Three thousand five hundred and forty-six alumni elected to support Jefferson this past year with a donation to Alumni Annual Giving. Through your efforts a record high of $826,003 was realized for 1981-1982, marking an increase of $52,442. My personal thanks to each of you who considered carefully the appeal of your class agent and responded with a gift to the Medical College.

Certainly one of the keys to our success last year was the size of the gift from our donors. The average gift rose $11.80 to $232.94, close to the level of the McClellan Merit Society. In addition 1260 alumni chose to increase the level of their giving during the past year.

Percentage of participation remains a disappointing 45.8%.

The President’s Club portion of the program directed by Benjamin Bacharach, M.D., ’56, continues to account for approximately one third of the amount raised. These gifts of $1,000 or more are essential to our success.

Congratulations are particularly in order for Stiles Ezell, M.D., and his class of 1932 for a participation figure of 66.1% honoring their 50th reunion. My own class of 1942 celebrating our 40th in June, took first place for dollar amount with $43,374 and third place in participation with 64.5%. Bronson McNierney’s 25th reunion class of 1957 was second in dollar amount with $26,924 and Eugene Bonacci’s class of 1956 third with $26,241. Two of the younger classes, 1971 and 1973, took second and third place in number of gifts with 98 and 94.

From your class agents and committee members again thanks to all who participated.

J. Wallace Davis, M.D.
Chairman
Commencement

Tradition saw graduation once again in the Academy of Music, where the 219 seniors took the Oath of Hippocrates. The Honorable Sandra Day O'Connor, first woman appointed to the U.S. Supreme Court, was the commencement speaker.

Jefferson Scene

The alumni banquet, class day awards, achievement award and senior portrait are just a few of the news items at Jeff.

Reunion Clinics

A representative from each of the five-year reunion classes gave presentations in their areas of expertise. The four presentations are by the following alumni:

- William B. West, M.D., '32
- Marvin A. Sackner, M.D., '57
- Joseph W. Sokolowski, Jr., M.D., '62
- Martin M. Mandel, M.D., '47

Class Notes

The portrait presentation of Paul A. Bowers, M.D., '37 and a story on the unusual talent of Arthur B. Lintgen, M.D., '66, to "read" records are reported in class notes.

Published four times a year, Fall, Winter, Spring, Summer
Second Class Postage Paid at Philadelphia, Pa. ISSN-0021-5821

The Alumni Association of Jefferson Medical College
1020 Locust Street, Philadelphia, Pennsylvania 19107
Trumpet heraldry and a row of pink and red carnations set the Academy of Music stage for the 158th Commencement of Jefferson Medical College and the 33rd Commencement of the College of Graduate Studies.

The students filed in from both sides of the stage to take their seats in the orchestra section. Proceeding from the rear of the Academy to the stage were the faculty, administration and honorary degree candidates, including the Honorable Sandra Day O'Connor, who gave the commencement address.

Following the processional and the singing of the national anthem, the Reverend Edward C. Bradley, S.J., '55, offered the invocation. President Lewis W. Bluemle then gave the opening remarks, saying that the conferring of degrees is an appropriate award for the recipients' hard work.

Jussi J. Saukkonen, M.D., Dean of the College of Graduate Studies presented the 12 candidates for Doctor of Philosophy degrees, who came to the stage to receive their degree from Dr. Bluemle.

The Doctor of Medicine degrees were presented by Interim Dean Frank D. Gray, Jr., with those graduating with honors cited as such. Following the conferring of their degrees, the class of 1982 rose to take the Oath of Hippocrates, administered by Francis E. Rosato, M.D., the Samuel D. Gross Professor of Surgery and Chairman of the Department.

Dr. Saukkonen then returned to the stage's center to present the Master of Science degrees to the 15 candidates.

The ceremony proceeded to the conferring of the honorary degrees. William W. Bodine, Jr., of the TJU Board of Trustees presented a Doctor of Letters to Richard C. Bond, Trustee of the Wanamaker Estate, former President and Chief Executive Officer of John Wanamaker and Jefferson Emeritus Trustee.

Richard M. Krause, M.D., Director of the National Institute of Allergy and Infectious Diseases of the National Institutes of Health, received a Doctor of Laws, presented by Russell W. Schaedler, M.D., '53, Professor of Microbiology and Chairman of the Department.

Receiving a Doctor of Science was John W. Oswald, Ph.D., President of Pennsylvania State University. Samuel S. Conly, Jr., M.D., 'S44, Associate Professor of Physiology and Associate Dean, presented the degree.

The late Dean, William F. Kellow, M.D., was honored with a Doctor of Laws posthumously. His daughter, Suzanne Kellow Portfolio, accepted the degree for her father, presented by Joseph S. Gonnella, M.D., Professor of Medicine and Associate Dean. Spontaneously, the entire graduating class then stood in honor of Dr. Kellow. "Our family is happy to find him here forever at home," Mrs. Portfolio said of her father.

The final recipient of an honorary degree was the Honorable Sandra Day O'Connor, the first woman to serve on the U.S. Supreme Court. She received a Doctor of Laws, presented by the Honorable A. Leon Higginbotham, Jr., who is also an emeritus member of the TJU Board of Trustees.

Justice O'Connor then took the podium to deliver the commencement address to the class of 1982.

Following her speech, Reverend Bradley gave the benediction. The new graduates, wearing the deep green hoods of their profession, filed out jubilantly to the traditional sound of Elgar's "Pomp and Circumstance."
Mr. President, it is a distinct honor and personal privilege on behalf of the Board of Trustees and the faculties of Thomas Jefferson University to present the Honorable Sandra Day O'Connor, Associate Justice of the United States Supreme Court for the honorary degree of Doctor of Laws. Since receiving her law degree from Stanford University with honors and highest distinction, Justice O’Connor has been a distinguished member of the bar, a brilliant member of the legislature and the judiciary of the State of Arizona. Her individual talents and merit exemplify the highest excellence in the law. Her appointment to the United States Supreme Court pleases us not only because it is so deserved but also because it symbolizes the eradication of some of the burdens and bias which in the past have precluded our nation in fully utilizing the total talents of some of our citizens. It is a profound honor and pleasure Mr. President, to present to you Justice O’Connor.

The Honorable A. Leon Higginbotham

The Address

It is a pleasure for me to be here with you in this historic city of Philadelphia for a memorable day in the lives of you who have just received your degree, evidencing the completion of your formal medical school training. Today, those of you receiving doctor of medicine degrees will assume for the first time the official mantle of respect, knowledge and honor which the public reserves for the members of your profession. Your word will soon be the word of hope and comfort for thousands, the very first words to the newborn and the very last word to those in your care at death. You will be trusted, revered, feared, yes and criticized, but generally loved by those whom you serve. I know you graduates must be an incredibly competent group, not just because you are getting out of medical school, but because you were talented enough to get over an even bigger hurdle, getting in.

However, I am sure that today you are happy to share your glory with the members of your family who have helped so much to make all of this possible. I refer first to your parents, whom you obviously selected with great care in your effort to be sure that they were of sufficient qualities to produce someone with enough brains to get into medical school. I imagine that your parents not only gave you a biological assist but they also gave you a financial assist that made your education possible or at least easier.

Several years ago I sat behind a group of graduating seniors and one of them stood up in the middle of the ceremony with a small sign that simply said “Thanks mom.” And so, on your behalf, I too say thanks mom, thanks dad and also thank you dear wife or dear husband for giving up so much so you could all share this glorious day.

Let me tell you how I agreed to be here with you today. More than a year ago, I was contacted by the President of the American Medical Association, Dr. Dan Cloud of Arizona, who asked if I would consider serving as a lay member of the Liaison Committee on Medical Education. As you know, that Committee is the accrediting agent for all of the medical schools in the United States and Canada. I agreed and attended several meetings until my nomination to the United States Supreme Court. The Dean of the Jefferson Medical College, Dr. William Kellow, was Chairman of the Committee.

Beginning with the first meeting which I attended, the committee was embroiled in some very difficult and sensitive decisions regarding the standards for medical schools and the enforcement of those standards. Discussions were heated and extensive. Dr. Kellow presided with warmth and good humor throughout. Although I had not known him previously, I liked him immediately. The meetings when we held them lasted more than two days and usually we had a chance to continue our visits at dinner or breakfast.

It was during a meeting of the Liaison Committee on Medical Education in Washington, D.C. that I was called to the White House to meet the President concerning my possible nomination for the Supreme Court. That morning last June when the Washington Post broke the story of the possibility of my nomination, I had breakfast with Will Kellow at the hotel. We read the story together. He was the first to congratulate me and wish me well. When my nomination was formally announced by the President two days later, Dr. Kellow wrote me immediately to renew his good wishes and also to ask me to
problems you, as health care professionals, face in our country.

As a state legislator I worked with various medical groups in Arizona in connection with legislation affecting the profession and the public health system in that state. At one time I was a lay member of the Board of a non-profit health and hospital insurance company. I worked on a committee which struggled to gain control over the rising costs of medical care. I presided as a trial judge over hours and hours of medical testimony in personal injury trials. These experiences have led me to the clear conclusion that each conscientious doctor and health care professional should devote some time throughout his or her entire career to the broader problems of medical care in our cities, in our states and in our nation.

It is not enough to simply strive to use the best and most sophisticated methods of improving each individual patient’s medical problem. We have millions of people who can be best served by staying healthy in the first place and by not requiring expensive treatments for acute care. Those people who so require medical care need to obtain it within a system that will not bankrupt them and the rest of us in the process.

Medical costs have become a very significant percentage of our gross expenditure. They increased from less than six percent of our gross national product in 1965 to 9.4 percent in 1980. Unbelievably, these costs amounted to $1,067 per person in this country in 1980. Most people in this country are exposed to losing everything they have if a medical disaster befalls their family and insurance is not available to pay all the bills. However, the availability of generous health insurance coverage, paradoxically, encourages increased usage of medical services and high medical costs. In fact third party payers, (insurance companies, governments, industry and charities) financed 68 percent of the total health care expenditures in 1980.

Hospital care accounts for some 40 percent of total health care expenditures, services of physicians account for another 19 percent. Thus as physicians you will control directly, or indirectly, by hospitalization orders, some 60 percent or more of our nation’s health care expenditures. You will be the people in the best position to know how we can solve our health care prob-
lems, how we can slow the growth in health care costs, how we can make the dollars spent on health care benefit more people for lower costs. You can, and you should, devote endless, unpaid, difficult and frustrating hours solving these issues. Make this effort because you should, but make it also because you have a financial interest in solving them.

I believe that a significant percentage of our society feels that doctors, like lawyers, simply make too much money in what the public regards to be a profession involving a public trust. When people feel that many members of a profession are receiving undue financial rewards, then changes, that many of you might deem unfortunate both to society and you, may follow. If people believe that they have access to good medical advice at a reasonable cost, it seems to me more likely that they will not wait until the acute illness strikes before seeking that advice. If there can be financial incentives also to the patient to stay out of the hospital in an acute care facility, it may also serve to encourage better preventive care at lower costs.

As doctors you can participate in developing these systems and these incentives. I also encourage you to participate in other ways in your communities to what extent you can. We need more doctors willing to participate in civic activities such as on boards of social service agencies, schools and organizations. Doctors have duties as doctors, but they also have duties as citizens, as do lawyers and bankers and representatives of labor and management. All of us in my opinion benefit from giving service to others. You have elected to train yourself to give both service and health care, in a very direct way, as physicians caring for the sick and disabled. As such, you can enjoy the greatest of all satisfaction in life: work at work worth doing. You can also share your knowledge and talent on a broader scale in your community. This will help you in turn by exposing you to some of the concerns and issues outside of your immediate profession and help you maintain a wider perspective and understanding than might otherwise be the case.

It occurs to me that you were uniquely fortunate as the 1982 graduates of Jefferson Medical College, for in Dr. Will Kellow you had a role model which could have been no better. He more than anyone I knew embodied the characteristics which appear from my standpoint to be the most important for a member of the medical profession. He was highly intelligent and knowledgeable in his field and was totally generous with his time in participating in non-profit activities for the betterment of mankind and his profession. He was kind and ethical and truly caring about other people.

Dr. Albert Schweitzer, one of the most revered men of all times, thought that education is the instrument by which the individual perfects himself for the purpose of serving not only himself but others as well. Will Kellow used his education in the way Albert Schweitzer envisioned. My hope for you, and particularly for you who were privileged to know Dr. Kellow, is that you will follow his example. He never stopped his broader concerns for others until his last breath on earth. If, at the end of your life, you can look back on such a record of service, then you will have been fine doctors and fine health care professionals and the kind of citizens that have allowed us to develop and to keep this wonderful country of ours. As Norman Cousins said, "The only safe assumption for human beings is that the world will be what we make it."

At her first public introduction to Jefferson's alumni and faculty, Dean and Vice President Leah M. Lowenstein stands during commencement. Dr. Lowenstein assumed her position in July, coming from Boston University School of Medicine, where she was Associate Dean and Professor of Medicine and Biochemistry.
alumni banquet

Greetings to the graduating class by Alumni Association President Norman J. Quinn, M.D., '48 opened dinner ceremonies at the annual Alumni Banquet, held June 10 at the Franklin Plaza Hotel. Over 600 guests attended the event, which honored the seniors and welcomed returning alumni.

David Quinn read a letter from Pennsylvania Governor Richard Thornburgh, who sent regards to the alumni and congratulations to the graduates. The President then cited the fact that this year's seniors make up the brightest and most intelligent class in Jefferson's history, for which Dr. Quinn had them stand. "Jefferson graduates are not only welcome in the scientific community, but depended on by the community as well," he said.

John H. Coley, M.D., '34, presented the Alumni Achievement Award, the Association's highest honor, to Joe Keyes, M.D., '17, (65th) Emeritus Professor of Psychiatry, receiving a standing ovation.

Frederic L. Ballard, Esq., Chairman of the TJU Board of Trustees, spoke on the strength of the Jefferson alumni and their vast influence. He encouraged the graduating seniors to carry on the tradition by "representing the crown jewels" wherever they go.

Speaking for the Administration was Lewis W. Blumle, Jr., M.D., President of the University. He updated the alumni on the changes in the past year, including the appointment of Leah M. Lowenstein, M.D., as Dean, and the recruitments of Willis C. Maddrey, M.D., as Magee Professor and Chairman of the Department of Medicine, and Robert Schwartzman, M.D., as Chairman of the Department of Neurology (see page 9). "Jefferson is on the move, progressing in the direction we want to go as leaders in our field," Dr. Blumle said.

J. Wallace Davis, M.D., '42, Chairman of the Annual Giving Fund, reported on the 34th Fund and presented class awards, saying that nearly half of all Jefferson's alumni participated in this year's effort.

Interim Dean Frank D. Gray, Jr., M.D., spoke on the state of the College, calling it "very good." He said there has been no appreciative decline in the quality of students matriculated. The biggest problem is student financing, he said, approaches to which the College is exploring. He then overviewed the budget, restoration efforts and curriculum changes, saying that Dean Kellow had left Jefferson in the strongest position in its history.

John T. Magee, M.D., '57, spoke for his class on the importance and the role of the non-university hospital in medical education.

O. Scott Lauter, M.D., ended the evening, speaking for his graduating class on "Dreams."

class day awards

The class of 1982, along with their families and friends, gathered in McClellan Hall June 10 for the annual Class Day presentation of honors and awards.

Frank D. Gray, Jr., M.D., Interim Dean, presided, opening the ceremony with a few statistics on the class. Four years ago, Jefferson received over 4,000 applications, from which 223 were admitted to the class of 1982. Of that number, 221 make up the graduating class, which represents 15 different states and 86 colleges and universities. The class of 1982 brings the number of Jefferson graduates to approximately 24,000 and the number of living alumni to about 8,000.

Paul J. Fink, M.D., Professor of Psychiatry and Human Behavior and Chairman of the Department, delivered the address, speaking on "Compassion and Physicianhood." Posing the question to the graduates whether compassion can be taught, Dr. Fink said that to be a good physician, you must be affected by what happens to your patients. But balancing this compassion in a highly technical job with family and one's own sanity, the speaker said, is difficult.

"As a physician, being compassionate requires something of you that you may or may not be prepared or able to give," Dr. Fink said. A key ingredient of compassion, he continued, is thoughtfulness. Physicians must constantly ask themselves if they can provide better or more care and more heart. Another ingredient, he added, is to look at the problem at hand in such a way so that the patient is the one who is helped.

The medical profession, for physicians, places great pulls on self, Dr. Fink told the graduates. He said compassion cannot rule a doctor's life, yet there is no answer to the question of where to draw the line.

"Only through a deep understanding of human nature can you be a truly compassionate physician," he said. "Too much compassion is terribly draining and with too little, you have missed the point of why you are in medicine."

Dr. Fink left the graduates with a final message about compassion. "The
joys of medicine are greater than the
pain," he said. "If you can avoid
running from the pain, you will be a
better physician. It is as easy to be
compassionate as it is to defend your­
self against it and be rotten to all who
surround you. Knowing yourself is the
only way to be wise and loving. And
your wisdom and love must be ever
expansive without taking the heart out
of you and depriving you of the joys
of your own personal life."

O. Scott Lauter, M.D., spoke on behalf
of the senior class, titling his speech
"Retrospective and Prospective," which
reflected on the number of changes
the students had experienced in four
years and where these would take
them. The transition from classroom
medicine to clinical medicine was, at
times, overwhelming, he said. A new
sense of responsibility accompanied
these changes.

"We shared the happiness when sick
patients became better, and shared the
grief and humility when sick patients
became sicker and then died," he said.

While Dr. Lauter overviewed the
serious experiences of the medical school
years, he also recounted the humorous
ones. "As bright and eager juniors," he
said, "we were constantly looking
for something to do, to the exasperation
of our resident mentors. We eventually
became comfortable doing nothing, and
soon were out looking for nothing to do."

With the approaching uncertainty of
internships and residencies, Dr. Lauter
reminded his classmates that graduation
represents the fulfillment of the dream
to become a doctor. "I hope the process
of the dream keeps up," he said.

The senior added that the formula
for medical school is the same formula
for the rest of their lives. "Work,
dedication, a hunger to do things well,
and more work," he said. "Go to it
with fear, determination, joy and love
in your hearts."

In thanking all the people who
contributed to each senior's dream, Dr.
Lauter said: "Our reward is your
reward, when tomorrow we each
become a doctor."

Awards and honors were then be ­
stowed on the students. The Alumni
Medal, given by the Alumni Association
each year to the student with the
highest cumulative record, went to
Craig H. Sherman, M.D., who also
received the George J. Willauer Prize
in General Surgery for his excellence
in general surgery during the clinical
years and the William Potter Memorial
Prize in Clinical Medicine for highest
attainment. Dr. Sherman graduated
summa cum laude.

The Lindback Award for Distin­
guished Teaching went to Misao Takeda,
M.D., Associate Professor of Pathology;
and to Bruce E. Jarrell, B.Ch.E., M.D.,
'73, Assistant Professor of Surgery.

achievement award

Joe Henry Coley, M.D., '34, received
the 1982 Alumni Achievement Award
during ceremonies at the annual Alumni
Banquet held June 10 at the Franklin
Plaza Hotel. John H. Hodges, M.D., '39,
presented the award to the obstetrician/gyne­
cologist, who received a standing
ovation.

Dr. Coley was given an honorary
degree of Doctor of Science from
Jefferson in 1980, which marked the
100th anniversary of the graduation of
his father, Andrew J. Coley, M.D. Dr.
Coley followed in his father's footsteps,
practicing obstetrics and gynecology in
his home city of Oklahoma City. The
award recipient was a Clinical Assis­
tant Professor of Obstetrics and Gyneco­
cology at the University of Oklahoma
and continues a private practice.

In accepting the award, Dr. Coley
spoke of his father, who was for many
years the oldest living member of the
Alumni Association, and of the struggles
of the Medical School in its founding
years. It was the determination set
in motion by its founder, George
McClellan, that has carried through
the years, Dr. Coley said.

He then charged each graduate and
alumnus to meet the challenge of
"keeping the faith" of the Medical
School by always standing by Jefferson.
"May she be the bright and guiding
star of eternity!" he said of Jefferson,
emphatic gestures accompanying his
final, strong words.

Dr. Coley served as the Alumni Trus­
tee for over six years, and has served
on the Executive Committee, as a class
agent and as Chairman of the Alumni
Division of the Susquecentennial Fund.
He is also a member of the Founders'
Society and a Fellow in the President's
Club.

A member of the Oklahoma County
Medical Society, the Oklahoma State
Medical Society and the Oklahoma City
Obstetrics and Gynecology Society, Dr.
Coley served as Chairman of the Okla­
hama Medical Board for Teacher's
Retirement for 25 years.

In addition to Dr. Coley's service to
the Jefferson community, he and his
family have been actively involved in
their Oklahoma City community. And
Dr. Coley was a founder or charter
member of numerous organizations in
his home state.

"Those of us who are fortunate
enough to call him friend are thankful
for his stories and his ever-present
gentlemanly manners," Dr. Hodges said.

Joe Henry Coley, M.D., '34
of Dr. Coley. "As a devoted graduate and alumnus, revered physician, distinguished educator and civic leader, it is an honor to name Dr. Coley the recipient of this award."

jeff relationships

For 32 members of the class of 1982 whose fathers graduated from Jefferson Medical College, it was like father, like child at the annual Dean’s Luncheon June 9, when Interim Dean Frank D. Gray, Jr., M.D., recognized these and other Jefferson relationships.


Two pairs of grandfather-grandson relationships can be found in the class of 1982: Thurman Gillespy, Sr. '07 and Albert W.; and Harvey R. Bauman '23 and Daniel J. Stauffer. John S. Monk, Jr. has an even earlier connection with Jefferson—his great grandfather, G. Emmanuel Spotz, graduated in 1897.

senior portrait

In keeping with annual tradition, the Class of 1982 presented Jefferson with a portrait of a faculty member in May. This year’s graduates chose to honor Wolfgang H. Vogel, Ph.D., Professor of Pharmacology and Professor of Psychiatry and Human Behavior.

From the start of the ceremony, the students’ warm feelings for Dr. Vogel were evident. In his opening remarks, Senior Class Representative Russell S. Breish, M.D., said what an outstanding teacher and good friend Dr. Vogel had been to the class over the last four years.

“The impression Dr. Vogel always gave was that teaching was a very important responsibility to him and not just a chore,” Dr. Breish said.

The graduate reminisced that four years ago, when the class first met Dr. Vogel, he had emphasized that the students should try to learn as much as possible about a subject, no matter how trivial it might seem at the time. The next year, in his pharmacology classes, the students soon learned how Dr. Vogel would dedicate himself to that theory in both his teaching and in the extra hours he gave so freely.

“He was always so warm and had a good sense of humor, but more important, he made sure we understood the concepts and didn’t just memorize the facts,” Dr. Breish said.

Taking the podium to present Dr. Vogel’s biographical sketch was Robert Snyder, Adjunct Professor of Pharmacology at Jefferson and Chairman of the Department of Pharmacology at Rutgers University.

Dr. Vogel was born in Dresden, Germany, and completed his schooling in Tubingen and Stuttgart, receiving the German equivalent of a Masters in physical chemistry and a Doctorate in organic chemistry.

His interest in biochemistry led him to look to America for further study. With “no money and no connections,” Dr. Vogel could not achieve his purpose immediately. A tennis game with his future wife, however, provided the necessary key in the form of her brother, who held a position at the Upstate Medical Center in Syracuse, New York. Dr. Vogel completed a post-doctoral fellowship in Upstate’s Department of Biochemistry. While he was there, an order for 100 day-old camels with humps was put through, which to this day has authorities mystified.

Dr. Vogel returned to Germany in 1959 to work with a large chemical company, returning to the United States two years later shortly after his marriage. He joined the Department of Pharmacology of the University of Illinois College of Medicine in 1961 and the National Heart Institute in Bethesda, Maryland in 1964. He then returned to the University of Illinois College of Medicine as an Assistant Professor as well as joining the L.B. Mendel Research Laboratory in Elgin, Illinois.

Joining Jefferson’s Department of Pharmacology in 1967 as an Associate Professor, Dr. Vogel was faced with the task of lecturing, which had become one of his biggest fears as he struggled with the English language. “He would do anything to avoid taking the podium,” Professor Snyder said. But Dr. Vogel quickly made progress, and his fears subsided, Professor Snyder assured.

“Dr. Vogel is known for his great contributions to Jefferson in pharmacology and psychiatry, but it is clear that we are here today because of his great impact on students,” Snyder said. “A very successful professor achieves the respect of his students, and I know of no other teacher who is treated with greater respect than Wolfgang Vogel.”

A Fellow in the American College of Clinical Pharmacology, Dr. Vogel is a member of a number of professional societies, including the American Association for the Advancement of Science and the International Society for Biochemical Pharmacology. The pharmacologist, who has published extensively, also serves on a number of committees and is the recipient of numerous awards, including the Lindback Award for Distinguished Teaching in 1972 from Jefferson. Dr. Vogel has been elected “best teacher” by students consistently as the Parents’ Day Speaker.

Alden Wicks’ portrait of Dr. Vogel was then unveiled, revealing the profes-
Dr. Vogel then took the podium in response. He began with an anecdote from his youth, when he had accompanied his parents on a trip to Vienna. Stopping in one of the old institutions, Dr. Vogel had gazed on the busts and portraits of the scholars on display. "I was young, and full of hope and ambition," he said. "I dreamed that one day my portrait might also hang on the walls of an academic institution. However, these gentle flames of youthful hope were soon extinguished by the gales of life's reality, and the moment of wishful thinking was soon forgotten—or so I had thought, until this year when the class of 1982 informed me that they had chosen me as their subject.

"The words of these students," he continued, "produced a storm in my subconscious, and a flood of all kinds of neurotransmitters in my brain. All of a sudden, I once again saw myself standing in Vienna, looking at the portraits of the great scholars."

Dr. Vogel then talked on his difficulty with the English language. When studying the subject in Germany, he managed to pass only by promising his professor that he would never attempt to speak the language again. When he came to this country, however, the promise had to be broken.

The Professor concentrated the remainder of his talk on the teacher's role and the art of teaching. "Knowledge and wisdom created by research become fruitful only when they are communicated to others in such a way as to set their minds on fire," Dr. Vogel said. "A teacher who is attempting to teach without inspiring in the pupil a desire to learn...is hammering on cold iron."

He said the Jefferson tradition of the senior portrait "is a noble way to stimulate, promote and foster the art of teaching." Honored by the seniors' choice, Dr. Vogel said it will always be one of the highlights of his life. "It will stimulate me to work harder and to come closer to the true art of teaching."

In closing, Dr. Vogel thanked his many friends and colleagues. "But most of all, I thank the students for this great honor and for fulfilling a lifelong dream. And with my thanks to you go my wishes that one day, your dream may also come true."

**neurology chairman**

Robert J. Schwartzman, M.D., has been named Professor of Neurology and Chairman of the Department at Jefferson. His appointment was effective July 1.

Dr. Schwartzman, a graduate of Harvard College, received his medical degree from the University of Pennsylvania in 1965. His post graduate training was taken at Duke Hospital in Durham, North Carolina, and the Hospital of the University of Pennsylvania.
From 1969 to 1971 he was a Clinical Associate at NIH, Medical Neurology Branch.

Following completion of his training he was appointed Assistant Professor of Neurology at the University of Miami School of Medicine and was promoted to Associate Professor in 1974. While at Miami he was Coordinator of student teaching, residency training and postgraduate education.

In 1978 Dr. Schwartzman was appointed Professor of Neurology and Chief of the Division of Neurology at the University of Texas Health Science Center in San Antonio, a position he held until his move to Jefferson this summer.

Certified by the American Board of Internal Medicine and the American Board of Neurology and Psychiatry, he is a member of the American Neurological Association, the American Academy of Neurology, the Society for Neuroscience and the American Academy for the Advancement of Science among others.

His current research activities include the studies of primate motor systems utilizing behavioral, neuroanatomical and neurophysiological techniques; 14C-deoxyglucose autoradiography for the study of normal physiological function, recovery of function following injury, embolic stroke model and neuroanatomical mapping; 2-deoxyglucose, 14C-antipyrine, NADH fluorescence for the study of embolic stroke and cerebral ischaemia and 2-deoxyglucose to study spinal shock.

A member of AOA Dr. Schwartzman has been cited many times for his teaching skills at both Duke University and the University of Texas Health Science Center.

**new departments**

Two new departments will be established in Jefferson's College of Allied Health Sciences, as announced by the TJU Board of Trustees. The new departments of physical therapy and occupational therapy will bring the total number of baccalaureate programs offered by the College to seven.

The new upperdivision curriculums, which are scheduled to begin in September of 1983, will provide students with clinical training at TJUH's Department of Rehabilitation Medicine, which is also the designated Spinal Cord Injury Center of Delaware Valley.

The College's existing programs include: cytotechnology, dental hygiene, medical technology, nursing and radiologic technology.

**last commencement**

After nearly 100 years of service to the nursing profession, Jefferson's School of Nursing ended June 10 when the final members of the Class of 1982 passed through the traditional arch of roses at commencement.

"Our faculty recommended that the School be closed because of recruitment problems," according to Doris R. Bowman, R.N., M.D.Ed., Director of the School of Nursing since 1958. Factors contributing to the decision to close the School include the trends in nursing education to designate the baccalaureate degree as the entry level for professional nursing.

The roots of the School run deep. In 1825, soon after Jefferson Medical College was founded, a Teaching Infirmary was begun to provide medical students with instruction in care for ambulatory and surgical patients. It soon became evident that further patient care was needed, so women were hired to provide nursing services.

In 1891, Jefferson Hospital Training School for Nurses began a two-year course of study under Ella Benson, the School's first director. The program was soon lengthened to three years, remaining so until recently, when it was shortened first to 35 months, and then to 33.

The first commencement in 1893 saw five graduates. By then, the program had grown considerably and the first nurses' home, at 518 Spruce Street, was opened. The 1907 opening of an eight-story hospital building and the increase in hospital patients meant an expansion in enrollment for the School. Student nurses then gained all their training in the hospital rather than, as done previously, in the patients' homes.

Also, the first classroom for nurses, at 1020 Sansom Street, introduced the first visual aids in nursing training with the "Chase Doll," a mock patient for students to practice on, and a skeleton.

The '20's brought new developments in housing quarters for the nurses, including an eight-story dormitory. The School's first full-time instructor, Nora E. Shoemaker, was appointed during that time. Until 1931, small monthly remunerations had been given the students. The end of this practice made it possible to employ more graduates so that students could be released from duty in the wards to attend classes.

A nursing library consisting of 1,200 volumes was presented the School in 1936, and in 1940, major curriculum changes were made in line with the "Curriculum Guide for Schools of Nursing," published in 1937 by the National League for Nursing Education. The next years brought the start of student government, a wage of fifty cents an hour for working in the Scott Memorial Library, and the opening of the James R. Martin Residence at 201 South 11th Street.

In 1960, the School became fully accredited by the National League for Nursing, a status it has maintained, and in 1968, it joined the newly created College of Allied Health Sciences when Jefferson became a University. The Board of Trustees accepted a recommendation from the School's faculty in 1979 to phase out the traditional diploma program. And 1982, with the last graduates, brings the School's alumni to 5,078.

Miss Bowman, who graduated from the Jefferson School of Nursing (then still called the Jefferson Medical College Hospital Training School for Nurses) in 1942, served with the Jefferson Unit (38th General Hospital) during World War II. This unit was stationed in the desert near Cairo, Egypt, where Miss Bowman was one of 125 nurses who cared for hundreds of casualties of General Rommel's march across Africa.

In 1954, Miss Bowman began her career at Jefferson as an Instructor in Pediatrics. By 1958, she was an Associate Director of Nursing. "In those
days, the nursing school as well as nursing service were under a Director of Nursing," she said. In 1958, changes in organization resulted in her appointment as Director of the School of Nursing.

Mabel C. Prevost, who held the Director’s title at that time, was promoted to Assistant Hospital Director, making her responsible administratively for the School until 1968.

The closing of the School of Nursing has brought back many memories of the past for Miss Bowman. “It’s the end of an era,” she said.

**who’s who chosen**

A JMC selection committee has awarded 21 medical college students the honor of appearing in this year’s *Who’s Who Among Students in American Universities and Colleges* for the prestigious 48-year-old annual directory of outstanding students.

According to Associate Dean and Director of Student Affairs James H. Robinson, M.D., criteria for the award include academic achievement and participation and leadership in academic and extracurricular activities. Service and citizenship to the Medical College and potential for future achievement are considered as well.

The Jefferson students join an elite group of students selected from more than 1,300 institutions of higher learning in this nation and several foreign countries.

Members of the faculty, administration and student body sit on the selection committee, which is chosen yearly by Dr. Robinson.

**trustees elected**

New developments in the Thomas Jefferson University Board of Trustees include the re-election of James E. Clark, M.D., ’52 as Alumni Trustee, and the election of Thomas A. Cooper, President and Director of The Girard Company and Girard Bank, to a three year term.

Dr. Clark was re-elected for a three-year term by a general balloting of the Jefferson Medical College alumni. Dr. Clark began his first term as Alumni Trustee in July, 1979. The other Alumni Trustees are John H. Hodges, M.D., ’39 and Carl Zenz, M.D., ’49.

Dr. Clark is a Professor of Medicine at Hahnemann Medical College, and is Chairman of the Department of Medicine and Chief of the Nephrology Section at the Crozer-Chester Medical Center. Appointed Assistant in Medicine at Jefferson in 1956, he was an Associate Professor of Medicine when he accepted his new position in 1968.

Board certified in internal medicine, Dr. Clark is a Consultant to a number of area health centers and is a member of the American Federation for Clinical Research, the American Society for Advancement of Science, the American Society for Artificial Internal Organs and the American Society of Nephrology. He also serves on numerous medical committees.

The election of Mr. Cooper to the Board was announced by Frederic L. Ballard, Esq., Chairman of the Board of Trustees.

“Mr. Cooper’s breadth of experience and wide range of interests will be an important asset to the University as we face the challenges of the 1980’s,” Mr. Ballard said. “We are pleased to welcome him as a new member of the Board.”

Mr. Cooper joined Girard in 1962 and has held numerous positions in the consumer, operations and corporate areas of the bank. In addition to his professional memberships, which include the American Bankers Association Governing Council and the steering committee of the Philadelphia Mortgage Plan, Mr. Cooper is actively involved in the community.

He is a member of the Board of the Philadelphia Rehabilitation Plan, the Board of Directors of the Philadelphia Urban Coalition, Chairman of the Southeastern Pennsylvania Chapter of the American Red Cross, Trustee of Children’s Hospital of Philadelphia and a member of the Board of Directors of Haverford College.

A graduate of Haverford College and Drew University, the new Board member attended the Graduate Management Program of the Wharton School of the University of Pennsylvania and the Management Development Program at the Harvard Business School.

**presidencies**

Two Jefferson faculty members have been elected to serve as President of major medical societies.

Gerald Marks, M.D., ’49, Professor of Surgery, is the founding President of the Society American Gastrointestinal Endoscopic Surgeons (SAGES), a new organization formed by gastrointestinal endoscopic surgeons to address the needs of their specialty.

A Diplomate of both the American Board of General Surgery and the American Board of Colon and Rectal Surgery, Dr. Marks is currently serving as President of the Pennsylvania Society of Colon and Rectal Surgeons and is President-Elect of the Northeast Society of Colon and Rectal Surgeons. The new President is also a Fellow in the American College of Surgeons and the American College of Colon and Rectal Surgeons, and serves as Associate Editor and Editorial Consultant to four medical journals.

Nagalingam Suntharalingam, Ph.D., Professor of Radiation Therapy and Nuclear Medicine (Medical Physics) has been named President-Elect of the American Association of Physicists in Medicine in 1982. Dr. Suntharalingam will serve as President of the national organization in 1983.

Certified in radiological physics by the American Board of Radiology, Dr. Suntharalingam first joined Jefferson for two years as an Instructor in 1962, and then again in 1967 as Associate Professor of Radiology (Medical Physics). His present positions began in 1971, and in 1973, he became Chief of the Medical Physics Section of Jefferson’s Department of Radiation Therapy and Nuclear Medicine.

Having served the American Association of Physicists in Medicine in varying capacities since 1963, Dr. Suntharalingam also belongs to the Health...
Physics Society, the Society of Nuclear Medicine and the American College of Radiology. He has served on numerous medical committees, including the Radiological Society of North America and the Radiation Therapy Oncology Group.

honors etcetera

Paul J. Fink, M.D., Professor and Chairman of the Department of Psychiatry and Human Behavior at Jeff, received the 1982 Vestermark Award in May, an honor given each year to recognize the outstanding contribution of an educator to the training and development of psychiatrists.

Dr. Fink received the award at the annual American Psychiatric Association meeting, which was held in Toronto, Canada. In response to receiving the award, Dr. Fink addressed the Association on "The Enigma of Stigma: Its Effect on Psychiatric Education."

Elmer H. Funk, Jr., M.D. '47, is the 1982 recipient of the Henry W. Elliott Distinguished Service Award of the American Society for Clinical Pharmacology and Therapeutics. The award is presented annually to recognize outstanding service to the ASCPT by one of its members. Dr. Funk, who is Director of Clinical Research for the Merck Sharp & Dohme Research Laboratories cardiovascular/renal group, has been on the Jefferson faculty since 1968, where he now holds the title of Clinical Assistant Professor of Medicine. The Secretary-Treasurer of ASCPT since 1973, Dr. Funk served as Assistant or Associate Secretary-Treasurer the preceding six years. In addition, he is an Associate Fellow of the American College of Cardiology; Senior Member of the American Federation for Clinical Research; member of the Board of Directors of the American Diabetes Association, Greater Philadelphia Affiliate; Vice President and Director of the Garfield G. Duncan Research Foundation; Trustee of the Edna G. Kynett Memorial Foundation; and President of Camp Firefly for Diabetic Children.

Frank D. Gray, Jr., M.D., Interim Dean and Professor of Medicine has been named the Magee Emeritus Professor of Medicine at Jefferson.

William S. Allerton, M.D., has been appointed Clinical Professor of Psychiatry and Human Behavior at Jefferson.

Robert L. Breckenridge, M.D. '44, has been named Honorary Clinical Professor of Pathology at Jefferson.

Richard E. Brennan, M.D. '72, has been promoted to Professor of Radiology at Jefferson.

James F. Burke, M.D., '66, has been promoted to Clinical Professor of Medicine at Jefferson.

David M. Capuzzi, M.D. '84, has been appointed Professor of Medicine at Jefferson, Lankenau affiliate.

Raphael J. DeHoratius, M.D. '68, has been promoted to Professor of Medicine.

Joseph C. Flanagan, M.D. '63, has been promoted to Professor of Ophthalmology at Jefferson, Wills affiliate.

Abraham Freedman, M.D., has been named Honorary Clinical Professor of Psychiatry and Human Behavior at Jefferson.

Marlys H. Gee, M.D., Ph.D., has been promoted to Clinical Professor of Physiology at Jefferson.

Theodore A. Hare, Ph.D., has been promoted to Professor of Pharmacology at Jefferson.

M. Bernard Hermel, M.D., has been named Honorary Clinical Professor of Radiology at Jefferson.

Ronald P. Jensch, Ph.D., '66 has been promoted to Clinical Professor of Anatomy.

Leonard Katz, M.D., has been promoted to Clinical Professor of Neurology at Jefferson, VA Wilmington affiliate.

Henry D. Lederer, M.D., has been appointed Visiting Professor of Psychiatry and Human Behavior at Jefferson.

Maurice E. Linden, M.D., has been named Honorary Clinical Professor of Psychiatry and Human Behavior at Jefferson.

Robert C. Mackowiak, M.D. '64, has been promoted to Clinical Professor of Medicine at Jefferson.

Roland W. Manthey, Ph.D., has been named Honorary Professor of Pharmacology at Jefferson.

Joel Morganroth, M.D., has been promoted to Professor of Medicine at Jefferson, Lankenau affiliate.

Melvin L. Moses, M.D. '62, has been promoted to Clinical Professor of Surgery at Jefferson.

Robert D. Mulberger, M.D., has been named Honorary Clinical Professor of Ophthalmology at Jefferson, Wills affiliate.

Charles R. Noback, Ph.D., was a Visiting Professor of Anatomy at Jefferson during April and May.

Paul J. Poirond, M.D. '41, was named Emeritus Professor of Psychiatry and Human Behavior at the Dean's Luncheon on June 9.

Theodore P. Reed, III, M.D., has been promoted to Clinical Professor of Obstetrics and Gynecology at Jefferson, Lankenau affiliate.

Leonard Reichman, DDS., has been named Honorary Clinical Professor of Otolaryngology at Jefferson.

Harold J. Robinson, M.D., has been promoted to Clinical Professor of Medicine.

Frederick B. Wagner, M.D. '41, has been named the Grace Revere Osler Emeritus Professor of Surgery. The appointment was made at the Dean's Luncheon June 9.

Burton L. Wellenbach, M.D., 'J44, has been promoted to Clinical Professor of Obstetrics and Gynecology.

H. Edward Yaskin, M.D. '35, has been named Honorary Clinical Professor of Neurology at Jefferson.
REUNIONS

Each year, the Clinic Talks kick off Reunion Week activities with a presentation by a member of each reunion class. The talks, which fill the morning before the Dean’s Luncheon, allow alumni to share ideas, research and memories. That evening and Saturday night, individual classes met together for their reunion parties. For some, only five years had passed since they last saw their classmates—for others, it had been decades. But for all, it was a joining of Jefferson past and present. The first Clinic talk, by William B. West, M.D., '32, begins on the next page.
Fifty years. My first impulse, like yours I suppose, is to say that many years couldn't possibly have passed. The pictures we have just seen, however, are ocular proof that indeed it has been a half century since we graduated.

But more has changed than just the Jefferson campus, especially in the practice of medicine. Today, I want to talk about just two of these changes: medical liability and high technology.

As you can well remember, when we went into practice, malpractice suits were unheard of. And this was the case for at least two decades. I think I bought my first medical liability policy in the early 50s.

Those were indeed the pastoral days of medical practice, and they continued more or less undisturbed even into the early '70s.

Then, the sky fell in. Vividly imprinted on the memory of every physician practicing in Pennsylvania in 1975 is what we refer to as the "Malpractice Crisis." And although my comments

Dr. West, who began his presentation with slides of Jefferson in the late '20s and early '30s, is an obstetrician/gynecologist in Huntingdon, Pennsylvania.
focus on Pennsylvania, similar crises occurred throughout the country.

Some of the largest carriers almost without warning declared that malpractice insurance was too risky — was too unprofitable for them — and that they were going to stop doing business in Pennsylvania. At the heart of this crisis was the availability of malpractice insurance rather than its cost. Through the efforts of many, not the least of which was the Pennsylvania Medical Society, physicians in the state weathered this malpractice crisis.

A Joint Underwriting Association (JUA) was created as a last resort source of medical liability insurance and the Catastrophe Loss Fund was established to pay claims above $100,000 to $1 million. In addition, PMS set up the Pennsylvania Medical Society Liability Insurance Company (PMSLIC), its own medical liability insurance company. Through these initiatives the problem of insurance availability was more or less solved.

As an aside, I would just like to point out that PMS’s efforts during this mid-70s’ crisis demonstrate the invaluable function a statewide medical society serves. I have a great fondness and a deep respect for PMS. I was President of the Society in 1965 and know first-hand the commitment it has to serve members. I think we need to impress our younger colleagues who may have doubts about the importance of organized medicine of the absolute need to belong not only to PMS but to the AMA as well.

As it turned out, solving the availability problem of medical liability insurance only postponed the larger problem — that of premium cost. Skyrocketing costs is at the heart of the rapidly evolving crisis currently facing physicians.

If the necessity for having medical liability insurance never crossed our minds when we began medical practice, what would we have thought if we were told that a neurosurgeon practicing in the Philadelphia area would be paying almost $15,000 a year for medical liability protection in 1982?

Talk about change.

How this current medical liability crisis will turn out falls within the area of speculation. What I can tell you, however, is that PMS is busy devising a plan to remedy the inequitable and intolerable burden of the present medical liability system.

This plan, to be presented to the PMS House of Delegates meeting this fall in Philadelphia, will be the work of a special task force appointed by PMS President and Jefferson alumnus, Raymond C. Grandon, M.D. ’45, and headed by John Y. Templeton, III, M.D. ’41, President of the Jefferson Hospital Medical Staff and Professor of Surgery. We can be proud of Jefferson’s continued contribution to all aspects of medical practice.

How we have come to the point of a second malpractice crisis involves many complexities, some of which can be explained and some of which defy explanation. A partial explanation, however, I think relates to the second change that has occurred in medicine over the last 50 years — the developments in health care technology.

Modern technology and medical research have done much to change the practice of medicine. CAT scanners, organ transplants, new drugs, sophisticated life-sustaining equipment, microsurgery — all of these and more create for our patients a medical care environment where state of the art care is the rule rather than the exception.

And I am living proof of this, as I stand here before you today on two

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Carl G. Whitbeck, M.D., Speaker for the Class of '37.

Herbert T. Caskey, M.D., Speaker for the Class of '72.

Cynthia B. Altman, M.D., Speaker for the Class of '77.
artificial hips.

But I often think that the cost for these technological advances—advances that none of us would want to do without—has been more than just financial. I think that these advances have caused an adverse change in the physician-patient relationship.

Some of the changes brought on by technological advances are unavoidable. Clearly high technology requires highly trained specialists. Clearly high technology is responsible for substantial increases in health care costs. And clearly high technology, by its very nature, depends more on the science than on the art of medicine. These are the facts of modern medicine.

Co-existing with these facts, however, are the expectations of patients. They want more from their physicians than just a cold diagnosis and a clinically appropriate treatment. Patients expect, and because of the rich tradition of medical practice, are probably right in expecting from their doctor, the support and understanding that can only come from sincere personal contact.

Such expectations aren’t new or surprising to us. Jefferson has long been noted for producing primary care physicians, so a patient relationship characterized by sincere personal contact is one with which we are familiar both through training, and for many of us, through several decades of general practice.

Now that we are the elder statesmen of medicine, I think we should use the experience we have gained over the years to counter the unnecessary effects of the new technology. We can perhaps do this best by reminding our younger colleagues that it is because of the technological advances in medicine that we should take that extra step to insure that our patients are treated compassionately and understandingly. Patients need such treatment more now than ever before. And now more than ever physicians need to be mindful of this.

I think we have to ask ourselves why at the very time when we are providing the highest quality of health care ever available, physicians are facing more and more malpractice litigation. I think that one explanation is that patients feel alienated from their physicians. Consequently, patients have much less reluctance than in the past to bring legal action for results that they are unhappy about, whether or not these results are real or imagined.

As elder statesmen we need to counsel our younger colleagues that dramatic changes in technology don’t have to lead to a break down in the kind of personal contact that once existed between physicians and patients. We might even suggest to our younger colleagues that at least a partial relationship might exist between such breakdowns in contact and the increases in malpractice litigation. We might suggest that while much in the practice of medicine has changed over the last 50 years, some of what has changed may not be beneficial either for physicians or patients, that patients still expect the art of healing as well as the science of medicine from us.
A rigorous description of the breathing pattern is generally not included in the documentation of the physical examination, except for phrases like “appears dyspneic”, “tachypneic”, “has labored breathing.” The clinician rarely watches the movements of the respiratory system for more than 30 seconds and cannot describe accurately the regularity or periodicity of breathing that occurs over long time intervals. Major advances have taken place in both interpretation of alterations of time and volume components of the breathing pattern and non-invasive techniques for its monitoring are now reliable and practical. The latter permit long-term observations and avoidance of devices that require a physical connection to the airway, viz, spirometers or pneumotachographs which are associated with increased tidal volume, fall of respiratory frequency and change in rhythmicity of breathing. Knowledge gained from non-invasive monitoring helps the physician to translate visual observations of the breathing pattern into clinical decision-making.

Although numerous devices have been proposed for non-invasive ventilatory monitoring, respiratory inductive plethysmography (Respiritrace®, Ambulatory Monitoring, Inc., Ardsley, NY) is the only practical, clinical approach to semiquantitative analysis of the breathing pattern. Other devices either provide qualitative data only, change calibration with postural changes or cannot be readily employed in patients with lung disease. To accurately measure tidal volume, the volume excursions of both the rib cage and abdomen must be accounted for since the respiratory system moves with two degrees of freedom. The respiratory inductive plethysmograph consists of two coils of Teflon insulated wire sewn onto elastic bands encircling the rib cage and abdomen connected to an oscillator module. Changes in cross-sectional area of the rib cage and abdominal compartments alter the self-inductance of the coils which after appropriate calibration to spirometry, reflect tidal volume.

**Theoretical Background**

In classic investigations of respiratory control, minute ventilation \( V_{\text{min}} \) is taken as the product of tidal volume \( VT \) and respiratory frequency \( f \):  
\[
V_{\text{min}} = VT \times f.
\]

Respiratory rate can be calculated as the reciprocal of the time of a total respiratory cycle of a single breath, \( T_{\text{TOT}} \):  
\[
V_{\text{min}} = VT \times \frac{1}{T_{\text{TOT}}}.
\]

The first parameter, \( VT/T_I \), has been termed the mean inspiratory flow rate and the second, \( T_I/T_{\text{TOT}} \) is the fractional inspiratory time or effective timing ratio. \( VT/T_I \) is proportional to respiratory center drive particularly when pulmonary mechanics are normal or only moderately comprised. With high grade airways obstruction, it may not adequately reflect respiratory center output, but this point has not been rigorously investigated. The timing ratio may diminish with airways obstruction and increase with stimulation of J receptors located in the alveolo-capillary membrane as in pulmonary edema.

Normally, in the supine position, about 30% of the tidal volume is contributed by the rib cage and 70% by the abdominal excursions. In the upright position, about 70% of the movement is due to the rib cage and 30% abdomen. A major contribution by the rib cage to tidal volume in the supine position implies intrinsic or extrinsic dysfunction of the diaphragm, e.g., minimal excursions may occur in severe emphysema when diaphragms are markedly depressed or in asci where the normal descent of the diaphragm is prevented.

Normally, the rib cage and abdominal compartments move in phase, but lung disease may cause paradoxical movements of one compartment to another. This can be described utilizing visual observation or with indices computed from respiratory inductive plethysmographic data. One such index is the “maximum compartmental amplitude” (MCA). The absolute values of the peak to peak rib cage and peak to peak abdominal signals are added and compared to tidal volume, defined as the peak to peak value of the sum of these signals. The time relations of the tidal volume calculated from the sum generally correspond to the tidal volume recorded by spirometry. Tidal volume is equivalent to MCA if the rib cage and abdominal signals are in phase, but if the peak to peak excursions of the rib cage and abdomen are out of phase, then MCA exceeds tidal volume to a variable extent.

**Breathing Pattern Parameters**

Values for timing and volume components in semi-recumbent normals and patients with selected disease states are listed in the Table. These data are calculated from the mean of all breaths collected over a 15 minute period utilizing respiratory inductive plethysmography.

In normal subjects, the respiratory rate ranges from 10.8 to 22 breaths per minute (mean ± 2SD) and tidal volume from 223 to 555ml (mean ± 2SD) (see Table). The values for rate are generally higher and tidal volume lower than normal values reported in the literature; the latter were obtained while the subject breathed into a spirometer through a mouthpiece with the nose occluded by a clip. Mean inspiratory flow \( (VT/T_I) \) has a relatively narrow range of variance, 148 to 348 (mean ± 2SD). Inspiratory time in the normals always exceeds one second and the MCA/VT ratio is less than 1.06.

Patients with clinically asymptomatic asthma show breathing patterns similar to normal except for a diminished fractional inspiratory time \( (T_I/T_{\text{TOT}}) \) due to a prolonged expiratory time (see Table). There is a tendency for greater rib cage contribution to tidal volume; MCA/VT remains within normal limits.

Cigarette smokers with either normal pulmonary function or evidence of small airway disease differ from normals in several ways (see Table). The most striking differences are their greater \( VT/T_I \) and minute ventilation. Heightening of respiratory center drive is due to nicotine stimulation of the respiratory center and peripheral chemoreceptors. Although the rate is

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Dr. Sackner is Professor of Medicine at the University of Miami School of Medicine and Director of Medical Services and Senior Attending Physician at Mount Sinai Medical Center.
Breathing Pattern Parameters (MEAN±SD)

<table>
<thead>
<tr>
<th></th>
<th>Normals (n=28)</th>
<th>Asymptomatic Asthma (n=16)</th>
<th>Smokers (n=22)</th>
<th>Chronic Obstructive Lung Disease (n=13)</th>
<th>Restrictive Lung Disease (n=6)</th>
<th>Ventilator Support Patients (n=10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$V_{\text{min}}$ (L/min)</td>
<td>6.04±1.18</td>
<td>6.02±1.94</td>
<td>8.18±2.54</td>
<td>8.60±2.86</td>
<td>11.18±.70</td>
<td>7.43±2.94</td>
</tr>
<tr>
<td>$f$ (breaths/min)</td>
<td>16.4±2.8</td>
<td>16.6±4.7</td>
<td>18.8±3.1</td>
<td>21.0±4.8</td>
<td>29.1±6.3</td>
<td>31.5±6.7</td>
</tr>
<tr>
<td>$V_T$ (ml)</td>
<td>389±83</td>
<td>464±244</td>
<td>470±105</td>
<td>456±199</td>
<td>410±71</td>
<td>239±84</td>
</tr>
<tr>
<td>$T_I$ (sec)</td>
<td>1.65±.31</td>
<td>1.69±.54</td>
<td>1.44±.27</td>
<td>1.17±.29</td>
<td>.93±.17</td>
<td>.84±.15</td>
</tr>
<tr>
<td>$V_T/T_I$</td>
<td>.425±.030</td>
<td>.402±.039</td>
<td>.398±.033</td>
<td>.350±.030</td>
<td>.420±.022</td>
<td>.398±.041</td>
</tr>
<tr>
<td>$V_T/T_{TOT}$</td>
<td>248±50</td>
<td>288±121</td>
<td>345±95</td>
<td>449±111</td>
<td>458±23</td>
<td>328±141</td>
</tr>
<tr>
<td>$%RC/V_T$</td>
<td>30±21</td>
<td>47±12</td>
<td>48±13</td>
<td>42±27</td>
<td>36±13</td>
<td>64±26</td>
</tr>
</tbody>
</table>

higher and inspiratory time is lower than normals, the overlap of these values does not permit separation between the two groups by physical examination.

Patients with chronic obstructive lung disease with or without CO₂ retention characteristically breathe with slightly higher rates than normals and show a markedly elevated respiratory center drive as reflected by increased $V_T/T_I$, 449ml/sec vs. 248ml/sec in normals (see Table). Inspection, auscultation and palpation of the rib cage and abdomen alert the clinician to the increased $V_T/T_I$ because of the accompanying diminution of inspiratory time. Minute ventilation is slightly increased above the normal, but there is a broad range of values with the lower minute ventilation correlating fairly well with CO₂ retention. Despite the increased respiratory center drive due to increased neural afferent input from airways, chest wall and/or diaphragm, mechanic obstruction to airflow prevents a proportional increase of ventilation. The contribution of rib cage movement to tidal volume in the supine position is often increased. MCA/$V_T$ often exceeds 1.06 because of the paradoxical movements between rib cage and abdomen.

Persons with restrictive lung disease generally have markedly elevated respiratory rate, mean 29.1 vs. 16.4 breath/min in normals (see Table). Tidal volume does not differ from normals and because of the increased rate, resting minute ventilation is almost doubled. In contrast to chronic obstructive lung disease, the similarly elevated values of $V_T/T_I$ in restrictive lung disease lead to the expected rise of minute ventilation. Inspiratory time is less than one second and this is easily detected by physical examination. MCA/$V_T$ is generally normal because both rib cage and abdomen move in phase.

Patients assisted by intermittent mandatory ventilation have a characteristic breathing pattern. The management of these patients with mechanical ventilators was employed because of respiratory insufficiency due to pneumonia, pulmonary edema, and postoperative major abdominal surgery. Rapid, shallow breathing with a brief inspiratory time is present in the non-assisted periods (see Table). Mean inspiratory flow may be normal or elevated. The most striking difference between these patients and the other disease categories is the preponderance of rib cage contribution to tidal volume. The majority of these patients have MCA/$V_T$ greater than 1.06 with values as high as 1.54. The paradoxical motion between rib cage and abdomen suggests that the ventilator support is required because of diaphragmatic muscle fatigue.

Rhythmicity of Breathing Pattern

In normals, asymptomatic smokers and asthmatics, and patients with restrictive lung disease, the rhythm, i.e., rate, tidal volume and/or end-expiratory level, is usually quite regular. Either none or one to two sighs occur over a 15 minute observation period. Many of the patients with chronic obstructive lung disease have periodic crescendo-decrescendo patterns analogous to Cheyne-Stokes breathing. Others may show clusters of sighs alternating with periods of rapid breathing.

In patients with anxiety neurosis and dyspnea with normal pulmonary function by the usual tests, the breathing rhythmicity may be quite disturbed. This ranges from sighs every 30 to 60 seconds, to alternating apneas, rapid shallow breathing and clusters of slow, deep breaths. If these patients are placed on a mouthpiece breathing with the nose occluded by a clip, the irregular patterns may become more regular and the erratic breathing pattern masked.

Non-invasive monitoring of the breathing pattern is a useful aid to diagnosis of lung disease, respiratory muscle function, and anxiety reactions. Utilization of this information increases the diagnostic acumen of the clinician in the approach to the interpretation of breathing pattern alterations detected by physical examination.
The Role of the Physician in the Nuclear Navy

by Joseph W. Sokolowski, Jr., M.D., '62

On Navy Day, 27 October 1945, the then Chief Executive, Harry S. Truman commented, "what the distant future of atomic research will bring to the fleet which we honor today no one can foretell. Control of our sea approaches and the skies above them is still the key to our freedom and to our ability to help enforce the peace of the world". Almost 200 years previously, John Paul Jones, as a ship's captain observed, "I wish to have no connection with any ship that does not sail fast, for I intend to go in harm's way". The combination of speed and endurance were served by the introduction of nuclear propulsion.

In 1938, the German scientists Otto Hahn and Fritz Strausmann observed that when radium atoms are bombarded with neutrons, a few of the atoms split releasing tremendous amounts of energy — "nuclear fission." In 1946, Phillip H. Abelson submitted his report on the feasibility of the development of the "Atomic Energy Submarine." Under the guidance of Captain Hyman G. Rickover, the aspirations of many people were fulfilled when the Nautilus was finally launched as the world's first nuclear powered vessel in 1954.

Concurrent with the development of nuclear propulsion and nuclear weaponry has been the emergence of a radiation health program whose purpose is to preserve and maintain the health of personnel so that they may accomplish their duties in areas potentially contaminated with radioactive material and fields of ionizing radiation. The program is supported by the combined endeavors of medical, engineering and radiation control personnel.

The specific responsibilities of medical personnel are the development and maintenance of physical standards for personnel exposed to ionizing radiation. Those conditions are identified which indicate that radiation exposure might cause an increased risk to an individual radiation worker. No one is allowed to enter an area where radiation exposure may be received before completing the radiation examination and receiving an individual dosimetry unit for monitoring the amount of radiation received. The radiation medical examination includes a review of the patient's medical history to determine previous radiation exposure, a personal and family history of malignancy, and a history of radiation therapy. The examination pays particular attention to any signs suggestive of malignancy or the presence of cataracts.

Established radiation standards and guides are applied to individual personnel exposed to ionizing radiation. External radiation controls include the limitation of exposure time that stems from a radioactive source, an increase in the distance between the radiation source and the worker, utilization of appropriate shielding materials, and allowing radioactive material to decay for a period of time to reduce exposure to personnel.

Internal radiation controls include: the avoiding of inhalation, ingestion and absorption. Limits have been established for external exposure to ionizing radiation. Generally personnel exposures will not exceed 0.5 rem in a regular calendar year. Naval physicians are encouraged to investigate physiologic effects of radiation.

There are approximately 326 nuclear propelled surface vessels and submarines in operation at the present time. The majority are units of the American and Russian Navies.

The potential exists for nuclear power plant accidents. Nine such accidents were reported to the public between 1954 and 1961.

In nuclear reactors water circulates through a closed piping system to transfer heat from the reactor core to a secondary steam system isolated from the reactor cooling water. Small amounts of corrosion products are carried by the reactor coolant and these may be deposited on the reactor core and become radioactive. A portion of this radioactivity will be ultimately removed by a purification system; but that which is not, will be deposited in the piping system.

The reactor core itself is installed in a heavy walled pressure vessel within a primary shield which limits radiation exposure. A secondary shield encloses the reactor plant piping system. Access to the reactor compartment itself is permitted only after the reactor is shut down. Radiation exposure to personnel usually occurs during either inspection, maintenance or repair. The source of this radiation is cobalt-60 deposited within the piping system.

Radiation exposure to personnel outside the propulsion plant spaces during reactor plant operation is not any greater than natural background radiation. For submarine operating personnel outside of the propulsion plant, the combination of low natural radioactivity in ship construction materials, and
reduced cosmic radiation underwater actually provides less radiation exposure at sea than the public receives ashore. Generally, operators of nuclear propulsion plants receive more radiation exposure in port during maintenance and overhaul than they receive during operation at sea.

Hazardous situations occur when nuclear weapons are exposed to an open flame, a drop fractures the warhead, or when the detonations system is exposed to electromagnetic radiation guidance systems. Radiologic hazards include plutonium, uranium and tritium, the latter being a hazard only in sealed environments such as submarines and weapons magazines. Non-radiologic hazards include shield materials such as lithium, lead and beryllium. Lithium may be an explosive or mucous membrane irritant. Lead exposure via inhalation or absorption through the skin is primarily toxic to the nervous system and bone marrow. Beryllium represents an inhalational hazard and elicits a granulomatous reaction similar to sarcoid.

Whenever a nuclear “incident” occurs, whether as a result of a reactor or nuclear weapon explosion, the medical department in a shipboard environment is responsible for establishment of triage and treatment of the injured, whether they be contaminated with radioactive material or not. Contaminated uninjured personnel are not the responsibility of the medical department unless there is residual, resistant or internal contamination. Decontamination of uninjured or deceased personnel is accomplished like a surgical procedure by non-medical personnel. Gowns, masks, boots, etc. are worn. All contaminated clothing is removed and tagged for disposal. The majority of contaminants are removed by soap and water. Hair may need to be clipped closely. Aural and ocular cavities are irrigated with water.

Radiation surveys of both shipyard and Naval personnel have demonstrated that exposure levels have decreased to 1/6 of their level in 1966, although the number of nuclear powered vessels has nearly doubled during this period of time. Since 1967, no personnel has exceeded the Navy self-imposed limit of 5 rem exposure per year for radiation associated nuclear propulsion plants.

Finally, training of paramedical personnel in areas of radiation health, protection standards, etc., is updated yearly. Training and counselling of non-medical crew members relevant to the hazards of radiation is performed. Personnel who work with nuclear weapons or have access to them are screened with regards to reliability, physical competence, mental alertness, proficiency and dependability.

The health risks of the occupational radiation worker (civilian or military) are no greater than normal day-to-day activities.
In a previous article for the JAB (Spring 1973) I indicated my interest in the field of anthropology as a discipline related to medicine and its sub-specialties. In that article, the relationship between anthropology and medicine was clearly defined by a mummy dissection that was accomplished at the Hospital of the University of Pennsylvania at which time it was established that arthritis and tuberculosis were existent in prehistoric days.

Piblotko is another disease that is known to anthropologists, but not well known to physicians until recent years. This disease affects Eskimos as well as those individuals living in cold climates that are subjected to a paucity of sunlight for six months each year.

It was first described by Dr. Admiral Peary in his search for the northwest passage in 1896. Upon his arrival in the Arctic circle, he noticed many Eskimos exhibiting very peculiar behavior patterns. These were manifested by a severe degree of psychomotor agitation in which the afflicted individual tended to defy gravity by flying through the air. These individuals also removed their parkas and in their poorly clothed state rolled in the snow. They were subsequently observed to have had twitching movements of the extremities and spasms of the fingers. For many years, the origin of this disease was not known. This isolated group of Eskimos were treated by witch doctors or shamans. The shaman with his grotesque head gear over this parka as well as a club with multiple objects in his hands attempted to cure these patients by stimulating these movements through the air. He also waved his hands in a frenzied manner over the face of the patient as he was rolling on the ground and suffered a generalized convulsive seizure. The treatment was unsuccessful; but nevertheless, the families continued to consult the witch doctors for help and direction.

Later, medical missionaries observed similar findings in a population of Alaskan Eskimos living near the Arctic circle; and this syndrome, too, was noted among the Eskimos in Greenland.

When physicians became involved with the treatment of this Eskimo, their approach became more scientific. An examination of the diet became the primary concern. It was found that the Eskimo ate primarily the meat of the caribou, and animal related to the deer and whose chemical composition is practically devoid of calcium. In the past few years, the neuro-chemist has become aware of the importance of calcium metabolism in the nervous system. Calcium is essential in suppressing membrane irritability. When calcium is present in excessive amounts, coma is present. When calcium is present in low amounts, tetany and an extreme degree of hyperirritability results. Calcium is involved, therefore, in bone formation as well as in muscle contraction and in the conduction of nerve impulses. At the synapse, calcium is involved in the regulation of acetyl choline which is released upon stimulation; and therefore, hypocalcemias produce increased neuromuscular irritability.

The second aspect is the diet as noted, for calcium is found in cereal grains and absorbed through the gastrointestinal tract through the action of Vitamin D and a parathryoid hormone. This latter hormone is ineffective in the absence of Vitamin D. Calcium, therefore, cannot be adsorbed if Vitamin D is not present. Since the Eskimo does not synthesize Vitamin D through the skin by the action of ultraviolet light from the sun, this vitamin is not stored in the liver and is another factor in the development of hypocalcemia in Eskimos. Thus, the scientific basis of Piblotko has been established as a disease related to hypocalcemia and occurring in ethnic groups subjected to an absence of sunshine for a six-month period of time and also through a failure to produce Vitamin D and subsequent calcium absorption through the gastrointestinal tract.

Physicians also reported that Eskimos have a tendency to develop frequent ear infections because of their exposure to cold and snow. In some instances, they develop perforations of the eardrum; and their central nervous system symptoms become intensified. These consist primarily of vertiginous episodes characterized by spinning sensations of the head with nausea or vomiting. With such a complication, the Eskimo has a tendency to become markedly uncommunicative and also develops predominant social withdrawal patterns. These may be accompanied by psychiatric manifestations of extreme agitation complicating tetany and convulsive symptoms. During this period, the Eskimo may imitate the sounds of animals or perform rituals such as beating sticks or striking a drum. He may then sleep for several hours particularly if he had a convulsive seizure.

Interestingly enough, there was no social stigma attached to these episodes; for it is believed that the afflicted individual may have lost his soul temporarily to the spirit world. The attacks also occurred more frequently in early spring and also affected women predominantly.

In many instances, the symptoms are indistinguishable from hyperventilation; for as Soma Weiss described, hyperventilation produces perioral numbness and tingling as well as syncope and carpal pedal spasm. The individual who appears to develop Piblotko also has what psychiatrists believe to be a markedly hysterical or anxious personality. Thus, this peculiar and relatively unknown disease to many physicians occurs as the result of a number of ecological variances such as those influencing nutrition, disease, climate, and diurnal variations of sunlight throughout the year. These physical factors together with social and cultural factors of the Eskimo are the basis for this unusual combination of neurologic and psychiatric symptoms.

Piblotko, in a sense, emphasizes the importance in the approach of any medical therapy to an illness; for it is important to assess the social, cultural, ethnic, and environmental factors when treating disease. This interdisciplinary approach to the treatment of disease is oft times not followed by physicians, but our sensitivity to the customs and cultures of the individual being treated will make our therapies more effective.

In this manner, the anthropologist may contribute to our knowledge of disease and we, in turn, will enrich the anthropologist by our medical expertise.
1910
Samuel Rich, Travelers Hotel, 117 East Fourth St., East Liverpool, Oh., was honored on his 93rd birthday in March. The retired ophthalmologist recalled spending his 91st birthday in the hospital, where he was given a copy of *Playboy* by a colleague. But the magazine disappeared before he could read it, causing him, he said, “mental anguish.”

1912
George L. Laverty, M.D., a member of the Dauphin County medical profession for over half a century and a past President of the Dauphin Medical Society who died November 28, 1978, has left a legacy to the citizens of central Pennsylvania. The George L. Laverty Foundation has been created from his estate for “medical and surgical research to prevent, inhibit and alleviate disease and suffering.” Six grants were awarded in 1981: three to Harrisburg Hospital, one to Hershey Medical Center, one to the south central chapter of the American Heart Association and one to the south central chapter of the American Cancer Society. The grant recipients for 1982 were being decided.

1915
Warren S. Reese, 432 W. Montgomery Ave., Haverford, Pa., retired in 1978 after 63 years of ophthalmology practice. In 1952, Dr. Reese performed the first intraocular lens implant in the United States, which is an official “Philadelphia First” recorded on the plaque on Penn Mutual Towers erected for the Bicentennial. Dr. Reese celebrated his 90th birthday in March and writes that he is enjoying good health.

1920
Cesar Dominguez-Conde, P.O. Box 699, Humaciao, Puerto Rico, writes that his hospital Clinica Oriente Inc. is celebrating its Golden Anniversary this year. Its Board of Directors has decided to change its name to Hospital Dr. Dominguez Inc.

1922
Lawrence S. Carey, 2245 Garrett Rd., Drexel Hill, Pa., was cited for his 60 years in medicine by the staff of the Delaware County Memorial Hospital recently. His association goes back to the hospital’s inception. Dr. Carey served as Associate Professor of Medicine at Jefferson. This past June he organized his 60th class reunion.

1928
William T. Lampe, 238 Street Rd., Southampton, Pa., who retired in 1973, writes that he is enjoying life with his wife, Marjorie, at Southampton Estates, a retirement home where Dr. Lampe says they have met many nice friends.

1929
Mario A. Castallo, 201 W. Evergreen Ave., Philadelphia, retired in February.

1931
William K. McDowell, P.O. Box 357, Tarboro, N.C., writes that he is enjoying retirement “after so many years of work. Manage to stay busy playing golf, working in the yard, especially in the rose garden and try to help out with some of the Church work.”

William H. Newman II., 251 E. Grove Ave., Clarks Summit, Pa., was honored by the Rotary Club of the Abingtons as a Paul Harris Fellow, the highest honor in Rotary. Dr. Newman has maintained a family practice for almost 50 years.
1932
Nathan S. Schlezinger, 8378 Glen Rd., Elkins Park, Pa., received a Fifty Years of Service Award this year from the Pennsylvania County Medical Society. He also served as Chairman for the very successful 50th reunion at Jefferson in June.

William B. West, Oneida Heights, Huntington, Pa., is now Medical Director for Consumers Life Insurance Company. Dr. West writes that he spends a good part of the winter at Hilton Head Island in South Carolina and still plays some golf and takes daily walks. He was speaker for his class during reunion activities (see page 14).

1933
Anthony Ruppersberg, Jr., 484 S. Drexel Ave., Columbus, Oh., received the Ohio State Medical Association’s certificate of appreciation in April for his service as Chairman of the Committee on Maternal and Neonatal Health. Each year, the OSMA acknowledges its appreciation to physicians as they complete their service as committee chairman.

1935
Thomas H. Phalen, 41 Murray St., Binghamton, N.Y., retired in January.

H. Edward Yaskin, 437 Hopkins Ln., Haddonfield, N.J., has been named Honorary Clinical Professor of Neurology at Jefferson.

1936
J. Edward Berk, 894-C Ronda Sevilla, Laguna Hills, Ca., was awarded the title of Honorary President by the Interamerican Association of Gastroenterology for his interest in international medicine and his contributions to the field of gastroenterology. Dr. Berk is Assistant Dean at the University of California, Irvine, California College of Medicine, where he was named a Distinguished Professor by the faculty earlier this year.

Elmer M. Reed, 2021 Fairwood Ln., State College, Pa., has been semi-retired since 1976 from the Pennsylvania State University (Student Health Service) and Speech and Hearing Clinic. Dr. Reed is now a medical consultant for Sera-Tex Biologics (Blood Division of Rite Aid Corporation).

1937
Robert S. Garber, Carrier Foundation, Belle Mead, N.J., former President of the Carrier Foundation, is now Senior Consultant and Vice Chairman of the Board of Trustees.

Robert C. McElroy, 916 Rock Creek Rd., Bryn Mawr, Pa., writes that he is retired and doing medical legal work.

Bernard B. Zamoisien, 139 Colwyn Ln., Bala Cynwyd, Pa., has become an Honorary Clinical Instructor in Family Medicine at Jefferson.

1938
The Fourth Annual Albert M. Biele Memorial Lecture in Psychiatry took place in January. Dr. Biele died September 21, 1978. George E. Vaillant, M.D., a Professor of Psychiatry at Harvard University Medical School spoke on “How Does the Adult Ego Mature?” at the lecture, which was sponsored by Jefferson’s Department of Psychiatry and Human Behavior.

1941
Rodney A. Farmer, 200 Township Line Rd., Elkins Park, Pa., has become an Honorary Clinical Associate in Neurology at Jefferson.

Halvey E. Marx, 76 Brennan Dr., Bryn Mawr, Pa., has been named Honorary Assistant Professor of Pathology at Jefferson.

Paul J. Poinsard, 2123 Delancey St., Philadelphia, has become Emeritus Professor of Psychology and Human Behavior at Jefferson.

Mario V. Troncelliti, 2142 County Line Rd., Ardmore, Pa., has been named Acting Chairman of the recently re-instituted independent Department of Anesthesiology at the Albert Einstein Medical Center, Daroff Division. Dr. Troncelliti joined the Daroff staff in 1979. As Chairman of Pennsylvania Hospital’s Anesthesiology Department, Dr. Troncelliti supervised anesthesia services at Daroff Division. Earlier this year he was honored on the occasion of his retirement as Department Chairman at Pennsylvania Hospital after 33 years of service.

1942
C. Brinley Bland, 717 Bethlehem Pk., Erdenheim, Pa., has been named Honorary Clinical Assistant Professor of Obstetrics and Gynecology at Jefferson.

Harold E. Brown, Red Ln., R.D. #7, Danville, Pa., retired from full-time activity at Geisinger Medical Center 11 years ago, after 33 years on the staff there. Dr. Brown served 19 of those years as Director of the Department of Urology. His wife, Louise, daughters, Sandra and Laura, son, John ’74, and six grandchildren “make up the family to date and will serve a major role in retirement plans.”

Edmund T. Hackman, 180 Miantonemo Dr., Warwick, R.I., writes that his daughter, Helen Holly, has been accepted into the freshman class at Jefferson.

A Thank You
July 5th of this year marked the first anniversary of the death of Abraham E. Rakoff, M.D. ’37. Though time ran rampant and vanished before our eyes could focus and before our hearts could contain their respite of breath, memory of this fine and special man is still marked and abiding. In the weeks that followed his demise, a bounty of gifts, a florist’s range of blossoms and plants, an avalanche of contributions and an abundance of over one thousand notes and letters came to us, his family. We were appreciative without doubt. We esteemed the warmth and caring of many friends, patients, colleagues and Jefferson societies who made singular and whole-hearted recognition of him.

However, the dimension of the task of responding to each and every card and of indicating, with sincerity, our gratitude for this help given during one of life’s most difficult experiences, was completely overwhelming. We did nothing but thank the good Lord for this outpouring of deep and strong feelings.

In the intervening time, our consciences have been tormented by what seemed to be our shabby response to the respect and love accorded this wonderful man. And so, we wish to thank each of you now for the help offered us throughout this harsh and shocking event. It may be late acknowledgment, but it is genuine gratitude nonetheless. Thank you sincerely.

Doris, Jan, Jed and Todd Rakoff
Jefferson's Department of Medicine presented the portrait of Frank D. Gray, Jr., M.D., Emeritus Magee Professor of Medicine, Chairman of the Department and Interim Dean to the University in early June.

Joseph Medoff, M.D., '39, Emeritus Clinical Professor of Medicine, presided over the presentation, in addition to delivering the biographical sketch of Dr. Gray. The son of a Minnesota practitioner, Dr. Gray finished 12 years of school without a single absence for illness and received early exposure to the medical field as a spectator in the gallery during his father's surgical operations.

A graduate of Northwestern University, he spent his fourth year of study in France. In 1938, Dr. Gray enrolled in the Columbia University College of Physicians and Surgeons and became interested in research being conducted on a relatively new technique involving tissue cultures. It was during this project that Dr. Gray met his future wife, Frieda, who was the research head.

World War II saw the physician in the First Division Chest Service of Bellevue Hospital in New York as an intern and then as an assistant resident. He entered an army training program, which took him to Normandy and eventually into the Battle of the Bulge. During a brief hospital stay for a trench wound, Dr. Gray gathered together a quantity of penicillin, reserved for venereal disease treatment, and traveled AWOL to deliver it to a place where it was much needed, a battalion aid station.

While Dr. Gray finished his military duty, his wife attended medical school and received an appointment at Johns Hopkins. After the war, Dr. Gray joined his wife at Johns Hopkins as an Assistant in Surgery. He then moved to New Haven, Connecticut, for a year's residency before joining Yale University where he helped to set up a cardiopulmonary section and catherization laboratory. In 1952, Dr. Gray was appointed Chief of the Pulmonary Disease Section of Yale.

When the Directorship of the Division of Medicine at Lankenau continued on p. 26
In a tribute to Paul A. Bowers, M.D. '37, friends and colleagues of the Emeritus Professor of Obstetrics and Gynecology presented his portrait to Jefferson in an April ceremony.

Leon A. Peris, M.D., '55, Clinical Associate Professor of Obstetrics and Gynecology and Chairman of the Portrait Committee presided over the presentation. In his opening remarks, Dr. Peris said that the late Dean, William F. Kellow, M.D., had, in his comments on the Committee's choice, said there was "no one more deserving."

Reviewing comments from residents and colleagues, Dr. Peris said that Dr. Bowers' concern for patient rights and patient self-respect were most evident. In addition, he pointed out that Dr. Bowers was most sought as physician by Jefferson students and wives.

Dr. Bowers' biography was delivered by Thaddeus L. Montgomery, M.D., '20, Emeritus Professor of Obstetrics and Gynecology, who traced the roots of the portrait's subject back to 1200 A.D. England. After much interesting history, Dr. Bowers arrived some 700 years later in Big Run, Pennsylvania.

A medical future for Dr. Bowers was clear from the start. He completed his pre-medical training at Bucknell University, from which he received an Alumni Achievement Award 38 years after graduation for his contributions to medicine.

Dr. Bowers entered Jefferson at the same time he joined the Medical Corps of the United States Army. He remained in service for 27 years, finishing as a colonel in the Army Reserve and the recipient of numerous honors and awards.

Following an internship at Jefferson Hospital, Dr. Bowers began a residency in Chicago, which was cut short by World War II. While stationed in Hawaii, he met and married his wife, Eloise, with whom he had three children. Dr. Bowers returned to Jefferson in 1946 to join Dr. Montgomery in the development of the newly combined Department of Obstetrics and Gynecology. He progressed steadily through the ranks to full Professor. (He currently is an Attending at TJU Hospital).
Hospital opened, Dr. Gray came to Philadelphia to fill the position. While there, he organized the Department of Medicine and the residency programs, remaining until 1976, when he joined Jefferson as Chairman of the Department of Medicine.

"Dr. Gray’s success at Jefferson is well known to us all," Dr. Medoff said, reviewing Dr. Gray’s appointment as Interim Dean.

A Fellow in the American College of Chest Physicians and the American College of Physicians, Dr. Gray served as the former’s President in 1966. He is a member of the American Society for Clinical Investigation, the American Association for the Advancement of Science and the Association of American Medical Colleges.

Board certified in internal medicine, Dr. Gray has served as Vice Chairman of the Board of Regents of the American College of Chest Physicians, Vice Chairman of the Executive Committee of the International Academy of Chest Physicians and Chairman of the IACP Credentials Committee.

He served in the medical corps of the United States Army from 1941 to 1971, retiring as a colonel in the reserve. Having published extensively, Dr. Gray was a member of the editorial board of Diseases of the Chest. He also has been a Visiting Professor to Sweden, the Soviet Union, Yugoslavia and Portugal.

Painted by Alden M. Wicks, the portrait was unveiled to reveal the white-coated Dr. Gray at the blackboard, explaining the chemical formulas written behind him.

Accepting the portrait for the Department of Medicine was John A. Martin, M.D., Professor of Medicine and then Interim Chairman, who said he considered one of Dr. Gray’s greatest accomplishments in the Department of Medicine to be the complete restructuring of the teaching program to the benefit of the entire faculty and residents.

“One of the things Dr. Gray brought to our Department was a dignity and great sense of fair play, for which I thank him,” Dr. Martin said.

Samuel S. Conly, Jr., M.D., ’S44, Associate Professor of Medicine and Associate Dean and Director of Admissions accepted the portrait for the faculty. “We in the Dean’s office have found Dr. Gray a delight to work with and for,” Dr. Conly said. “We have come to know him, appreciate him and respect him.”

In accepting the portrait for the University, President Lewis W. Bluemle, Jr., M.D., said he had no difficulty choosing Dr. Gray to be Interim Dean, whom he knew possessed the necessary qualities.

“His selfless motivation, wealth of knowledge and honest, temperate approach to problems, particularly people problems, have endeared Dr. Gray to his colleagues,” Dr. Bluemle said.

Dr. Gray then gave a few words of thanks, saying the ceremony had been “a humbling experience.”

BOWERS continued

At the same time, he achieved an equivalent success at Philadelphia General Hospital, where he emerged as an Attending Physician, Chairman of the Department of Obstetrics and Gynecology, President of the Staff, and a portrait subject as well.

An active consultant to the Valley Forge Army Hospital for many years, Dr. Bowers relinquished this duty only upon his retirement from the Army Medical Corps in 1970.

Dr. Bowers accumulated a widespread and devoted private practice through the years. Dr. Montgomery relayed a comment from one patient, who said: “He made me feel that I was the only one in the office he was concerned about.”

Dr. Bowers’ training was in the clinical phases of his specialty, and the numerous papers and discussions he presented over his career reflect his vast knowledge and study of the subject.

Dr. Montgomery outlined the “pioneer efforts” he and Dr. Bowers accomplished at Jefferson to preserve the physiological concepts of labor.

Their work in natural childbirth, husband participation in birth and the rooming-in of child and mother came at a time “when such procedures were looked upon askance in the ivory halls of medical pedagogy.”

Active in the community and professional societies, Dr. Bowers is board certified in obstetrics and gynecology. He is a past President of the Alumni Association and of the Obstetrical Society of Philadelphia, and a Fellow of the American Medical Association, the American College of Surgeons and the American College of Obstetricians and Gynecologists. In addition, Dr. Bowers is a member of the Philadelphia County Medical Society, the Pennsylvania State Medical Society, the College of Physicians of Philadelphia and the Association of Military Surgeons of the United States.

In his closing remarks, Dr. Montgomery said that future generations of medical students will pass Dr. Bowers’ portrait and remark: “He delivered me” or “he operated on my mother” or “he was a classmate of my grandfather, who said he was a great guy.” Grandfather was right, Dr. Montgomery assured the audience, “Paul Bowers is a great guy.”

The portrait, painted by J. Nelson Shanks, was then unveiled to reveal Dr. Bowers seated, the familiar smile on his face as if listening with care to a patient.

Interim Dean Frank K. Gray, Jr., M.D., accepted the portrait for the faculty, and Lewis W. Bluemle, Jr., M.D., accepted it for the Board of Trustees. “In the years to come, when people look at Dr. Bowers’ portrait, they will remember his excellent teaching,” Dr. Bluemle said, “but what I will remember most is his good fellowship.”

Dr. Bowers then took the podium to thank his colleagues, his friends, his family and Jefferson for their support.

“What progress I have made I owe to Jefferson,” he said.

In closing, the obstetrician said he was greatly humbled by the honor of the portrait, and that “most of us have few days when something this special happens.”
Joseph N. Marino, 637 Prescott Ave., Scranton, Pa., writes that his son, Ralph, graduated from Jefferson in June.

Robert H. McCarter, 14 Newton St., Weston, Ma., writes that he is teaching and practicing as usual. Dr. McCarter is also working with Physicians for Social Responsibility on the medical consequences of nuclear war. He is planning a trip to Washington, D.C. with the Harvard Medical School faculty and student team to interview congressmen on the issue.

1943

Theodore J. Berry, 164 Pennsylvania Ave., Bryn Mawr, Pa., has written and had published a book on James “Jumbo” Elliott, titled Jumbo Elliott, the legendary Villanova track coach. A lifelong friend of Elliott, Dr. Berry recounts his life and career in the book, which was excerpted in three parts in the Philadelphia Inquirer. Jumbo Elliott was published by St. Martin’s.

Stanley C. Clader, 449 S. Ithan Ave., Rosemont, Pa., has been named Honorary Clinical Assistant Professor of Obstetrics and Gynecology at Jefferson.

Davis G. Durham, 901 Mt. Lebanon Rd., Wilmington, De., has been named Honorary Clinical Assistant Professor of Ophthalmology at Jefferson.

Thomas M. Kain, Jr., 56 Bradford Wy., West Berlin, N.J., has been named Honorary Clinical Assistant Professor of Medicine at Jefferson.

Bernard J. Miller, 882 Andorra Rd., Lafayette Hill, Pa., Professor of Anatomy and Clinical Associate Professor of Surgery at Jefferson, received an Honorary Doctor of Science degree from Villanova University at its commencement exercises in May. Father John Driscoll, President of Villanova, conferred the degree on Dr. Miller.

1944

Robert L. Breckenridge, 13 Cunningham Ln., Cherry Hill, N.J., has been named Honorary Clinical Professor of Pathology at Jefferson.

1944

J. David McGaughey III, 44 Morningside Ter., Wallingford, Ct., has been appointed Medical Director, insurance medicine, in the systems and human resources division of Connecticut General Life Insurance Company, a subsidiary of Connecticut General Corporation. Dr. McGaughey has been with the Corporation since 1932.

John T. McGeehan, 106 Oak St., Danville, Pa., is a new Associate in Radiology at Geisinger Medical Center. Prior to his new appointment, Dr. McGeehan, a specialist in radiology and surgery, was Chief of Radiology and Radiation at Andrew Kaul Memorial in St. Mary’s.

1945

F. Albert Olash, 4-F Suburban Medical Plaza, Louisville, Ky., is Associate Clinical Professor of Medicine at the University of Louisville Medical School and is in private practice in internal medicine and cardiology. Dr. Olash is now President of the American Heart Association Kentucky Affiliate and has two sons in medical college.

1946

Joseph L. Melnick, 1152 N, 63rd St., Philadelphia, writes that his son, Howard, has graduated from the Medical College of Pennsylvania and has

Not Quite Beyond Recall

It was in the fall of either my junior or senior year at Jefferson, 1941 or 1942, that the Professor of Gynecology, Lewis C. Scheffey M.D., ‘20 was lecturing to the class of 1943 in the north lecture hall of the college building. Immaculately and impeccably groomed, with a full head of graying hair in a Prussian brush cut, a handsome man then perhaps in his mid-fifties, Dr. Scheffey was a good speaker and presented his material in a convincing and interesting fashion. But on this day he simply did not get through to me—I was bored and inattentive and for whatever reason determined not to listen. Seated in the back of the room, I cast about for diversion and soon persuaded a like-minded buddy on my right to have a go at a then-popular pencil-and-paper game, Hang The Bishop.

The purpose of the game was to dredge up an obscure word and to defy your opponent to identify it, letter by letter, before his bishop bought it on a gallows, anatomic part by anatomic part. Well, we quickly ran through (and I remember them well) eleemosynary and manioc, pratique and theodolite, but not without some tomfoolery and hilarity certainly obvious and audible to the Professor.

When the class ended and we made our way to the door, Professor Scheffey with considerable diffidence approached us and, gentle man that he was, told us that he had noticed what he took to be our discomfort during his lecture and inquired whether it was because his subject was about women.

To this day I’m not sure which I remember with greater chagrin, Professor Scheffey’s mild-mannered admonition, or Armitage’s hanging my bishop with the word geclept.

Sam Faris ’43

David A. Culp, M.D., ’54, completed his term as President of the American Urological Association during meetings in Kansas City in May. On May 17, the Alumni Association honored him at a luncheon there.
been accepted for an ENT residency at Jefferson. Son, Paul, has finished his sophomore year at the Medical College of Pennsylvania and son-in-law Neil Sloane, M.D., has been appointed to an ob/gyn residency at Temple University Hospital.

1947

Paul H. Jernstrom, 13 Southfield Dr., Rolling Hills, Ca., was a recent member of a senior male marathon team that captured top honors in its division. Dr. Jernstrom started running in 1974 to improve his health. After reaching his goal of 55-60 miles a week, he was "race-bound." He has entered a total of 28 marathons and prides himself on finishing the Boston Marathon in three hours.

Donald R. Watkins, 11 Sanford St., Bradford, Pa., is Chief of Surgery at Bradford Hospital and continues in his private practice. Dr. Watkins is Chairman of the Bradford Civil Service Commission and is President of the Bradford Gun Club.

1948

The 34th reunion for the class was held at Seaview Country Club in mid May. The weather dampened the golfers' feet, but not the spirit of the reunion. Dinner for 15 was held Saturday night. Present were the George O'Donnells, the Rudy DePersias, the Joseph Bartos, the Gill Hoffmans, the Scotty Boyles, the Thomas McBrides and Pat Frank. Gill Hoffman won the annual class golf tournament. Plans for the 35th already are under way with a return to the Jefferson campus as part of the activities. Tom McBride was and is reunion chairman.

John D. Bealer, 3639 Emerson Ci., Bethlehem, Pa., is happy to report he is back to work as Corporate Medical Director of Bethlehem Steel after major cardiac surgery. He likewise reports that his golf game is unchanged.

C. Harold Cohn, 1130 Garfield Ave., Wyomissing, Pa., has been elected to a three-year term as Director of the Reading-Berks Auto Club. Dr. Cohn is a thoracic cardiovascular surgeon.

1950

James R. Hodge, 295 Pembroke Rd., Akron, Oh., Chairman of the Department of Psychiatry at Akron City Hospital, has been named the Director of Residency Training for the Northeastern Ohio University College of Medicine Integrated Psychiatric Residency Program.

Bernard V. Hyland, 1003 Greenbriar Dr., Clarks Summit, Pa., has donated the Kathryn and Bernard Hyland Memorial Lecture Hall to the University of Scranton in honor of his parents, who are gratefully remembered.

James M. Monaghan III, 85 Woodland Rd., Short Hills, N.J., Chairman of the Department of Radiology at The Hospital Center at Orange, has been re-elected to The Hospital Center's Board of Trustees. Dr. Monaghan will serve a three-year term.

1951

Benjamin R. Paradee, 9 Colonial Ridge Dr., Haddonfield, N.J., has given up private practice and a 26-year partnership with classmate H. Edward LaVoice. Dr. Paradee is now the Medical Director of Medford Leas—a total life-care community. "The new work is very enjoyable, but I do miss the long, happy association with Ed. Shirley and the children are all well. We have one grandson."

Bruce W. Raffensperger, 400 Bellaire Ave., Fort Washington, Pa., has been elected President of the Medical Staff at Chestnut Hill Hospital. A former Director of the Hospital's Department of Obstetrics and Gynecology, Dr. Raffensperger has been an attending obstetrician on the Hospital staff for 27 years.

Frank J. Sweeney, Jr., Vice President for Health Services, TJU, was one of four new commissioners recently appointed to the governing board of the Joint Commission on Accreditation of Hospitals. Dr. Sweeney represents the American College of Physicians on the 22-member Board.

1952

Nelson P. Aspen, 633 N. Church St., West Chester, Pa., President of the Chester County Medical Society, attended a meeting last winter to discuss the future of voluntary health planning in Greater Philadelphia.

Kurt E. Lauer, 4580 Broadway, New York, has been elected a Fellow in the American College of Physicians. Dr. Lauer is in private practice and is an Attending in cardiology at Jewish Memorial Hospital. He also serves as a preceptor in the Geriatric Nurse Practitioner Program of the New York Hospital and Cornell Medical Center. The Lauers have two daughters, Jean, a recent graduate of Pace University, and Susan, a student at Smith College.

1953

Lansing H. Bennett, U.S. Embassy, Jakarta, Indonesia, returned to the U.S. for a "safe haven" course (designed to provide instructors to teach embassy personnel what to do in medical emergencies in civil and natural disasters), for the Advanced Life Support Trauma and the American College of Physicians meeting in Baltimore. He then took a "home leave to be re-Americanized" before returning to Jakarta in June.

Stanley S. Schneider, 679 Loring Ave., Los Angeles, is still finding California living enjoyable. Dr. Schneider is Co-Chairman of the Anesthesiology Department at Cedars Sinai Medical Center, a 1,150-bed facility. His family is all well, including a grandson.

1954

Robert M. Allen, 9312 Convento Ter., Fairfax, Va., has been elected a Fellow in the American College of Radiology and will receive his award during the annual meeting of ACR in Boston in September.

Robert A. Hinrichs, 2007 Galatea Ter., Corona del Mar, Ca., is taking his son, Brad, on the "last tour of colleges back East this summer." Dr. Hinrichs is still active in practice.

David L. McMorris, 201 Plaza Dr., Prescott, Az., is establishing a private practice in internal medicine there, where he finds "interesting people and country." Dr. McMorris writes that the last issue of the JAB "made us homesick for Philadelphia."

1955

Harry G. Light, R.D. #5, Whiteacre Dr., Bethlehem, Pa., has been elected a Governor of the American College of Surgeons.

Guy L. Schless, Pennsylvania Hospital, 301 S. Eighth St., Philadelphia, has been promoted to Associate Clinical Professor of Medicine at University of Pennsylvania School of Medicine. Dr. Schless returned to Guy's Hospital Medical School in the University of London, England, as Honorary Consultant Physician in July.

1956

William D. Bacon, 17252 13th Ave., N.W., Seattle, Wa., was visited earlier this year by former roommate and class-
mate Russell H. Harris, who had missed last year's reunion while on a sailing trip.

Nelson M. Chitterling, 1890 Coventry Pl., Annapolis, Md., wrote to say that he enjoyed "the greatest class reunion." He added that "1956 produced an outstanding group!"

Russell H. Harris, P.O. Box 9073, Rapid City, S.D., visited classmate and former roommate William D. Bacon earlier in the year. Dr. Harris missed the reunion fun last year, during which time he was on a sailboat voyage from San Diego to Hawaii.

Anthony F. Merlino, 655 Broad St., Providence, R.I., who is serving as President of the Rhode Island Chapter of the American College of Surgeons, also has been elected President of the Rhode Island Orthopaedic Society.

1957

Robert S. Brodstein, 3343 Baker Dr., Ogden, Ut., has been living in Utah since 1965, and when not busy in the office, tries to keep up with his hunting, fishing and skiing. Following his internship at Denver General, Dr. Brodstein spent some time in Korea as a flight surgeon and took his ophthalmology residency at Henry Ford Hospital in Detroit. His two children are both attending the University of Colorado at Boulder.

Lawrence R. Cooperman, V.A. Hospital, Department of Radiology, Newington, Ct., has been elected a Fellow in the American College of Radiology and will receive his award during the annual meeting of the ACR in Boston in September.

Nicholas Spock, 300 N. Shamokin St., Shamokin, Pa., is still in family practice after 20 years. Dr. Spock's three children are all in various stages of school. "I guess I can't plan to retire yet!"

1959

William A. Steinbach, Miller Rd., Waverly, Pa., has been appointed to the Board of Councilors of the American Academy of Orthopaedic Surgeons. In addition to his private practice, Dr. Steinbach is Chief of Surgery at Community Medical Center and is on the staff of Moses Taylor Hospital, Mercy Hospital, Scranton State General Hospital and Allied Services.

1960

Richard A. Alley, New Bridge Center, 480 Pierce St., Kingston, Pa., has been elected to a three-year term as Divisional Chairperson by the medical staff of Wilkes-Barre Mercy Hospital. Dr. Alley's appointment will be in the Medical Division.

Jack Bocher, 531 Maple Ave., West Chester, Pa., has been named an Instructor in Orthopaedic Surgery at Jefferson.

1961

Allen E. Chandler, 901 W. Mt. Airy Ave., Philadelphia, is now a full Colonel in the Pennsylvania Army National Guard and the Senior Command Surgeon in the State Guard Command A Combat Support Hospital. His son, Rodney, started at the U.S. Military Academy at West Point in July.

Harold L. McWilliams, 2501 Kidd Rd., Fallston, Md., spent five weeks in West Africa this past winter as a visiting surgeon at the Ogbonosho Mission Hospital. He writes that he had the pleasure of working with William Gaventa '45, who is the Chief Medical Officer at that hospital and who has made a career as a Baptist Medical Missionary. Dr. McWilliams has been promoted to Assistant Professor of Surgery at Johns Hopkins University School of Medicine. Sons Scott and Andrew are now 5 and 4, respectively.

Holroyd Award

Francis H. Sterling, M.D., '60 was honored by La Salle College last March, during the third Annual Holroyd Lecture Program, for his excellence in teaching and outstanding contributions to the field of endocrinology. Renowned heart specialist Michael E. DeBakey, M.D., delivered this year's lecture.

The recipient of the distinguished Holroyd Award, Dr. Sterling, a La Salle alumnus, has served on the faculty of the University of Pennsylvania Medical School since 1966 and currently holds the title of Associate Professor of Medicine.

Dr. Sterling's prowess in teaching has been recognized by Penn several times in the past. In the last ten years, he was named the recipient of the Student Government Teaching Award three times, received the Lindback Distinguished Teaching Award in 1973 and was elected an honorary member of the Alpha Omega Alpha Medical Honor Society. In six of the past ten graduations at the University of Pennsylvania Medical School, Dr. Sterling has been elected to administer the Oath of Hippocrates.

This year's Holroyd Award recipient has maintained active research and clinical study in his area of specialization. He has authored a lengthy list of papers, and has served as an officer of the Philadelphia Endocrine Society from 1973 to 1977, holding the Presidency from 1975 to 1977.
Elliott Perlin, 10721 Lady Slipper Ter., Rockville, Md., retired from the Navy last November and is now Chief of Hematology at Howard University Hospital in Washington, D.C.

Jack C. Sabo, 678-14th St., Lakewood, N.J., is practicing with a four-man surgical group, with three members being Jeff graduates. Dr. Sabo is board certified in general and thoracic surgery. He is Chief of Surgery at Paul Kimball Hospital and President-elect of the Medical-Dental Staff at the same hospital.

1962
William J. Brennan Jr., Indian Health Services Hospital, Gallup, N.M., is Director of Radiology for the Navajo Area and Chief of Radiology at the Gallup Indian Medical Center.

Michael D. Cefaratti, 606 Court St., Reading, Pa., is in his sixteenth year of ophthalmology practice and is "very happy to be in the best specialty." Dr. Cefaratti is anxious to meet with his classmates.

1963
Joseph C. Flanagan, 1627 Lafayette Rd., Gladwyne, Pa., has been promoted from Associate Professor to Professor of Ophthalmology at Jefferson. Dr. Flanagan has also been appointed Director of the Oculoplastic Service at Wills Eye Hospital in Philadelphia. An Attending Surgeon at Wills, Dr. Flanagan is also a consulting physician with the Department of Ophthalmology at Mercy Catholic Medical Center and an Associate with the Department of Ophthalmology and Director of the Eye Clinic at Lankenau Hospital.

Herbert C. Rader (Capt.), Catherine Booth Hosp., Nagercoil-629 001, Tamil Nadu, India, wrote a long letter to bring Jefferson up to date on his activities overseas. He has "somewhat reluctantly" again assumed the responsibility of Chief Medical Officer/Administrator of Catherine Booth Hospital, but still loves his work. "We truly enjoy our work here and consider this appointment a real privilege," Dr. Rader's wife, Lois, and their six children are all active in school. Son Herb surprised a crowd outside the hospital by "clubbing" a 53-inch cobra!

1964
Robert P. Barroway, 110 Mews Ln., Cherry Hill, N.J., has been named an Instructor in Pediatrics at Jefferson.

Leroy S. Clark, 19242 Bernetta Pl., Tarzana, Ca., has been named Chairman of the Department of Radiology at Rancho Encino Hospital. Dr. Clark is currently Co-Director of the Department of Radiology at the Medical Center of Tarzana.

George E. Fleming, Oak Knoll, Hollidaysburg, Pa., sent word to the Editor that an error was printed in the spring issue of JAB. Son, George, is entering his sophomore year at Washington and Jefferson College, not Jefferson in Philadelphia, as noted. The Flemings' other son, John, will begin his senior year at W & J in the fall. Apologies to the Fleming family.

Robert C. Mackowiak, 189 Hillcrest Ave., Philadelphia, has been promoted from Clinical Associate Professor to Clinical Professor of Medicine at Jefferson.

Bennett M. Shapiro, 10010 238th Way S.E., Issaquah, Wa., is one of three University of Washington professors to receive a 1982 Guggenheim Fellowship. On the faculty since 1971, Dr. Shapiro is a Professor of Biochemistry and has concentrated his study in the area of the biochemistry of sperm in fertilization. In all, 277 American and Canadian scholars, scientists and artists are chosen to receive the fellowships.

1965
Robert Davidson, 242 Merion Rd., Merion Station, Pa., has been appointed to the attending staff of the family practice service at West Park Hospital.

Harlan M. Mellik, 44 Thackeray Dr., Short Hills, N.J., has been elected Chairman of the Department of Medicine at East Orange General Hospital in East Orange, New Jersey.

Robert M. Pilewski, 7 Oakwood Dr., Oil City, Pa., has been appointed to the Board of Directors of the Hospital Council of Western Pennsylvania and is one of two physicians on the board. A specialist in internal medicine, Dr. Pilewski is a member of the medical staff at Oil City Hospital, where he is currently serving as Chairman of the governing board.

Thomas J. Schneider, 4212 Oak St., Palm Beach Gardens, Fl., is completing his second year as Chief of Staff at St. Mary's Hospital. Dr. Schneider is President-elect of the Florida Society for Gastrointestinal Endoscopy. He writes that he is busy in practice and loves the Florida fishing.

George W. Smith, 259 W. 10th St., New York, is Clinical Director of The Mission of the Immaculate Virgin (Mount Loretto) and Chairman of the Department of Psychiatry. The Mission is a residential treatment center for nearly 600 adolescents. Dr. Smith recently completed his fourth year as a faculty member for a two-day institute at the annual meeting of the American Orthopsychiatric Association. This year's topic was "Therapy with Gay, Lesbian and Bisexual Clients."

Richard P. Wenzel, 1940 Fox Run Ln., Charlottesville, Va., will be Visiting Professor of Infectious Diseases in Taiwan this summer. "Modesty prevents me from recommending that you immediately purchase my textbook on hospital acquired infections, published by CRC Press, Inc., (1981)."

1967
James E. Hinkle, 5315 N. Powers Ferry Rd., Atlanta, is Chief of Anesthesia at Shallowsford Hospital in Atlanta, and he writes: "We are about to embark on a major expansion into obstetrics."

David H. Miller, 9 Old Windy Bush Rd., New Hope, Pa., has been elected President of the Warmington General Hospital medical staff for a two-year term. Board-certified in ophthalmology, Dr. Miller is a recipient of the American Medical Association Continuing Medical Education Award and is a Fellow of the American Academy of Ophthalmology and Otologyngology.

1968
Raphael J. DeHoratus, 667 Sproul Rd., Villanova, Pa., has been promoted from Associate Professor to Professor of Medicine at Jefferson.

Russell J. Stumacher, 605 Conshohocken State Rd., Bala Cynwyd, Pa., was elected by students to the Faculty Honor Roll of the University of Pennsylvania Medical Center in March for his excellence in teaching the infectious disease course at Graduate Hospital and for understanding the special needs of medical students. In a letter to Dr. Stumacher, the University said: "The pleasure that you derive from teaching was readily apparent to your students. This, as well as your awareness of the humanistic side of medicine, your elegant yet detailed and organized lectures, and your use of a 'hands-on' as well as cerebral approach to medical education were greatly appreciated by all. In addition to this, you were felt to be approachable and flexible, and to have an interest in people."
1969
John F. Frantz, II, 11 Club Terr., Newport News, Va., is Chief of Surgery at Mary Immaculate Hospital and an Ophthalmology Instructor at Eastern Virginia Medical School in Norfolk, in addition to practicing ophthalmology in a three-man group. Dr. Frantz wrote the chapter on Clostridial Infections in the recently published "Current Ocular Therapy."

Richard C. Gross, 6402 Eureka Rd., Roseville, Ca., announces the birth of his third and "last" child last May, Rachael-Marie. "Our only girl."

Donald N. Tomasello, 708 Southwinds Dr., Bryn Mawr, Pa., has been named Clinical Assistant Professor of Surgery at Jefferson.

1970
Charles E. Quaglieri, 2000 Pheasant Ln., Reno, Nv., has a neurology private practice. Dr. Quaglieri's third child, Edmond, was born in March, 1981. Dr. Quaglieri hopes to be able to visit one of his reunions "sometime."

1971
James E. Barone, 36 Seventh Ave., New York, and his wife, Mary, were expecting their second child. James, Jr., is now 2.

Gregory P. Borkowski, 1642 Seven Oaks Dr., Lyndhurst, Oh., is a Staff Radiologist at Cleveland Clinic Foundation and is actively involved in the initial R & D of Digital Subtraction Radiography at Cleveland Clinic. Dr. Borkowski is Task Force Chairman of Abdominal Nuclear Magnetic Resonance Imaging and presented a paper recently at the Roentgen Ray Society meeting in New Orleans.

Terrence S. Carden, 23636 N. Elm Rd., Mundelein, Ill., Director of Emergency Services at Highland Park Hospital in Illinois was responsible for the successful testing and implementation of a new electrical defibrillation system that is dramatically increasing cardiac arrest "saves." Dr. Carden was featured in the November 1981 issue of Fire Chief Magazine and the September 1981 issue of Emergency Magazine.

Robert E. Chandlere, 2099 Powers Ferry Rd., Marietta, Ga., has been elected Vice President of the Atlanta Radiological Society for 1982-83.

David R. Cooper, 333 Stanley Dr., Kingston, Pa., was the subject of two articles by Darrell Sifford in the Philadelphia Inquirer. Mr. Sifford wrote on why Dr. Cooper, an orthopaedic surgeon in Wilkes-Barre, chose a small town over a big city. The second article focused on Dr. Cooper's arthroscopic surgery.

William C. Davison, 3741 S. Mission Hills Rd., Northbrook, Ill., writes that he recently had dinner with classmates James E. Barone and James R. Dooley and that it was "good to see my Bohemian friends again!"

Francisco J. Garcia-Torres, 4402 Lymbar Dr., Houston, who was promoted to Clinical Assistant Professor of Medicine at Baylor College of Medicine, will direct the Kelsey Seybold Clinic Annual Symposium on "Update on GI Diseases" next October.

Barry R. Klein, 2892 San Lago Ct., Las Vegas, is board-certified in emergency medicine. Dr. Klein is Director of Emergency Medicine at Southern Nevada Memorial Hospital and is an Assistant Professor at the University of Nevada.

Jeffrey C. Weiss, 11 E. Levering Mill Rd., Bala Cynwyd, Pa., was promoted to Clinical Associate Professor of Pediatrics at Jefferson.

1972
Richard E. Brennan, 1255 Sequoia Rd., Cherry Hill, N.J., has been promoted to Professor of Radiology at Jefferson.

John J. Laskas, Jr., Honey Hill Farm, Darling, Media, Pa., announces the birth of Thomas More in March, who joins Alyson, 8, John III, 7, and Joseph, 3. Dr. Laskas is practicing dermatology in Delaware County and "farming out on weekends." He writes that he is a local township councilman in his "spare time!"

Fred D. Lublin, 111 Overhill Rd., Bala Cynwyd, Pa., has been promoted to Associate Professor of Neurology at Jefferson.

Ronald J. Wapner, 2650 N. Providence Rd., Media, Pa., has been promoted from Assistant Professor to Associate Professor of Obstetrics and Gynecology at Jefferson. Dr. Wapner, who is Director of the Division of Maternal-Fetal Medicine, also has received a secondary appointment at Jefferson of Associate Professor of Radiology.

Timothy C. Wolfgang, 9524 Redington Dr., Richmond, Va., is a cardiac sur-

geon at Medical College of Virginia. He and his wife were expecting their third "little Wolfgang" in June.

1973
Rodney A. Appell, LSU Medical Center, Urology, 1542 Tulane Ave., New Orleans, has joined the faculty of Louisiana State University as an Assistant Professor of Urology and is also Director of the Urodynamics Unit. At recent conventions in New Orleans, Dr. Appell was able to get together with classmates Michael Meyers and Paul Smey.

John H. Benner, 510 N. Walnut St., West Chester, Pa., has been named an Instructor in Orthopaedic Surgery at Jefferson.

Leonard M. DelVecchio, Jr., 315 Cottage Pl., Lewistown, Pa., is in radiology private practice at Lewistown Hospital. Dr. DelVecchio and his wife, Michal, have four children: Kristin, 6; Matthew, 4; Mark, 2; and Michael, born in March.

Benjamin Gerson, 200 Temple St., Newton, Ma., was incorrectly noted in the previous issue of JAB as teaching a statistics class at Jefferson. Rather, Dr. Gerson, along with Jefferson's Hyman Menduke, Ph.D., teaches the course at the national meetings of the American Society of Clinical Pathologists and elsewhere. Their next presentation will be in October in Miami Beach. Also, Dr. Gerson and his wife, Barbara, have two children, not four; Adam and Allison. Apologies to Dr. Gerson and his family.

Barry Gordon, 4340 Roland Springs Dr., Baltimore, received his Ph.D. in psychology from Johns Hopkins in 1981 and is now establishing a cognitive neurology/neuropsychology clinic at Hopkins. His wife, Renee, is busy as a freelance writer and son, Brett, turned 2 in April.

Paul D. Manganiello, 40 Village Green, West Lebanon, N.H., continues his reproductive endocrinology practice at Dartmouth Hitchcock Medical Center and Clinic in Hanover. Dr. Manganiello has two children, Marc,3, and Lisa, 1.

Kathleen W. McNicholas, Deborah Heart & Lung Center, Browns Mills, N.J., received her boards in cardiac and thoracic surgery last year. Dr. McNicholas is now an Attending in pediatric cardiac and thoracic surgery at the Deborah Heart and Lung Center, where she enjoys working with Michael D. Strong '66, Anthony J. Del Rossi '69, and Donald L. Clark '58.
On the Record, No One Sees More

He explains it as an "accidental outgrowth" of his interest in phonographic recordings. But whatever the reason, Arthur B. Lintgen, M.D. '66, has the unique ability to look at the grooves on records and identify the piece of music recorded.

Dr. Lintgen, an internist who lives in Abington, Pennsylvania, discovered he had this strange talent five years ago at a party when friends, ribbing him on his extensive musical knowledge, said they bet he could even read record grooves. As much to his own surprise as to his friends, he could, and he has been astounding acquaintances ever since.

His method is simply to take a disc in his hands, briefly study the grooves and then announce the name of the work and its composer, such as "Also Sprach Zarathustra" by Strauss or "The Nutcracker" by Tchaikovsky. Dr. Lintgen guarantees successful identification of only those works he knows. Therefore, he limits his ability to classical orchestral works from Beethoven through contemporary compositions.

"I never sat down to memorize these recordings," Dr. Lintgen says. "My talent has zero value and there is no reason for me to spend time on it."

E.S.P. and X-ray vision are not the cause, the physician asserts, nor does he have perfect pitch. He can only assume that it is a freak result of a lifelong, ardent interest in sound and audio processes.

"So it really is not that big a deal when it was 30 years in the making," he says.

Others, however, do not readily agree. Dr. Lintgen has been the subject of articles in The New York Times, Time Magazine, Discover Magazine, Reader's Digest, and both the Philadelphia Inquirer and Bulletin. He also was featured on television for a segment of That's Incredible and had an interview with the BBC.

Dr. Lintgen amazed them all. The music professor who tested him for That's Incredible brought "terrible recordings—old budget and reissued records," he says, but he still scored 20 out of 20. Proving he doesn't need to have seen the actual disc first, Dr. Lintgen astounded the Time Magazine interviewer by identifying prereleased recordings.

Many set out to prove the physician a fraud, but are greatly disappointed. Dr. Lintgen passed the test with James "The Amazing" Randi, a professional magician who specializes in revealing
impersonators. And he didn’t fall for any of the tricks that Discover Magazine tried on him. “One of the recordings was pre-Beethoven, which I guessed right away. One was a man narrating and another was rock music,” he says. “I got all his traps.”

While knowing a great deal about music certainly contributes to his bizarre talent, this is not enough to explain it totally. Conductors and prodigies know much more than he, Dr. Lintgen admits, “so it is something beyond this basic knowledge. And I have terrible eyesight.”

The physician’s peculiar ability to correlate the structural piece of music and the disc relates, to a certain degree, to the process of making records. Solo instruments and voice are miked differently from orchestral playing, Dr. Lintgen explains.

“The patterns of a solo voice or instrument overwhelm or distort the total orchestral structure,” he says. “This is one of the reasons I limit myself to orchestral works alone.”

Also, musical dynamics come into play in his deductive process. Loud and soft passages reflect light differently, creating jagged or smooth grooves, as the case may be.

The music written before Beethoven’s time has less dynamic variance, and while Dr. Lintgen can recognize many recordings from this period, he is surer within his own limits. “I don’t like to disappoint people,” he says.

The astonishing part to Dr. Lintgen’s singular gift is the speed with which he executes it. Others, with careful study, could conceivably accomplish the same thing, but not in the mere two or three seconds the physician needs. He has even recognized a recording of “Beethoven’s Fifth” from across the room.

So far, Dr. Lintgen’s unusual faculty is unique to himself. One person wrote him who, he says, could do it to a certain extent. “But his illustrations didn’t hold up and certainly didn’t prove anything.”

Fame has not changed his life, Dr. Lintgen insists, other than to make him a bit busier. He has accepted an offer to be an audio and record reviewer for Absolute Sound, a quarterly review, a job he says he will enjoy. But he has refused any further interviews.

“I am a doctor and intend to stay a doctor,” he says. R.T.

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Joseph R. Thomas, Jr., 84 Myrick Ln., Harvard, Ma., has left the Air Force and has gone into private practice in Harvard, Massachusetts. Dr. Thomas writes that he is trying “to settle down and not move anymore,” and that he plans to be in Philadelphia this fall for the Jefferson Orthopaedic Society meeting “if at all possible.”

1974

Joseph R. Berger, 12860 SW 119 St., Miami, is Assistant Professor in the Department of Neurology and Internal Medicine at the University of Miami. Dr. Berger says that he, his wife, Sandy, and sons, Ronnie, and Mike, 2, are enjoying Florida living.

Joel M. Brown, 3405 Therondunn Dr., Plano, Tx., writes that he and his wife, Sharon, are “alive and well along with children, Jennifer and Jeremy.” Dr. Brown recently completed a year as Chief of Internal Medicine at Plano General Hospital.

Victoria A. Gillis, RD #7, Kittanning, Pa., left her post as Director of EMS at Armstrong County Memorial Hospital to start a fellowship in Critical Care Medicine at the University of Maryland Shock Trauma Unit in Baltimore, which began in July.

Guy M. Nardella, Jr., 636 N. Lemon St., Media, Pa., completed a residency in plastic surgery at the University of Pittsburgh and in July, entered private practice in Media. Dr. Nardella also became board certified this year.

Steven R. Peikin, 466 Wyldhaven Rd., Rosemont, Pa., has been promoted to Associate Professor of Medicine at Jefferson.

Michael L. Podolsky, 80 Lincoln Dr., Laurel Springs, N.J., has been promoted to Clinical Assistant Professor of Obstetrics and Gynecology at Jefferson.

1975

Joseph B. Giletto, 533 Kenmore Rd., Merion, Pa., announces that his wife gave birth to Matthew Basil last September. Godparents were classmate Angelo S. Agro and his wife.

Lawrence W. Ginsberg, 835 N. Sequoia Ave., Lindsay, Ca., and his wife/classmate Kathryn Hall Ginsberg announce the birth of their third child, Rachel Natalie, who arrived last December. Kathryn’s brother, Bruce Hall ’78 joined Larry in his internal medicine practice last summer. Husband and wife are, respectively, Chief of Internal Medicine and Chief of Pediatrics at Lindsay District Hospital.

Edward S. Schulman, 120 Cross Keys Rd., Baltimore, Md., received the prize for “top research paper” last fall at the American College of Chest Physicians’ 47th Annual Assembly in San Francisco. Dr. Schulman’s paper was on the “Purification and Characterization of Human Lung Mast Cells.” He currently works with pulmonary disease and clinical immunology at Johns Hopkins.

1976

James J. Dobson, 1110 Bay Ave., Lewes, De., has joined the medical staff of Milford Memorial Hospital and will serve as one of the five physicians providing the emergency department with 24-hour physician coverage. Dr. Dobson is an internist.

Sandra Willner Horowitz, 824 Maple Rd., Flossmoor, Il., is practicing diagnostic radiology and neuroradiology in a community hospital in Chicago Heights, Illinois. Her husband, Steven L. Horowitz ’75 is practicing ENT. Their daughter, Jeanne Miriam, is now 4.

Sally Ann Cunningham Johnson, 910 Knight Dr., Durham, N.C., and her husband, Bill, are the proud parents of Hannah Kate, who was born last August. Dr. Johnson is continuing her work in forensic psychiatry with the Federal Bureau of Prisons and at Duke University.

Frederic B. Kremer, One Graduate Plaza, Philadelphia, has been promoted to Clinical Assistant Professor of Ophthalmology at Jefferson.

John O. Punderson, Jr., 724 Cheyenne Ln., Mendota Heights, Mn., and his wife, Kathie, announce the birth of their first child, Lisa Marie, who was born in January. Dr. Punderson is practicing family medicine in West St. Paul, Minnesota.

1977

Jeffery and Wynn Adam, 50 Emmandale Dr., Huntington, W.V., have two children, Thomas Martin, 3, and Jeffery Stewart, born in March. Wynn was board-certified in diagnostic radiology last year and has been practicing at Ohio State University with a special interest in computed tomography and ultrasound. Jeffery finished his otolaryngology residency in July at Ohio State University.
David C.S. Nickeson, 10811 Greenwillow, Houston, married Maryellen Oliver in March. Dr. Nickeson completed his pulmonary fellowship in June and has accepted a staff position at Baylor College of Medicine in Houston.

Brad S. Rogers, Mercer Urology Associates, 416 Bellevue Ave., Trenton, N.J., has moved to Yardley, Pennsylvania, from Miami, where he is practicing urology at the Mercer County Medical Center in Trenton, New Jersey.

Robert E. Wisniewski, 1411 N. Van Buren St., Wilmington, De., has been appointed an Instructor in obstetrics and gynecology at Jefferson.

1978

Daniel F. Flynn, 74 Wilbur St., Waltham, Ma., is Chief Resident in the Department of Radiation Medicine at the Massachusetts General Hospital in Boston.

Frank Guillard, 306 Adams Ave., State College, Pa., has joined the practice of Hall, McGuire and Associates. Certified in internal medicine, Dr. Guillard was an Instructor of Medicine at Hershey Medical School for one year.

Eric W. Jahnke, 1016 Cliff Dr., Santa Barbara, Ca., has been certified as a Diplomat in internal medicine by the American Board of Internal Medicine. Dr. Jahnke planned to move to northern California to continue his training in a GI fellowship.

Joyce R. King, 3626 Gaviota Ave., Long Beach, Ca., was accepted for a surgical pathology fellowship at Long Beach Memorial Hospital, which began in July.

David M. Lavin, 104 E. 2nd St., Erie, Pa., passed his internal medicine boards last year, and in addition to his private practice, is involved in teaching residents at Hamot Medical Center. Dr. Lavin’s wife, Debra, gave birth to their first child, Sean David, in February.

Alfred E. Levy, 221 Rustic Ridge, Garland, Tx., is practicing with four other family physicians as a partnership. Dr. Levy and his wife, Patti, have a “beautiful daughter, Anna Frances,” born last September.

Alex C. Mamourian, 65 B Bradley St., Burlington, Vt., has finished his radiology residency at the University of Vermont. He was planning a bicycle trip down the west coast from Vancouver to Los Angeles.

Bruce E. Nayowith, 10 Pine Grove St., Woodstock, N.Y., after completing his rotating internship in Phoenix, volunteered to work on the Wind River Reservation in Wyoming for two years doing out-patient medicine. Dr. Nayo­ with is now living in Woodstock where he is working in an emergency room and helping his father build a house on his apple orchard.

Arthur J. Patterson, Jr., 5022 Friendship Ave., Pittsburgh, began as Chief Surgical Resident at West Penn Hospital in Pittsburgh last fall, at which time he was also married. He plans to join his father in the practice of general surgery in Waynesburg, Pennsylvania, next year.

Ann E. Reilly, 104 S.W. Montgomery Ave., Ardmore, Pa., is practicing internal medicine in the Valley Forge area, and is on the medical staffs of Paoli Memorial Hospital and Lankenau Hospital. Dr. Reilly enjoys teaching rounds at Lankenau and has a faculty appointment at Jefferson.

Duncan Salmon, 409 Wingate Rd., Baltimore, is in a cardiology fellowship until 1983 at The Johns Hopkins Hospital. Dr. Salmon was board-certified in internal medicine last year. He and his wife, Beverly, have one son, James Morgan, 3.


Jill M. Sunfrest, Letterman Army Medical Center, San Francisco, began her last year of a general surgery residency program in July at Letterman Army Medical Center. Dr. Sunfrest’s brother, Joel, was in this year’s graduating class.

John D. Wofford, Jr., 409 Euclid Ave., Birmingham, Al., is currently in his first year of an infectious disease fellowship in Birmingham. Dr. Wofford plans to return to Jackson, Mississippi to set up practice.

1979

Richard S. Blumberg, after completing his internal medicine residency at New York Hospital, began an infectious disease fellowship in July at Massachusetts General Hospital in Boston.

Steven B. Cherry, 226 W. Jackson St., York, Pa., was married in 1980 and is currently in his fourth year of an ob/gyn residency at York Hospital.

Allen W. Ditto has moved to Hagerstown, Maryland where he is entering family medicine private practice. His address is 1610 Oakhill Avenue.

Anthony W. Fiorello entered anesthesia private practice in July in Ft. Lauderdale, Florida. The Fiorellos’ son, J. Michael, is 2 and their second child is due in September.

Steven A. Foreman, 2686 38th Ave., San Francisco, plans to do a research fellowship after completing his psychiatric residency.

Michael L. Graybeal, 5464 Blackstone Ave., Chicago, following the birth of his first child in June, moved to Chicago from Kentucky to become a Fellow in endocrinology and metabolism at the University of Chicago.

Michael J. Kibelbek, 1027 Hastie Rd., Pittsburgh, writes that his wife, Melanie, gave birth to Jonas Charles on January 17, the coldest night of the century. Dr. Kibelbek finished a pediatrics residency in June and has begun an anesthesia residency at Mercy Hospital in preparation for a pediatric intensive care fellowship at Children’s Hospital of Philadelphia in 1984.

Allen E. Tyler, 2511 N. Marshall St., Philadelphia, began as Chief Neurology Resident in July at the Medical College of Pennsylvania.

1980

Donald P. De Lorenzo Jr., 19 Chamber St., Danville, Pa., married classmate Margaret M. Flanagan in April.

Thurman Gillespy, III, 525 Summerlea St., Pittsburgh, is taking a radiology residency at St. Francis General Hospital there.

James 1: Hopkins, 2316 Belmont Ave., Ardmore, Pa., married Kathleen A. Lawlor last October.

Douglas P. Hume, 418 Central Ave., Lancaster, N.Y., is E.R. Director for Buffalo Columbus Hospital in Buffalo, New York. Dr. Hume is also the New York/Pennsylvania Regional Director for Physician Staffing, Inc.

Gerard F. Klinzing, 859 Old Lancaster Rd., Bryn Mawr, Pa., and his wife are proud to announce the birth of their daughter, Emily, who arrived last October.

Mark J. Krawitz, 200 Carman Ave., East Meadow, N.Y., and his wife, Marsha, announce the birth of their son, Brian Jason, in January.
**Obituaries**

**William R. Leisner**, 2126 Main Blvd., Allentown, Pa., and his wife, Jeanne, are expecting a baby in the fall. Dr. Leisner sends greetings to all those "Derbs" from Phi Alpha.

**Edwin P. Little**, 1753 Shelburne Dr., Johnstown, Pa., and his wife, Nancy, are expecting their second child in October.

**Susan C. Loken**, 373 Fairville Rd., Chadds Ford, Pa., is in her second year of an ob/gyn residency at Wilmington Medical Center.

**Shahab S. Minassian**, 7414 Castor Ave., Philadelphia, has won the resident’s competition of the Philadelphia Obstetrical Society. The competition includes 11 Delaware Valley Hospitals. Dr. Minassian plans to marry Joanne Chamberlain, a free-lance photographer, October 30th.

**Raymond F. Nungesser**, 1061 Walnut St., Williamsport, Pa., and his wife were expecting their second child in June. Kriston, born at Jefferson, is now 2.

**Marianne T. Ritchie**, 275 Bryn Mawr Ave., Bryn Mawr, Pa., married **Stuart L. Gordon** ’81 last July. Dr. Ritchie has been granted a gastroenterology fellowship at the Memorial Sloan Kettering and Cornell, for two years of study to begin in July, 1983.

**1981**

**Judith H. Fluellen**, 885 N. 50th St., Philadelphia, is expecting her first child in early August. Dr. Fluellen then plans to take a year off and do “sporadic moonlighting.” After that, she will go back for more training in “who only knows what” specialty!

**Stephen P. Gadomski**, 1134½ Lombard St., Philadelphia, writes that his surgical internship at Einstein Medical Center is hard work, “but a worthwhile experience.” Dr. Gadomski will be at Einstein for two years, and then at Jefferson for orthinolaryngology until 1986.

**Stuart L. Gordon**, 275 Bryn Mawr Ave., Bryn Mawr, Pa., married **Marianne T. Ritchie** ’81 last July. Dr. Gordon will begin an orthopaedics residency at the Columbia-Presbyterian Medical Center in July, 1983.

**Mark A. Smith**, 7802 Hanover Pkwy., Greenbriar Condominiums, Greenbelt, Md., is working as an emergency medicine physician in southern Maryland and is conducting a research project at the National Eye Institute at the NIH in Bethesda, Maryland.

**Burtis M. Hance**, 1906
Died January 18, 1982 at the age of 97. Dr. Hance, a urologist and gynecologist, served as President of the Medical Staff and Chief Urologist at Easton Hospital in Easton, Pennsylvania.

**Walter M. Bortz**, 1908
Died February 23, 1982 at the age of 96. Dr. Bortz was an emeritus staff member at Westmoreland Hospital in Greensburg, Pennsylvania.

**Edwin G. Reade**, 1916
Died February 24, 1982 at the age of 90. Dr. Reade had a private practice in Watertown, Connecticut, until 1966 when he became the physician at the Taft School there. At the time of his death he was residing in Pinehurst, North Carolina.

**Joseph E. O’Brien**, 1920
Died February 25, 1982 at the age of 87. Dr. O’Brien, a resident of Erie, Pennsylvania, was a surgeon and a retired Medical Director of St. Joseph Home.

**Lawrence G. Heins**, 1921
Died May 28, 1981 at the age of 84. The retired physician was a resident of Abilene, Kansas. He served as County Commissioner for Dickinson County for many years.

**George B. German**, 1923
Died December 14, 1981 at the age of 81. Dr. German was Chief of Obstetrics at Cooper Hospital in Camden, New Jersey, at the outbreak of World War II. By the summer of 1942 he had set up the 61st Station Hospital in Tunisia, staffed with his team of 50 doctors and nurses. It was the first military hospital put together by a local hospital and activated by the army. A past President of the New Jersey Obstetrical and Gynecological Society, Dr. German was a Fellow of the American College of Surgeons and a Diplomate of the American Board of Obstetricians and Gynecologists. Surviving are his wife, Edith, a son and two daughters.

**Theodore Pick**, 1926
Died January 21, 1981. Dr. Pick was a general practitioner who resided in New York City.

**David R. Meranze**, 1927
Died May 31, 1982 at the age of 82. Dr. Meranze served as a pathologist and Director of Laboratories from 1930 to 1965 at Albert Einstein Medical Center, Daroff Division. During this time, he did extensive research in areas such as the mechanism of blood clotting and the effect of carbon dioxide on blood circulation in the brain. He taught at both Jefferson and Hahnemann. Dr. Meranze was a member of several organizations, including the American Society of Clinical Pathologists. Surviving are his wife, Yetta, and two sons.

**John J. Moretti**, 1928
Died December 2, 1981 at the age of 82. Dr. Moretti, a general practitioner, resided in Cedar Grove, New Jersey.

**Donald L. Kegaries**, 1929
Died January 4, 1982 at the age of 78. Dr. Kegaries, an internist, was a
Edward H. Kotin, 1930
Died April 6, 1982. Dr. Kotin was an Honorary Clinical Assistant Professor of Medicine at Jefferson. A cardiologist, he was a resident of Philadelphia. Two sons survive him.

Myles J. Murphy, 1932
Died April 30, 1982 at the age of 78. Dr. Murphy was an Emeritus staff member at St. Mary’s Hospital in Philadelphia, where he was a lifetime resident. Surviving are his wife, Helen, two daughters and two sons.

Thomas J. Leichner, 1933
Died February 28, 1982 at the age of 74. Dr. Leichner was a general practitioner and surgeon in Philadelphia. His son Thomas J. Leichner, Jr., is in Jefferson’s class of 1965.

Eugene E. Raymond, 1933
Died December 20, 1981 at the age of 73. Dr. Raymond, a surgeon in Johnstown, Pennsylvania, was a past President of the Johnstown Mercy Hospital staff.

Jacob G. Hyman, 1934
Died February 17, 1982. Dr. Hyman was Chief of the Department of Obstetrics at Nesbitt Hospital in Wilkes-Barre, Pennsylvania, where he also served as President of the medical staff. A past President of the Luzerne County Medical Society, he was a Fellow of the International College of Surgeons, the College of Emergency Medicine and the American College of Family Physicians. Surviving are his wife, Sophie, and two sons, one of whom is Paul S. Hyman, M.D. ‘62.

James A. Mansmann, 1934
Died March 11, 1982 at the age of 72. Dr. Mansmann, a resident of Bakerstown, Pennsylvania, was Director of the Allergy Clinic at St. Francis General Hospital until his retirement in 1975.

Nicholas W. Hatfield, 1935
Died December 19, 1981 at the age of 71. Dr. Hatfield retired in 1975 as a reviewing physician for the Social Security Administration. Prior to this appointment, he was a general practitioner in Brightwood, Indiana. Surviving are his wife, Helen, two sons, two physician stepsons and two daughters.

Sidney S. Samuels, 1936
Died April 10, 1982 at the age of 69. Dr. Samuels had served as Chief of Otolaryngology at Albert Einstein Medical Center, Northern Division, Philadelphia. He was a member of the Pennsylvania Academy and the American Academy of Otolaryngology. Surviving are his wife, Sylvia, and two daughters.

Thomas E. Merritt, 1937
Died July 11, 1981. Dr. Merritt was a family practitioner in Graysville, Alabama. He is survived by his wife, Edna.

Densmore Thomas, 1937
Died March 18, 1982 at the age of 74. Dr. Thomas, who had retired to West End, North Carolina, was an obstetrician/gynecologist in Warren, Ohio. He was a member of the Trumbull Medical Association, serving as its President in 1949, and a Fellow of the American College of Obstetricians and Gynecologists. Dr. Thomas served on several committees of the College and was on the Committee on Maternal Health of the Ohio State Medical Society. His wife, Dorothy, and two sons and a daughter survive him.

Robert E. Lee, 1939
Died March 5, 1982 at the age of 69. Dr. Lee was a general practitioner and obstetrician with offices in Short Hills and Lincoln Park, New Jersey. Surviving are three sons and a daughter.

Richard E. Flood, 1941
Died February 7, 1982. Dr. Flood, a general practitioner from Cove Station, West Virginia, was a Clinical Professor at the West Virginia University School of Medicine. He was a past President of the West Virginia Academy of Family Practice and served as one of two delegates from his state to the AMA.

George Youngman, 1941
Died April 25, 1982 at the age of 68. A resident of Big Springs, Texas, Dr. Youngman served as Chief Radiologist at the Veterans Administration until his retirement in 1977. His wife, Martha, three sons and one daughter survive him.

John S. Stone, 1942
Died April 11, 1982. Dr. Stone was a general practitioner who resided in Stoneville, North Carolina.

Robert G. Arrington, 1944S
Died March 18, 1982 at the age of 61. Dr. Arrington, a resident of Huntington, West Virginia, was a retired Commander in the naval reserve. He was given the “Railway Man of the Year Award” in 1971 following his service as staff physician at the Huntington Chesapeake and Ohio Railway Hospital. Surviving are his wife, Janis, two daughters and a son.

Paul E. Jones, Jr., 1944S
Died March 31, 1981. Dr. Jones was an internist who resided in Concord, North Carolina.

James M. O’Leary, 1946
Died March 1, 1982 at the age of 61. Dr. O’Leary, a general and thoracic surgeon, resided in Hollidaysburg, Pennsylvania. He served at Mercy Hospital in Altoona where he was Chief of Surgery, Chief of the Medical Staff and a member of the Board of Trustees. Dr. O’Leary had retired in 1981. A Fellow of the American College of Surgeons and the American Board of Surgeons, he was Medical Director of Highlands Professional Standard Review. Surviving are his wife, Patricia, a daughter and two sons.

Robert J. Dongell, Jr., 1960
Died January 30, 1982. Dr. Dongell was an intern who practiced in Gallitzin, Pennsylvania.

Leroy J. Nelson, 1969
Died April 1, 1982 with his daughter in an avalanche at Squaw Valley, California. Dr. Nelson, an orthopaedic surgeon who was residing in Eureka, California, completed his residency at Jefferson following his graduation. His military duty was spent in Guam. Dr. Nelson was recently inducted as a Fellow in the American Academy of Orthopaedic Surgeons. His wife, Kathie, and a son survive him.
Henry L. Bockus, M.D.

Henry L. Bockus, M.D. of the Class of 1917, died suddenly and unexpectedly on April 3, 1982, following injuries suffered when struck by a van near his home and office in Philadelphia. Dr. Bockus was undoubtedly one of the greatest physicians among the long list of illustrious alumni produced by Jefferson, and was one of the giants of American and world medicine and gastroenterology.

Born in Newark, Delaware, in 1894, Dr. Bockus grew up in Philadelphia and graduated from Central High School before entering Jefferson Medical College. His classmates at Jefferson prognosticated that “Roy” was sure to attain the highest success in his profession and so he did. Following a Cuban stint in the Marine Corps in World War I, which then led to a life-long affection for and many friendships with Latin Americans, and after an internship in Bethlehem, Pennsylvania, and a residency in medicine and gastroenterology in New York City, Dr. Bockus returned to Philadelphia in 1921. He joined the staff of the Graduate Hospital of the University of Pennsylvania, and here organized the Department of Gastroenterology, developing it into one of the foremost centers of gastrointestinal learning and teaching in the world. In due course Dr. Bockus became Chairman of the Department of Medicine at the Graduate School of Medicine of the University of Pennsylvania where he developed his famous courses in gastroenterology. He attracted eager graduate medical students from all over the world for his own courses as well as those of the entire Graduate School. A representative class during 1950-51 consisted of 343 students from 67 medical schools and 24 foreign countries. His former students were in general agreement that Dr. Bockus was the greatest teacher they ever encountered. His personal lectures ultimately formed the core of the monumental volumes of *Gastroenterology*, that appeared initially in 1946, with subsequent additions in the 1960’s and 1970’s. The volumes have been translated into Spanish, Portuguese and Italian and have served as the major reference source of gastrointestinal knowledge all over the world.

Dr. Bockus was a member of more societies, presiding over several, and received more honors than can be listed here. A collection of medals from over 20 countries was turned over to Jefferson’s library, together with manuscripts and teaching slides, as a permanent memorial to this great Jefferson alumnus. His Alma Mater awarded Dr. Bockus an Honorary degree in 1958 and the Alumni Association bestowed upon him in 1964 its Alumni Achievement Award. He and Francis J. Braceland, M.D. were the first alumni members of Jefferson's Board of Trustees.

In 1958, Dr. Bockus served as President of the First World Congress of Gastroenterology held in Washington, D.C., and he subsequently served as President of the World Organization of Gastroenterology. In the same year a group of his former students, inspired by Professor T. Figueredo Mendes of Rio de Janeiro founded the Bockus International Society of Gastroenterology comprising former students and associates of Dr. Bockus, and subsequently students of the Professor. The Society currently has about 350 members from 39 countries and strives to continue the scholarship inspired by Dr. Bockus, and the exchange of gastrointestinal knowledge and friendship on the international level.

Dr. Bockus was faithful to the clinical traditions of his Alma Mater, and often reflected upon the glorious days of Jefferson while he was a student. His students came to admire him not only for his remarkable scholarship and clinical skills, incisive intellect, his keen sense of humor, but also for his strength of character, his honesty, his friendship, and the devotion to his patients and to his students. Those who knew him well, appreciated his warmth and concern for others. Dr. Bockus was affectionately known to his friends and colleagues as El Maestro and indeed he was the Master who will always live in the memory of his friends and students. Dr. Bockus is survived by his beloved wife, Rosalynd, and his daughter, Barbara Bockus Aponte to whom the Alumni wish to express their deepest sympathy.

Franz Goldstein, M.D. ’53

David M. Davis, M.D.

David M. Davis, M.D., the Nathan Lewis Hatfield Emeritus Professor of Urology, died June 21 at the age of 96. He was a member of the Jefferson faculty from 1935 until his retirement in 1951. Dr. Davis was named the first Nathan Lewis Hatfield Professor upon its establishment in 1946.

He was born in Buffalo, New York, and received his B.S. degree from Princeton University and his M.D. degree from Johns Hopkins University. He was widely known for his investigations, writing and clinical work in urology. A considerable part of his training was received at the Brady Institute at Hopkins in association with Dr. Hugh H. Young, with whom he collaborated in the preparation of a widely known and authoritative textbook on this subject.

Dr. Davis occupied the Chair of Urological Surgery at the University of Rochester Medical School for a period of four years, resigning to form an association with Dr. Young from 1928 to 1930. He then went into private practice in Phoenix until 1935, when he joined the faculty at Jefferson.

The Professor, one of the pioneers of American urology, devised original operative procedures for correction of ureteral and ureteropelvic obstructions and hypospadias, which are in use throughout the world. He was among the first to recognize the importance of urinary system hydrodynamics (urodynamics) and his writings were the stimuli for enormous clinical investigative efforts in this area.

The author of over 130 scientific papers, Dr. Davis was the recipient of the first Hugh Hampton Young Award of the American Urological Association in 1969. He was a member of Phi Beta Kappa and Alpha Omega Alpha Fraternities, and was President of the Medical and Surgical Association of the Southwest, the Philadelphia Urological Society and the American Association of Genito-Urinary Surgeons. He received an honorary degree from Jefferson in 1972.
Class of 1982 Hospital Appointments

Match Day 1982 arrived in mid-march at Jefferson—the day each year on which the seniors find out where they will spend the next year of training. Of the 219 graduates, 200 (91% of the class) participated in the Match. Fifty-four percent of those 200 received their first choices, with an additional 17% receiving their second choices. The selection of specialties of the 200 Match participants is internal medicine 24.5%, surgery 24.5%, family medicine 20%, flexible program, 10.5%, pediatrics 4%, obstetrics and gynecology 3%, anesthesia 3%, psychiatry 2%, pathology 0.5%, radiation therapy 0.5%. The list of the class of 1982 with their hospital appointments follows. Alpha Omega Alpha members are noted:

Victor F. Altadonna (AOA)  
Hospital of University of Pennsylvania  
Philadelphia

Charles M. Amadee  
Lafayette Area Hospital  
Lafayette, PA

Rex D. Antinuzzi  
George Washington University Hospital  
Washington, DC

Vincent T. Armenti  
St. Vincent's Hospital  
New York

Robert W. Armstrong, Jr  
Geisinger Medical Center  
Danville, PA

Michael G. Avedissian  
Reading Hospital and Medical Center  
Reading, PA

Jeffrey B. Banyas  
The Western Pennsylvania Hospital  
Pittsburgh

Richard A. Bartlett  
The Graduate Hospital  
Philadelphia

Evan K. Bash (AOA)  
Mercy Catholic Medical Center  
Philadelphia

Randall T. Bashore (AOA)  
Medical College of Virginia  
Richmond, VA

Robert J. Biester  
Wilmington Medical Center  
Wilmington, DE

Jeffrey M. Bikle  
Chesnut Hill Hospital  
Philadelphia

Anthony Billas, Jr.  
Geisinger Medical Center  
Danville, PA

Edward C. Blasko  
The Graduate Hospital  
Philadelphia

Jeffrey D. Bloss (AOA)  
Wilford Hall USAF Medical Center  
San Antonio, TX

Sherry L. Blumenthal (AOA)  
The Medical College of Pennsylvania  
Philadelphia

Robert H. Boretsky  
Shadyside Hospital  
Pittsburgh

Kenneth M. Brantley  
University of Virginia Medical Center  
Charlottesville, VA

Russell S. Breish (AOA)  
Chesnut Hill Hospital  
Philadelphia

Michael F. Breslow  
University of Arizona Affiliated Education Program  
Tucson, AZ

Todd H. Broad  
The Graduate Hospital  
Philadelphia

Ronald J. Brockman  
The Medical College of Pennsylvania  
Philadelphia

Richard D. Bruehlman (AOA)  
St. Margaret Memorial Hospital  
Pittsburgh

Kim L. Carpenter  
York Hospital  
York, PA

Franklin J. Chinn, Jr.  
Valley Medical Center  
Fresno, CA

Christine Chiosi  
Roanoke Memorial Hospital  
Roanoke, VA

John J. Cienki  
Rhode Island Hospital  
Providence, RI

Timothy P. Clare  
St. Margaret Memorial Hospital  
Pittsburgh

Jeffrey I. Clyman  
St. Joseph's Hospital  
Denver, CO

Stephen G. Clyman  
Wilmington Medical Center  
Wilmington, DE

Sherry L. Clyman  
SI. Joseph's Hospital  
Wilmington, DE

Alan J. Cohen  
University of California, San Francisco School of Medicine  
San Francisco

Steven W. Cohen  
Harrisburg Hospital  
Harrisburg, PA

Bruce S. Cohick  
Polyclinic Medical Center  
Harrisburg, PA

Cora J. Collette  
Naval Regional Medical Center  
San Diego

Allan H. Cummings  
Albany Medical Center Hospital  
Albany, NY

James E. D'Amour  
Wilmington Medical Center  
Wilmington, DE

Walter W. Dearolf, III  
Thomas Jefferson University Hospital  
Philadelphia

Neil L. DeNunzio (AOA)  
Allegheny General Hospital  
Pittsburgh

Stanley T. Depman  
Wilmington Medical Center  
Wilmington, DE

Albert DiGerolamo  
DeWitt Army Hospital  
Fort Belvoir, VA

Paul P. Doghramji  
Chesnut Hill Hospital  
Philadelphia

Eileen M. Doherty  
Medical Center Hospital of Vermont  
Burlington, VT

Mark P. Downey  
Presbyterian-University of Pennsylvania Medical Center  
Philadelphia

Lance C. Dozier  
The Medical College of Pennsylvania  
Philadelphia

David B. Edwards  
Maricopa County General Hospital  
Phoenix, AZ

Dirk M. Elston (AOA)  
Walter Reed Army Medical Center
Washington, DC
Christopher M. Eriksen
York Hospital
York, PA
Michael J. Estner
The Western Pennsylvania Hospital
Pittsburgh
David S. Estock
The Bryn Mawr Hospital
Bryn Mawr, PA
John R. Evans
Loma Linda University Medical Center
Loma Linda, CA
Robert J. Evans
University of Virginia Medical Center
Charlottesville, VA
Gary L. Feinberg
Pennsylvania Hospital
Philadelphia
Drew E. Fenton
Letterman Army Medical Center
San Francisco
Steven C. Flashner
The Medical College of Pennsylvania
Philadelphia
Dale E. Fowler
University of Missouri Medical Center
Columbia, MO
Michael A. Franchetti
Hahnemann Medical College and Hospital
Philadelphia
Melanie Freed (AOA)
Oakwood Hospital
Dearborn, MI
Angela M. Galdini
Mary Imogene Bassett Hospital
Cooperstown, NY
Janice R. Gall
St. Vincent’s Hospital
New York
William B. Gamble
St. Elizabeth’s Hospital
Boston
John C. Gardner (AOA)
Geisinger Medical Center
Danville, PA
Larry M. Gersten (AOA)
Pennsylvania Hospital
Philadelphia
Albert W. Gillespy
Thomas Jefferson University Hospital
Bruce S. Gilmore
Mercy Catholic Medical Center
Philadelphia
Stanford D. Gittlen
Thomas Jefferson University Hospital
Michael E. Goldberg (AOA)
Thomas Jefferson University Hospital
Richard E. Goldstein
Vanderbilt University Hospital
Nashville, TN
Robert M. Gorsen
Lenox Hill Hospital
New York
David C. Greb
Malcolm Grow Medical Center
Washington, DC
Claudia I. Groves
Pennsylvania Hospital
Philadelphia
Michael F. Hagerty
Allegheny General Hospital
Pittsburgh
Scott M. Halla
Wilmington Medical Center
Wilmington, DE
Jo-Ann M. Hardisky
Scrapton-Temple Residency Program
Scranton, PA
Richard E. Hawkins
Naval Regional Medical Center
Portsmouth, VA
Deborah K. Hess
Medical College of Virginia
Richmond, VA
Margaret T. Hessen (AOA)
Lankenau Hospital
Philadelphia
Scott E. Hessen (AOA)
Thomas Jefferson University Hospital
Robert P. Hinks (AOA)
Hospital of University of Pennsylvania
Philadelphia
Charles R. Hoidal
Tripler Army Medical Center
Honolulu
David Horvick
Thomas Jefferson University Hospital
William L. Howe, II
Naval Aerospace and Regional Medical Center
Pensacola, FL
Marian M. Huang
University Hospitals of Cleveland
Case Western Reserve University
Cleveland, OH
William F. Iobst
Robert Packer Hospital
Sayre, PA
Edward A. Jackson
Saginaw Cooperative Hospital
Saginaw, MI
Richard L. Jahnle (AOA)
Abington Memorial Hospital
Abington, PA
Paul M. Jurkowski (AOA)
Silas B. Hays Army Community Hospital
Fort Ord, CA
Mary F. Kegel
Hartford Hospital
Hartford, CT
Denise M. Kenna
Carney Hospital
Boston
Garrett D. Kine
New England Medical Center
Boston
Howard N. Kivell
Montefiore Hospital and Medical Center
Bronx, NY
Gary D. Koch
Presbyterian Hospital of Pacific Medical Center
San Francisco
Richard C. Kovach
Thomas Jefferson University Hospital
Charles B. Krespan
Wilmington Medical Center
Wilmington, DE
Peter D. Landin
Allentown Affiliated Hospitals

Craig H. Sherman, M.D., ’82, Alumni Medal Recipient.

O. Scott Lauter, M.D., Class Speaker at Alumni Banquet.
Allentown, PA
Cail G. Larkin
Wilmington Medical Center
Wilmington, DE

William R. Laurence, Jr.
Carraway Methodist Medical Center
Birmingham, AL

O. Scott Lauter (AOA)
Hartford Hospital
Hartford, CT

John F. Lawlis, III
Dartmouth-Hitchcock Medical Center
Hanover, NH

Ilene B. Lefkowitz (AOA)
Thomas Jefferson University Hospital

Alex V. Levin (AOA)
Children's Hospital of Philadelphia
Philadelphia

James S. Lewis
St. Mary's Hospital and Medical Center
San Francisco

Orlin M. Liberman
Mount Zion Hospital and Medical Center
San Francisco

Richard S. Lorraine
Albert Einstein Medical Center
Philadelphia

Edward Lubat
State University – Kings County Center
Brooklyn, NY

Cary L. Lubkin
Cooper Medical Center
Camden, NJ

R. Bruce Lutz, III (AOA)
Naval Regional Medical Center
San Diego

John C. Lystash (AOA)
The New York Hospital
New York

A. Radford MacFarlane
Dartmouth-Hitchcock Medical Center
Hanover, NH

Robert S. Magley
Latrobe Area Hospital
Latrobe, PA

David P. Maguire
Reading Hospital and Medical Center
Reading, PA

Charles A. Mandelberg
University of Connecticut Affiliated Hospitals
Farmington, CT

Ralph J. Marino
Roanoke Memorial Hospital
Roanoke, VA

David B. Massey
Moses H. Cone Memorial Hospital
Greensboro, NC

Denise Crilly McFadden
St. Barnabas Medical Center
Livingston, NJ

Paul A. McGeeshan
Geisinger Medical Center
Danville, PA

Thomas E. McGuire
St. Vincent’s Health Center
Erie, PA

Mark A. McGurrin
Thomas Jefferson University Hospital

Kevin P. McNamara
Letterman Army Medical Center
San Francisco

Robert M. McNamara
The Medical College of Pennsylvania
Philadelphia

Alan T. Midura
The Williamsport Hospital
Williamsport, PA

John S. Monk, Jr.
York Hospital
York, PA

Steven A. Monte
Thomas Jefferson University Hospital

David K. Moore
United Health and Hospital Service
Kingston, PA

Howard A. Moritz
The Medical College of Pennsylvania
Philadelphia

Judd W. Moul (AOA)
Walter Reed Army Medical Center
Washington, DC

Ricardo J. Navarrete
Children’s Hospital of San Francisco
San Francisco

Richard A. Nesbitt
Geisinger Medical Center
Danville, PA

Leonard A. Nitowski
Wilmington Medical Center
Wilmington, DE

Juan J. Nogueras
The Presbyterian Hospital
New York

John P. Nolan, Jr.
Abington Memorial Hospital
Abington

Andrew J. Norton (AOA)
Medical College of Wisconsin Affiliated Hospitals
Milwaukee, WI

Richard F. Pacropis
The Bryn Mawr Hospital
Bryn Mawr, PA

Lorraine C. Palos
Thomas Jefferson University Hospital

David B. Panasuk
Thomas Jefferson University Hospital

F. Noel Parent, III
Rhode Island Hospital
Providence, RI

Pauline K. Park
Thomas Jefferson University Hospital

William J. Paronis
Latrobe Area Hospital
Latrobe, PA

William D. Paterson
Thomas Jefferson University Hospital

Steven W. Pearson
Akron General Medical Center
Akron, OH

Christopher M. Pezzi
Geisinger Medical Center
Danville, PA

Timothy S. Pillai
The Graduate Hospital
Philadelphia

William P. Platko, Jr.
Mercy Hospital
Pittsburgh

Stephen F. Ponchak, Jr.
Women & Infants Hospital
Providence, RI

James R. Powell
The Western Pennsylvania Hospital
Pittsburgh

David L. Reich
Harbor UCLA Medical Center
Torrance, CA

S. Mitchell Rivitz (AOA)
University of California at Los Angeles

Cynthia B. Robinson (AOA)
Hospital of University of Pennsylvania
Philadelphia

James W. Robinson
Riverside Hospital
Newport News, VA

Jay A. Robinson
The Altoona Hospital
Altoona, PA

George R. Rohrer, Jr.
The Williamsport Hospital
Williamsport, PA

Nina M. Roman
David Grant Medical Center
Fairfield, CA

Jerry M. Roth
Abington Memorial Hospital
Abington, PA

Randall W. Ryan
Pennsylvania Hospital
Philadelphia

Devereux N. Saller, Jr.
Reading Hospital and Medical Center
Reading, PA

Madalyn Schaefgen
Sacred Heart Hospital
Allentown, PA

Robert F. Schiowitz
Albert Einstein Medical Center
Philadelphia
Fall Calendar

**September 8**
Opening Exercises
McClellan Hall

**September 29**
Class Agents' Dinner
Jefferson Alumni Hall

**October 3**
Reception during the meetings of the American Academy of Family Physicians
Stanford Court
San Francisco

**October 16**
Dinner for Central Pennsylvania alumni
The Hershey Hotel

**October 20**
Reception during the meetings of the American Academy of Otolaryngology
The Royal Orleans
New Orleans

**October 22**
The President's Club Dinner
The College of Physicians of Philadelphia

**October 26**
Reception during the meetings of
The American College of Surgeons
The Drake Hotel
Chicago

**October 27**
Dinner for Southwestern Pennsylvania Alumni
The Sheridan Greensburg
Greensburg

**November 1**
Reception during the meetings of
The American Academy of Ophthalmology
Stanford Court
San Francisco

**November 4**
Reception to honor John F. Ditunno, Jr., M.D.
President of the American Academy of Physical Medicine
during the national meetings in Houston
Hyatt Regency

**November 28**
Reception during the meetings of the Radiological Society of North America
The Drake Hotel
Chicago

**February 11 to 21**
Post-Graduate Seminar
Hawaii

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