising healthy children."

Dr. Edwin O. Harrington, who holds faculty appointments in pediatrics, preventive medicine and psychiatry, is Director of the program. Describing the operation of the new facility, Dr. Harrington said: "The basic unit of the Center is a pediatrician (the leader of the team), a child psychiatrist, a nurse, a social worker and a public health nurse. Their threefold task will be to diagnose the child, meet his immediate needs and then help his family begin the process leading to a program of continuous care and supervision of the child."

correction
In a feature on the Board of Trustees the winter ALUMNI BULLETIN inadvertently referred to R. George Rincliffe as former Chairman of the Board at Philadelphia Electric Company. Mr. Rincliffe's correct title is Chairman of the Board.
admissions director
Progress in the development of Jefferson's School of Allied Health Sciences made news recently when Lawrence Abrams was named Director of Admissions and Registrar. Dr. John W. Goldschmidt, Dean of the School, in announcing the appointment said that Mr. Abrams would also serve as Planning Director.

Mr. Abrams received a B. S. in economics from The Pennsylvania State University where he was President of the student body. He earned a Master of Science degree in counseling psychology from Temple University. He has held faculty positions at Temple and at Drexel Institute of Technology in Philadelphia. In July, 1965, he became Coordinator of the Education Office at Jefferson Medical Center. In August, 1965, he became Director of Admissions and Registrar. Dr. John W. Goldschmidt, Dean of the School, in announcing the appointment said that Mr. Abrams would also serve as Planning Director.

new post for alumnus
Associate Dean Dr. Samuel S. Conly is Jefferson's new Director of Admissions, appointed by Dean William F. Kellow on January 27. Dr. Conly is a 1944S alumnus of Jefferson and a Phi Beta graduate of Lafayette College.

Dr. Conly's job began with the selection of students for the largest entering class in Jefferson's history, the September 1968 freshmen. By the closing date more than 2,700 applications had been received; 192 students will be accepted. This figure represents a ten per cent increase in enrollment over the past two years, in line with the expansion requested of all medical schools by the United States Surgeon General. Jefferson has responded to the request several years earlier than the proposed target date.

A faculty member since 1947, Dr. Conly entered the Dean's Office in 1956. He has a particular interest in space medicine and is Jefferson's Coordinator for MEND (Medical Education for Defense). He serves as Chairman of the Medical Student Recruitment Committee of the Philadelphia County Medical Society, Chairman of the Student Housing Committee and a member of Sigma Xi, the national honorary society.

A member of the Executive Committee of the Alumni Association, Dr. Conly also serves on the Annual Giving Committee.

sesquicentennial award
Dr. William A. Sodeman, Dean, Emeritus, of Jefferson, received the Sesquicentennial Award of the University of Michigan in January. One of three chosen for the award, Dr. Sodeman was cited as a "Versatile International Medical Consultant" and as Dean of Jefferson Medical College. He is a 1931 graduate of the University of Michigan Medical School.

neilson elected
Harry R. Neilson, on Jefferson's Board as an exchange trustee from Lankenau Hospital, has been elected President of the Board of Trustees at Lankenau. On the Jefferson Board for a year now, Neilson, 40, has been a trustee at Lankenau since 1957. For the past four years he has served as Vice President and Assistant to the President of the Board.

continuing education
Continuing Education news centers on the symposium, "Advances in Gynecologic Endocrinology," held at Jefferson April 19-20. Designed to bring the practicing physician up to date on gynecologic endocrinology, the program presented recent advances in the field in an integrated form. The correlation between basic sciences, clinical investigation and practice were stressed and current concepts in genetics, neuroendocrinology and steroid chemistry were reviewed.

On the program were members of four of the nation's medical school faculties: Dr. C. D. Christian, Duke University School of Medicine, Dr. David Charles, Boston University School of Medicine, Dr. Donald Goss, Vanderbilt University School of Medicine, and Dr. Joel Rankin, Western Reserve University School of Medicine. Jefferson staffed the symposium with eight faculty members. Program Chairman Dr. Alvin F. Goldfarb planned the sessions with Dr. John H. Killough, Assistant Dean for Continuing Education.
faculty notes

biochemistry

Dr. Paul H. Maurer, Professor of Biochemistry and Head of the Department, and Dr. Paul Pinchuck, Assistant Professor of Biochemistry, presented a paper entitled “Species and Strain Selectivity of Immune Competency” at the Mid-winter Conference of Immunologists in Houston, Texas, January 27-30.

medicine

Dr. Allan J. Erslev, The Thomas Drake Martinez Cardeza Research Professor of Medicine, returned to Jefferson in January after five months on a Guggenheim Fellowship at the University Institute for Experimental Medicine in Copenhagen, Denmark. In addition to carrying out studies on the control of red cell production in bleeding anemias and hemolytic anemias, he gave a number of lectures to the students and faculty of the University of Copenhagen and the University of Aarhus in Denmark, and the University of Freiburg, West Germany.

Dr. Laurence G. Wesson, Jr., Professor of Medicine, is the new Director of the Dialysis Unit. Dr. Wesson replaces Dr. James E. Clark, Assistant Professor of Medicine, who accepted a post as Chief of Medicine and Director of the Division of Nephrology at Crozer Chester Medical Center.

Dr. Abraham Cohen, Honorary Assistant Professor of Clinical Medicine, gave two lectures in Prague, Czechoslovakia, at Charles University recently. The occasion was a celebration in honor of the 70th birthday of Dr. Frantisek Lenoch.

Dr. Sandor S. Shapiro, Assistant Professor of Medicine, was the opening speaker at the American College of Chest Physicians Postgraduate Course on Etiology, Diagnosis and Treatment of Thromboembolism on March 28. His topic was “Blood Coagulation and Significance of the Hypercoagulable State.” Other papers presented by Dr. Shapiro were “Biological Activation of Radioactive Human Prothrombin” at the Federation Meetings in Atlantic City on April 20, and on May 5, “Congenital Dysprothrombinemia: An Inherited Structural Disorder of Human Prothrombin,” at the meetings of the American Society for Clinical Investigation.

ophthalmology

Dr. Thomas D. Duane, Professor of Ophthalmology and Head of the Department, addressed a group of scientists-astronauts at the NASA Manned Spacecraft Center in Houston, Texas, on December 7. His lecture, “Visual Apparatus,” is considered part of the academic training of the newest group of astronauts.

Dr. Herbert E. Kaufman was a guest of the Department of Ophthalmology at Jefferson on February 21, under the Undergraduate Visiting Professor Program. Dr. Kaufman is Professor and Chairman of the Department of Ophthalmology at the University of Florida in Gainesville. Dr. Kaufman addressed the third year students during his visit and conducted conferences on external ocular diseases for the ophthalmology residents and staff.

Dr. Edwin U. Keates, Associate in Ophthalmology, delivered a paper on “Recent Techniques in Examination of the Optic Nerve” at the annual Flower Ophthalmological Seminar of the New York Medical College, held in Aruba, West Indies, on January 29.

orthopaedic surgery

Dr. John J. Gartland, Assistant Professor of Orthopaedic Surgery, has been appointed to the Orthopaedic Advisory Committee to the Division of Maternal and Child Health of the Commonwealth of Pennsylvania. On July 1, he will take up new duties as Chief of Orthopaedic Surgery at Lankenau Hospital.

otolaryngology

Dr. Fred Harbert, Professor of Otolaryngology and Head of the Department, is Vice President of the American Laryngological, Rhinological, and Otological Society for the Eastern Division for 1968.

pathology

Dr. Gonzalo E. Aponte, Professor of Pathology and Head of the Department, attended the meetings of the Latin American Congress of Pathology held in San Juan, Puerto Rico, in December and gave a paper together with Dr. John J. Capelli and Dr. Lawrence G. Wesson, Jr., of the Department of Medicine, entitled “Characterization and Source of Renin in Anephric Humans.”
pediatrics

Dr. Robert L. Brent, Professor of Pediatrics and Head of the Department, presented a paper on "Environmental Causes of Human Malformations" and another on "Clinical Implications of Intrauterine Growth Retardation" at the annual National Medical Meeting in Guatemala during November. Dr. Brent participated in the program of the annual meeting of the American Association for the Advancement of Science in New York City on December 28. Other papers which Dr. Brent has delivered recently include "Environmental Causes of Congenital Malformations," Wilmington Medical Center, Wilmington, Delaware, on January 10; "Experimental and Clinical Aspects of Intrauterine Growth Retardation," Second International Workshop in Teratology, Kyoto, Japan, on April 5; and "Evaluation of Developmental Effects and Teratogenicity of Drugs," 59th Ross Conference on Pediatric Research, Dorado Beach, Puerto Rico, May 5-7. Dr. Brent also participated in the Teratology Course of the Joint Annual Meeting of Congenital Anomalies Research Association of Japan and the Japanese Human Genetics Society in Tokyo, Japan, on April 8.

Dr. Irving J. Olshin, Associate Professor of Pediatrics, and Dr. Brent are the guest editors of the May issue of the Pediatric Clinics of North America which reviews recent clinical advances.

Dr. Mary Louise Soentgen, Assistant Professor of Pediatrics, has been awarded a grant from Abbott Laboratories, Research Division, to conduct an investigation on the treatment of acid-base disorders. Last fall she served as a consultant for the "Symposium on Fluid and Electrolytes," held at the Abbott Laboratories in Waukegan, Illinois.

pharmacology

Dr. Julius M. Coon, Professor of Pharmacology and Head of the Department, participated in a joint meeting of the Food and Agriculture Organization and the World Health Organization Expert Committees on Pesticide Residues, held in Rome, Italy December 4-11.

Dr. Coon, Dr. Anthony J. Triolo, Assistant Professor of Pharmacology, and graduate students Steven Bass and Robert Vukovich attended the annual meeting of the Society of Toxicology in Washington, D.C., on March 4-6. A paper entitled "Effect of DDT on Parathion in Mice," co-authored by Mr. Bass and Dr. Triolo, was presented by Mr. Bass.

preventive medicine

Dr. E. Harold Hinman, Professor of Preventive Medicine and Head of the Department, has been appointed to a three year term on the Committee on General Preventive Medicine of the Council on Graduate and Undergraduate Education and Training of the American College of Preventive Medicine.

Dr. Abram S. Benenson, Professor of Preventive Medicine, delivered the graduation address to the Third Global Medicine Course at the Walter Reed Army Institute of Research on December 22.

Dr. Irwin L. Stoloff, Assistant Professor of Preventive Medicine, a member of the American College of Chest Physicians, is physician in charge of the Central Philadelphia Chest X-Ray Survey Unit.

psychiatry

The Philadelphia Association for Psychoanalysis held a scientific meeting to honor the memory of Dr. Robert Waelder, Professor of Psychiatry, on March 22, at the Philadelphia County Medical Society. The program included readings of some unpublished letters and an unpublished paper of Dr. Waelder and a critique of his last book, Progress and Revolution. Dr. Samuel A. Guttman, Professor of Psychiatry, spoke on "Some Aspects of Robert Waelder."

Dr. Floyd S. Cornelison, Professor of Psychiatry and Head of the Department, held a presentation on "The Use of Films in Clinical Psychiatry," in El Paso, Texas, at the annual meeting of the Texas Association for Mental Health recently.

Dr. Paul J. Poinsard, Clinical Professor of Psychiatry, has been appointed Chairman of the Committee on Mental Health of the Pennsylvania Medical Society.

Dr. Claus B. Bahnson, Associate Professor of Psychiatry, has been selected as Editor of Prophylaxe, a journal published in Heidelberg, Germany, on preventive medicine and social hygiene. At the 39th annual meeting of the Eastern Psychological Association, held April 18-20, in Washington, D.C., Dr. Bahnson delivered the paper, "Long Term Effect of Perceived Parental Attitudes on Somatic Disease in Cancer, Myocardial Infarction, and Hemophilia."

Dr. Abraham Freedman, Associate Professor of Clinical Psychiatry, served as Regional Editor for the recently published edition of the Annual Survey of Psychoanalysis.
Dr. Ivan Boszormenyi-Nagy, Associate Professor of Psychiatry, was a panel member discussing “Violence and Family Patterns” at the Regional Conference of the American Psychiatric Association in New York City in November.

Dr. Kurt J. Wolff, Associate Professor of Psychiatry, served as Chairman of a workshop on “Group Psychotherapy with Older People,” at the 25th annual conference of the American Group Psychotherapy Association, held January 26, in Chicago.

Dr. Robert S. Garber, Assistant Professor of Clinical Psychiatry, gave the Annual Lecture on History and Philosophy of Medicine to the combined students of J. Hillis Miller Health Center and the University of Florida Medical School on February 2, in Gainesville, Florida. His topic: “Two Philadelphia Psychiatrists and a Theory of American Psychiatry.” Dr. Garber has been nominated for a fourth term as Secretary of the American Psychiatric Association.

Dr. Daniel Lieberman, Assistant Professor of Clinical Psychiatry, was appointed a consultant to the National Institute of Mental Health in December, and in January was reappointed to the American Psychiatric Association Committee on Psychiatric Nursing.

Dr. Warren J. Muhlfelder, Assistant Professor of Clinical Psychiatry, is the newly appointed Chairman of the Committee on Psychiatric Research of the Pennsylvania Psychiatric Society.

Dr. Gaston G. Trigos, Instructor in Psychiatry, attended the Winter Scientific Meeting of the Association of Physicians of the Ohio Department of Mental Hygiene and Correction, held in January at the Cleveland Psychiatric Institute, and presented the paper, “What Is Community Psychiatry?”

**radiology**

Dr. Philip J. Hodes, Professor of Radiology and Head of the Department, was awarded the Gold Medal of the Inter-America Congress of Radiology at its annual meeting in Montevideo, Uruguay. The Gold Medal is the highest honor awarded by this organization, which includes radiologists from North, Central, and South America.

Dr. Jack Edeiken, Professor of Radiology, with Dr. Hodes has recently published a book, *Roentgen Diagnosis of Diseases of Bone*, which has received wide favorable recognition throughout the world. The work is the result of more than five years of concentrated effort.

Dr. Robert O. Gorson, Professor of Radiology, has been named President-Elect of the American Association of Psychiatrists in Medicine. Dr. Gorson also served as Chairman of a national committee which recently completed a report requested by the National Council on Radiation Protection and Measurements on medical x-ray and gamma ray protection for energies up to 10 MEV.

Dr. A. Edward O’Hara, Professor of Clinical Radiology, recently installed an x-ray unit immediately adjacent to the Pediatric Ward, enabling him to examine premature infants, healthy newborn infants, and any very ill infants who previously were examined only with the greatest difficulty because of the risks involved in transporting them from one section of the hospital to the X-ray Department.

Dr. Corinne Farrell, Instructor in Radiology, was invited to present her findings in osteosarcoma at the International Bone Symposium, held in England on April 1-6.

Dr. Norman R. Silverman, Resident in Radiology, was named a semi-finalist in the Student American Medical Association Exhibition dealing with “Television Fluorodensitometry,” held in Detroit, Michigan, April 24-27.

**surgery**

Dr. John Y. Templeton, III, The Samuel D. Gross Professor of Surgery and Head of the Department, discussed the subjects, “The Surgical Treatment of Coronary Artery Disease” and “Carcinoma of the Lung,” at the Postgraduate Program of the University of North Carolina School of Medicine during February.

Dr. Charles Fineberg, Assistant Professor of Surgery, has been appointed Senior Attending Surgeon and Director of Thoracic and Cardiovascular Surgery at the Albert Einstein Medical Center, Southern Division, in Philadelphia. At present Dr. Fineberg is Director of Clinical Cancer Training and Director of the Tumor Advisory Group at Jefferson. He is a Diplomat of the American Board of Surgery and the American Board of Thoracic Surgery.

**urology**

Dr. Paul D. Zimskind, The Nathan Lewis Hatfield Professor of Urology and Head of the Department, discussed “Neurogenic Bladder Dysfunction” on WCAU-TV’s Seminar for Physicians on February 2.
1908
Dr. Marshall C. Rumbaugh, 10 W. Dorrance St., Kingston, Pa., is a member of the Qualification Council of the United States Section of the International College of Surgeons.

1909
Mrs. Christopher S. Barker, 711 Broad St., New Bern, N. C., writes that her two sons are living nearby in New Bern. Rear Admiral C. S. Barker, Jr., Retd., and Dr. Charles T. Barker each have three children.

1913
Dr. William J. Goetz closed his office door on January 20, 1968. Behind it were 55 years of medical practice in Reading, Pa. The Reading Eagle interviewed the town’s leading physician for a feature story on his retirement. “A visit to my office cost 35 cents,” Dr. Goetz recalls of the early days. “The patient even got medication for that price.” Dr. Goetz made cardiology his specialty. He was appointed Chief in Cardiology at the Community General Hospital in 1946 and held the position for fourteen years. He studied under Dr. Paul Dudley White at Massachusetts General Hospital.

Dr. Goetz has been active in professional and community affairs. He doesn’t plan to leave the working world entirely. With Mrs. Goetz he has moved into the Masonic Home in Elizabeth-town, Pa. “A wonderful institution,” he calls it and he plans to do some work in the hospital there. He has often been heard to say, “I would rather wear out than rust out.”

Dr. Jacob W. Walker, 2401 Pennsylvania Ave., Phila., spent the winter at home in Philadelphia with weekly painting sessions at the Museum of Art.

1914
Dr. Holbert J. Nixon, 805-6 Gallatin National Bank Bldg., Uniontown, Pa., is keeping busy with his obstetrics practice.

Dr. Karl B. Pace, P. O. Box 620, Greenville, N. C., has past the 53 year mark in his practice. There are two more Jeff graduates in the family, son Dr. Karl B. Pace, Jr., ’47, and Dr. Charles T. Pace ’49. “We love to hear from the old crowd at Jefferson.”

1916
Dr. Peyton R. Greaves, 4222 Council Circle, Jackson, Miss., keeps an active practice—along with raising cotton, corn, and soybeans on his two thousand acre farm.

Dr. John W. Green, 732 Morningside Dr., San Antonio, Tex., has been retired for almost four years. “Mrs. Green and I are enjoying good health and have done quite a bit of traveling. Keeping active at home.”

1918
Dr. Jenaro Barreras, Box 205, Caguas, P. R., has been General Surgeon at Caguas Municipal Hospital since 1927 and was cited for his services recently in ceremonies at the hospital. The Puerto Rican Medical Association has honored Dr. Barreras also, with a Diploma of Merit. He and Mrs. Barreras have four daughters and ten grandchildren.

Dr. David R. Brewer, R. R. 1, Clear Spring, Md., will be on hand for the 50th reunion.

Dr. Charles O. Bristow, 217 E. Washington St., Rockingham, N. C., has completed his 44th year of general practice in the Rockingham area. Dr. Bristow has plans to attend the 50th reunion this year.

Dr. Perkins
work still going on. Dr. and Mrs. Perkins reside at 334 Pine St., South Weymouth, Mass.

DR. WILLIAM C. WILENTZ, 188 Market St., Perth Amboy, N. J., was re-elected President of the Board of Directors of the Garden State Hospitalization Plan in January. In December he was elected to a third term as Vice President of the American Academy of Compensation Medicine. Dr. Wilentz is Chief Medical Examiner of Middlesex County, N. J.

DR. GEORGE J. WILLAUER, 6129 Greene St., Phila., is serving as President of the Pennsylvania Society of Thoracic Surgeons. Dr. Willauer's predecessor is classmate Dr. W. Emory Burnett.

1924

DR. AARON CAPPER, 10501 Wilshire Blvd., Los Angeles, and Mrs. Capper are enjoying good health "and the privilege of being close to our two sons and seven grandchildren. Our son Stanley is Assistant Professor of Ophthalmology at UCLA. Bob is practicing psychiatry in Camarillo. I conduct Child Health Conferences for the Los Angeles County Board of Health."

1925

DR. ALF C. JOHNSON, Country Club Addn., Great Falls, Mont., practices on a limited scale now and is anticipating retirement in a few years. "We have three children in college, two of whom will be postgraduates next year, and one younger in high school."

1926

DR. NORMAN H. GEMMILL, Stewarts-town, Pa., is in partnership with his son Dr. Reginald B. Gemmill '55. "A rural practice and working as hard as ever after 40 years. Hope to reach the 50 years club. Nothing spectacular happens in a life like mine except the joy and satisfaction one gets from serving others. Two recent grandchildren make a total of eight."

1927

DR. ROMUALDO R. SCICCHITANO was elected a member of the Association of Master Knights of the Sovereign Military Order of Malta in the U. S. A. by the Association's Board of Founders in December. Dr. Scicchitano is in general and thoracic surgery practice with his son, Dr. Leon P. Scicchitano '58, at 710 Centre St., Ashland, Pa.

1928

DR. MEYER Q. LAVELL, 4169 6th Ave., #202, San Diego, Calif., was expecting a visit from DR. TED GRUNDFAST and his wife at last writing. "Their daughter, Lois, visited us in San Diego last June on her way to Los Angeles for internship at UCLA."

DR. JOSEPH A. SCARANO, 1432 S. Broad St., Phila., has two Jefferson sons—Dr. Victor R. Scarano '61, who finishes his surgery residency at Alabama Medical Center in July, and Dr. Joseph J. Scarano '59, who completes his two year term of service at Fitzsimmons General Hospital in Denver, Colo., at the same time.

The Griffith Lectureship

The Los Angeles County Heart Association initiated a scientific lecture-ship in January, in its increasing effort to stimulate intellectual contributions to scientific knowledge. The man the Association chose to honor with the lecture dedication was Dr. George C. Griffith '26. The Annual George C. Griffith Scientific Lectureship is named for a cardiologist whose contributions to the Los Angeles medical and scientific community have earned him a leader's reputation. The occasion for the lectureship announcement was a testimonial dinner where the dedicatory address was given by Arthur G. Coons, President, Emeritus, of Occidental College. Of Dr. Griffith the speaker said: "It is the person for whom respect as well as renown, eminence, and distinction for nobility of soul as well as for performance of professional duty, and who manifests a warmth towards his fellow men communicated to his contemporaries, for whom men reserve the phase 'a great person.' I unhesitatingly name George Griffith such a one." The dinner was attended by 850 people.

One of Dr. Griffith's chief efforts has been the proliferation of medical knowledge. He has been President of both the Los Angeles and the California Heart Associations, President of the American College of Cardiology and the American Therapeutic Society, among a myriad of other leadership positions. He has traveled extensively for the Foreign Training Program of the American College of Cardiology, lecturing and training, bringing current medical information to students and clinicians abroad.

His faculty association with the University of Southern California goes back to 1946. He is now Professor of Cardiology, Emeritus, and holds an honorary Doctor of Science degree from the University. Only last year the American College of Cardiology recognized Dr. Griffith's special skill by presenting him with the Gifted Teacher Award, the College's highest academic honor. Past recipients of this award include Dr. Paul Dudley White and Dr. Samuel A. Levine.
Dr. En Shui Tai, Bonny Lane, RD #2, Collegeville, Pa., keeps in touch with classmate Harold Strause in Reading, Pa. "No news from Tokyo and hope Jo Ono is now enjoying good health." Dr. and Mrs. Tai have eight children, nearly finished their educations.

1929

Dr. Mario A. Castallo, 1621 Spruce St., Phila., has been appointed Chief Associate Editor for Obstetrics and Gynecology for the Cyclopedia of Medicine, Surgery and Specialties, published by F. A. Davis Company. In February Dr. Castallo was honored by Arizona alumni at a dinner meeting held at the Skyline Country Club in Tucson, and updated the group on what is going on at Jefferson.

Dr. Milton Harrison has retired from active practice and resides at Boston Post Road, Old Lyme, Conn. "I probably will turn out to be a country doctor between the boating and the fishing."

Dr. Eurfryn Jones, 339 N. 25 St., Camp Hill, Pa., has assumed the position of Director of the Emergency Room at the Harrisburg Polyclinic Hospital, after retiring from surgery and practice. "Now a senior citizen."

Dr. Joseph J. Repa planned to move from 74 East St. in Oneonta, N. Y., to Maryland in April 1968.

1930

Dr. William D. Beasley, 805 First National Bank Bldg., Springfield, Ohio, recently relinquished his position as Chief of Medical Staff at Community Hospital in Springfield. Dr. Beasley hopes to reduce his activities somewhat and spend more time on business affairs. He continues his gynecology practice. In addition to his medical and business interests, Dr. Beasley has raised a prize-winning trotter.

Dr. Alexander B. Cimochowski, 342 Main St., Forest City, Pa., has resigned the office of Mayor of Forest City. Dr. Cimochowski served in this post for ten years, through nearly three terms.

1931

Dr. William K. McDowell, Tarboro Clinic, Tarboro, N. C., is still "working too hard—or perhaps it is just that at the age of 60 it is more difficult to get the work done. Am doing all the EENT at our hospital in addition to serving as Chief of Staff. My two children are grown, but neither is married—something to which I am looking forward. Want some grandchildren to hold on my knee before arthritis makes it difficult to do so. My son has a Ph.D. in math and is teaching and doing research at North Carolina State University and my daughter is working on a master's in German."

Dr. Amar D. Matta writes from New Delhi, India, that he very much enjoys keeping current on Jefferson via the ALUMNI BULLETIN. Dr. Matta practiced in what is now West Pakistan before the partition, and has now settled in New Delhi. His address there: 2252 Gurdwara Rd., Karolbagh, New Delhi, India. "Regards and best wishes to the alumni, especially my colleagues of the class of 1931. I shall be glad to be of any service to any of our doctors who visit India."

1932

Dr. Maurice I. Bakunin, 105 Brooklawn Ave., Bridgeport, Conn., at last report was to give up his private practice and to resign his post as Chief of Obstetrics and Gynecology at Bridgeport Hospital to join a team of physicians providing around-the-clock service in the hospital's emergency division.

Dr. John C. Ullery, 1593 Pemberton Dr., Columbus, Ohio, was featured in an article appearing in the Ohio State University alumni magazine in January. Dr. Ullery has been Chairman of the Department of Obstetrics and Gynecology there since 1954. Noted were his accomplishments in enlarging the department from a $35,000 a year, 13 staff member operation to a $450,000, 137 staff member one. He initiated the department's research program, for which the budget is now $750,000 annually, and a resident training program. During his years at Ohio State Dr. Ullery has written three textbooks and published 75 articles.

1933

Dr. Harold T. Fuerst, 510 E. 77th St., N. Y., retired as Assistant Commissioner in the New York City Department of Health to go to the New York Medical College as Professor of Preventive Medicine. The appointment also includes the designation as Chief of the new preventive medicine service at the affiliated Metropolitan Hospital. Dr. Fuerst will be speaker for the class of '33 at the clinic sessions during reunion week. "Looking forward to renewing contacts with classmates."

Dr. Anthony Ruppersberg, Jr., 336 E. State St., Columbus, Ohio, on his retirement from the Army Reserve National Guard after 34 years of commissioned service, was honored with a troop review and parade at Camp Perry. Dr. Ruppersberg recently was appointed to the Ohio Advisory Committee on Scientific, Engineering and Other Specialized Personnel of the Selective Service System of Ohio. In November, 1967, he was awarded the Legion of Merit (First Oak Leaf Cluster), presented at the Office of the Adjutant General, Fort Hayes, Ohio.

Dr. Stanley M. Stapinski, 80 W. Main St., Glen Lyon, Pa., has been elected a Fellow of the College of Physicians of Philadelphia. He is associated with the Hospital of the University of Pennsylvania.

1935

Dr. R. Marvel Keagy, 501 Howard Ave., Altoona, Pa., has moved into new quarters at the Blair Medical Center with Dr. Rodney L. Sponsler '62, as a partner in pediatrics practice. Dr. Keagy is Chairman of District III of the American Academy of Pediatrics. "My leisure time is spent at my tree farm, where I try to keep fit working the trees, and riding horse back. My father (Dr. Frank Keagy '04) was 88 years old in January, is in fairly good health, and enjoys getting news of Jeff in the ALUMNI BULLETIN."

1936

Dr. Oscar H. Cohen, 115 Church St., Boonton, N. J., has been elected to fellowship in the American College of Radiology.

Dr. Philip M. L. Forsberg, 154 School St., Concord, N. H., has been elected a corporator of the New Hampshire Savings Bank. Dr. Forsberg is Senior Vice
President and Medical Director of the United Life and Accident Insurance Company in Concord, and a director and Chairman of the Finance Committee.

Dr. Samuel J. Fortunato, 11 Hamilton Rd., Short Hills, N. J., was elected President of the Medical Staff of St. James Hospital in Newark, N. J., recently. He is Clinical Assistant Professor of Gynecology and Obstetrics at the New Jersey College of Medicine and Dentistry in addition to serving as attending physician at three hospitals.

1937

Dr. John R. R. Ewan, 916 19th St., N. W., Washington, D. C., recently moved into new offices with his internal medicine and gastroenterology practice.

1939

Dr. William M. Bush, Suite 437, 60 E. 42nd St., N. Y., has been elected President of the Rye (N.Y.) Republican Club for a two year term. Dr. Bush's youngest daughter, Pamela, will enter law school in the fall.

1940

Dr. Louis T. Gabriel, Jr., Rt. #1, Center Valley, Pa., who has been practicing general surgery in Allentown, Pa., recently became associated with the Ashland State General Hospital in Ashland, Pa.

1941

Dr. James A. Collins, Director of the Department of Medicine at Geisinger Medical Center in Danville, Pa., is Chairman of the 1968 Committee on Convention Papers of the Pennsylvania Medical Society.

Dr. Oscar Creech died on December 22, 1967, following a long illness. Dr. Creech had only recently been inaugurated as Dean of the Tulane University School of Medicine in New Orleans. He achieved international recognition as co-inventor of the renal perfusion technique in the treatment of malignant diseases and was President of the International Cardiovascular Society at the time of his death. He is survived by his widow, the former Dorothy Brown, and four children.

Dr. John C. Cressler, 6011 Bradley Blvd., Bethesda, Md., has been named Staff Director to the Defense Medical Materiel Board in Washington, D. C. Dr. Cressler will be responsible for evaluating all new or improved items of medical materiel proposed as standard items for entry into the Department of Defense Supply System. Among the items reviewed are the medical components of the Army's new field hospital system. The Defense Medical Materiel Board consists of the three Surgeons General of the military departments.

Prior to his new appointment Dr. Cressler was Post Surgeon and Commanding Officer of Walson Army Hospital, Fort Dix, N. J. In January he was cited for meritorious service in this capacity, having displayed "unusual initiative and extremely high competence in supervising and guiding the operations of the hospital and installation medical services activities." Dr. Cressler holds a master's degree in hospital administration.

1942

Dr. J. Wallace Davis, 135 S. 18th St., Phila., was elected President of the J. A. Meigs Medical Association at the society's January meeting. Dr. Davis succeeds Dr. George J. Willauer '23, in this post. The organization was founded in 1880; membership comes from the Philadelphia medical schools.

1943

Dr. Gerald E. Callery, 111 Long Lane, Upper Darby, Pa., has been named to serve on the active staff at the new Paoli Memorial Hospital in Paoli, Pa. Dr. Callery will have privileges in orthopaedic surgery. He is affiliated with three other hospitals.

Dr. Gerald H. Cessna, 510 Century Bldg., Pittsburgh, Pa., was awarded the Distinguished Graduate Award for 1967 at the annual homecoming of Saint Francis College, Portage, Pa. Dr. Cessna is Chief of Staff and Chairman of the Department of Obstetrics and Gynecology at North Hills Passavant Hospital.

Dr. Samuel L. Cresson, 901 Waverly Rd., Bryn Mawr, Pa., is Clinical Professor of Surgery at Temple University and Chief of the Division of Pediatric Surgery at Temple University Hospital. The Cressons have three children, one recently graduated from Columbia Presbyterian Nursing School and now at Massachusetts General. "Will be looking forward to the 25th."

Dr. George W. Hager, Jr., 219 S. Sixth St., Camden, N. J., sends the news that his son, George III, will enter Jefferson this fall after two years of graduate work in genetics at the University of Indiana.

Dr. Bernard S. Rossman, 5 Old Lancaster Rd., Bala-Cynwyd, Pa., sends these notes on family activities: Daughter Sheryl married to a physician and living in Puerto Rico, son Steve engrossed in photography, and Mrs. Rossman operating the "Treasure Shop" in Bala-Cynwyd.

1944J

Dr. Edward B. McCabe, 5905 N. Barnes, Oklahoma City, Okla., has moved here from Cleveland, Ohio, and joined a radiology group. "Family growing up and away. Oldest son is a law student, second son in business school and oldest daughter off to college in the fall. That leaves three at home for a while."

Dr. John A. Martin, 2037 Crystal Spring Ave., S. W., Roanoke, Va., served as President of the Virginia Chapter of the American College of
Radiology last year and as President of the Roanoke Academy of Medicine.

1944S

DR. ROBERT R. SCHOPBACH, 284 Fisher Road, Grosse Pointe Farms, Mich., is directing the psychiatric residency training program at Henry Ford Hospital. "Looking forward to university and perhaps medical school affiliation in the near future."

1945

DR. WILLIAM T. LINEBERRY, JR., has been transferred to the U.S. Naval Hospital, Camp Pendleton, Calif. 92055, to relieve the Chief of Surgery who is retiring. Camp Pendleton is the country's largest Marine base and the hospital has a census of about 500 people. "I frequently see many Jefferson alumni—Bob Lanning, Jim Helsper and Bill Herrick."

DR. ARTHUR A. SWEETSER has assumed duties as Associate Director of the Lehigh University Health Service in Bethlehem, Pa. Dr. Sweetser was a general practitioner for 17 years prior to his Lehigh appointment.

1946

DR. JACK GELB, 2812 Faultland Rd., Wilmington, Del., is President-Elect of the Delaware Academy of General Practice, scheduled to take office next year. Dr. Gelb is a member of the Wilmington Medical Center's Medical Council. The Gelbs have two sons.

1947

DR. WILLIAM P. COGLIAN, 4 Davidson Dr., Beaver Falls, Pa., is doing general and thoracic surgery at three local hospitals and finding time for tennis, golf and even squash. Daughter Ann is a student nurse at Jefferson, her father's, grandfather's and great grandfather's alma mater.

DR. LAURANCE A. MOSIER, 10510 Chapman Ave., Garden Grove, Calif., was appointed Assistant Clinical Professor of Surgery last year at the University of California College of Medicine. This year he starts a term of office as Alternate Delegate (California) to the AMA. "Hopefully will have a chance to renew friendships with classmates and fellow Jeffersonians as meetings are held in various parts of the country."

1948

Norman Quinn, reunion chairman, reports that John Y. Templeton, The Samuel D. Gross Professor of Surgery and Head of the Department, and Mrs. Templeton, have accepted the class invitation to attend the Bermuda reunion, June 20 to June 24. Dr. Templeton will conduct the three day scientific side of the meeting. Alumni and their families will board an Eastern Airline flight at 8 A.M. in Philadelphia and four hours later be settled in Bermuda's Castle Harbor Hotel. It will be a reunion that literally has everything...

1950

DR. JAMES R. HODGE, 295 Pembroke Rd., Akron, Ohio, has been named to membership in the American Society of Clinical Hypnosis for evidencing "exceptional achievement in the use of hypnosis in the investigatory or therapeutic fields..."

DR. JOSEPH J. JOHN, 11th USAF Dispensary, APO San Francisco, writes that his tour in Thailand has developed into a very interesting one. "We work ten hours a day, six days a week and naturally look forward to Sundays on the beach of the Bay of Thailand." Dr. John is Chief of Professional Services and Chief Surgeon of a 16-bed modular dispensary. Plans are to move to a 100-bed hospital very shortly. At last writing Dr. John was to visit all the bases in Vietnam in January as a medical member of the USAF Safety Survey Team.

1951

DR. ARIS M. SOPHOCLES, 4469 S. Broad St., Yardville, N. J., is in an ENT specialty. "My son, Aris, Jr., whose picture was in our 1950 yearbook, is now a sophomore at Jeff—class of 1970—as predicted in the yearbook. Also have a daughter who is studying at the Pennsylvania Academy of the Fine Arts in Philadelphia."

1952

DR. HOWARD FUGATE, JR., 150 Schooley St., Moorestown, N. J., has purchased...
a farm in Punxsutawney, Pa., but with a busy practice in Moorestown has no plan to move there—"at least not until the far distant future."

1953

Dr. Carl F. Brandfass, Jr., 71 Cherry Lane, Amherst, Mass., writes: "Have just begun a new job as Medical Director of Wing Memorial Hospital in Palmer, Mass." Last summer Dr. Brandfass spent two months in Vietnam with AMA Volunteer Physicians for Vietnam, a program supplying medical care to the civilian population of South Vietnam.

Dr. Donald D. Dunkle, 124 S. Linden St., Manheim, Pa., gave up his general practice two years ago. Along with three other physicians, he now staffs the Emergency Room of the Lancaster General Hospital on a full-time basis. "We work a 12 hour shift for five days, then are completely off for five days. You can't beat a six month year. One man is on duty all the time . . . Needless to say we love our work. Spent quite a bit of time in Alexandria, Va., studying the Mills Plan. It took about a year to negotiate with the Board on a contract."

Dr. Roy H. Hand, 1042 Kipling Rd., Jenkintown, Pa., spent half of last year in a cardiovascular fellowship with Dr. Denton Cooley at Baylor University in Houston, Tex. He's now with a group practicing general surgery at Abington Memorial Hospital. "Four children."

Dr. August F. Herff, Jr., M & S Tower, Suite 820, San Antonio, Tex., is serving as President of the San Antonio Surgical Society and is a past Secretary of the local American College of Surgeons chapter. Plans include reunion in May.

Dr. Willard S. Krabill, 120 Carter Ave., Goshen, Ind., has a group practice with two other Jeff men, Dr. Donald L. Minter '54, and Dr. John M. Bender '57. Dr. Krabill took a year's leave recently and spent nine months in an ob-gyn refresher course and two months at a Menonite Christian Hospital in Taiwan. The Krabills are expecting their fourth child in July.

Dr. Edmund K. Lindemuth, Jr., was appointed Medical Director of the Bucks County Department of Health. The Department employs more than 100 staff members in programs encompassing numerous branches of the public health field.

1954

Dr. Charles C. Stellar, 219 Bryant St., Buffalo, N. Y., continues as Director of the Division of Pediatric Endocrinology at the State University of New York at Buffalo. Dr. Aceto and his wife, who is a pediatrician, have two daughters.

Dr. Jack W. Fink, 126 Holly Dr., Lansdale, Pa., recently completed his second year as President of the Medical Staff at North Penn Hospital.

Dr. Newton E. Kendig, 62 E. Main St., Mount Joy, Pa., is the new Lancaster County Coroner, elected for a four year term. "Although this will take more of my time, I'm sure this term in public office will prove very interesting."

Dr. Jacob C. Stacks, Jr., 400 Lurgan Ave., Shippensburg, Pa., in July opened an office in Camp Hill, Pa., after completing a four year residency in child psychiatry—two years of general psychiatry at Jefferson and two years of child psychiatry at Hahnemann Hospital in Philadelphia.

Dr. Kayo Sunada has been named Director of the State Home and Training School at Wheat Ridge, Colo. He had served as Acting Director since November and was formerly Chief of Clinical Services at the school. Dr. Sunada came to Wheat Ridge in 1961 from the University of Washington at Seattle, where he held faculty positions in bacteriology and pediatrics. He is also a former Assistant Clinical Professor of Pediatrics at the University of Colorado Medical School in Denver.

1956

Dr. Robert A. Brown finished an obstetrics residency at Balboa Naval Hospital in San Diego, Calif., in July, 1967. The following month Dr. Brown left for a year's tour in Vietnam as Commanding Officer of the 3rd Medical Battalion. Mailing address: 412 S. Cummings Ave., Glassboro, N. J.

Dr. F. William Sunderman, Jr., 16 N.W. 22nd Dr., Gainesville, Fla., Professor of Pathology and Director of Clinical Laboratories at the University of Florida College of Medicine, has been named Professor and Head of the Department of Laboratory Medicine at the University of Connecticut School of Medicine. Dr. Sunderman's research interests include developing new methods of chemical analysis for diagnostic use in clinical laboratories and the application of computers to the processing of clinical data in the laboratory. He is the developer of a widely-used technique for use in diagnosing tumors of the adrenal medullary gland.

Dr. Sunderman is a former faculty member at Jefferson. He is a member of numerous professional societies.
Welsh ponies in our spare time. Our stallion was reserve champion, high point award winner for the United States and Canada last year."

DR. JOHN B. DAVIES, 700 Duke St., Alexandria, Va., writes: "Enjoying the practice of psychiatry in Alexandria. Becky, our two girls and I moved into a new home a few months ago."

DR. MERLYN R. DEMMY, 1504 Pennsylvania Ave., Paoli, Pa., has returned to a full-time faculty position with the Department of Psychiatry at Jefferson and is Director of the Division of Mental Retardation. Dr. Demmy also keeps a part-time psychiatry practice.

DR. JAMES B. LEE has been named Director of the Section of Experimental Medicine and Associate Director of the Section of Endocrinology in the St. Louis University Department of Internal Medicine. Dr. Lee also received the rank of Associate Professor of Internal Medicine. His work will involve establishing the role of prostaglandins in cardiovascular hemodynamics. On military leave since 1966, he had held a faculty appointment at the University for a year prior to that. He is the former Director of Endocrinology and Metabolic Research at St. Vincent's Hospital in Worcester, Mass., and in 1964 was an Associate Professor of Medicine at Georgetown University Hospital.

Dr. Joseph T. English '58, in February received one of the highest honors in government service, an Arthur S. Flemming Award. Dr. English was selected as one of the ten "outstanding young men in the Federal Government." This year Arthur Flemming himself, former Secretary of Health, Education and Welfare and now President of the University of Oregon, returned to Washington to make the presentations.

Dr. English is Assistant Director of the Office of Economic Opportunity for Health Affairs. He previously served as Senior Psychiatric Consultant to the Peace Corps. The Flemming Awards are divided into two categories, scientific and administrative. One of the five cited in the administrative field, Dr. English is responsible for the planning, implementation and quality of all OEO health programs. His accomplishments were described in the text of his citation: "For organizing comprehensive neighborhood health centers, which ... have already provided free medical services to over a million of the nation's poor ... and for obtaining the cooperation of several medical schools and local medical societies and health departments in running the centers, an achievement which reflects as well on the medical profession as on Dr. English."

DR. CONSTANTINE L. NELLAS, 550 Grant St., Pittsburgh, Pa. is in practice in Pittsburgh and is Head of the Department of Rheumatology at Allegheny General Hospital. June is the wedding date for Dr. Nellas and Miss Joanne Pantages of Pittsburgh.

1957
The John P. Ferri, Jr., M. D. Memorial Library has been proposed for establishment at the Fair Acres Farm, Lima, Pa., in tribute to the late Medical Director of this home for the aged. The Memorial Library is intended to recognize Dr. Ferri's contribution to the home and his devotion to his patients. Professional librarians are assisting in the planning for the library, which will be one of the finest geriatric facilities of its kind. Dr. Ferri died on September 1, 1967.

1958
DR. GEORGE A. JACK spent a "very rewarding" year abroad working at the Royal Marsden Hospital in London, Christie Hospital in Manchester, England, and in Stockholm, Sweden. He is now an Assistant Professor of Radiology in the Department of Therapeutic Radiology at the University of California in San Francisco.

DR. JOHN K. KREIDER, 2045 State St., East Petersburg, Pa., recently spent
eight weeks serving at a mission hospital in Rhodesia. Dr. Kreider, who has a practice in East Petersburg, assisted Dr. Myron Stern there. Dr. Stern is the only physician at Mtshabeqi Mission Hospital which serves a teacher training school and an associated primary school. Dr. Kreider was sponsored by the Board for World Missions but made the trip at his own expense.

Dr. J. Myron Schneeberg, 7943 Rolling Green Rd., Cheltenham, Pa., moved his offices to the Northern Division of Einstein Medical Center where he is engaged in urology practice with his brother. Dr. Schneeberg is one of the urologists on the kidney transplantation team at Einstein. "Thus far six human transplants have been done and the results are good."

1959

Dr. Kenneth M. Blanc has a general surgery practice and is associated with Rancocas Valley Hospital in New Jersey. Since discharge from the Army in June of 1956, Dr. Blanc resides at 139 Great Rd., Maple Shade, N.J., with his wife and daughter.

Dr. Nathaniel P. H. Ching, University of Kansas Medical Center, 39th and Rainbow Blvd., Kansas City, Kan., is almost finished his thoracic surgery residency and will be going into practice in July.

Dr. Sandy A. Furey has opened offices for the practice of internal medicine and cardiology in the Medical Arts Building, Scranton, Pa. Dr. Furey recently completed military service. He served as Chief of Cardiology at the Specialized Treatment Center at Fort Gordon, Ga.

Dr. Tom D. Halliday, 409 Second St., Marietta, Ohio, is enjoying an obstetrics and gynecology practice in Marietta. The Hallidays' first child, John, was born in August.

Dr. Walter L. McConnell, Berkshire Valley, R.D. 1, Wharton, N.J., has a general practice (“a dying breed”) in North Jersey with Dr. Penn P. Shelley '57, and four other associates. "Running marathons to keep in shape." He hoped to run in Boston in April and to ski St. Moritz in February.

Dr. George Pappas, 801 Hudson St., Denver, Colo., was made Assistant Professor at the University of Colorado Medical School last August. He is also Attending Surgeon at Colorado General Hospital and Chief of Cardiac Surgery at the Veterans Administration Hospital in Denver. "Settled at last!"

Dr. Edward K. Poole resigned his commission in the Navy last September and is now in private radiology practice with four associates. Address: 2410 Rio Grande, Austin, Tex.

1960

Dr. Gerald P. Collins, 333 E. 14th St., Apt. 15-C, N.Y., has passed the Boards in both anatomic and clinical pathology and currently is practicing in New York City.

Dr. Charles R. Deuffner, 312 Stone Ave., Clarks Summit, Pa., served as co-chairman of the annual cardiovascular seminar for nurses from a five county area, held in November.

Dr. John P. Galgon, 1137 N. 16th St., Allentown, Pa., is on the staff at the hospital as head of the medical chest department and newly established pulmonary function laboratory. The laboratory is the first of its kind in the Lehigh Valley and a step in the expansion of the hospital into health care center. Dr. Galgon did an internal medicine residency and another year of specialty study at the Veterans Hospital in Philadelphia and at Philadelphia General Hospital. He resigned a faculty appointment at the University of Michigan to accept the Allentown Hospital appointment.

Dr. Thomas K. Howard, 401 Allegheny Ave., Hanover, Pa., opened a solo practice in orthopedic surgery with offices in Hanover and Gettysburg, Pa.

Dr. Charles T. Newton, 3417 Memphis Lane, Belair, Bowie, Md., started a neurology residency at Georgetown University Hospital in Washington, D.C., last July.

Dr. Walter E. Seigle has returned to the private practice of general medicine and surgery in association with the Lackawanna Medical Group, 420 E. Drinker St., Dunmore, Pa. Dr. Seigle left private practice in 1963 to become Associate Medical Director with the Prudential Life Insurance Company in Chicago. In 1966 he entered a residency in general surgery at Wilkes-Barre General Hospital which he completed in December of 1967.

Dr. Francis W. Wachter, 28 Georgia St., Valley Stream, N.Y., writes: "As you can see from the address I am still on the move. We arrived here in October and I am presently a staff pathologist at St. Alban's Naval Hospital. Am learning to make the transition from resident to staff. There are a good many Jeffersonians about."

1961

Dr. Peter J. Cera, Jr., presently is serving in the Navy doing pathology at the U. S. Naval Hospital in St. Albans, N.Y. The Ceras became parents (a son) on December 3, 1967.

Dr. Robert R. Conte, 1222 Mountain View, Greensburg, Pa., is practicing obstetrics and gynecology with an associate in Latrobe, Pa., since July. "My family of five children, Jean and I have moved into a new home which is as exciting to me as is the practice."

Dr. Allen L. Davies, c/o 303 Main St., Avoca, Pa., is in Vietnam as a thoracic surgeon. "Now done with my residency and look at my first clinic!"

Dr. Stephen L. DeFelice, 9710 Caney Place, Silver Spring, Md., is presently involved in drug development of antimalarials at Walter Reed Army Medical Center, where he is Chief of the Section of Clinical Pharmacology, Division of Medicinal Chemistry. "Will cast aside my LBJ outfit this summer (I hope)."

Dr. Gordon Vigario, 20th Station Hospital, Nurnberg, APO 09696, N.Y., has been advanced to the job of Chief of Radiology at the hospital at Nurnberg, Germany. The hospital handles mainly orthopedic and general medical patients. "I expect to be out of the Army come August of 1968, and plan a visit to Philadelphia. Hope to look up a few of the old crew. In September I start a fourth year 'brush up' residency at the University of Virginia."
1962  
DR. DEBHANOM MUANGMAN graduates from Harvard with a Doctor of Public Health degree in June. "After that I will be returning home with my wife and working with the Thai government." Dr. Muangman will be glad to hear from classmates and Jeffersonians visiting in Bangkok. His address: 489 Rajvithi Rd., Bangkok 4, Thailand.

DR. WILLIAM S. MAINKER, 520 Olive Terr., Union, N. J., is on a year's assignment in Korea with the 43rd Surgical Hospital.

1964  
DR. WILLIAM F. BINGHAM, U.S. Naval Home, 24th & Grays Ferry Ave., Phila., will complete his service with the Navy in July and begin a four year neurosurgery residency at Columbia-Presbyterian in New York City. The Binghams have two daughters.

DR. ANTHONY M. HARRISON, 4929 Bayard St., Pittsburgh, Pa., returned to Pittsburgh (Western Pennsylvania Hospital) in July after two years with the Public Health Service. "Our stay in Boston was fun and rewarding as I was given a year's credit toward my Boards in surgery for my service experience." Dr. Harrison writes that Dr. John Taylor '65, is also at "West Penn" in surgery and that Dr. Harvey Slater '65, will be one of the new residents in July.

DR. PHILIP R. HIRSCH, JR., 4146 N. 27th St., Arlington, Va., finished Army duty last July and is now in the first year of a psychiatry residency at Georgetown University Hospital. He plans to go into analytic training and stay in D.C. "Wife, Ann, is modeling, and Philip III is almost six."

DR. JAMES J. HOUSER, 115 Norfolk Rd., USN Air Station, Alameda, Calif., finished a 12 month tour on the USS ENTERPRISE as Radiation Control Officer. In January he started a three year residency in internal medicine at the USN Hospital in Oakland, Calif. "Christmas found the six of us at Disneyland for two wonderful days.

DR. DR. CARROLL P. OSGOOD, JR., was awarded a bronze star with a "V" device for risking his life to treat wounded soldiers on a battlefield near Dung Pho on July 15. Dr. Osgood, circling overhead in a helicopter, learned that medical evacuations were impossible because of the lack of a suitable landing zone. Dr. Osgood had himself lowered in a sling to reach the wounded under enemy fire. He administered medical aid until all of the wounded were evacuated by helicopter slings and he remained in the area to insure treatment for any additional casualties.

His address: 1/35 Inf. Bn. 3rd Bde., 25th Div., APO San Francisco.

Dr. Muangman

Dr. Joseph J. Pittelli, Benedict Rd., Cold Spring, N. Y., has joined the staff of Butterfield Memorial Hospital in Cold Spring. Dr. Pittelli completed a pediatric residency at the University of Michigan Medical Center before serving two years with the Army at Fort Sill, Okla., where he was Chief of Pediatrics.

Dr. Alan B. Rubens took neurology Boards in Bangkok, Thailand, on May 7. Finishing up a two year stay as Chief of Neurology at Clark Air Base in the Phillipines, Dr. Rubens calls the experience "challenging"—with the administrative duties sometimes a little overbearing. Plans now include a return to the Boston V.A. Hospital with a fellowship to study in the Aphasia Unit.

1963  
DR. ROBERT S. LEVITT, 401 W. 56th St., N. Y., has been named to the staff of the Sayreville Medical Group. He previously worked as Chief Resident in Obstetrics and Gynecology at Roosevelt Hospital in New York.

Dr. Osgood
DR. THOMAS J. SCHNEIDER writes from Nha Trang Air Base, Vietnam: "My tour of duty here ends on 5 May 1968 . . . and so does my military career. I have been accepted as a first year fellow in internal medicine at the Cleveland Clinic beginning July 1968; certainly looking forward to that." Dr. and Mrs. Schneider have three girls now, with the latest arrival on November 5.

DR. VICTOR B. SLOTNICK, 312 Melrose Rd., Merion, Pa., was promoted to Associate Director of, Clinical Investigation at McNeil Laboratories, Inc.

DR. HARRY F. SMITH, 129½ Tradd St., Charleston, S. C., married Miss Donna K. McClain recently and is stationed in Charleston as physician aboard the U.S.S. OZARK.

DR. ROBERT R. THOMPSON, his wife and two boys are enjoying the last year in the USPHS in Mt. Edgecumbe, Alaska, (P. O. Box 256). "It has been a terrific experience living in this state for two years, although we can't say much for the misguided efforts of the PHS in caring for the Alaska natives. Next year I will begin a general surgery residency at Hennipin County Hospital in Minneapolis, Minn."

1966

DR. IVAN P. CHUDNOW, 6805 Chamberlin Ave., Edwards AFB, Calif., is a flight medical officer stationed here "on the edge of the Mojave Desert. Looking forward to a very interesting tour." The Chudnows became parents on October 14—a boy.

DR. MICHAEL P. DOLAN, 1000 Westchester Ave., White Plains, N. Y., is working for the IBM Corporation in New York and living in Ridgefield, Conn. "Miss San Francisco very much, intend to return at earliest opportunity."

DR. DAVID W. JENKINS, 7957 Papago Way, North Highlands, Calif., is enjoying his tour with the Air Force at McClellan AFB in Sacramento, Calif. "Joey and the children are all becoming real 'hippies.'"

DR. JAMES V. SNYDER, USN Hospital, P. O. Box 105, Camp Lejeune, N. C., is being trained in anesthesia by the Navy. Daughter Catherine Ann will be a year old in July.

DR. HARVEY J. SUGERMAN is in the first year of a general surgery residency at the Hospital of the University of Pennsylvania. Address: 3400 Spruce St., Phila.

DR. DAVID W. VASTINE, 2515 N.E. Expressway Access Rd., Apt. M-15, Atlanta, Ga., is currently working at the National Communicable Disease Center as an epidemic intelligence officer to the Smallpox Eradication Program. "Recently spent two months in West Pakistan and stopped to visit Harry Love in San Francisco on the way. He is enjoying his surgical residency at the University of California."

1967

DR. DONALD L. ADAMS, 339 E. Crestwood Dr., Camp Hill, Pa., begins an obstetrics and gynecology residency at Harrisburg Hospital in July.

DR. JOEL S. GROSSMAN, 14426 Addison St., #11, Sherman Oaks, Calif., has accepted a residency in radiology at Cedars-Sinai Medical Center in Los Angeles.

DR. CLIFFORD C. KUHN, 1018 Munroe Falls Ave., Cuyahoga Falls, Ohio, will be going to the University of Michigan next year for a four year residency in child psychiatry. Son Gregory is a year old now.

DR. ROBERT G. LITTLE, Germantown Disp. & Hosp., E. Penn & E. Wister Sts., Phila., wrote with two news items. One, the birth of Glenn Thorstein Little in February, and two, his assignment to Blackfeet Indian Reservation in Browning, Mont., as of July. He will be with the Indian Health Branch of the USPHS.

DR. DAVID E. WILLIAMS, c/o Lloyd, Darby Rd., Havertford, Pa., has received an appointment in internal medicine at the Maine Medical Center, Portland, Maine. "Looking forward to seeing the Bill Horners, who will be there in surgery."

DR. LEWIS WINTERS, Cheltenham Terr., Apt. B-105, Wyncote, Pa., will return to Jeff for an anesthesiology residency.

From the Battlefield

Nui Kim Son is a fishing village located in the area of the Marble Mountain. It surrounds the access to the Third Amtrac Battalion of the First Marine Division in South Vietnam.

DR. JOHN T. SACK '66, is with the Third Battalion here. Dr. Sack expected to see almost anything on the job, but hadn't really thought he'd be contending with a plague epidemic. "In the latter part of October, a case of plague was reported to have come from Nui Kim Son," he writes. The Preventive Medicine Unit of NSA Hospital reacted immediately, spraying DDT over the area. "By November 3, 1967, the battalion became acutely aware of a problem in Nui Kim Son because of an acute infectious death of a child (later proven by autopsy to be plague) . . . By 5 November 1967 there was a definite epidemic of plague in Nui Kim Son." A massive vaccination program was started. "With help and security provided by U. S. Marines the Preventive Medicine Unit of NSA was able to vaccinate approximately 4,800 people in Nui Kim Son." Since the Vietnamese hospital facilities are poor and crowded, Dr. Sack sent only the young children to the Da Nang Civilian Hospital. "The adults and older children I kept in the village and treated them there. I have no lab facilities so the diagnosis of plague was made from physical examination and history of plague in the family. The bubo is quite characteristic and not easy to miss after you have seen a few."

"It was recommended that I use only one antibiotic, even though most texts recommend a combination of either streptomycin chloramphenicol or tetracycline. I used streptomycin because it was the only one available in injectable form. IM injection was the only way that we could be sure that people got their medicine. Once a person was on streptomycin he survived." By mid November the epidemic was over.

"It was unfortunate that I couldn't have studied the patients more, but over here you have to treat from your impression from the physical examination and with the drug available to use on the Vietnamese."

His address: 3rd AMTRAC Battalion, 1st Marine Division (Rein) FMF, FPO San Francisco, Calif.
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### August 1, 1967 to March 29, 1968

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<td>Joseph J. Armao</td>
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<td>John R. Patterson</td>
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<td>Robert J. Senior</td>
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<td>Eugene F. Bonacci</td>
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<td>Paul D. Zimskind</td>
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<td>Bronson J. McNierney</td>
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<td>Herbert G. Hopwood, Jr.</td>
<td>163</td>
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<td>Lawrence J. Mellon, Jr.</td>
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<td>1970</td>
<td>Marvin E. Jaffe</td>
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<td>Clinical</td>
<td>Robert I. Wise</td>
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<td>Andrew J. Ramsay</td>
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<td>Pre-Clinical</td>
<td>Eileen L. Randall</td>
<td>75</td>
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<td>Non-Graduates</td>
<td>Salomon Pober</td>
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<td>Mr. Franklyn S. Judson</td>
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<td>Students</td>
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#### Graduates without recorded addresses

- 93

#### Total Alumni body

- 7,430

A, B, C, Indicate leading classes in three categories.

*Inclusion in Class Total of gifts and bequests by widows and friends of Jefferson. The complete list will be published in the Annual Giving Fund Report at the end of the Drive.

†Deceased.
The Orlowitz Residence Hall, twenty floors completed with anticipated occupancy September, 1968. Site: 10th and Walnut.
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Thomas B. Mervine, M.D., '40
Bruce Barrick Montgomery, M.D., '60
John R. Montgomery, M.D., '26
Theodore L. Montgomery, Jr., M.D., '90
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Louis Pierucci, Jr., M.D., '55
Edward Pogodski, Jr., M.D., '54

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U. S. Navy—William T. Lineberry, '45
U. S. Pub Health Service—Billie E. Doolin, '49
Veterans Administration—Louis M. Lide, '21
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Arabian Gulf—Burwell M. Kennedy, '52
Bolivia—Herberto Mercado, '20
Cambodia—Joseph M. Costigan, '32
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Costa Rica—Alberto Oreamuno, '29
Cuba—Nelson A. Huerta, '33
Honduras—Angel A. Uloa, '29
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