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Radiation Therapy
The Chairman of the Department of Radiation Therapy and Nuclear Medicine writes of the importance of the new Bodine Center.

Medical Ethics
Jeffersonians inaugurate a committee dealing with today's conflicts of values as they relate to medical/ethical issues.

Jefferson Scene
Among a variety of news items, the Alumni Association welcomes a new President and the Medical College gains prestige through the appointments of three alumni to chairmanships.

Class Notes
Two class note specials highlight this section of JAB: John M. Levinson '53 serves as President of the internationally renowned Explorers Club whose New York headquarters are pictured at left and Thomas C. Kravis '68 serves as team physician for an America's Cup syndicate.

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Cover Design by Louis V. Day

Photo Credit:
Feature photographs, Don Walker

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
POSTMASTER: Send address changes to the above address.
Radiation Therapy

The Bodine Center will be an important and major addition to Jefferson's commitment to the development of Centers of Excellence

Carl M. Mansfield, M.D.

Following the discovery of radium by Madame Curie and x-rays by Roentgen, radiation was immediately used in the treatment of a host of diseases. In fact, the “X” or unknown rays were considered to be the possible cure for all diseases. Therefore, it was only natural to use them for the treatment of cancer, especially cancer of accessible areas such as skin, breast, vagina and cervix. When tumors in these areas were treated with radium or x-rays, the cancer often regressed or disappeared completely. In fact, a few patients were cured. Needless to say, there were many failures. But there were enough successes to inspire the early workers to continue to use radiation in the treatment of cancer patients.

From these two discoveries of radium and x-rays, two systems of irradiation of cancer developed. When radium was used in the early days, it was placed on, or in the tumor (interstitial and intracavitary radiation). When x-rays were used they were directed at the tumor by a beam from a machine, which was outside of the patient (external beam radiation).

In the early years of radiation therapy, little was known about the dosage of radiation and its effects on normal tissue. Therefore, many patients and physicians received radiation “burns.” With time and experimentation the dosages were better understood, and the “burns” decreased and the cure rate improved. However, the machines were not very powerful, the x-rays they produced did not penetrate very far into the body, and only a small amount reached the tumor. In order to increase the quantity of x-rays to the tumor, large dosages had to be given. This resulted in “burns” to the skin.

As technology improved, machines with greater penetrating power were developed to give a high dose of radiation to the tumor, without damage to the skin and surrounding normal tissue. The power of the machines increased from a few kilovoltage (1000 volts) to 50 kilovolts (50 KV) and higher.

Other methods were being developed to help bring about high tumor dosage. For example, it became apparent that planning the treatment and directing the x-ray beams in a coordinated fashion resulted in a better “dose distribution.” In other words, one could plan treatment techniques that made it possible to give high dosages to the tumor and relatively low dosages to the surrounding normal tissue.

For more than 20 years, the Division of Radiation Therapy has maintained a prominent national role in cancer teaching, research and treatment. In the field of teaching, the residency program is highly sought. (We have filled every slot each year since 1968.) Research by the staff physicians has always been a high priority. This interest in research was recognized in 1968, with the award of a NIH Program Project Grant, which was funded for 16 years. This department was the first in the Delaware Valley area to begin to do clinical research on hyperthermia and to use this therapeutic technique. We were the only department doing this advanced work until this year, when other local hospitals began to accept and utilize hyper-

Dr. Mansfield was named Professor of Radiation Therapy and Nuclear Medicine and Chairman of the Department in August of 1983. His areas of interest are breast cancer and intraoperative therapy.
As technology improved, machines with greater penetrating power were developed to give a high dose of radiation to the tumor without damage to the skin and surrounding normal tissue.

thermia in the treatment of patients. Because of our expertise, hospitals, such as Cooper Hospital, Camden Division, have turned to us for help to start their programs. All of these efforts were directed toward a single theme; increased tumor dose while, at the same time, sparing normal tissue, i.e., improved therapeutic ratio.

The Bodine Center for Cancer Treatment has been conceived and designed on this premise of improved therapeutic ratio. (Each aspect of the Center is designed to improve tumor control and decrease dose to normal tissue.) The planning was ten years in the making. This facility, located on three floors on the Sansom Street side of the new hospital, will be an important and major addition to Jefferson's commitment to the development of "Centers of Excellence."

In the Hyperthermia Suite, certain tumors will be heated after irradiation to enhance the ability of radiation to kill the tumor cells. In the intra-operative suite, surgery will be performed to excise the tumor when possible, and the tumor site can then be irradiated. In the treatment planning suite, computers, fluoroscopy and the CT scanner are used to design treatment techniques that will further ensure high tumor doses and low doses to the surrounding normal structures.

Upon entering the department, one will be impressed by the spacious, beautifully furnished reception area. The patient and family will sign in at the reception desk, where they will be given instructions depending upon the purpose of their visit. Patients will have come for one of the following reasons: an initial consultation, follow-up visits or daily treatment with radiation therapy.

Patients for consultation or post-treatment follow-up visits will be directed to the nurses station, on level one, where they will be placed in an examining room to be seen by the resident and staff physician. When the examination is completed, follow-up patients are given new appointments and appropriate requests for any indicated routine tests. Patients for consultation go to the Family Consultation Room after their examination, where the physician meets with them and their family, to answer questions and explain the treatment and the reason for its being given. Those patients who come to receive daily treatment will take the elevator down two levels to the basement, where they are instructed to change and wait to be called for their treatment.

In the old department we had three treatment machines; in the new Center there are four machines, two 6 MV (6,000 KV) and two 25 MV, around which are built all of the coordinating facilities to enhance the effect and impact of these machines on patient treatment. For example, there is an operating room adjacent to one of the 25 MV machines. This arrangement makes it possible to operate to remove deep tumors, and while the operative site is still open, to move the patient into the 25 MV room, where the site of the removed tumor can be irradiated before the surgical closure. There is a Hyperthermia Suite on the same floor, so that patient tumors can be heated with hyperthermia, following irradiation.

Each of the four machines can, for the most part, carry out similar functions, but they also serve different but coordinated functions. The two 6 MV machines are set so that one can better handle small treatment areas, and the other large treatment areas. Yet they are able to back up each other in case one has "down" time. One 25 MV machine can duplicate the other 25 MV, or the 6 MV, and has the capability to produce any X-ray energy between 6 and 25 MV, making it possible to produce very sophisticated treatment techniques. In addition, the 25 MV machines can produce another type of irradiation in the form of electrons at different energies. By varying the energy, tumors at different depths in the body can be treated. This capacity further enhances our ability to provide sophisticated techniques.

The patient receives daily treatment, for four to six weeks. Once a week the patient is sent upstairs for an "on-treatment" process checkup. The checkup can occur more frequently when necessary, or when the patient

The Department of Radiation Therapy and Nuclear Medicine was the first in the Delaware Valley to begin to do clinical research on hyperthermia and to use this therapeutic technique.
Mr. Teddy Higgins (left), an installation engineer with the M.E.L. Phillips Company in England, and Dr. Carl M. Mansfield, author of this article, examine the high energy Linear Accelerator in its initial phase of installation. Mr. Higgins points out the various components within the accelerator head.

and his family requests it.

The patient and his family are often unaware of the additional support activities and facilities for the treatment machines. For example, the treatment planning staff is responsible for designing individualized treatment for each patient. This staff is supported by a CT scanner that helps pinpoint the tumor volume and treatment area. Additional support is given by a computer that is powerful enough to sort out and integrate all of the complicated parameters of the treatment machines, and the massive information from the CT scanners and physicists. When a treatment plan and technique have been produced, the patient is taken to the Simulation Room, where the treatment technique and plan can be "simulated" before going to the treatment room.

Part of the treatment technique is to shape the radiation beam to match the tumor's shape, while trying to avoid irradiating surrounding normal tissue. The treatment techniques require a high degree of precision; therefore, every precaution must be taken to ensure that the patient does not move during treatment. Immobilization devices are made in the machine shop for each patient. Also, the patient can be placed in moulds or casts for further immobilization. These are made in the Immobilization Mould room.

The patient who goes to the first level for examination will find convenient and comfortable examining rooms that are equipped so that the physician can make a thorough evaluation. On this level there is a "Day" hospital area that will permit patients to rest before or after their treatment. Such rest will be necessary, especially for patients receiving the new techniques of hyperfractionated and accelerated irradiation, or concomitant multimodality therapy.

The second level is for activities of the physicians and physicists. The physician offices have been increased from the present seven to ten, and are situated at this level, so that the physicians are centrally located to all of the activities of the department. They can go up or down to the patient activities levels, the adjacent computer area, the physicians' Biology Research laboratories or the conference room. This arrangement allows the physicians to make the most efficient use of their time.

The Bodine Center is designed for the convenience and comfort of the patient. It is open, bright and friendly in appearance, and will result in better surroundings for the patient. This cheerful atmosphere is enhanced by a skylight, which allows sunlight to reach the second and third levels, via an atrium located at each end of the facility.

The Bodine Center for Cancer Treatment will see approximately 1,100 new patients annually. It will enhance Jefferson’s ability to deliver comprehensive cancer therapy, by being able to better support medical and surgical oncology in the present, ongoing multidisciplinary efforts. The Center, in cooperation with other departments and modalities in the University, will provide integrated and cohesive care, in addition to teaching and research capabilities. This Center will be dedicated to a wide spectrum of activities and investigations into oncology, and
Additional support is given by a computer that is powerful enough to sort out and integrate all of the complicated parameters of the treatment machines . . .

Mr. Narendra Shah, also with the M.E.L. Phillips Company, demonstrates some of the capabilities of the low energy Linear Accelerator. He indicates the point formed by the intersection of two laser beams which can be focused on the tumor site for precision irradiation. Dr. Mansfield holds the control pendant as he studies the process.

Oncology-related subjects at the clinical, tissue, cellular and molecular levels. These activities include the focused interests of clinicians, physicists and biologists seeking to improve the care of cancer patients. Research will be directed, in a systematic way, to the understanding of the relationship of basic cellular or tissue mechanisms, and their responses to a variety of agents, in order to extrapolate and apply this understanding to the diagnosis and treatment of patients. Efforts will continue to be directed to examining the processes of radiation therapy, that contribute to the success or failure of this modality, when used alone or in combination with other treatment modalities.

The Center is staffed by highly qualified and dedicated individuals. Serving with me is Dr. Mohammed Mohiuddin who is the Vice-Chairman of the Department. His interests are the combined modality treatment of cancer of the pancreas and rectum. Dr. Walter G. Gunn has an interest in biofeedback and gynecologic malignancies. Dr. Leslie Tupchong has a major interest in tumors of the head and neck, lymphomas and hyperthermia. Dr. Charles B. Simone's interest is in the management of breast cancer, nutrition, lymphomas and hyperthermia, while Dr. George Alexander is interested in lung cancer, hyperthermia and intraoperative therapy. Dr. Lydia T. Komarnicky is responsible for GI tumors and Dr. Richard M. Yelovich '81 has an interest in lung cancer and soft tissue sarcomas.

Basic research will be conducted by Dr. Tupchong in mono clonal antibodies. Dr. Simone will continue his work in the mechanism of cell membrane damage by immunological and non-immunological means, and Dr. Komarnicky and I will continue our work on normal tissue response to combined modality therapy. The Department's work is supported by supervisors, who direct a well trained and experienced technical, secretarial and administrative staff.

The Jefferson community can be proud of the Bodine Center which is a bold new venture in the treatment of the cancer patient. All Jeffersonians will benefit from this strong and far-sighted commitment by the Board of Trustees to Jefferson's future. 

The formal dedication of the Bodine Center for Cancer Treatment is set for Wednesday, March 25. Named for the late William Warden Bodine, Jr., the Center has been partially funded from contributions made in his memory. Mr. Bodine who died in August 1983 at the age of 65 had been associated with Jefferson for 24 years as President, Trustee and Chairman of the Board. It was during this tenure as President that the Jefferson campus underwent its successful expansion program which includes Jefferson Alumni Hall, Orlowitz Residence Hall and The Scott Library.

Medical Ethics

by Mary Blitzer Field

"Until philosophers are kings, or the kings and princes of this world have the spirit and power of philosophy, . . . then only will this our State have a possibility of life and behold the light of day."

PLATO'S Republic, Book V

CASE STUDY:
The Situation: An elderly woman was admitted to Thomas Jefferson University Hospital last fall with thrombocytopenia and mental status change. She had previously been diagnosed as suffering from end-stage leukemia and organic brain syndrome. Out of respect for their mother's wishes, the patient's children requested that her care be merely supportive. In the event of a cardiac or pulmonary arrest, they asked that she not be resuscitated. The Attending Physician did not note this request in her medical records. That evening, the patient deteriorated rapidly, but the Chief Medical Resident on the floor could not reach the Attending Physician. The patient subsequently suffered cardiopulmonary arrest.

The Question: Should the resident have initiated emergency resuscitation orders?

This actual case study was one among several cases recently under discussion by the Thomas Jefferson University Hospital Ethics Committee. Excerpts from the Committee's discussion of the case follow. (Names of speakers are withheld in order to protect their privacy.)

Moderator:
According to the language of institutional bylaws, "All patients shall be considered candidates for emergency resuscitation unless otherwise specified by the Attending Physician. The responsibility of determining that certain patients are unsuitable for emergency resuscitation rests directly upon the patient's Attending Physician and cannot be shifted to any other member of the staff of the Hospital."

Legal Counsel:
Yes. The trigger to a DNR (Do Not Resuscitate) order must be the physician's note. That is, only the Attending can dislodge the presumption of resuscitation.

Cardiologist:
Right. Even at 3 a.m. the Attending must come to the hospital to write and sign the order — and even in the Emergency Room.

Moderator:
So from the point of view of "the guy in the trenches," there's no choice. You must "code" the patient in the absence of a written order to the contrary.

But let's remember — the resident in this situation was in a bind either way. If he resuscitated the patient, he could be found liable for going against the family's explicit wishes. But if he didn't "code" her, he could be found liable for going against institutional bylaws.

And another conflict is at hand here — not a legal one but an ethical one. If the resident respected the family's wishes to let the woman die, he would be acting according to a standard of patient/family autonomy. But if he administered CPR, he would be acting according to a standard of beneficent paternalism. Which standard should prevail?

Resident:
Well, I'll tell you. I believe I acted according to the principle of C.Y.A. (Cover your rear end).

And so go the discussions of the hospital Ethics Committee. For the past few months, the Committee has been meeting every two weeks. At each
meeting they put a case through “ethical analysis.” Dr. Burton L. Wellenbach '44, Chairman of the Ethics Committee, provides a succinct definition of ethical analysis: it’s “the process of coming to a decision where there is a conflict of values.” Most of the cases the Committee discusses actually occurred at TJUH. Only one was hypothetical.

At their meetings, Committee members try to generate controversy. For, out of the dialectic of opposing viewpoints, they hope to arrive at knowledge of what is morally right. In this sense, Committee meetings resemble the Socratic dialogues Plato describes in the Republic. Just as these ancient discussions were led by a philosopher, so too the Ethics Committee discussions are led by two professional philosophers: Professor John H. Sorenson, is a doctoral candidate at the Princeton Theological Seminary and Janet Fleetwood holds a Ph.D. in Philosophy from the University of Southern California.

The Ethics Committee was established two years ago at President Buelmele’s initiative. The then President of the Hospital Medical Staff, Dr. Warren P. Goldburgh '52, and MaryAnne McGinley, Director of Nurses, appointed the original members and drew up Committee rules. Since the inception of the Committee, Executive Director of the Hospital, Michael Bradley, has demonstrated his interest and provided encouragement. Under the leadership of Dr. Wellenbach, Clinical Professor of Obstetrics and Gynecology, the Committee is cochaired by Dr. Stanton N. Smullens '61, Associate Professor of Surgery. A dozen-or-so physicians serve, as well as several ex-officio members representing a broad spectrum of professions — social work, nursing, law and hospital administration. So far, hospital physicians have responded enthusiastically to the idea of an Ethics Committee. “Every month I receive an average of two or three applicants wanting to join,” Dr. Wellenbach comments. “Interest in our Committee seems to be contagious.”

In establishing an ethics committee, Thomas Jefferson University Hospital is following a national trend. The Hastings Center, a private corporation of professional ethicists, reports that the number of hospital ethics committees has grown rapidly over the past ten years: a decade ago, when the New Jersey Supreme Court ruled that Karen Ann Quinlan’s family should consult an “Ethics Committee,” physicians, lawyers and specialists in biomedical ethics asked, “What’s an ethics committee?”

Three years ago, when the President’s Commission recommended that hospitals experiment with ethics committees in order to facilitate decisions, the question rapidly became, “How can we set up an ethics committee?” Over the past three years, the growth of ethics committees has doubled. Today, they are commonplace. “Sixty percent of all U.S. hospitals now have ethics committees,” states Dr. Wellenbach. “Interestingly enough, Catholic hospitals have always been on the forefront in establishing such committees because of the religious implications of abortion and tubal ligation.”

Hospital ethics committees shouldn’t be confused with IRB’s (Institutional Review Boards). Many hospitals instituted IRB’s shortly after World War II in order to monitor human-subject research. The purpose of hospital ethics committees is much broader. In fact, like other ethics committees across the country, Jefferson’s Ethics Committee views it mission as three-fold: the Committee’s primary goal is to educate medical students, housestaff, physicians and the community at large. The second goal of the Committee is to develop general guidelines and policies. Finally, the Committee hopes to serve as a consultative body in particularly controversial cases. Inasmuch as it is humanly possible, they hope to convene with no preconceptions of dogmas. Based on a wide range of perspectives, they will try to establish a consensus of use to the patient, the family and the Attending Physician.

Ideally, believes Dr. Wellenbach, the Committee should develop the capacity to carry out each of these three functions separately and in the order in which they are presented above. Of course, faced with “real world” exigencies and events, the Committee has not evolved precisely according to plan. Although they are still in the educational phase, they have already served in their second capacity. In discussing one case, the Committee has actually ended up rewriting institutional bylaws concerning braindeath in children.

Plato envisaged an ideal state where “philosophers are king or kings have the power of philosophy.” Do ethics committees hope eventually to attain the absolute authority of philosopher-kings in the medical community? Definitely not, respond hospital ethics committees across the U.S.

In fact, it has been partly in reaction to the absolutist nature of proposed government rulings that ethics committees have proliferated during the past three years. In 1983, the U.S. Department of Health and Human Services proposed rules governing the treatment of handicapped newborns. This proposal stated that “Recipients that provide health care to infants would be required to post a conspicuous notice in locations that provide care. The notice . . . would provide a contact point in the Department of Health and Human Services for reporting violations immediately by telephone.”

The American Academy of Pediatrics and the President’s Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research lost no time in speaking out against these DHHS rules. Both the American Academy of Pediatrics and the President’s Commission viewed the DHHS rules as moralistic rather than moral. They argued that proper medical treatment of handicapped newborns was too complex and ambiguous an issue for legislation by government fiat. In place of such rules, they proposed that hospitals establish ethics committees to review cases individually.

Dr. Wellenbach emphasizes that the TJUH committee is not intended to police hospital activities nor to act as a legislative body. “We don’t want to maintain a punitive attitude toward the medical community.” But, like other committees around the country, Jefferson’s Committee is walking a fine line:
in order for the Committee not eventually to dissolve, it must have some real influence in the medical community. But, at the same time, the Committee must not err too far in the opposite direction, thereby wresting decision-making power away from patients, families and physicians. As Dr. Wellenbach puts it, "Inevitably we'll become an influencing body, but that doesn't mean we'll become the be-all and end-all."

As for future concerns of ethics committees, Dr. Wellenbach predicts that the impact of cost containment will be primary. "With Gramm-Rudman staring us in the face, hospitals are going to have to cut costs drastically."

The ethical implications of such measures on the care of the terminally ill and the elderly are troubling. For example, in order to cut costs, will hospitals need to implement triage systems?

"Teiresias: The future will come of itself though I shroud it in silence. Oedipus: Then seeing that it must come, you, on your part, should tell me of it."

SOPHOCLES' Oedipus Rex

CASE STUDY:
The Situation: A young unwed mother gave birth to an infant girl. She subsequently put up the infant for adoption. Twenty-three years later, the daughter wanted to meet her biological mother in an effort to understand her own identity. The hospital provided her with information concerning her mother's identity. Her mother is now suing the hospital for divulging confidential information.

The Question: Should the hospital have provided the daughter with information about her mother?

Dr. Wellenbach presented this hypothetical case. In addition to the individual's right to know versus the individual's right to confidentiality, the Committee discussed issues of institutional liability. Dr. Wellenbach believes that the liability crisis is, in part, responsible for the recent proliferation of ethics committees. But he believes it is mainly the rapid growth in medical technology that has provoked the need for such committees. As one writer puts it, "as medical technology raises the upper limit of what physicians can do, more questions come up about what they should do."

Because of advances in reproductive technology, obstetricians and gynecologists have more than their fair share of ethical dilemmas. The blessings provided by such techniques as in vitro fertilization and artificial insemination are clearly mixed. In fact, the ethical implications of reproductive technology have become so ambiguous that the American Fertility Society has just released a set of guidelines concerning reproductive procedures. "The report gives physicians ground rules for professional conduct that were lacking before," according to one A.F.S. committee member. Among the procedures considered "ethically acceptable" by the committee are the patenting of instruments, products and devices; basic in vitro fertilization; artificial insemination by husband for demonstrated indications and artificial insemination by donor. The report labels all reproductive techniques involving a third party "controversial," but finds only three aspects of the new reproductive technology "ethically unacceptable," patenting medical procedures; surrogate gestational motherhood for nonmedical reasons; and surrogate motherhood for nonmedical reasons. "Surrogate motherhood for 'nonmedical reasons' means that the contract was entered into for convenience," explains one American Fertility Society committee member. Athletes or "glamorous actresses may prefer not to become pregnant" because of possible detriment to their careers. "Or the person who is asking for the contract may be afraid to carry a pregnancy, but without a medical reason."

Dr. Wellenbach cites the implications of genetic engineering as particularly troubling. "By means of amniocentesis, two or three hundred diseases can now be diagnosed in utero. Within the next 20 years, it may become possible to draw up a genetic profile for every infant." Who should have access
to this information, Dr. Wellenbach wonders. "If the child is aware of his genetic profile, how will this information influence his attitude toward himself? If his genetic profile indicates that his life expectancy is short, will employers discriminate against him? Will insurance companies want to insure him? Will medical schools want to accept him?"

"... I will follow that system of regimen which, according to my ability and judgement, I consider for the benefit of my patients and abstain from whatever is deleterious ..."

HIPPOCRATIC OATH

CASE STUDY:
The Situation: An elderly woman underwent bypass surgery at Jefferson. About a year later, she complained to her cardiologist that she was developing angina again. He recommended that she undergo angiography and possible further cardiac surgery. She refused.

The Question: What course of action should the cardiologist have pursued?

The assumption that the physician is acting in his patient's best interest is at least as old as the Hippocratic oath. But in an age of increasing consumerism, patients are beginning to question their treatment. Dr. Wellenbach believes that "we are living in a much healthier atmosphere. Decisions are no longer unilateral. They are made between patient and physician." As the old system of paternalism dies out, physicians are developing a greater sensitivity to their patients' points of view. For example, in the actual case of the elderly cardiac patient, the cardiologist learned that his patient feared surgery because of the intense pain she had suffered after her bypass surgery. He was able to persuade his patient to undergo angiography by convincing her that he would do everything in his power to prevent her from experiencing so much pain a second time.

Dr. Wellenbach has several items on his agenda as Committee Chairman.

He'd like the Hospital and the Medical College to have a full-time ethicist. He hopes to set up a resource library of guidelines and case discussions. The collection will probably be housed in Scott Library. He also plans to invite outside speakers to talk at Committee meetings. Possible speakers would be experts in their respective fields and might include a judge, a Tay Sachs disease expert and a cystic fibrosis expert. And he'd like to see an ethics symposium held during Alumni Weekend.

(Last January, Thomas Jefferson University Hospital sponsored just such a symposium. Dr. Daniel J. Callahan from the Hastings Center presented a history of ethics committees, Professor Arnold Rosoff, J.D., from the Wharton School, discussed ethics committees from the legal perspective and Dr. Kenneth J. Ryan, from Harvard Medical School, talked about ethics committees from the clinician's viewpoint.)

The hospital Ethics Committee is not the only regular forum for ethics discussions at Jefferson. Two Jefferson Medical College sophomores, Martha Carlough and Tammy Guion, cochair the Jefferson Ethics Society which is under the advisory of Dr. Ronald P. Jensch, Professor of Anatomy. Every month the Society sponsors a lecture followed by a discussion. This past year, the Society has hosted a number of speakers including Dr. Laird G. Jackson, Professor of Medicine, on the topic of genetic counseling, and Dr. Wolfgang H. Vogel, Professor of Pharmacology, on the topic of pharmaceutical testing. On November 20th, the Ethics Society showed the film "Whose Life is it Anyway?" with Richard Dreyfuss. Following the movie, Dr. Robert L. Perkel, Assistant Professor of Family Medicine, led a discussion concerning the right to die.

Ethics Society lectures are attended mainly by medical students, but they are open to everyone, including physicians, nurses, nursing and allied health students, as well as hospital staff. The hospital Ethics Committee, however, is intended for regular members and for third-year students on the pediatric and family medicine block. And whereas the Ethics Committee will eventually
set hospital policies, the purpose of the student-run Ethics Society is purely educational.

Medical students may pursue their interests in ethics along more formal channels, too. Among the 30-odd electives in the Sophomore Seminar Series are three ethics courses. Dr. Clara A. Callahan, Assistant Professor of Pediatrics, teaches Bioethical Issues in Medicine. The course includes topics such as the Baby Doe legislation and “Do Not Resuscitate Orders” as well as informed consent and the allocation of health care. Dr. Howard L. Kent, Associate Professor of Obstetrics and Gynecology, teaches “Ethical and Social Issues in Obstetrics and Gynecology,” a course covering such issues as abortion, intrauterine fetal therapy and genetic counseling. “Ethical Dilemmas in Medicine,” taught by Dr. Jean W. Helz, Assistant Professor of Psychiatry, and by Dr. Michael L. Simenoff, Professor of Medicine, covers topics ranging from the allocation of resources to impaired physicians.

And a few other sophomore seminars touch upon the field of ethics — if only tangentially. In “Our Environment: How Safe is It?,” Dr. E. Marshall Johnson, Professor of Anatomy, and Dr. Richard R. Schmidt, Associate Professor of Anatomy, lead students to develop a concept to a “safe” environment in terms of reproductive and developmental toxicity. In “Growth and Outcome of the Fetus,” Dr. Loretta P. Finnegan, Professor of Pediatrics, discusses the effects of drug abuse during pregnancy. Dr. J. Yasha Kresh, Associate Professor of Surgery, takes up the ethical implications of organ transplants in “Advances in Organ Replacement.”

In addition to offering these electives, Jefferson requires students to take one course on ethics. Taught by Dr. Perkel, this course constitutes part of the Medicine and Society Series. So, theoretically, every Jefferson student will have had some training in ethics before reciting the Hippocratic oath.

The function of the Hospital Ethics Committee extends beyond that of formal education. Borrowing a phrase from a Hastings Center report, Dr. Wellenbach observes, “In days to come, the Hospital Ethics Committee may very well become the ‘conscience of the Hospital.”’ And Dr. Wellenbach believes that as issues of cost containment, access to health care and quality of health care emerge, the Committee may well be pressed into service on behalf of the community at large.

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The Oath of Hippocrates

SWEAR by Apollo the physician, and Aesculapius, and Health, and All-heal, and all the gods and goddesses, that, according to my ability and judgment, I will keep this Oath and this stipulation — to reckon him who taught me this Art equally dear to me as my parents, to share my substance with him, and relieve his necessities if required; to look upon his offspring in the same footing as my own brothers, and to teach them this art, if they shall wish to learn it, without fee or stipulation; and that by precept, lecture, and every other mode of instruction, I will impart a knowledge of the Art to my own sons, and those of my teachers, and to disciples bound by a stipulation and oath according to the law of medicine, but to none others. ☞ I will follow that system of regimen which, according to my ability and judgment, I consider for the benefit of my patients, and abstain from whatever is deleterious and mischievous. I will give no deadly medicine to any one if asked, nor suggest any such counsel; and in like manner I will not give to a woman a pessary to produce abortion. With purity and with holiness I will pass my life and practise my Art. ☞ I will not cut persons labouring under the stone, but will leave this to be done by men who are practitioners of this work. Into whatever houses I enter, I will go into them for the benefit of the sick, and will abstain from every voluntary act of mischief and corruption; and, further, from the seduction of females or males, of freemen and slaves. ☞ Whatever, in connexion with my professional practice, or not in connexion with it, I see or hear, in the life of men, which ought not to be spoken of abroad, I will not divulge, as reckoning that all such should be kept secret. While I continue to keep this Oath unviolated, may it be granted to me to enjoy life and the practise of the art, respected by all men, in all times! But should I trespass and violate this Oath, may the reverse be my lot!

From The Genuine Works of Hippocrates translated from the Greek by Francis Adams, Surgeon, volume 2, London, 1840

At the Class Day Program in June of 1986 two senior students were awarded the first J. Woodrow Savacool Price in Medical Ethics. It was in the fall of 1985 that Dr. Savacool's friends and colleagues honored him with the establishment of the first such prize to be presented at the College. The program states that “the prize be awarded to a senior medical student who embodies the traditional ideal of caring for people.” The seniors are chosen by a committee of faculty who receive nominations from Department Chairman. The first recipients were William V. Martinez and Brian S. Smith with honorable mention to Joanne Swift.
financial aid

Student Financial Aid has changed dramatically over the past few years with regard to the amount and type of aid available, writes Dean and Vice President Joseph S. Connella in Perspectives, a faculty newsletter published by the Dean’s office. The staff and counseling required to administer aid has also been changed.

Five years ago, the Financial Aid Office administered a total of $7,761,570 in student aid and the ratio of grant to loan was equal. In 1984-85, a total of $9,844,616 in aid was administered and the grant to loan ratio was one to two. The average indebtedness of JMC graduates increased from $16,700 to $29,900.

At the present time, the students have their first contact with the Office of Student Financial Aid on the day they are interviewed for admission. The financial aid coordinator meets with each interview group to briefly outline the financial aid process, and is available for the remainder of that day to meet with applicants on an individual basis.

For two years, the Office of Student Financial Aid has been conducting budgeting, recordkeeping and debt management sessions for students. All students who want (or need) to borrow market rate loans are required to meet with a counselor to discuss the amount of the loan, terms of the loan and projected repayment. In addition, the office has a computer program entitled “Student Loan Counselor,” which can produce annual repayment schedules for all loan programs as well as project the percent of annual income (based on a chosen specialty) required to make those payments. The program is available in the Scott library.

The 1986-87 academic year marks the second year that the medical school has participated in the College Work Study Program. This is a federal program where the government pays 80% of a student’s salary and the employer pays 20%. Although it was felt in the past that medical students did not have time to work due to the heavy course load, an investigation has shown that many students do work without adverse effects on their studies. The College Work Study Program is deemed as an alternative to borrowing through higher cost educational loan programs. However, the Medical College is not requiring financial aid recipients to participate. Approximately 30 students have participated each year for the first two years.

A Financial Planning Series has been sponsored by the Office of Student Financial Aid. This seminar has been typically conducted during February, March and April and offered six sessions covering such topics as financial planning, insurance, investment opportunities and factors to consider when going into practice. The speakers were experienced professionals who provided useful information to current and future physicians. (Both residents and students were invited). These programs will continue in 1987.

The one thing that does not change in financial aid is the fact that, in a given year, federal aid programs are subject to change. This year is no different than previous years. Traditionally, the administration proposes drastic cuts to educational programs and Congress generally is successful in sustaining, and occasionally expanding, existing programs. During this current school year the Federal Programs provided supplemental funds for these programs.

Furthermore, the recent passage (October, 1986) of the Higher Education of 1986 will enable students to borrow additional funds ($5,000 to $7,500 per year) through the Guaranteed Student Loan Program. The GSL Program offers students loan funds at an 8% subsidized interest rate.

With all of the uncertainty regarding federal aid programs, it has become obvious that alternatives to federal loans are needed. The ever increasing support from Jefferson Alumni is of major assistance in this objective.

alumni president

Robert Poole III, ’53 has been elected President of the Alumni Association for 1987. In a symbolic gesture, outgoing President, Samuel S. Conly, Jr., ’44, handed Dr. Poole the President’s gavel at the Annual Dinner and Business Meeting on February 26 at the College of Physicians of Philadelphia.

Dr. Poole, a board certified family physician in West Chester, Pennsylvania, is a hospital Board Member and Chairman of the Staff Development Committee of the Chester County Hospital. As a family physician, he has been active in his community and has served as team physician for Henderson High School, United Fund President, Chairman of the County Commissioners Committee on Narcotic Study, Chairman of the Sex Education Public School study committee, Chairman of the County Board of Health and Chairman of the Day Care Building Fund. For his service to West Chester, he was named as an Outstanding...
ing Young Man of America by the JC's in 1973, and as the Outstanding Citizen of West Chester in 1980 by the Chamber of Commerce.

Among his international interests, Dr. Poole has served Rotary International as a District Governor and at present is an International Coordinator in the program of Rotary and the World Health Organization designed to immunize all children in developing countries against preventable diseases. He traveled with a delegation from the Pennsylvania Medical Society to compare health care delivery systems in Sweden, Russia and Switzerland and at present is Chairman of the Bioethics Committee of PMS.

Dr. Poole has a strong commitment to the importance of education as it relates to social strength. He recently has served a two-year term as President of the Ursinus College Alumni Association and now is a member of its Board of Directors. At Jefferson he has served the Alumni Association for many years as a member of the Executive Committee and Class Agent for '53. Dr. Poole states, "I am grateful for what Ursinus and Jefferson have done for me and intend to do whatever I can to perpetuate their excellence."

Recently, the new President accompanied Lewis W. Bluemle on a visit to our San Diego, Los Angeles and San Francisco alumni chapters. He observes that "the strength of the Jefferson Medical Alumni Association is best seen in the affection and reminiscences evident in such distant, geographic, intergenerational fellowships. Very few medical schools enjoy the loyalty and support that is rooted in history, as is ours."

As an alumnus intimately involved in health care delivery, Dr. Poole is most anxious to maintain a close relationship between medical education and the problems of the practicing physician. "Dr. Bluemle has assured me that the influence of the Alumni Association is important and quite evident with regard to policy matters," says Poole. "I'm most anxious that our support and guidance be tangibly evident through our Executive Committee and Alumni Trustees."

An item of particular interest on Dr. Poole's agenda will be the institution of a new reunion schedule. Next June, the Annual Alumni Reunion will be a weekend, rather than a mid-week event. "I am most anxious to make the return to Jefferson as convenient as possible for all the alumni, and also look forward to hosting the senior class of '87, to a party the night before graduation at the Port of History Museum."

Bob and Anne Poole have four daughters, Pam, Cindy, Tina and Missy. He is honored to be included in that long list of distinguished names that began with the first President Samuel D. Gross in 1870.

career day

The array of specialties from which medical students can choose is extensive. And since rotating internships were phased out about ten years ago, it's become harder for aspiring physicians to make informed decisions. To address this problem, the Alumni Association of Jefferson Medical College instituted Career Day. At this annual event, students can gather information about different specialties by talking directly with alumni. Students rotate from room to room in Jeff Hall, attending four out of the 20 sessions offered. At each session the practicing physician informs students of the rewards and drawbacks of a particular specialty. The floor is then open to general discussion.

Before the assembled students broke up into small group discussions, John T. Magee '57 addressed them in general session on "The Scoop of Match Day." Introductory remarks were also provided by Nancy S. Czarnecki '65, Chairman of the Program and the first woman to graduate from Jefferson. After welcoming students to this year's Career day (held on December 3,
Albert E. O'Hara, Professor of Radiology and Clinical Professor of Pediatrics, has retired following 28 years of devoted teaching in the Medical College. To mark this event his friends and colleagues in both departments commissioned his portrait to be painted. It was presented to the College at ceremonies October 22. The O'Hara portrait will hang in the Department of Radiology.

1986), Dr. Czarnecki encouraged students and session instructors alike to be "candid and informal" in their group discussions.

Nancy S. Roberts '76 came right to the point about her specialty, ob/gyn. "If you're going into ob/gyn to make lots of money, you're too late. Malpractice premiums are at an all-time high. The average obstetrician/gynecologist gets sued every six years. But the primary thing is that I happen to love what I do. Personal gratification is the reason to go into ob/gyn.

"For the past five years, it's been stylish to see a woman gynecologist. So women have had a much easier time than men setting up practice in geographically competitive places like Philadelphia," she confided.

"Ob/gyn's are like craftsmen. Their work involves a lot of straightforward procedures for which they need to use their hands."

"Neurologists are like criminologists," Howard J. Caplan '72 informed the students attending his session. "They have to ferret out the underlying causes of their patients' symptoms.

"To make another comparison, our specialty used to be like black magic. You'd wave your hands over your patient and announce your diagnosis. No one could prove you right or wrong.

"But with the advent of high tech toys like the CT scan, our diagnoses have become much more accurate. People complain that neurologists diagnose but can't treat. This is becoming less and less true."

"Psychiatrists are analogous to grad students in the social sciences," said Frank G. Maleson '65. "Psychiatry is intellectually stimulating. It's a very civilized kind of work.

"But there are some occupational hazards. Isolation is one of them. And, although it might seem like a contradiction, sitting still for ten or 12 hours at a stretch can be a physical drain."

Dr. Maleson cautioned his students to choose residencies representing a broad spectrum of psychiatric schools of thought. Some programs have "gone biological," he pointed out, while others are strictly behaviorist. A psychoanalyst himself, Dr. Maleson contended that the behaviorist approach tends to be "very sterile."

The other specialties represented at the afternoon sessions were cardiology, anesthesiology, pediatrics, orthopedics, ophthalmology, family practice, rehabilitation medicine, otolaryngology, neurosurgery, plastic surgery, radiology, medicine, general surgery, urology, emergency medicine, pathology and dermatology.

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review process

John J. Gartland S’44, former Chairman of the Department of Orthopaedics and James Edwards Professor from 1970-1985, is now serving as Director, Office of Departmental Review and as Chairman, Committee on Departmental Review. Dr. Gartland’s association with the review process at Jefferson is a longstanding one. In 1979, the Accreditation Council for Graduate Medical Education announced that it was planning to issue “Revised Essentials of Accredited Residencies in Graduate Medical Education,” and that all medical education programs would be held in strict compliance beginning July 1, 1982. In an effort to see where Jefferson stood in regard to compliance with the new guidelines, a Special Committee on Graduate Medical Education was formed in early 1979, and the Department of Orthopaedic Surgery was selected to be the pilot department to test against these guidelines. “It was that fascinating experience that focused my attention on the review process at Jefferson and on the glaring weakness in our review process for graduate medical education in particular,” Dr. Gartland comments.

In his new role as Director, Dr. Gartland has succeeded handsomely in making the review process more responsive to the University’s needs. “Before 1983,” notes Dr. Gartland, “there was no clear and visible coordinating mechanism to ensure that the Medical School and University benefit to the fullest” from departmental reviews. Prior to this time, he notes, many departments within the University were unaware of the outcomes of the review process in other departments. Thanks to Dr. Gartland’s efforts, the Committee now operates as the missing coordinating mechanism.

And Dr. Gartland has expanded the functions of the Committee in other ways. Prior to 1983, “the Committee evaluated the performance of a department chairman as its primary focus rather than the total performance of a department,” he observes. In an effort to address this problem, Dr. Gartland has ensured that the Committee will consider a wide range of factors including student and faculty evaluations, and the number of publications and research grants per department. “The mission of a medical university is three-fold and includes research, education and patient care,” Dr. Gartland remarks. He believes that the purpose of his Committee is to make sure each department is fulfilling this mission. But he emphasizes that the Committee should not be viewed simply as a departmental watchdog. The Committee “views its role as neither punitive nor adversarial but rather as a mechanism to assist departments achieve their goals within the University.”

As for long-range goals, Dr. Gartland has two in mind: he hopes “to develop review process mechanisms that would place less emphasis on past performance in favor of a greater emphasis on departmental strategic and long-range planning.” He’d also like to make the Committee “more actively assistive to the educational programs maintained by our affiliated institutions.”

To date, Dr. Gartland’s Committee has reviewed the Departments of Anatomy and Urology. This winter they are starting up the review process in the Departments of Surgery and Otolaryngology. And looking toward the Spring, the Committee will review the Departments of Microbiology and Medicine.

board appointments

With two new appointments to Thomas Jefferson University’s Board of Trustees there presently is a full complement of members. In recent months Sam S. McKeel, Publisher of the Philadelphia Inquirer and Daily News and Chairman of the Philadelphia Newspaper, Inc., and Julius W. Irving, internationally known member of the Philadelphia 76’ers, have been elected to membership. Burce W. Karrh, M.D., was reelected to a second three-year term.

Mr. McKeel, a Director of Metropolitan Sunday Newspapers, Inc., is active in numerous civic organizations. He is Director of the Greater Philadelphia First Corporation, Director of the Philadelphia Orchestra Association, Vice Chairman of the Philadelphia Convention and Visitors Bureau, a Director and member of the Executive Committee of the Philadelphia Chamber of Commerce and Trustee of the Philadelphia College of Art.

Mr. McKeel was born in Wilson, North Carolina, and received his bachelor of arts degree from the University of North Carolina and his master’s degree from Columbia University. Prior to joining the Inquirer in 1971, Mr. McKeel was Vice President and General Manager of the Akron Beacon-Journal.

Mr. Irving, known to his fans as „Dr. J.” has been a member of the 76’ers since 1976. He was named “Most Valuable Player” by the American Basketball Association and the National

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**TJUH publications**


In addition, brochures for physicians are published from time to time with information on specific Jefferson referral services of note. Titles already available are: Bone Tumor Program, Cerebral Vascular Center, Erectile Dysfunction Testing, Evaluation of Impotence, Managing and Preventing Osteoporosis, Pediatric Seizure Disorders, Rehabilitation Medicine at Jefferson, The Sleep Disorders Center, and Ultrasound.

Further, a magazine for physicians, *Contemporary Medicine - News from Jefferson*, is now published five times a year. Each issue provides an update on several Jefferson clinical programs, reporting noteworthy developments and research.

Alumni are welcome to obtain any of these publications and to join the mailing list for future issues contact the Alumni Office.
Basketball Association. In 1985, he received the Man of the Year Award from American Express, and in 1983, he received the Jackie Robinson Award for American Black Achievement presented by Ebony Magazine.

Mr. Irving is engaged in many activities for civic and charitable organizations. In 1985, he received the Big Brothers, Inc., New York City Sports Award and in 1984, the Father Flannigan Award from Boys Town Nebraska. He has also lent his support to Easter Seals, the Salvation Army and the Special Olympics as well as the Police Athletic League of Philadelphia and the Lupus Foundation of America.

nursing advancement

A five-year review of the Clinical Ladder in the TJUH Department of Nursing was reviewed recently. Frances T. Gerber, M.S.N., explains the original rationale behind the Clinical Ladder: "Historically, nurses have not been rewarded for expertise in clinical nursing positions. Those nurses who've wanted to advance professionally have moved away from the clinical setting and into managerial positions." These positions have tended to provide them with higher pay, more attractive work schedules and professional recognition.

Ms. Gerber explains that the Clinical Ladder was designed to provide nurses with compensation for demonstrated excellence in clinical work equivalent to the compensation they might receive by going into management. In this way, the Ladder would mitigate against the historical trend of nurses away from the bedside and into management.

And the Clinical Ladder has indeed succeeded, according to the recent report of a Task Force appointed to review the system at Jeff. A sign of the Clinical Ladder's success has been the dramatic drop in nursing staff turnover at Jefferson. Since implementation of the Career Ladder, the turnover rate has nearly been cut in half. According to the Task Force report, this decrease "has resulted in a financial savings of approximately $220,000 during fiscal year 1985 alone." And certainly more important than the financial savings gained through staff retention are the effects of staff retention on patient care; where turnover is low, staff morale tends to be high, and patient care is delivered most efficiently.

But a few problems still need to be worked out, believes Ms. Gerber. She notes that many nurses still question the relative status of the various professional tracks they may pursue. As a result, the Task Force has recommended that the concept of a Clinical Ladder be broadened to encompass not only clinical positions but other positions within the Department of Nursing as well. This new organizational structure would be called a Career Ladder rather than a Clinical Ladder. With this new structure in place, a nurse might opt to progress along one of four tracks: clinical practice, management, staff development or quality assurance. Ranks, promotions and educational requirements within tracks would be organized according to roughly the same hierarchies.

Ms. Gerber provides an example of a current disparity in educational requirements. Until now, a Level IV Clinical Nurse Specialist has reported to the Nursing Care Coordinator. Although the Nurse IV position has required a master's degree or a baccalaureate with certification, the Coordinator position has required no education beyond the basic nursing level. To overcome the interpersonal conflicts created by this disparity in education, the Task Force has recommended that both positions require master's degrees.

Not only has the Task Force recommended expanding the Clinical Ladder to include all existing nursing jobs, but they've also recommended that a new clinical nurse research position be created. On the Career Ladder, this position would be placed at the same level as the management position of Assistant Nursing Director. "Nursing research in the Hospital is in an embryonic stage," stated the members of the Task Force. "Therefore, strong leadership is required to support nursing personnel in the research effort." As a teaching hospital, TJUH has always been committed to research. Ms. Gerber looks forward to seeing the development of an active nursing research program in the hospital.

alumni chairmen

Three alumni, graduates of the sixties, have been named to head departments at Medical Colleges in Florida, New York and Washington states. Bennett M. Shapiro '64 has been serving as Professor and Chairman of the Department of Biochemistry at the University of Washington School of Medicine since October of '85; Paul L. Kornblith '62 was appointed Professor and Chairman of the Unified Department of Neurosurgery at the Albert Einstein College of Medicine and the Montefiore Medical Center in New York; and Mark D. Brown '65 was named Chairman of the Department of Orthopedics and Rehabilitation at the University of Miami School of Medicine.

Dr. Shapiro, who joined the Faculty at the University of Washington in 1971 was named Professor in July of 1978. His research interests are with the biocchemistry of fertilization: molecular basis of cellular regulation. He has written extensively with nearly 100 publications to his name. He also has participated frequently as a symposium lecturer in institutions across the country. Dr. Shapiro is a member of the American Chemical Society, American Association for the Advancement of Science, American Society of Biological Chemists, Society for Developmental Biology and the American Society for Cell Biology. At Jefferson he was the recipient for four years of the Francis W. Shain Memorial Scholarship and was a member of AOA.

Dr. Kornblith served as Chief of the Surgical Neurology branch of the National Institute of Neurological and Communicative Disorders and Stroke for the past eight years, during which he held appointments as Professorial Lecturer and Visiting Lecturer in Neurological Surgery at the George Washington, Georgetown and Johns Hopkins Universities. During this period, he also served for two years as acting Clinical Director of its Intramural Research Program.

Prior to joining the NIH in 1979, Dr. Kornblith was Program Director of Neuro-Oncology at the Massachusetts General Hospital and an Assistant Pro-
Dr. Kornblith, Chairman of the Department of Neurosurgery at Albert Einstein College of Medicine.

Dr. Kornblith is a Fellow of the New York Academy of Sciences. He is also a member of the Society of Neurological Surgeons, American Association of Neurological Surgery and the Society for Neuroscience among other affiliations.

Dr. Kornblith was the recipient of the American Medical Association's Physicians' Recognition Award, as well as the United States Public Health Services' Superior Service Award.

Among other current appointments, Dr. Kornblith is on the Editorial Board of the Journal of Neuro-Oncology. He is also a board member of the American Registry of Pathology, representing the Society of Neurological Surgeons and a member of the Council of the Gordon Research Conference.

Dr. Brown joined the faculty at the University of Miami School of Medicine in 1973 progressing through the academic ranks until 1982 when he was named Professor. In addition he holds secondary appointments as Professor in the Department of Surgery and the Department of Neurological Surgery.

Having received his Ph.D in experimental pathology at Jefferson in 1969, Dr. Brown also took his rotating internship and residency in orthopaedic surgery at Jefferson. He was a member of AOA. Presently President of the Miami Orthopaedic Society, he is a member of the American Academy of Orthopaedic Surgery, the American Association of Tissue Banks, the Association of Bone and Joint Surgeons, the Cervical Spine Research Society, the International Society for the Study of the Lumbar Spine and the Jefferson Orthopaedic Society among others. He shares with his alumni colleagues a proficiency in writing having authored numerous scientific papers and abstracts. Dr. Brown currently is Associate Editor for Clinical Orthopaedics and Related Research and serves on the Board of Editors for Spine.

honors, etcetera

Thorir D. Bjornsson, M.D. has been appointed Professor of Medicine and Director of the Division of Clinical Pharmacology. He holds a secondary appointment as Professor of Pharmacology.

Paul C. Brucker, M.D., Alumni Professor of Family Medicine and Chairman of the Department, has been elected Secretary-Treasurer for the American Board of Family Practice.

At the invitation of the Bureau of Health, Peoples Republic of China and the United Nations, Robert L. Brent, M.D., Ph.D., Chairman of the Department of Pediatrics and Director of the Stein Research Center, taught three courses in several Chinese provinces during May, 1986.

In June, Dr. Brent delivered the introductory presentation, "The Etiology of Human Congenital Malformations," at the 92nd Ross Conference on Pediatric Research held in Santa Fe, New Mexico. Later in June, he presented the topic, "Radiation Embryology," at a course dealing with the biological effects of ionizing radiation sponsored by the Harvard School of Public Health.

Peter Chodoff, M.D. '51, has been appointed Professor in the Department of Anesthesiology, effective August 8, 1986.
Ivan Damjanov, M.D., Ph.D., has been appointed Professor of Pathology, effective July, 1986.

Ralph C. Eagle, Jr., M.D., has been appointed Professor of Ophthalmology, effective July, 1986.

John L. Farber, M.D., has been appointed Professor of Medicine, effective July, 1986.

Stephen A. Feig, M.D., Professor of Radiology and Chief of the Division of Mammography, was cited by the Radiological Society of North America as an organizer for the course on breast imaging at the December meetings in Chicago.

Loretta P. Finnegan, M.D., Professor of both Pediatrics and Psychiatry and Human Behavior, was given the Dole and Nyswander Award by the Northeast Regional Methadone Treatment Conference at the meeting in Baltimore in December. She received it in recognition of her continuing achievements and dedication of the value of methadone treatments in the state of Pennsylvania.

Herbert D. Kleber, M.D. '60 was similarly honored for his work in Connecticut. (see p. 24).

Dr. and Mrs. V. Watson Pugh '53 with daughter Holly '86 who were honored with Jefferson's highest award, The Cornerstone, at the President's Club dinner last fall. They have established a named Professorship in the Department of Microbiology.

Joseph S. Connella, M.D., Dean and Vice President, spoke on "Problems at the Transition from Medical School to Residency Training" at the October meetings of the AAMC in New Orleans in special general session. In addition he addressed the Educational Commission for Foreign Medical Graduates there on "International Exchange: A Shared Approach to the Identification and Solution of Problems in Medicine and Medical Education." In November at the University of Pittsburgh, Graduate School of Public Health, The Health Policy Institute, he spoke on "Quality of the Science of Health Care." In addition the Dean spent the month of August in New Zealand and Australia as the guest of the Association for Medical Education to speak at the Annual Conference. He also gave seminars at three medical schools in New Zealand and at medical schools in Melbourne, Adelaide, Sydney and Brisbane on Evaluation of Clinical Competence, the Prospective Payment System in the United States, and on the Staging of Disease.

Madhu P. Kalia, M.D., Ph.D., has been appointed Professor of Pharmacology with a secondary appointment in neurosurgery.

Lov K. Sarin, M.D., Professor of Ophthalmology, has been elected President of the Wills Eye Hospital Medical Staff. He has served as Co-Director of the Wills' Retina Service since 1977.

Francis J. Sweeney, Jr., M.D., '51, has been appointed Professor of Medicine, effective July, 1986.

Five JMC fraternities raised $1,800 for the Philadelphia Center for Older People (PCOP), a United Way agency. The fraternities, Phi Alpha Sigma, Phi Chi, Phi Delta Epsilon, Nu Sigma Nu, and Alpha Kappa Kappa raised the money by sponsoring a 12-hour-plus dance marathon and by publishing an ad book.

In addition, 15 members of Phi Chi responded to a request for service to the Center at Broad and Lombard Streets. The students did carpentry and painted the interior of the Coffee Cup, a satellite of the PCOP, near Jefferson Alumni Hall, and performed similar work at the Shiloh Center, another PCOP satellite in South Philadelphia.

The 1986 President's Club dinner, which each year thanks donors who have contributed $1,000 or more to the College, was held on November 7 at Garden State Park. In addition to the Cornerstone Award new Fellows were cited for their generosity of accumulated gifts of $25,000.
1926

J. Wallace Cleland, 327 Wendy Ln., Waverly, Oh., gave up pediatrics 14 years ago. He has retired in Bristol Village and reports that he has "gotten along remarkably well."

1927

William T. Hunt, Jr., 513 Parkview Dr., Wynnewood, Pa., was presented the Honor Award from the Board of Directors of the American Academy of Ophthalmology for his many years of service to the Academy and its scientific and continuing education programs.

1929

Paul O. Blake, 273 Lansdowne Ave., Lansdowne, Pa., writes that he has retired as of September, 1986.

1930

Howard W. Brettell, 390 Shady Ave., Steubenville, Oh., voices his opinion that classmates "Borns and Kennedy earned their retirement."

1931

Kenneth E. Fry, 621 University St., Walla Walla, Wa., gave a lecture on Thomas Eakins and the Gross Clinic to members of the Inquiry Club recently. William K. Jenson '53, Chief of Staff at the Veterans Hospital there, was his guest. Dr. Fry writes that "goose season opened last Saturday and with the first shot and only 25 minutes after shooting I killed a 12-pound goose."

Leo Kahn, 2806 N. 46th Ave., Hollywood, Fl., writes that his son Charles B. Kahn '63 is Chief of Staff at Hollywood Memorial Hospital, the largest hospital in Hollywood.

1932

Burchard E. Wright, Jr., 6333 St. Andrew Ct., Fort Myers, Fl., Secretary of the Talalosa Chapter of the Florida Society of Sons of the American Revolution, has been appointed to a committee seeking funds to help restore the house where Ben Franklin resided in London. Dr. Wright has also been appointed to the Florida Society Committee on Endowment Trust Disbursement.

1933

Richard I. Barstow, Box 525, Norfolk Ct., was honored at a reception and ceremony at the Norfolk Library on August 10. The event marked Dr. Barstow's 50 years of medical service and recognized his many contributions to civic life. A special feature of the occasion was the unveiling of a bronze portrait bust of Dr. Barstow. The sculpture will be on permanent display in the Library.

Dr. Barstow has been reknowned in his community as a dedicated country doctor. Until his recent retirement from medical practice, he continued to make house calls whenever he thought it was in a patient's best interest.

Edward Gartman, Fairhaven, 7200 Third Ave., Sykesville, Md., writes, "I'm still painting daily and will have a show at Fairhaven, titled 'Fairhaven: Shadows and Substances.'"

1934

Samuel Bar, 26 Main St., Enfieldtown, N.J., reports that he is still in general practice.

Israel O. Silver, 660 Boas St., Harrisburg, Pa., has retired.

1935

R. Marvel Keagy, 3510 Baker Blvd., Altoona, Pa. has retired.

1936

J. Edward Berk, 894 C Ronda Sevilla, Laguna Hills, Ca., is one of four editors of the fourth edition of Boekus Gastroenterology. Robert M. Donaldson, M.D., Professor of Medicine at Yale University School of Medicine, gave it a fine review in the October 16 New England Journal of Medicine. The seven-volume text also received a highly favorable review in the October 24 Journal of the American Medical Association.

At a Franklin County Medical Society Meeting held in Chambersburg, Pa., John P. Manges, P.O. Box 498, Chambersburg received an award from the Pennsylvania Medical Society for 50 years of service. Dr. Manges is currently doing part-time consulting in radiology.

1937

Maurice Abramson, 7500 Manchester Rd., Melrose Pk., Pa., writes, "I am looking forward to our 50th class reunion with God's help. I hope to see many of our classmates this June. I am still taking violin lessons and playing with the Doctor's Symphony."

Coe T. Swift, 21 Heritage Court, Belmont, Ca., has returned from a trip to Nepal and India last October.

Carl G. Whitbeck, 11 Creek Ct., Rhinebeck, N.Y., is semiretired. He still serves as Director of the Barnwell Nursing Home.

1938

Samuel D. Ulrich, 3422 Derry St., Harrisburg, Pa., retired from general prac-
tice in 1978. He is working part time with the Commonwealth of Pennsylvania Disability Determination Division.

1942

Joseph C. Doherty, 712 Brinker Ave., Latrobe, Pa., reports that he has "retired completely as of January 1, 1986."

1943

Edward M. Greaney, Jr., 2701 W. Alameda, Burbank, Ca., a Clinical Professor of Surgery at the University of Southern California, is serving his second term as Governor of the College of Surgeons. One of his ten children, a son, will join him in practice this year.

Bernard S. Rossman, 419 N. Vendome Ave., Margate, N.J., is "now fully retired and back with sand in my shoes - the circle has been completed. At present I assisting my wife in her fabulous gift gallery. I am surrounded by works of art, crafts, unusual jewelry and loads of friends. All buddies are welcome."

1944J

Prince D. Beach, Sr., 11721 Forest Glen, Houston, reports that he plans to retire in 1987.

Frank H. Butt, 506 S. State St., N. Warren, Pa., retired from anesthesiology three years ago. "Too much pressure and too expensive malpractice insurance." He is spending time with his family and traveling between Pennsylvania and Florida. "Hope to see the gang again in 1989."

1944S

John J. Gartland, Office of Departmental Review, Center for Research in Medical Education and Health Care, was named President-elect of the Council of Medical Specialty Societies at the meetings in November. He will assume office in 1988. The Council was formed in 1965 by the American College of Surgeons, the American College of Physicians and the American Academy of Obstetricians and Gynecologists to address issues such as standards of health care, malpractice, funding graduate medical education, technology assessment and professionalism in medicine. The Council of Medical Specialty Societies is now running the largest DRG monitoring system in the country.

Thomas F. Nealon, Jr., Director of Surgery at St. Vincent’s Hospital and Medical Center of New York City, received the fourth annual Jonathan Mayhew Wainwright Award of Moses Taylor Hospital at a dinner dance on October 8 at St. Mary’s Center in Scranton. At the dinner, Dr. Nealon delivered the keynote address, "Cancer Management in 1980’s."

1947

William B. Abrams, 220 Spruce Tree Rd., Radnor, Pa., has been appointed Adjunct Professor of Medicine effective, July 1, 1986.

Gail G. L. Li, 1380 Lusitana St., Honolulu, writes that recently he lunched with classmate Benjamin Lawerence who was attending an ACS meeting there and more recently dinner with vacationing classmates Rip Yingling and George Tibbens and their wives.

William V. McDonnell, 120 Treaty Elms Ln., Haddonfield, N.J., is now full-time Vice President of Medical Affairs and Medical Director of the West Jersey Health System. In December of ’79, Dr. McDonnell retired as Professor of Pathology at Jefferson and as Director of Laboratories in the West Jersey Health System.

Nathaniel D. Yingling, 1212 Turnpike Ave., Clearfield, Pa., writes that he retired in October, 1986 and is still in good health. He was Chief of Surgery from 1958 through 1980 at Clearfield Hospital. His son, Douglas B. Yingling ’78, a Fellow in the American College of Surgeons, is continuing his practice in Clearfield. Dr. Yingling plans to attend the reunion in June.

1948

Richard M. Landis, 653 West Chester St., Lancaster, Pa., met with several classmates last summer in California while on his way to Hawaii for vacation. "Saw Bob Berger and his wife, T.J., in San Francisco and had a pleasant tour of the area. On our return from the islands Nan and I saw Jim Kleckner and Jan in Los Angeles and Jack and Ginny Connolly in Newport Beach. Jack is still active as a vascular surgeon and Jim has just retired."

Lee S. Serfas, 80 Gordon Dr., Old Orchard, Easton, Pa., retired in January of ’86. He writes that he is busy playing golf, shooting skees and learning to fly.

1949

Gerald J. Marks, 111 S. 11th St., Philadelphia, Professor of Surgery and Director of the Division of Colorectal Surgery at TJU recently participated in an organizational Conference for a new

One of the Association’s most popular functions is the reception held each year during the meetings of the American College of Surgeons. In New Orleans last fall nearly 250 guests were present. Many of Jefferson’s alumni have served or are serving as Governors. From left Robert C. Laning ’48, Jerome M. Cotler ’52, Gerald Marks ’49, Jose H. Amadeo ’52 and Eugene H. Kain ’54. Others presently holding this post are Robert K. Finley ’48, Edward M. Greaney ’43 and Harry G. Light ’55.
May 23, 1903
215 South 10th Street
Philadelphia, Pennsylvania

My dear Anna,

I never did address you in that way before but I took the liberty of doing so this time, just because I feel like it, from jubilance of feeling and I know you won’t be offended. I have a sort of strange feeling today and feel like being good to everybody. I think that expresses the feeling just about as well as it can be expressed in words, for it is simply indescribable.

I think I have never before been so truly happy. But the feeling is somewhat lessened by having to witness the agony of some of the men who went down. Poor fellows my heart aches for them, thirty nine in all.

I suppose you have received my telegram before this. I felt so full, I wanted to telegraph to everybody.

I live about a third of a square from the College and about seven o’clock this morning I began to hear “yells” in the neighborhood of the College, so I knew what that meant. The College was open and the boys were getting their reports. So it didn’t take me long to get up there and get mine. I walked in as bold as a lion and called for my report. I took it (they were given out in sealed envelopes) and opened it right on the spot and when I saw it was a blue sheet (the others were white) I didn’t stop to read it but let out one of the loudest yells that ever came out of anybody’s face before. Then I could stand by and watch the others. Congratulations were in order all forenoon. You could see little groups around shaking each others hands among those who had passed and trying to console those who did not. After I had talked around for awhile I proceeded to the telegraph office, and my what a mob there, each trying to get his message in first. I sent one home and one to you for I thought you would be interested to know.

My heart simply aches for those who didn’t pass. I could tell you many pathetic scenes. But perhaps I had better not. One man in particular was handed his report (it was taken to him by a friend) and when he opened it he never said a word but sat down on a chair with the tears rolling down his cheeks and when the boys began to talk to him, he threw himself on the bed and cried like a child — but never a word of complaint. Tears come to my eyes as I write this. He was a general favorite. And he was a good man and as the boys say “knows his stuff.” But perhaps he didn’t do well in the exam. They make no discriminations here, even the Class Treasurer and the President of the YMCA being thrown. So you can see why I was in suspense. I didn’t feel it much until yesterday when I knew the faculty was in session. The feeling is terrible and I never wish to go through it again.

Doctor Ullum of Waynesburg, is in Philadelphia now and he gave seven of us a dinner at the Hotel Bingham today. It was nice and we had a fine time. He has a son, Frank, in the graduating class and is down to see him through. He gave the dinner in honor of the occasion. Oh, this has been a red letter day in my life and I’ll never forget it. I’m going out calling this eve — to keep myself out of mischief.

And now that I am all through, Anna, and am assured graduating next Thursday I want to express my thanks to you for the good you have done me. Persons who have never gone through a like or similar experience don’t realize how much good a kind thought expressed, a few words of encouragement meant, or a well meant jolly does for a person. Perhaps you didn’t know it but even your confidence in my success gave me confidence and much encouragement. Now you mustn’t say this is a jolly or I shall truly feel hurt this time if you do. I graduate next Thursday at twelve o’clock noon, and wish very much that you could be here but I suppose I’m not to have that pleasure.

Oh yes, I took a hospital exam while I was in Atlantic City (you see it wasn’t quite all pleasure) and came out second best and therefore was approved a Resident Physician to the hospital — Atlantic City General Hospital — to go on duty June 1. I am not sure yet that I will accept but think I will. I am trying to get it arranged so I can go on duty October 1st instead of June 1st. June 1st will make it very inconvenient for me as I want to take the Pennsylvania State Board exam June 23 and want the time to prepare. So you see I may not be able to go camping after all. I must tell you I took a long trip out in the country Thursday.

I was so very sorry to hear your mamma is sick and suffering so. I hope she is better ere this. I can understand how hard it is for you, not only the work but the worry. I’ll hope for the best. I’m so glad your school closes soon, for I know you need a rest. Take care of yourself and don’t get sick too — for doctors can’t work miracles.

Sincerely,

Jim

Editor’s Note: This delightful letter was discovered as files in the Alumni Office were being reviewed. With only the class of 1903 and the signature “Jim” to use for detective work we found that there were six James with one from Waynesburg in the class. This was James H. Corwin whose son J. Douglas ’35 and grandsons James H. II ’56 and Douglas T. ’59 also have medical degrees from Jefferson. A call to Douglas in Washington, Pennsylvania, asked the very pertinent question “was your grandmother named Anna.” With a positive response we were able to identify the author of this letter.
international journal, *Surgical Endoscopy — Ultrasound and Interventional Techniques*. Dr. Marks is Senior Editor of the Journal of which Dr. Barry B. Goldberg, Professor of Radiology and Director of the Division of Diagnostic Ultrasound is an Associate Director.

In addition, Dr. Marks served as co-chairman at the Fourth International Symposium of Digestive Surgery held recently in Rome.

Dr. Marks reports that it has been proposed that the model Jefferson has created through its relationship with the University of Rome be adopted by other universities internationally. He also served as moderator for a panel discussion "Anal Disease: Painful Anal Afflictions” during the spring meetings of the American College of Surgeons in Philadelphia in April.

### 1950

**James R. Hodge**, 295 Pembroke Rd., Akron, Oh., has been elected Vice President of the Central Neuropsychiatric Association. The CNPA is a national organization of psychiatrists, neurologists and neurosurgeons. Dr. Hodge is also Professor and Chairman of the Department of Psychiatry at the Northwestern Ohio Universities College of Medicine.


### 1951

**Peter Chodoff**, 716 Hickory Lot Rd., Towson, Md., has been appointed Professor in the Department of Anesthesiology at Jefferson as of August 8, 1956.

**Ernest F. Doherty**, 103 Waterside Pl., Grafton, Va., writes, "Marie and I are enjoying the Tidewater Peninsula area very much. We’re only 30 minutes from Williamsburg. Last April, I enjoyed another trip as Medical Officer on board the Coast Guard Eagle to Bermuda."

**Benjamin R. Paradee**, 9 Colonial Ridge Dr., Haddonfield, N.J., reports that he is "very active in geriatric practice. Dan, our third child, was just married. We have one unmarried now out of four. We now have three grandchildren and one more on the way."

**Frank J. Sweeney**, 931 Cedar Grove Rd., Wynnewood, Pa., has been reappointed an American College of Physicians representative to the Joint Commission on Accreditation of Hospital’s Board of Commissioners for his second three year term.

He also has been reappointed Professor of Medicine at Jefferson.

### 1952

**Edward W. Ditto III**, 625 Orchard Rd., Hagerstown, Md., reports that he has had an eventful year. "Our winter vacation last year took place in Barbados. We traveled the little island in an open jeep which we hung onto for dear life. In April we took a bus trip with our old medical school friends, the Hoffmans from Lancaster, to New York for a big weekend in the Big Apple."

**Kurt E. Lauer**, 630 Fort Washington Ave., New York, is continuing in his private practice of cardiology and internal medicine.

**Jerome J. Lebovitz**, 320 Ft. Duquesne Blvd., 9-C Gateway, Pittsburgh, now has three grandchildren and was remarried in January of ’85. He looks forward to his 35th Class Reunion in June.

**Thomas S. Lynch**, Box 103A, R.F.D. 1, Tuckerton, N.J., reports that he has retired from family practice.

**Robert L. Phillips**, 200 E. Northwood, Greensboro, N.C. has authored two history books: *The Life and Writings of John Wesley Long, 1926-1959* and the *History of the Greensboro Academy of Medicine*. He is “still practicing neurosurgery and having a great time with his five grandchildren.”

**Leonard E. Rosen**, 2812 N. 46th Ave., Hollywood, Fl., writes, "I have been living in Florida for the past two years and work for an HMO."

### 1954

**Joseph L. Abbot**, 101 Chrislena Ln., West Chester, Pa., has "finally had a grandson named Joseph L. III.”

**Charles H. Greenbaum**, 10125 Derrke Rd., Philadelphia, reports that his son, Steven, is Chief Resident in dermatology at the Henry Ford Hospital in Detroit.

**Paul W. Weis**, 1453 Linden St., Allentown, Pa., reports that his first grandson, Matthew, was born on April 17 to his son, Paul, and daughter-in-law, Sally.

**Harry C. Light**, R.D. #5, Bethlehem, Pa., is currently serving as a Governor of the American College of Surgeons and Chairman of the Advisory Group of the Pennsylvania Chapters of the College.

**Ernest L. McKenna, Jr.**, has been elected Chairman of the Section on Otolaryngology at the Philadelphia College of Physicians for 1986-87. He resides at 14 Montrose Estates in Rosemont.

**Leon A. Peris**, 111 S. 11th St., Philadelphia has been named President-elect of the Philadelphia Obstetrical Society, the oldest in the nation.

### 1955

**Leopold S. Loewenberg**, 1100 Walnut St., #300, Philadelphia, has been elected Vice Chairman of the Pennsylvania, New Jersey and Delaware District of the American College of Obstetricians and Gynecologists.

### 1958

**Joseph T. English**, 7 Valley Rd., Bronxville, N.Y., has been elected to the Board of Trustees of Sarah Lawrence College in Bronxville. Dr. English, who will serve a four-year term, is Director of the Department of Psychiatry at St. Vincent’s Hospital and Medical Center in New York. He also holds teaching appointments at New York Medical College, Cornell University School of Medicine and Harvard Medical School.

**James M. Walker**, Mark 70, Cherry Hill, N.J., reports that Mickey is doing well in his third year at Jeff.

### 1959

**Harris R. Clearfield**, 720 Oxford Rd., Bala Cynwyd, Pa., Professor of Medicine and Interim Chairman, Department of Medicine, Hahnemann University, was recently invited by Secretary of Defense Casper Weinberger to join a group of 60 civilians from various professional and business backgrounds in a joint civilian orientation conference to review the military preparedness of the U.S. armed forces. After briefings at the Pentagon by the Joint Chiefs of Staff, the Director of the Strategic Defense Initiative and Secretary Weinberger, the group flew to Fort Hood, Texas, where the Armored Corps was reviewed.
A Physician of Unbounded Spirit

What do Admiral Peary, Charles Lindbergh and John Levinson share in common? The instinct to explore!

by Mary Blitzer Field

It's exhilarating to set foot in uncharted territory. And there are still vast frontiers to be explored, claims John M. Levinson '53, current President of the Explorers Club. He points out these areas on a world map covering an entire wall in his office at the Club's New York City headquarters. "Look! There are vast areas of New Guinea, New Zealand and Brazil that haven't been explored. We have untouched shipwrecks littering the bottom of the Mediterranean." And sweeping his arm upward he continues, "We have many areas in the northern climes that haven't been explored. Look at Siberia." The ocean holds out the greatest promise, Dr. Levinson believes. "The moon is a quarter of a million miles away. But there are more footsteps from man on the moon than there are a quarter of a mile below the surface of the ocean."

Having finished this rapid survey of the globe, Dr. Levinson strides into the Explorers Club trophy room. The collection here embodies the machismo of the conqueror. Along the northern wall is a collection of Persian armor dating from the fifth Crusade. Some of Napoleon's books line one shelf. A double elephant tusk leans against the wall in one corner. In another corner stands a three-foot tall, white cone-shaped object - a whale's foreskin, Dr. Levinson explains. The oak-panelled walls are studded with the heads of hunted animals.

As he makes a tour of the room, there is something proprietary in his long gait and broad gestures. Yet he is quick to defend himself against what he calls "the stereotype of the explorer as exploiter." "The days of the Great White Hunter are gone," he comments with no trace of regret in his voice. He seems to view the hunting trophies as colorful anachronisms. His attitude toward the outward trappings of the Explorers Club seems to be one of affectionate irony.

This is certainly his attitude toward the Club's annual dinner. With a glint of humor in his eyes, Dr. Levinson lists some of the exotics on this year's hors-d'oeuvres menu: Python Porridge, Snapping Turtle Stew, Okalacoochie Swamp Creatures and Boar Intestines...
in Tripe Sauce. "You'll note that none of these exotics is an endangered species," he comments. The main course at this year's dinner was "a culinary duplication of the last dinner served aboard the R.M.S. Titanic" before she went down in 1912. For the past 20-odd years, the annual dinner has taken place at New York's Waldorf-Astoria. The original black-tie dinner was held 82 years ago, the year the club was founded.

In 1904, three years after Queen Victoria's death, Henry Collins Walsh invited a group of men to meet for the purpose of organizing a club "to encourage explorers in their work by evincing interest and sympathy, and especially by bringing them in personal contact and binding them in the bonds of good fellowship." Over the years, the original Victorian gentlemen's club asgrown to become a world-owned professional society boasting 3,000 plus members from over 60 countries.

The roster of famous members is impressive. Admiral Peary of North Pole fame and Admiral Byrd of South Pole fame were members. So was trans-Atlantic pilot Charles Lindbergh. Radio journalist Lowell Thomas was a member. (The Tudor townhouse that serves as Club Headquarters is named after Mr. Thomas whom Dr. Levinson describes as the "greatest commentator of his day — the Dean of them all!") Richard Leakey known for his research into the origins of Man belongs. Thor Heyerdahl of Kon-Tiki fame is a member. So is pilot Charles ("Chuck") Yeager. Science writers Isaac Asimov and Carl Sagan belong to the Club along with journalists Dan Rather and Hugh Downs. Robert Ballard who recently discovered the Titanic is a member. Among the many astronauts who belong to the Club are John Glenn and Sally Ride. (The Club opened its doors to women six years ago). Soviet expert Elizabeth Pickering is a member as is Anna Roosevelt (Teddy's great granddaughter). Bachendri Pal, the first woman to scale Mt. Everest, belongs.

It was another Jeff alumus who sponsored Dr. Levinson for membership in the Explorers Club. Dr. Levinson describes Davis G. Durham '43, as his "mentor for international medicine." An ophthalmologist for Project HOPE, Dr. Durham was elected to membership in the Explorers Club because of some new eye diseases he'd discovered in Samoa during the 50's (JAB, Fall '79). He put Dr. Levinson up for membership in the Club because of Dr. Levinson's work in Vietnam.

Dr. Levinson first visited Vietnam in 1963. He was struck by the country's poor sanitation and malnutrition as well as by the lack of adequate medical facilities and resources there. Of the obstetrical wards, he observed that often two cots were pushed together for five mothers and their newborn infants. The maternal death rate was 25 times higher than in America, and 8% of newborn babies did not live to leave the hospitals. As a result of his experience in Vietnam, Dr. Levinson founded an organization to provide medical help and to advance medical education throughout the world. He still administers AIM (Aid for International Medicine), a nonprofit, privately funded organization, out of his home in Wilmington, Delaware.

On November 19, 1986, Aid for International Medicine, Inc. received The Eisenhower Award "for significant contribution to the advancement of international understanding." Susan Eisenhower, the granddaughter of President Eisenhower, presented the award to Dr. Levinson at the People to People International, First International Award Dinner of the Delaware Chapter — the largest chapter of this organization started by the late president.

Dr. Levinson's most recent venture under the auspices of AIM has been with the Afghan freedom fighters. He just returned from a month in the Northwest frontier province of Pakistan where he helped set up a surgical unit for obstetrics and gynecology. "So, although I've retired early from my private practice in Wilmington, I'm continuing to practice medicine through AIM."

Dr. Levinson credits other Club members with an equally strong commitment to world health. Perhaps most notable among these members is the Club's current Honorary President, Sir Edmund Hillary. In 1953, Hillary and his Sherpa guide, Tenzing Norgay, were the first men ever to set foot on the summit of Mt. Everest. "When Hillary stepped down from the mountain top, he never forgot the Sherpas," Dr. Levinson remarks. "He has raised the funds to build dozens of clinics, hospitals and schools up in the remote areas where the Sherpas live in Nepal. Both he and I have written that the modern explorer gives more than he takes."

Dr. Levinson (left) shares a lighter moment with Sir Edmund P. Hillary, Honorary President of the Explorers Club, during the Club's Annual Dinner.
Dr. Levinson is eager to defend Club members against the stigma of imperialism often attached to explorers. “I haven’t been claiming any lands,” he says of his own field work. “I’ve been making medical observations and observing disease patterns.” He cites the work of another member in support of his claim about explorers. “When Robert Ballard returned to the Titanic in 1986, he carried a plaque from the Explorers Club that I’d handed him several days before. The plaque asked that those that passed this way would leave the ship and its contents undisturbed as a memorial to deepwater exploration. We want people to see the ship and to understand it — not to salvage, pillage and rape the ruin.”

Scientific exploration and world health are not the only concerns of Club members. Improved international relations are also high on their list of goals. Dr. Levinson describes a current project of his: “I’ve been working for a year and a half with letters to the Soviet Academy of Science, and to the Russian ambassador. U.S. Senator Kennedy, a long-time friend of mine, has been working on this too. We’re trying to get the Soviets to agree to an expedition running across the top of Alaska to Siberia to learn about the origins of Man. So we have scientific and cultural reasons to undertake this expedition.”

In addition to serving as a social meeting ground for explorers, the Club serves the scholarly needs of explorers. The Library includes some 25,000 catalogued volumes on exploration and related science, and over 5,000 maps and charts. The Club’s archives contain log books, diaries, correspondence, photographs and artifacts from the collections of many famous explorers. Among the memorabilia on display in the Lowell Thomas Building are a runner from Admiral Peary’s dog sledge, some of Peary’s original lantern slides and the mittens belonging to his black companion, Matthew Henson. Other Club treasures include the globe Thor Heyerdahl used to plan his Kon-Tiki expedition.

Also of interest to scholars are the Club’s two quarterly publications. The Explorers Journal, a scientific and educational quarterly, as a perquisite of membership. Featured in the most recent issue is a description of an imaginary journey astride a comet written by Carl Sagan and T.V. writer, Ann Druyan. In another article, the marine-biologist author describes his experiences taking close-up photographs of sharks off the coast of Rhode Island. The Explorers Newsletter keeps members updated on functions, expeditions, chapter news and lecture series.

One of these lecture series takes place every year at the Club’s New York headquarters. The series is open to the public, “but usually attendance is so enthusiastic that frequently we are unable to seat all comers,” notes Dr. Levinson. New among events at the Club is the Expedition Seminar. “What we present are those problems and areas common to all expeditions; financing, insurance, logistics, food supplies, medicine, leadership, etc. The approach is to view the expedition as a vehicle, i.e., “This is how to put it all together.”

The Club also serves scholars through their grant program. The Club seeks applicants among graduate students, college students and high school students throughout the world. Last year, the Club was able to sponsor the field work of 76 such students.

In addition to the Club’s headquarters on Manhattan’s east side, the Club has chapters throughout the world. New chapters have been started in Toronto and in Fairbanks, Alaska. Dr. Levinson has received signs of interest from India, Israel, Germany and Poland. And looking to the future, he hopes to see shows about Explorers Club expeditions aired before long on public T.V.

In whatever ways the original Explorers Club has grown, the spirit in which it was founded remains unchanged. From its very inception, remarks Dr. Levinson, the Club has been dedicated to “the ideal that it is vital to preserve the instinct to explore.” When I confessed to Dr. Levinson that “I’ve always felt this tug to go north,” he urged me to follow my instincts. “Well, then, go! GO!”
speaker at the Alberta Heritage Days, the University of Alberta and was an invited speaker at the Ministry of Health in Rome. He also was elected to the Western Association of Physicians.

Robert M. Glazer, The Pepper Pavilion, Suite 801, 19th and Lombard Streets, Philadelphia, continues in the private practice of orthopaedic surgery at the Graduate Hospital in Philadelphia, specializing in surgery of the lower extremity. He also continues to teach in the Departments of Orthopaedic Surgery and Physical Medicine and Rehabilitation at the University of Pennsylvania.

Stephen Gosin, 103 Belhaven Ave., Linwood, N.J., reports that his son, Jeffrey, is a 2nd-year medical student at Jefferson. Dr. Gosin is recovering from a back implant surgery and fusion.

William E. Staas, Jr., 323 Mimosa Dr., Cherry Hill, N.J., President/Medical Director of Magee Rehabilitation Hospital, has been re-elected to the same positions by the Magee Rehabilitation Hospital Board of Trustees.

1963

George H. Cohen, 1350 Brandt, Hillsborough, Ca., is Chief of Cardiology at Peninsula Hospital and Medical Center in Burlington. He and Elaine travel East frequently to see their children, Twins Jeffrey and Jonathan are at Cornell and Penn, while Sheryl works in banking in New York City.

Joseph C. Flanagan, 1627 Lafayette Rd., Gladwyne, Pa., gave the A.D. Ruedemann, Sr., Memorial Lecture during the meetings of the American Academy of Ophthalmology in New Orleans in December. During the meetings he was awarded several plaques in recognition of his services: one from the joint session of the AAO and the American Society of Ocularists; one for his services as Secretary and Director of the National Examining Board of Ocularists from 1981 to 1986; and one from the American Society of Ophthalmic Plastic and Reconstructive Surgery, Inc.

Robert C. Gallo, 8513 Thorneden Terr., Bethesda, Md., is one of the six winners of the 1986 Albert Lasker awards for medical research and public service. Dr. Gallo of the National Cancer Institute in Bethesda and Dr. Luc Montagnier of the Pasteur Institute in Paris, who worked separately, were both cited for their identification of the virus that causes AIDS (Acquired Immune Deficiency Syndrome).

This is the second time Gallo has won the prestigious award created four decades ago to honor medical researchers and promoters of public health. He won the award in 1982 for his research on retroviruses, the class to which the AIDS virus belongs. Currently, Dr. Gallo is Chief of the Laboratory of Tumor Cell Biology at the National Cancer Institute.

1965

Robert J. Echenberg, 246 Pine Top Trail, Bethlehem, Pa., was married to Sandra Ann McNear on May 4, 1985. Their daughter, Alexandra Kiria, was born on March 31, 1986.

Martin H. Lizerbram, 5060 La Jolla Bl., San Diego, writes, “We have enjoyed our trips to Philly to visit our daughter, Fran, who is in her second year at Jefferson. My practice of allergy and internal medicine is going nicely, despite all the changes which are happening in this area.”

Antonio Ramos-Umpierre, B St., #B-1, Villa Capaua, Guaynabo, Puerto Rico, reports that his son, Jose, graduated from the University of Pennsylvania in December and plans to go to law school. His daughter, Melagias, is at Rosemont. Dr. Ramos-Umpierre is “trying to play golf twice a week.”

Richard P. Wenzel, 604 W. Park Rd., Iowa City, has accepted a new position as Director, Division of Clinical Epidemiology in the Department of Medicine, and Director of the Hospital’s Epidemiology Program at the University of Iowa Hospitals and Clinics. His new book Prevention and Control of Nosocomial Infections was published in November. Dr. Wenzel writes, “Our entire family enjoyed the sabbatical year in London, where I was affiliated with the London School of Hygiene and Tropical Medicine. My wife, Jo Gail, took courses in art history and became expert in antiques. Amy (16) and Richard (14) are now experienced travelers.

1966

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1967

Michael D. Strong, III, 7 Pepperbush Ln., Moorestown, N.J., has been appointed Assistant Professor in the Department of Cardiothoracic Surgery at Hahnemann University. Prior to his appointment he was Associate Chief of Surgery at Deborah Heart and Lung Center in Browns Mills, New Jersey.
1968

Edward A. Deglin, 210 Locust St., Philadelphia, has been appointed Assistant Professor of Ophthalmology at the University of Pennsylvania Medical School.

John D. Frost, 2933 W. 100th St., Anchorage, Ak., is now married with three daughters, ages 3, 7 and 11. He is serving as Councillor to the American Academy of Surgeons Board of Councillors for the state of Alaska.

Joseph F. Kestner, 113 Chandler Ln., Wilmington, De., reports that he was recently named Head of the Pulmonary Division in the Department of Medicine at the Medical Center of Delaware.

Stephen R. Kozloff, 1936 15th Ave., Greeley, Co., reports that he has been "reappointed to a six-year term to the Colorado State Board of Medical Examiners by Governor Lamm, and then was elected Secretary of the Board for a two-year term."

James B. Turchik, 19 Bradford Dr., Syracuse, N.Y., reports that he enjoyed providing housing for prospective house officers at Jeff. "It was a good experience for us and a way of helping students."

1969

Robert A. Lustig, Cooper Medical Ct., 1 Cooper Pl., Camden, N.J., has been appointed Assistant Professor of Radiation Therapy and Nuclear Medicine, effective July 1, 1969.

1970

Harvey B. Lefton, 559 Long Ln., Huntingdon Valley, Pa., was promoted to Clinical Professor of Medicine at the Medical College of Pennsylvania. Dr. Lefton is Founding President of the Volunteer Staff Association at the MCP.

Larry S. Myers, HHC 1st Armored Division, APO New York, reports that he has been assigned to the U.S. Army First Armored Division as of August, 1986. His wife of three years, Paula Erdelyi, is a Licensed Clinical Social Worker; "She loves Europe!"

1971

Delwyn C. Case, Jr., is Assistant Director, Division of Hematology in the Department of Medicine, Maine Medical Center in Portland. He is also Associate Professor of Medicine at the University of Vermont. He recently presented papers at the American Society of Hematology Meetings, the American Association for Cancer Research and the UICC Meeting in Budapest, Hungary. His home address is 1801 Ole Musket Road in Foreside.

1972

Paul M. Dainer, 4132 Stowe Run Ln., Jacksonville, Fl., announces the birth of his daughter, Caroline Michelle Dainer, on June 26, 1972.

Martin Weisberg, 35 Carter Ln., Elkins Pk., Pa., has been promoted to Clinical Associate Professor in the Department of Obstetrics and Gynecology, effective July 1972.

1973

William T. Chain, 327 Windsor Ave., Narberth, Pa., has been appointed Medical Director of the Bryn Mawr Hospital Alcohol and Drug Intervention Unit, effective January, 1986.

Gary R. Fleisher, 2 Alexander Dr., Newton Highlands, Ma., has relocated to Boston as Director of the Division of Emergency Medicine at the Children's Hospital and as Associate Professor of Pediatrics at Harvard Medical School.

Benjamin Gerson, 200 Temple St., Newton, Ma., is Associate Professor of Pathology at the Harvard Medical School. He has also been reappointed to the FDA. His wife, Barbara, and he now have two children, Adam and Allison.

Marc R. Goldenberg, 830 Old Lancaster Rd., Bryn Mawr, Pa., was appointed Instructor in the Department of Surgery, last July.

Joseph P. Mullen III, 829 Meadowview Dr., Kennett Sq., Pa., has been elected a Fellow of the American College of Emergency Physicians, effective September 1986. "My brother, Matt, is now working with me as a full-time ER physician at the South Chester County Medical Center. I also have been serving as Chester County EMS Medical Director for 1986."

Stephen P. Muller, 603 Westlake Dr., Austin, Tx., writes, "We welcome cold Yankee visitors to this very attractive Texas, hill-country city."

Mark S. Pascal, 1349 Mercedes St., Teaneck, N.J., has been made Chairman of the Service and Rehabilitation Commission, New Jersey State Division of the American Cancer Society, and Vice President of the Bergen County Unit of the American Cancer Society. He is a member of the Executive Board of Trustees, New Jersey State Division of the ACS, and a member of the Executive Committee of the Oncology Society of New Jersey.

1974

Bruce C. Berger, 1210 Imperial Rd., Rydal, Pa., has been elected to the Board of Governors of the Southeast Pennsylvania Chapter of the American Heart Association.

Jay S. Schinfeld, 1245 Highland Ave., Abington, Pa., has returned to the area after 12 years with his wife, Sandy, and their two sons. He is serving as Chief of Reproductive Endocrinology/Infertility at Abington Memorial Hospital and as Associate Professor of Ob/Cyn at Temple University. He hopes to see more of his classmates now that he's back in the area.

Steven M. Wenner and Nadine P. Wenner '76, 30 Academy Dr., Longmeadow, Ma., are both in practice in nearby Springfield. Steven specializes
in orthopaedic surgery and hand surgery, and Nadine specializes in dermatology. Their son, Jeremy is now 11 and their daughter, Andrea is 8.

Arnold J. Wills, 2011 White Oaks Dr., Alexandria, Va., his wife, Lilian, and son, Adam, are enjoying life in the Washington, D.C. area. He recently opened a new office at 650 Pennsylvania Avenue in Washington.

1975

Winslow J. Borkowski, Jr., has received an appointment as pediatric neurologist at the Alfred I. DuPont Institute in Wilmington, Delaware. He trained at Milwaukee Children’s Hospital and the Medical College of Wisconsin Affiliated Hospitals. Dr. Borkowski completed a pediatric fellowship in Milwaukee prior to the completion of a fellowship in electro-encephalography at the University of Nebraska Medical Center in Omaha. He is residing at 2358 Berwyn Road in Wilmington.

Arthur Sitelman, 12346 Evenson Dr., Los Angeles, and his wife, Edna, are proud to announce the birth of their daughter, Lora Lenore, six lbs., six oz., on January 12, 1986. Since last July, Dr. Sitelman has served as Co-Director of Laboratories at the Beverly Hills Medical Center, Los Angeles. He is also a member of the Glenview Pathology Medical Group, where, he reports, he is “enjoying responsibilities in surgical pathology, clinical pathology consultation, dermatopathology medical-legal consultation, laboratory administration and the incomparable Southern California lifestyle and weather.”

Robert E. Wall, 3675 S. Jersey St., Denver, has been appointed Chairman of the Department of Obstetrics and Gynecology at the Rose Medical Center in Denver, a private teaching affiliate of the University of Colorado Health Science Center.

1976

Jonathan B. Belmont, 360 Harrow Ln., Ambler, Pa., has been appointed to the staff of the Grand View Hospital in Sellersville. A former Fellow in retinovitreous ophthalmology at the University of California-Scripps Clinic, Dr. Belmont served his residency at Wills Eye Hospital.

John R. Cohn, 111 S. 11th St., Philadelphia, has completed a course in laser bronchoscopy at Henry Ford Hospital in Detroit. Dr. Cohn practices pulmonary medicine and allergy and immunology at Jefferson. He holds the rank of Clinical Assistant Professor of Medicine.

Gary A. Emmett, 2408 Pine St., Philadelphia, announces the birth of his fourth child, Isaac Cory, on September 13, 1986. His son weighed in at 10 lbs., 14 ozs. Dr. Emmett has been promoted to Assistant Professor of Pediatrics at Jefferson. He has opened an additional office at 18th and South Streets.

Robert L. Goldberg, 1524 McHenry Ave., Modesto, Ca., has been named the First Vice President of the Western Occupational Medical Association, a post he will hold until 1989 when he will become President. Dr. Goldberg is a member of the Board of Directors of the Stanislaus Medical Society and Medical Advisor to the Hershey Chocolate Company in Oakland and the Gallo Glass Company in Modesto. He is a Fellow of the American Academy of Family Physicians.

Scott M. Goldman, 41 W. Springfield Ave., Philadelphia, has been appointed Assistant Professor of Cardiothoracic Surgery at Hahnemann University. Prior to his appointment he was an Assistant Professor at Jefferson.

1977

Michael P. Hofmann, 46 S. Factory St., Skowhegan, Me., has been practicing general pediatrics in rural Skowhegan for the past five years. He reports that his practice and his three boys, Timothy, Gregory and Alexander keep him very busy. He wishes Jeff alumni to note that he is actively seeking a pediatrician associate and “would be delighted to hear from any seasoned pediatricians or recent graduates who are looking for a new practice opportunity.”

Gary M. Lawrence, R.D. 1, Box 429, Wilkes Barre, Pa., announces the birth of his third child, Andrew, in December 1985. He has joined classmate, Q. Thomas Novinger, as associate in pediatrics at the Geisinger Medical Group in Wilkes Barre.

John W. Peters, 802 Jefferson Ave., Scranton, Pa., writes that his daughter, Rachael, is now 18 months old.

Cynthia Altman Weinstein, 1989 Armstrong Dr., Lansdale, Pa., has been elected Alternate Delegate to the American Medical Association by the members of the House of Delegates of the Pennsylvania Medical Society.

Robert M. Zukoski, 926 Howe St., Southport, N.C., is in private practice in general surgery and gynecology. He has been elected Chief of Staff at the J. Arthur Doser Hospital where he also serves on the Board of Trustees. Dr. Zukoski reports that he is enjoying a busy solo surgical practice, but that he now has less time for flying his plane.

1978

Raymond B. Leidich, 5158 Blackhawk Dr., Danville, Ca., will be in private practice at the Danville Medical Center in June, 1987. His wife, Beth, a urology nurse specialist, will serve as his office manager. A Fellow of the American College of Surgeons he writes “two of our new neighbors are John Madden and Billy Martin.”

Charles L. Reese IV, Baltimore and Wollaston Streets, Unionville, Pa., has been appointed Instructor in the Department of Surgery (Emergency Medicine), effective July, 1986.

Norman G. Rosenblum, 830 Primrose Ln., Wynnewood, Pa., has been appointed Assistant Professor in the Department of Obstetrics and Gynecology, effective July, 1986.

Ronald D. Springle, 1214 S. 36th Ave., Yakima, Wa., is Director of Addiction Services for Central Washington. He was given the Volunteer of the Year Award recently by the Board of Washington State Council on Alcoholism.

1979

Peter L. Choyke, 6204 Maiden Ln., Bethesda, Md., and his wife, Lynda, are proud to announce the birth of their son, Adam Reed, on March 21, 1986.

Thomas M. DeWire, Sr., 1301 Avondale Ave., Richmond, Va., has recently opened a practice in plastic and reconstructive surgery at the Memorial Reconstructive Surgery Center in Richmond. Dr. DeWire reports that he spends his free time enjoying his two sons, sailing, gardening and building wooden furniture.

Alan H. Goldberg, 2630 Terrace Hill, Pottstown, Pa., is serving as Medical Director of the Hill School in Pottstown and continuing his private practice in family medicine.

Robert L. Herman, 9066 Arborwood, San Antonio, Tex., writes, "We are currently enjoying life in San Antonio where I am a staff cardiologist at Wil-
Turning Sailors into Athletes:

Stacking the Deck for the America's Cup

This year's America's Cup race has become so intensely competitive that it would no longer be accurate to call the event a sport. In fact, one journalist has dubbed the race "Sail Wars." Physical stamina and prowess, clever tactical maneuvering and technological innovations, have long been acknowledged as important aspects of the competition. Computer design and engineering, and fund raising have become increasingly important to both challengers and defenders. And now even medical expertise has become part of the contest.

When Thomas C. Kravis '68 volunteered to serve as team physician to Dennis Conner's Stars and Stripes, he envisioned that each of the various syndicates would wish to share their medical expertise internationally. "I thought we might be able to have a United Nations of physicians," he recalls. However, the initial Australian response to Kravis's suggestion was curt: "Thank you very much but we've already made our own arrangements."

"And besides," the Australians added with a dig, "we're going to keep the Cup!"

The spirit of this comment contrasted sharply with the spirit of international cooperation fostered by a project initiated by Kravis during his junior year at Jefferson. In 1967, with a cadre of interested medical students from Jefferson and John Hopkins, he developed a volunteer clinic in a remote, poor area of Haiti where free care was given to native patients in great medical and economic need. That project, described in JAB of Spring '67, enjoyed the cooperative efforts of a private army of Papa Doc, several Canadian Catholic nuns, a French priest and a Baptist general practitioner from Alabama. It was that experience of international cooperation almost two decades ago that led Kravis to believe that a similar sharing effort might be possible at the America's Cup Race.

However, as the final round robins were being played off in September '86 through January '87, rivalry was intense, particularly among the various American syndicates. "A young sailor from the San Francisco syndicate came to my clinic with a ruptured ligament," relates Dr. Kravis. After the young man left the Sail America syndicate's boatyard, the oldest member of Conner's crew, a 44-year-old ex-Lieutenant Colonel in the Marines whose life-long dream was to be a grinder in the America's Cup race, reprimanded Dr. Kravis. "How come you're taking care of the enemy? This is war. If they're not smart enough to have their own doctors, they deserve to lose!" But, says Dr. Kravis, Dennis Conner knows he's reputed to be intensely competitive, and making the clinic available to the other syndicates was part of a deliberate strategy, to cultivate a "Good Guy" image.

Dr. Kravis's initial association with Conner began as a lark. He was sitting by the water with a friend, Terry Brown, who owns The Atlas hotels in the San Diego area. They were watching Conner come in from a test race. Conner asked Brown whether he might be interested in providing financial support for the Sail America syndicate. Dr. Kravis jokingly told Brown, "If you contribute, I'll volunteer to be their doc." Several months later, Brown committed up to $1,000,000. Brown called Dr. Kravis the same day and said, "Doctor Tom, you're in!"

One of the first steps he took as team physician was to perform extensive testing on each crew member. "We began with the simple procedures including routine histories and physical examinations and once this phase of the workup was completed, we moved on to more exotic measurements." Routine physical exams revealed previously undetected heart murmurs, cardiac dysrhythmias and in three instances, abnormal liver function tests. These later tests suggested the possibility of hepatitis. This information presented Kravis with a dilemma, since he had promised each of the 30 crew members that the medical tests would be kept strictly confidential and certainly not used to "exclude" any of the members from making the limited 11-member team for the 12-meter yacht. Because of the possibility of an infectious type of hepatitis, Kravis feared that the indi-

Editor's note: By the time the Winter issue of the JAB reaches its membership Dennis Conner may have made history. Dr. Kravis was interviewed in early December and page proof with this story went to the printer the day Stars and Stripes swept the New Zealanders, four wins to one.
individual crew members involved could spread the infection to the entire crew, thereby jeopardizing Conner's chances even before the training for the race had begun. The attorney for the Stars and Stripes syndicate was consulted and a release provided to each of the crew members which each willingly signed. Fortunately, after further evaluation and testing, none of the sailors proved to have infectious hepatitis.

The other tests included resting and exercise, electrocardiograms, ergonomic testing, static and dynamic pulmonary function tests, resting, and maximum VO2. The America's Cup training program would total almost two years. Serum ferritin was therefore measured in each of the athletes since abnormalities in this protein had been reported to be associated with chronic fatigue in marathon runners. "We also measured body water and fat by impedance plasmynography. These studies suggested that the young men applying for positions on Conner's yacht were for the most part, excellent sailors but not athletes." The next goal therefore, was to, develop a fitness program that would turn sailors into athletes and provide them with the opportunity of competing in this endurance program. Ergonomic testing utilizing various equipment on the 12-meter and a careful program aimed at preventing accidents and injuries was introduced. Nutritional counselling and diets were provided for each member.

Among the various tests included in his work-up, Dr. Kravis found the psychological tests most interesting. "I'd love to tell you about various individual crew members," he states with a wry laugh, "but the results are strictly confidential." He at least feels safe in saying, "It's a unique individual who meets the criteria of Dennis Conner and is chosen to train to race a 12-meter." The tests measured psychological stability, the ability to work and relate with others, and competitiveness. As for this last factor, Dr. Kravis confides, some of the crew members were clear off the scale.

In serving as physician to the Sail America syndicate, Dr. Kravis has had to learn as he goes along. "I did a computer search on sailing and medicine at the National Library in Bethesda," he remarks. "There's virtually nothing written on the subject of a fitness program or an injury program for competitive sailors." As the senior editor of a 1200-page textbook in emergency medicine, he looks forward to refining medical fitness and training protocols for the next America's Cup in 1990.

Would Dr. Kravis care to make any predictions about the final race? He believes that Conner's yacht, Stars and Stripes, is the best America has to offer. The yacht's superiority was proved when Conner defeated San Francisco's USA in the semi-finals and the New Zealand in the finals. He predicts that the outcome of the final race will be determined not just by technological innovations such as excellence in computerized design, sails or winged keels but rather by human factors such as stamina, astuteness of mental judgement as well as equipment reliability. □
ford Hall USAF Medical Center, Lackland Air Force Base. I can’t believe there are so many years after mine in the class notes.”


Jonathan W. Sastic, R.D. #1, Box 253A, Oneonta, N.Y., reports that both he and his wife, Lois M. Sastic 79, passed their surgical board examinations in 1985. They spent two months in 1986 in Lugefeil Memorial Hospital, Taitung, Taiwan doing surgery. “It was a very rewarding experience.”

Herbert D. Snyder, 336 Ludwell Dr., Lancaster, Pa., entered the private practice of general surgery in Lancaster in July, 1986 after completing a tour in the U.S. Navy.

1980

Mark D. Chilton, 8110 Clearfield Rd., Frederick, Md., reports that “Matthew is 18 months old and doing great.”

William R. Leisner, 342 V Hagan Rd., Cape May Court House, N.J., writes, “Jeanne and I welcomed our second son, Ross, in July. My medical practice is doing well and we invite all of our friends to visit when they come to the Shore.”

Stanton B. Miller, 9032 Ayrdale Crescent, Philadelphia, writes, “I have joined the practice of B.J. Miller Surgical Associates last July as a partner at Germantown Hospital.

Shahab S. Minassian, 144 Whitemarsh Rd., Ardmore, Pa. has been appointed Assistant Professor in the Department of Obstetrics and Gynecology at the Medical College of Pennsylvania. He completed his fellowship in the Division of Reproductive Endocrinology and Fertility at Jefferson.

Michael P. Savage, 717 Spruce St., Philadelphia, has been appointed Assistant Professor of Medicine, effective July 1, 1986.

Paul E. Stander, 8022 N. Mockingbird Ln., Paradise Valley, Az., has been appointed Chairman of the Department of Community Medicine at the Maricopa Medical Center in Phoenix. He has also been appointed as a Surveyor for the Accreditation Association for Ambulatory Health Care.

1981

Kelly J. Acton, 962 Eagle Ridge Dr., Billings, Mt., is still working for the Indian Health Service encompassing all eight reservations in Montana and Wyoming. “My job entails developing programs for the treatment and prevention of diabetes, educating patients and health care providers, collecting epidemiologic data, developing educational curricula for schools, senior citizen centers and other groups and a variety of other diabetes related activities. My husband, John Peterson, is the Clinical Coordinator of Pharmacy at Deaconess Hospital in Billings. We spend as much time as possible in the mountains cross country skiing in winter and backpacking in summer. Montana is a great place to live; we never intend to leave.”

Scott A. Brennan, 812 Lombard St., Philadelphia, served as a trip physician for a successful high altitude climbing expedition in the Soviet Union in August, 1986. He will begin a plastic surgery residency at Duke University in 1987.

Michael R. Cairns, 3201 Myra St., Durham, N.C., has finished his infectious disease fellowship at Duke University and continues to work there in AIDS research.

Stephen P. Gadomski and Diane Gillum Gadomski, 245 Carriage Hill Dr., Moorrestown, N.J., “are thrilled to announce the birth of their first child, Elizabeth Clare, on July 30, 1986.” Steve is now in private practice in otorlaryngology. Diane has finished her residency in general surgery at Jefferson and is actively preparing to resume her career.

Andrea G. Jordan, Pepper Pavilion, One Graduate Plaza, Philadelphia, has joined the staff of the Department of Pathology and Laboratory Medicine of the Graduate Hospital. Having completed a residency and Tiffany Blake Fellowship at Dartmouth Hitchcock Medical Center, Dr. Jordan’s specialty includes cytopathology, immunohistology and thin needle aspiration.

Mark S. Kruger, 154 Stoney Ridge Dr., Longwood, Fl., writes “I recently celebrated my first wedding anniversary with my lovely wife, Ruth, whom I met during my residency in Akron, Ohio. I am currently practicing emergency medicine at Florida Hospital in Orlando.

Malcolm McNinch, 31 Lynch Rd., McCleary, Wa., finished his residency at Good Samaritan Hospital in Portland and currently is completing a National Health Service Corps scholarship obligation in a clinic there. Writes classmate Kelly Acton “he lives in Olympia with his wife, Janeen, and three year old son, Ryan, who judging from his size is headed for a career as linebacker with the Eagles!”

Ann L. Rosenberg, 116 Avignon Ave., Pennsauken, N.J., is an Instructor of Surgery at Jefferson, and is also on staff at Our Lady of Lourdes Medical Center in Camden.

David M. Sack, Reserve Officers Training Corps Unit, Miami University, Oxford, Oh., has been promoted to his present rank of Lieutenant Commander while serving with the Training Corps there. Dr. Sack joined the Navy in June, 1981.

Richard F. Spaide, Box 27, Landstuhl Army Regional Medical Center, A.P.O., N.Y., writes, "I am the ophthalmologist at the Landstuhl Army Regional Medical Center, which is located in West Germany. My wife, Chang, is doing research at the European Molecular Biology Laboratory in Heidelberg. Anybody traveling in the area should stop by!"

Leslie S. Squires, 1032 Society Hill, Cherry Hill, N.J., has been appointed Instructor in the Department of Medicine, effective July, 1986.

Thomas R. Westphal, P.O. Box 1215, Havertown, Pa., was married on June 14 to Sonia Katherine Morris of Gladstone. Mrs. Westphal is a nurse at Thomas Jefferson University Hospital where Dr. Westphal is a senior orthopaedic resident. The couple honeymooned in Hawaii.

1982

Timothy P. Clare, 101 Main St., New Matamoras, Oh., and his wife, had a son, David Patrick, on March 20, 1986.

Tom D. Halliday ‘59 reported that this is the first time he delivered a Jefferson baby.

Alan J. Cohen, 501 Hamilton Rd., Merion, Pa., reports that he has completed his residency at the University of California, San Francisco. He is now a Fellow in psychiatry at the Institute of the Pennsylvania Hospital. He recently published two articles in the Jefferson Journal of Psychiatry entitled “Shakespeare’s Othello” and “Mycoplasma Pneumonia Encephalopathy.”

Michael F. Hagerty, 121 Lake Dr., Wexford, Pa., is taking a cardiology fel-
lowship at Allegheny General Hospital in Pittsburgh. He has two daughters, Sarah, age 3, and Diane, age 1.

Alex V. Levin, 3329 W. Penn St., Philadelphia, has completed his residency in pediatrics at the Children’s Hospital of Philadelphia where he is on staff in the General Pediatrics Child Abuse Division. Dr. Levin is also doing a residency at Wills Eye Hospital.

Orlin M. Lieberman finished her residency in obstetrics and gynecology at Mount Zion Hospital in San Francisco and currently is in private practice in Los Angeles. She plans to marry Michael Lyson, a marine biologist, in July. Her address is 31822 Village Center Road, West Lake Village.

Judd W. Moul, 1127 Fairview Ct., Silver Spring, Md., is completing his residency in urology at Walter Reed Hospital. He was recently awarded the Kimbrough Memorial Award for best research paper by a resident at the Society of Government Service Urologists’ Meeting in San Antonio.

Leonard A. Nitowski, Box 422, R.D. #1, is doing a residency in ortho-pedics at Wills Eye Hospital. and currently is in private practice in the Glendale Medical Center in Glendale. Dr. Levin is also doing a residency at Wills Eye Hospital.

Ellen K. Blair, One Harbor Ct., Portsmouth, Va., is enjoying working with classmates Tim Walsh, and Kevin O’Neil, and with Rich Hawkins ’82 in the medicine program at Portsmouth Naval Hospital.

Thomas A. Cacciola, 1 Timothy Ln., Fairmont, W.V., was married to Sue Mulkalak, R.N. in June, 1986. In July, he moved from Fairmont where he started a new position with the Public Health Service. “Any visitors?”

Martin B. Getzow, P.O. Box 1357, Shippock, N.M., and his wife, Barbara, have joined Shippock Indian Hospital staff there on the Navajo reservation. “The Four Corners area offers beautiful vistas, Indian powwows and fantastic skiing. Come out and visit!”

Timothy M. Heilman, 206 Village Ln., New Wilmington, Pa., married Sue Camus, May 25, 1985. He has finished his residency at Forbes Family Practice in Monroeville and now is a member of a three-man family practice group in New Wilmington. His daughter, Kathryn Anna, was born on April 4, 1986.

Joseph M. Henry, 503 Shipley Rd., Wilmington, De., was appointed Instructor in the Department of Surgery last July.

Michael M. McDonald, 1001 Tall Trees, Scranton, Pa., is fulfilling his NSHC obligation in the Emergency Department of St. Joseph’s Hospital in Carbondale.

Ann B. Olewnik, 316 Dove Dr., Newark, De., is currently a Fellow in the Department of Pediatrics at the Medical Center of Delaware. “My husband, James A. Crittenden and I had our first child, Laura Ann, on October 28, 1986.”

Stephen E. Pascucci, 13954 Fletchers Mill Dr., Tampa, Fl., writes, “My wife and I are the parents of a seven-month-old baby girl named Christina. I expect to complete my ophthalmology residency at the University of South Florida in June of 1987, after which I will begin a fellowship in corneal and external diseases of the eye at Georgetown University in Washington, D.C.”

Academy of Family Physicians to help finance his interest in the part-time teaching of family practice. The Park-Davis Teacher Development Awards have been given annually by the Academy since 1977.

1983

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Diane L. Roscoe, 3707 Cambie St., Vancouver, B.C., hopes to get some visitors from JMC in Vancouver.

Dale W. Sailer, 90 N. Tenth St., Akron, Pa., entered a partnership in family practice in Akron last July.

John P. Sutak, 54 Forest St., Medford, Ma., was married on March 15 to Wendee K. Wildashm, a designer from Dayton, Ohio. The best man was classmate Gary Ott and the groomsmen included Louis F. D’Amico and Kenneth R. Arthur both ’83. Dr. Sutak has completed three years of a general surgery residency at the University of Cincinnati, and is currently on leave from his clinical duties to pursue his research interests in biochemical mediators of inflammation. He has accepted a two-year research faculty position as a postdoctoral fellow at Harvard and the Brigham Hospital. He plans to return to the University of Cincinnati in two years to complete his general training in surgery.

1984

Joseph W. Chow, 3824 Booth St., Kansas City, Ks., writes, “I will be starting an infectious disease fellowship at the University of Pittsburgh in July, 1987.”


J. Christopher Daniel, Branch Medical Clinic, F.P.O. San Francisco, sends his “greetings from the Philippines!”

James P. Daubert, 1418 Vanguard Pl., Durham, N.C., will be starting a fellowship in cardiology at Duke with a subspecialty in electrophysiology.

Joseph M. DellaCroce, Jr., 8723 Westchester Pike, Upper Darby, Pa., and his wife, Mary, announce the birth of their daughter, Megan Frances, on July 22, 1996.

John J. Kelly III, 2424 N. Seminary Ave., Chicago, is finishing his residency in internal medicine at the University of Illinois Hospital. He has been appointed Chief Resident of the Medical Service at the West Side V.A. Hospital for 1987-98.

Thomas A. Moore II, 4555 Good Adams Ln., Virginia Beach, plans to marry Susan Kane Loeb, a baccalaureate graduate in nursing from Gwynedd Mercy College, on July 18, 1987.
Obituaries

Joseph C. Brugman, 1910
Died October 11, 1986 at the age of 100. Dr. Brugman, an orthopaedic surgeon, had practiced in Lost Nation, Iowa, and later in Sprague and Seattle, Washington. A Fellow of the American Academy of Orthopaedic Surgeons, he was a founder and past President of the North Pacific Orthopaedic Society and a past President of the Seattle Orthopaedic Society. He served as Chief of his specialty at St. Frances Xavier Cabrini Hospital in Seattle. Two sons survive him.

Ivor D. Fenton, 1912
Died October 23, 1986 at the age of 97. Dr. Fenton served 12 terms in the United States House representing Schuykill and Northumberland counties (Pennsylvania) from 1939 to 1963. A member of the House Appropriations Committee, he worked to benefit the anthracite mining interests. Dr. Fenton also served as President of the Schuykill County Medical Society. He returned to his community in 1963 to continue his practice of medicine. Surviving are his three daughters.

Benjamin J. Lawrence, 1918
Died October 5, 1986. Dr. Lawrence was a general surgeon from Mt. Airy, North Carolina. A son, Benjamin, Jr., '47 survives him.

John F. Coppolino, 1922
Died October 26, 1986 at the age of 88. Dr. Coppolino, an Honorary Professor of Pediatrics at Jefferson, was a Diplomat of the American Board of Pediatrics and a Fellow of the American Academy of Pediatrics. Dr. Coppolino had been residing in Plantation, Florida, in recent years. A son and two daughters survive him.

Albert F. Jumblatt, 1924
Died May 30, 1985 at the age of 86. The retired physician was a resident of San Diego.

Isidore T. Strittmatter, 1924
Died November 12, 1986. Dr. Strittmatter, a family physician in Philadelphia, had served as President of the Philadelphia County Medical Society. He had been a member of the President’s Club at Jefferson for many years. Surviving are a daughter and two sons.

Chester P. Swett, 1925
Died October 15, 1986. Dr. Swett served as a family practitioner in Lancaster, Ohio, for over 55 years. In 1980 he was elected President of the Ohio Academy of Medical History. A son survives him.

Hammell P. Shipp, 1926
Died September 30, 1986 at the age of 86. Dr. Shipp, an obstetrician/gynecologist, had served as Chief of Staff at Cooper Medical Center in Camden and was an Emeritus member of the staff at Zurbrugg Memorial Hospital in Riverside. An Honorary Clinical Assistant Professor at Jefferson, he was a Diplomat of the American College of Surgeons and the American College of Obstetricians and Gynecologists. Active in civic organizations he served on the Advisory Board of Asbury College in Wilmore, Kentucky, where he received an honorary degree in 1957. Surviving are his wife, Betty, two sons and a daughter.

William H. Diehl, 1927
Died September 22, 1986 at the age of 84. Dr. Diehl was an otolaryngologist who resided in Lebanon, Pennsylvania. His wife, Jennie survives him.

W. Lewis Brown, 1930
Died July 25, 1986. A general practitioner in Gallipolis, Ohio, until his retirement, Dr. Brown was residing in Laguna Hills, California, at the time of his death. His wife survives him.

George W. Bland, 1930
Died November 4, 1986. Dr. Bland had practiced obstetrics and gynecology in Somers, Montana, prior to his move to his retirement home in Elk, Washington.

Charles K. Padgett, 1930
Died September 12, 1986. Dr. Padgett was a family practitioner in Shelby, North Carolina, until his retirement in 1984. Surviving is his wife, Virginia.

Anacleto Berrillo, 1931
Died September 30, 1986 at the age of 81. Dr. Berrillo was a general...
practitioner in Providence, Rhode Island. In 1977 he was honored by
the Board of Trustees of St. Joseph Hospital where he had been affil-
iated for 44 years. Surviving are his wife, Jane, and a physician son.

Jack F. Smyth, 1931
Died August 29, 1986 at the age of 86. The family practitioner was a
resident of Marion, Ohio.

Charles T. Lawrence, Jr., 1934
Died March 7, 1986 at the age of 77. Dr. Lawrence, a psychiatrist, was a
resident of Stow, Ohio.

Harry Crystal, 1936
Died August 25, 1986. Dr. Crystal, a
family physician, resided in
Wyomissing, Pennsylvania.

Henry R. Hartman, 1936
Died August 30, 1986, at the age of 76. A
general practitioner, Dr. Hartman
was a resident of Laureldale,
Pennsylvania.

Peter P. Leone, 1936
Died November 28, 1986. Dr. Leone
was associated with both Humble Oil
and Refining Company and Exxon
during his career serving as Medical
Director. He was a resident of Cape
May Court House, New Jersey.

Albert M. Schwartz, 1936
Died November 26, 1986 at the age
of 76. Dr. Schwartz was a family
practitioner in West Philadelphia for
over 50 years. He was a member of
the American Academy of Family
Practice. Surviving are his wife,
Frances, a son Burton W. Schwartz
'67, and a daughter-in-law Judith
Parker Schwartz '70.

Alfred B. Miller, 1937
Died June 6, 1986 at the age of 74.
Certified by the American Board of
Dermatology he was a resident of
Norfolk, Virginia.

Leon D. Blumberg, 1938
Died July 24, 1986. Dr. Blumberg
practiced internal medicine in
Philadelphia.

Rodney A. Farmer, 1941
Died October 8, 1986 at the age of
72. Dr. Farmer, a neurologist, was
former Chief of Neurology at
Coatesville Veterans Medical
Center. An Honorary Clinical Associate
at Jefferson he also was associated
with Germantown Hospital and the
Institute of the University of Penn-
sylvania. He was certified by the
American Board of Psychiatry and
Neurology and was a Fellow of the
American Academy of Neurology.
Surviving are his wife, Nancy, and
two sons.

H. Eugene Hile, 1943
Died November 8, 1986. Dr. Hile, a
pediatrician, was a resident of Pitts-
burgh. An Associate Professor of Pediatrics at the University of Pitts-
burgh Medical School, he had
served as Secretary of the Pennsyl-
vania State Chapter of the American
Academy of Pediatrics. Surviving
are his wife, Dolores, two sons and
two daughters.

William O. Curry, Jr., 1946
Died October 30, 1986 at the age of
65. Dr. Curry was a general practit-
ioner until his retirement in 1984 in
Danville, Pennsylvania. He had
served as President of the Montour
County Medical Society. In 1984 he
and his wife, Emily, were named
Danville's Citizen of the Year, the
only time a husband and wife have
shared the award. In addition to his
wife he is survived by two daughters
and two sons.

Clifford B. Lull, Jr., 1948
Died October 2, 1986 at the age of
62. Dr. Lull, a radiologist, was on the
staff of Punxsutawney Hospital in
Pennsylvania where he resided. He
also had been associated with Pennsyl-
vania Hospital in Chambersburg,
Pennsylvania, and Maple Avenue
Hospital in DuBois, Pennsylvania,
where he was Chief. A Fellow of the
American College of Radiology he
was certified by the American Board
of Radiology. Dr. Lull had served as
President of the Jefferson County
Medical Society. He was the son of
the late Clifford B. Lull '15, a Clini-
cal Professor of Obstetrics at Jeffer-
son, the nephew of the late General
George F. Lull '09 and the cousin of the
late George F. Lull '40. Two
sons and a daughter survive him.

Richard J. Potter, 1948
Died October 11, 1986. Dr. Potter,
a cardiologist was a resident of
West Branch, Michigan. He is sur-
vived by a daughter.

Joseph E. McCraw, 1950
Died April 20, 1986 at the age of 65.
A general surgeon, Dr. McCraw
practiced and resided in Laurel,
Mississippi.

Gerald F. Simmermon, 1950
Died September 7, 1986 at the age
of 61. Dr. Simmermon was Chief of
Anesthesiology and Vice President
for Medical Affairs at Good Samaritan
Hospital in Lebanon, Pennsylvania.
He was board certified by the Ameri-
can Board of Anesthesiology and
was a member of the American
Society of Anesthesiologists. Surviv-
ing are his wife, Bertha, a daughter
and two sons.

Joseph F. Smith, 1956
Died November 5, 1986 at the age of
56. Dr. Smith was Chief of Staff and
Head of the Radiology Department
at the Southern Chester County
Medical Center in West Grove, Penn-
sylvania. He also had served as radi-
ologist and Director of Diagnostic
Radiology at Fitzgerald Division of
Mercy Catholic Medical Center and
Assistant Chief of Radiology at Anne
Arundel Hospital in Annapolis. A
Diplomate of the American Board of
Radiology and the American Board
of Nuclear Medicine he was a
member of the Radiological Society
of North America and the American
College of Radiology. Surviving are
his wife, Rita, two daughters and
two sons.

William A. Wimsatt, 1961
Died October 6, 1986 at the age of
50. Dr. Wimsatt was a general prac-
titioner in Mitchellville, Maryland,
and was associated with Doctors
Hospital of Prince George's County,
Prince George's General Hospital
and Leland Hospital. Surviving are
his wife, Rosellen, two daughters
and four sons.

James T. Syenda, 1983
Died May 5, 1986 at the age of 29. Dr.
Syenda was residing in Baltimore, at
the time of his death.

Mrs. Joseph J. Mulone
Died November 6, 1986. Mrs.
Mulone, Anne, served as Executive
Secretary of Jefferson's Alumni
Association from the fall of 1956 to
the spring of 1966. A resident of
Deland, Florida, Mrs. Mulone was
responsible for reorganizing the
internal functioning of the Alumni
Office and coordinated the estab-
lishment of the Alumni Advisory
Council in the 60s. She was a gradu-
ate of the Pennsylvania State Uni-
versity. Surviving are her husband,
Joseph, and a son Rugh.
The Reunion Weekend
June 5, 6 & 7
All Class Parties on Saturday

60th Reunion
Luncheon
Jefferson Alumni Hall

55th Reunion
Luncheon
The Locust Club

50th Reunion
Dinner
The Cosmopolitan Club

45th Reunion
Dinner
Carpenters’ Hall

40th Reunion
Dinner and Dancing
Union League of Philadelphia

35th Reunion
Dinner
The Downtown Club

30th Reunion
Dinner
The Downtown Club

25th Reunion
Dinner Dance
The Franklin Institute

20th Reunion
Dinner Dance
College of Physicians of Philadelphia

15th Reunion
The Penthouse Suite
Veterans Stadium

10th Reunion
Dinner
Port of History Museum

5th Reunion
Cocktail Buffet
Jefferson Alumni Hall

Alumni Calendar
Spring, 1987

January 23
Reception during the meetings of the American Academy of Orthopaedic Surgeons
Stanford Court
San Francisco

February 26
Annual Dinner and Meeting of the Alumni Association
College of Physicians of Philadelphia

March 20
Parents Day
for sophomore students
Jefferson Alumni Hall

April 1
Dinner for alumni
in Washington, D.C. area
The Mayflower Hotel

April 3
Reception during meetings of the American College of Physicians
Royal Orleans
New Orleans

April 20 to May 11
Postgraduate Seminar to the great cities of ancient and modern China

April 28
Reception during the meetings of the American College of Obstetricians-Gynecologists
The Las Vegas Hilton

May 1
Reception during the meetings of the Medical Society of New Jersey
The Host Farm
Lancaster, Pennsylvania

May 12
Reception during the meetings of the American Psychiatric Association
The Drake Hotel
Chicago