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Ye too, who banish sicknesses by Phoebus' art, bring . . . a few gifts to the goddess [Minerva Medica].

Ovid, Fasti, III, 827
Minerva Medica
University Art Historian Julie S. Berkowitz describes the re-discovery of an ancient statue in Thompson Annex.

Jefferson’s Program on Health Policy
David M. Macfadyen, M.D., Associate Dean for Health Policy, discusses the development of the program at Jefferson.

First Woman Alumni President
The Annual Business Meeting brought many familiar faces back to the campus; and Nancy S. Czarnecki, '65 was installed as the first woman President of the Alumni Association.

Class Notes
As many of you know, Lewis W. Bluemle, Jr., M.D., President of Thomas Jefferson University, has announced that he plans to retire on June 30, 1990. The task of finding a successor to Dr. Bluemle, who has led the University so successfully for the past 12 years, is not an easy one. We are fortunate, however, in having a very able Search Committee to direct the task of identifying appropriate candidates. An article adapted from one which appeared in the University’s newsletter, New Directions, describes this Committee. In a second article, some of the guidelines which have been set forth for the selection of candidates are discussed.

STRATTON HEADS PRESIDENTIAL SEARCH

James W. Stratton, Vice Chairman of Jefferson’s Board of Trustees and Chairman of the Board’s Clinical Affairs Committee, has been appointed Chairman of the Thomas Jefferson University Presidential Search Committee. Edward C. Driscoll, Board Chairman, has named Mr. Stratton to head a Committee charged with conducting a nationwide search for a successor to President Lewis W. Bluemle, Jr., M.D., who will retire on June 30, 1990.

"The lion’s share of the credit for Jefferson’s many advances in recent years belongs to Dr. Bluemle," Mr. Driscoll said. "While his retirement will be a great loss to the institution, it also presents a challenge and an opportunity for his successor."

Mr. Stratton, President of Stratton Management Company, served as Chairman of the highly successful Jefferson Decade Fund Committee.

The Search Committee is charged with recommending a candidate for the Presidency to the Board of Trustees by February 1990.

"It will indeed be a challenge to find a candidate to succeed Dr. Bluemle and to lead Jefferson into the twenty-first century," said Mr. Stratton. "I am delighted with the caliber of the Jeffersonians who have agreed to participate in this endeavor."

Jefferson Trustees serving on the Committee include Mr. Driscoll; Mr. Stratton; Lennox K. Black, a member of the Finance Committee; Ira Brind, Esq., Chairman of the Capital Projects Task Force; Jack Farber, Chairman of the Finance Committee; Mrs. Samuel M. V. Hamilton, Chairman of the Development Committee; Brian G. Harrison, Chairman of the Jefferson Park Hospital Board of Trustees; Bruce W. Karrh, M.D., a member of the Clinical Affairs Committee and the Joint Conference Committee of the Thomas Jefferson University Board of Trustees; and Josephine C. Mandeville, Chairman of the Board’s Nominating Committee.

Other Search Committee members are Paul C. Brucker, M.D., The Alumni Professor of Family Medicine and Department Chairman; Trevor A. Fisk, Associate Executive Hospital Director for Planning and Marketing; Warren P. Goldburgh, M.D., ’52, Clinical Profes-
The Search for a President

The Presidential Search Committee appointed by the Board of Trustees has been especially selected to represent the diverse constituent groups of Thomas Jefferson University. Each member is well acquainted with the mission and future objectives of the institution, and dedicated to the purpose of identifying candidates who would continue and enhance the progress made during the tenure of Lewis W. Blue, Jr., M.D. Members of the committee include two Jefferson Medical College alumni: Warren P. Goldburgh, M.D., ’52, Clinical Professor of Medicine, and Robert Poole, M.D., ’53, who served as President of the Alumni Association in 1987-88.

The Committee is seeking nominations for the position from a wide variety of sources. Alumni are especially encouraged to submit names of potential candidates. It will be the mission of the Search Committee to select, from these names, a small number of qualified candidates for final review by the Board of Trustees, which has sole authority to elect the new President.

As Chief Executive Officer of the University, the President is responsible for providing overall leadership in promoting an institution deeply rooted in the past, yet sensitive to its responsibilities as a health center of national renown. He or she will face the challenge of refining the basic concept of a medically oriented university at a time when the expanded research and teaching efforts must be balanced with unprecedented requirements for new approaches in health care policy.

The new President must assure that the administrative structure of the University continually adapts to permit consumers and professionals involved in health care to communicate their health care needs. He or she must understand that the role of an academic health center should be anticipatory and innovative, not merely responsive and ordinary; that the University should maintain its leadership in setting standards in management, programs, and techniques in health care delivery and community medicine, as well as in education.

At the same time, the new President must ensure that the institution generates increasing support in order to further its capacity to attract the most capable students and faculty. It will be necessary to preserve traditional channels of support, public and private, while opening up new funding opportunities as the University continues to grow.

For these purposes it is essential that the new President shall have served successfully at a senior level in an academic health center and that he or she shall have demonstrated success in establishing, maintaining and encouraging a strong team of senior officers and faculty leaders. Almost certainly the new President will have had experience in most phases of academic health care, including clinical practice, research and education. In addition, he or she should be skilled in external relations, political relationships, and management of the numerous affiliations that develop around a successful health center network.

The Search Committee is seeking nominations from a wide variety of sources. In addition to alumni and faculty, selected deans and officers of medical schools and academic health centers across the country are among those being contacted.

Alumni interested in proposing candidates for consideration by the Search Committee are invited to contact Rhonda Karp, Ed.D., Executive Associate to the President, at Thomas Jefferson University, 616 Scott Building, 11th and Walnut Streets, Philadelphia, PA 19107. Review of applications and nominations is to be continual, beginning May 16, 1989.

COMMITTEE

Professor of Medicine; Albert D. Herbert, Jr., R.T., L.R.T.(R), M.S., Chairman of the Department of Diagnostic Imaging and Special Assistant to the Dean of the College of Allied Health Sciences; Sergio A. Jimenez, M.D., Professor of Medicine and Director of Rheumatology Research; David C. Levin, M.D., Professor of Radiology and Department Chairman; Robert Poole, M.D., ’53, Immediate Past President of the Jefferson Medical College Alumni Association; Darwin J. Prockop, M.D., Ph.D., Professor of Biochemistry and Molecular Biology, Chairman of the Department and Director of the Jefferson Institute of Molecular Medicine; Francis E. Rosato, M.D., The Samuel D. Gross Professor of Surgery and Department Chairman; Martin Siegfried, an M.D./Ph.D. student in the Gibbon Scholar program; and Pamela G. Watson, R.N., Sc.D., Chairman of the Department of Nursing in the College of Allied Health Sciences.

Trustees Gustave G. Amsterdam, Esq., Vice Chairman; Frederic L. Ballard, Esq., Immediate Past Chairman of the Board; and Orville H. Bullitt, Jr., Ph.D., Vice Chairman, Chairman of the Scientific and Academic Affairs Committee, and a member of the Board of Trustees of Jefferson Park Hospital, will serve as advisors to the Search Committee. Dr. Blue has also been asked to attend Committee meetings upon request.

Rhonda Karp, Ed.D., Executive Associate to the President, will coordinate the activities of the Committee.

*Adapted from an article in New Directions, the newsletter of Thomas Jefferson University, January 23, 1989.
Re-discovery of a Rare Antiquity at Jefferson

by Julie S. Berkowitz

A Preliminary Report on the Statue of Athena/Minerva

Thompson Annex's ground floor elevator lobby is an unlikely site for an archaeological "find," yet recently it hosted such an event. A niche there yielded a full-length, slightly under life-size, marble statue of the goddess Athena. The 46½ inch statue stands on a plinth integral to the sculpture. The torso was created in the early Roman Imperial period, and the head and arms were added to the damaged work in the eighteenth or nineteenth century.

The statue was not hidden, but actually had been on view for decades. In recent memory it attracted little attention except from Jefferson pranksters who occasionally rotated the work on its pedestal and festooned the costume with balloons, scarves or tinsel. Surprisingly, no one yet interviewed has documented information about the work's provenance, donor or date of donation to Jefferson. To date no records on the sculpture have emerged. Only two of more than 20 art inventories and insurance appraisals give even a passing mention of the work.

When was this sculpture's antique origin rediscovered and the work revealed as a treasure of our collection? In August, 1988, I acted on a tip from Jefferson Archivist Judy Robins. She invited me to accompany her and Ceil Kinney, Draftsman from Facilities Planning, on a survey of Thompson's valuable furnishings to be removed during the PACE project construction.

In August, 1988, I acted on a tip from Jefferson Archivist Judy Robins. She invited me to accompany her and Ceil Kinney, Draftsman from Facilities Planning, on a survey of Thompson's valuable furnishings to be removed during the PACE project construction. Duly noting chandeliers, donor plaques and signs I stopped in my tracks at the sight of Athena. While observing details of her costume, posture and measurements, at first I thought she was a typical Neoclassical work from the nineteenth century. Then gradually I realized that she could be old, very old, maybe ancient.

Since then many interested Jefferson staff have inquired how I recognized the statue's antiquity. An analogous situation is a physician's visual observations of a patient before taking a history or conducting laboratory tests. He draws upon his previous experience and accumulated knowledge to form a working hypothesis of the disease or condition. When an art historian sees an unfamiliar artwork, this object sets off a chain reaction of relevant images in the mind's eye in the process of making an identification.

I pictured numerous ancient Greek and Roman female figures dressed in Classical costume. From the mid-fifth century B.C. there was a typical contrapposto stance—weight on one leg, the other bent at the knee—with softly draped folds of the costume revealing the musculature of underlying forms. In recalling their distinctive patina and weathering, I observed that the marble surface of Jefferson's Athena is a tawny color, with pockmarks and irregularly scattered, dark accretions (the result of chemical reactions between marble crystals and minerals in the soil). This suggested probable burial in antiquity and long exposure to the elements.

Within minutes, though, I felt uneasy about the head and arms. They were whiter, smoother, free of accretions and showed faint, diagonal tool marks. Moreover the arms seemed awkwardly placed. They appeared heavy and stiff compared with the delicately carved drapery folds over the slender and lithe torso. Then I noticed the cracks and bonding elements at the neckline and sleeves. I concluded that the head and arms must have been added centuries later. I recalled that restoration of antique art was first systematically carried out in Rome during the High Renaissance, and reached a zenith in the eighteenth century.

This hypothesis was only an educated guess, because ancient art is outside my area of expertise. Like a physician who makes referrals to other specialists, I canvassed the Philadelphia area for experts in Greek and Roman art. All six experts consulted agreed unequivocally that the torso is an ancient Roman work, with suggested dates ranging from 100 B.C. to the second century or possibly the third century A.D. They kindly provided me with bibliographic references, names of other scholars, and sculptors to investigate for the restoration.

The first scholar to arrive was Brunilde Sismondo Ridgway, Ph.D.,
Julie S. Berkowitz, M.A., University Art Historian at Thomas Jefferson University, arrived in February 1988 to begin preliminary research for a book about the history of Jefferson’s portraits and other art objects. Ms. Berkowitz holds degrees in History of Art from Smith College and the University of Pennsylvania. Prior to coming to Jefferson she was a Lecturer and Coordinator of College Programs in the Division of Education of the Philadelphia Museum of Art, where she also served as department copywriter. She has also lectured widely on museum studies, and taught courses in American painting and sculpture as a guest lecturer at Beaver College. Her areas of expertise include American and European nineteenth and twentieth century art, with a special interest in Philadelphia portraiture. Among her publications is the College of Physicians of Philadelphia Portrait Catalogue, a collection of introductory essays and individual entries for 215 historic and contemporary portraits owned by the College of Physicians.

the Rhys Carpenter Professor of Classical and Near Eastern Archaeology at Bryn Mawr College, and Chairman of the Department (1983-88). It was an exhilarating experience for me and for Frederick B. Wagner, Jr., M.D., ’41, Jefferson’s Historian, to observe Dr. Ridgway as she studied the statue. She reached conclusions about its origin by examining the style and carving of the costume, the attachment of an exterior metal pin, the stance and anatomy of the figure, the Roman-type moldings of the attached base, and the condition of the marble surface.

In her opinion Athena was carved around the first century A.D. The head and arms were added to the damaged, ancient statue in the Neoclassical period of the eighteenth and nineteenth centuries. The body of our figure has the elongated proportions of later Greek sculpture of the Hellenistic period (331-31 B.C.), with narrow shoulders, high waist and wide bottom. The contrapposto posture is of the type originated with the fifth-century B.C. sculptor Polyclitus and continued through the centuries.

While making arrangements to relocate the statue I began research on the ancient concept of Athena/Minerva. Greek legend relates that Athena sprang grown and fully armed from the head of her father Zeus and shouted a triumphant cry of victory. She was the deity of battle and of storms and was the patron goddess of Athens. She was worshipped widely throughout Greece as the personification of mentality and wisdom. She was the protectress of agriculture and of the skilled arts and crafts, including medicine. In art and literature there are depictions and references to Athena Hygeia as a healer, especially before the popularity of Asklepios (the god of healing) in Greece. In Rome the cult of Minerva was blended with that of Athena. Minerva Medica was the special deity of physicians, temples were dedicated to her, and her connections with medicine are attested to in the literature.

She is most commonly depicted wearing armor, and Jefferson’s Athena wears a helmet and an aegis on her breast. The aegis was the goatskin of Zeus, used like an amulet for magical protection. Writhing snakes border this
garment and in the center is the head of Medusa, the fearful Gorgon whose hair was covered with serpents. Dr. Ridgway and John Stephens Crawford, Ph.D., Professor and Co-chairman of the History of Art Department at the University of Delaware, thought the aegis on Jefferson's statue looked more typically Roman than Greek.

Dr. Ridgway pointed out the special features of Athena's bronze Corinthian type of helmet, worn tilted back for better visibility. The visor is decorated with two rams' heads in relief, symbols of the fighting spirit. Under the helmet is a soft Persian cap. This leather or wool cap, called a tiara, alludes to the headress of the Amazons, Orientals who were defeated by the Athenians in mythology. The Amazons came to be an allusion to the Persians who were defeated by the Greeks historically in 480 B.C.

According to Dr. Ridgway, Athena's Greek Classical-style costume includes a chiton, the thin, linen, tubular undergarment buttoned along the upper arms to form sleeves, and a peplos, the heavy wool overgarment belted over the overfold; this is typical of the iconography of this goddess. However, the inexact rendering of the costume's folds caused some other consultants to think that the Roman sculptor omitted the chiton. Beth Cohen, Ph.D., an art historian and archeologist and formerly a faculty member at Columbia University, pointed out that the sleeves should belong to a chiton, but there is no indication of such a garment at the hemline or at the opening of the peplos on the figure's right side, where it is typically seen.

Dr. Cohen's analysis of costume led into the question of prototypes. She noted that the earliest fifth-century Classical Athenas showed the goddess wearing a helmet and a peplos with a long overfold belted at the waist. The Athena Parthenos, the colossal gold and ivory cult image by Phidias at the Parthenon, retained this generic costume, utilized the contrapposto pose, and added the aegis. The aegis had a small, "broochlike" Medusa head, was worn high on the chest, and was divided at the lower front edge. The Phidian type of aegis continued in later versions of the Athena Parthenos and later Classical Athenas. Jefferson's statue differs from the Phidian prototype in its extremely high-belted peplos and its slenderer proportions.

Dr. Cohen suggested that the sculptor of Jefferson's torso could have adapted the costume type from later contemporary works such as a candelabrum relief from Emperor Hadrian's villa at Tivoli and two statuettes, all now in the Ashmolean Museum at Oxford University.

The consensus of opinion among scholars is that the sculptor of the Athena torso was probably working...
from copies or casts of earlier Greek or Roman prototypes. Most agree that this is a free, inventive and eclectic interpretation of prototypes, rather than a direct copy of a specific work using the mechanical pointing method. Dr. Ridgway and Claire Romano, Ph.D., Coordinator of Exhibitions at the University Museum of the University of Pennsylvania, commented on the Roman sculptor's use of the running drill in the costume folds.

Donald White, Ph.D., Associate Curator of the Mediterranean Section, University Museum of the University of Pennsylvania, pointed out that from the first century B.C. there was an international flow of artisans and materials, and that many Greek immigrant artisans directed Roman sculpture ateliers. But the workmanship of much Roman sculpture did not adhere to the standards of Greek Classical sculpture. In the opinion of Elizabeth Bartman, Ph.D., Assistant Professor in the Art History Department at the University of Pennsylvania, the carving on Jefferson's Athena is simplified, schematized and flat compared with Greek sculpture. Dr. Crawford thought the folds metallic-looking and the anatomy inexact, with a disconnectedness between the four views, unlike Greek sculpture which finished all four sides completely even for frontal pedimental sculpture.

All experts agreed that because of summary, shallow carving in the figure's back, the sculpture originally must have stood in a niche or against a wall in antiquity. Because of her small size she was probably part of a larger assemblage. Suggestions ranged from public sites such as a library, city gate, theater, gymnastic complex, fountain or shrine to domestic sites such as a villa garden or atrium of a house. The site was most likely in or near Rome.

All scholars noted with interest two other elements. One is the worn appearance of the plinth, suggesting that it might have been recut either in antiquity or with restoration. Dr. Ridgway said the plinth is typically Roman, formed of two tori and a scotia molding like the base of a Roman Ionic column.

The visor of Athena's bronze Corinthian type of helmet is worn tilted back for better visibility. The visor is decorated with two rams' heads in relief, symbols of the fighting spirit. Under the helmet is a soft Persian cap of wool or leather.

Jefferson's Athena wears an aegis on her breast. The aegis was the goatskin of Zeus, used like an amulet for magical protection. Writhing snakes border this garment and in the center is the head of Medusa, the fearful Gorgon whose hair was covered with serpents.

Russell W. Schaedler, M.D., '53 (left), the Plimpton-Pugh Professor and Chairman of the Microbiology Department and Chairman of the University Art Committee, has been a dedicated supporter of and participant in Athena research.
The second is the iron pin attached to Athena's right side. According to Dr. Ridgway, "it is almost sure evidence of the antiquity of the statue." Dr. Cohen remarked that there are fewer deposits around the pin and the area may have been reworked. Most scholars agreed it is more likely that the pin attached a metal attribute such as a spear, rather than tacked additional drapery folds.

The experts also agreed that the awkwardly restored arms probably did not recall the gestures of the Roman statue before it was damaged. Dr. Ridgway proposed that originally the statue's right arm held a spear and the left arm a shield. Athena's left arm was more likely lowered than raised, because the drapery folds at her waistline where the arm would have rested are smooth, not deeply carved. Dr. Cohen noted that similar arm positions are found in the Ashmolean candelabrum relief.

However, the helmeted head suggests that the Neoclassical restorer paid close attention to a specific fourth-century source. The carving is considered "very high quality" by Dr. Cohen who is writing a monograph entitled Greek Helmets and the Goddess Athena. A prototype suggested by both Dr. Cohen and Dr. Ridgway is the Athena Giustiniani, a Roman marble copy of an original Greek bronze of about 400 B.C., now in the Vatican. Of special note is this work's Corinthian helmet and hollowed-out eyeholes. If the Neoclassical restorer worked in Rome, he could have known the Athena Giustiniani from many replicas available in that city. Other similar possibilities for the prototype are the Athena Mattei in the Louvre, suggested by Dr. Ridgway, and the Athena Velletri also in the Louvre, suggested by Dr. Crawford. Further research about the restorer and his source is necessary.

This leads to the question of the original owner(s). By the eighteenth and nineteenth centuries cultured people from all over Europe and America converged on Rome to visit antiquarian sites and collections. English gentlemen were particularly

Wrapped in mylar and soft padding, and securely tied to a pallet truck, Athena was walked down 11th Street in a procession including the crew and nine anxious Jefferson staff.
It took a crew of five professional art handlers a whole morning to maneuver the 450-pound statue and the 1000-pound pedestal, using hydraulic lifts and pulleys. Here Edward O. Watson, Jr., Manager of Custodial Services in Jefferson Alumni Hall, (left, in jacket) lends a helping hand, while Russell W. Schaedler, M.D., '53 checks the placement.

Ray Angelastro of Custodial Services prepared the pedestal for placement in the Eakins Gallery.

George McCadle, Radiology Department Administrator, and technician Gerard Mullen adjust the portable x-ray unit.

After trial and error with the power settings, technicians Gerard Mullen and Mary Ellen Porpiglia discovered the proper exposure for the beam to penetrate the marble.

The x-ray films clearly showed the "modern" drill holes, serrated metal pins and bonding material that fastened the restored head and arms.
fond of furnishing their country houses with sculptures bought while on the grand tour. Many original sculptures, restorations, copies, and casts of antiquities came to America, either directly from Rome or via England.

Was it a Jefferson faculty member, trustee or graduate who donated our Athena? To start my hunt for the unknown donor and date of donation, I interviewed several Jefferson "old-timers" who remember the work as "always" having been in its niche in Thompson. This building was erected in 1924, and the niche is included in the architect's original drawings. It is my guess that Athena was already owned or at least a promised gift in the 1920s, because no other artwork in Jefferson's collection seems appropriate for a niche. Recently, the names of two Trustees have been suggested as the donor, but evidence is too speculative to specify either of them in print. I solicit readers of the Alumni Bulletin to suggest possible donors, based on documented knowledge of antiquarian interests. The work probably came to Jefferson during the first quarter of this century.

The University Art Committee decided to relocate Athena, after decades at Thompson, to the anteroom of the Eakins Gallery in Jefferson Alumni Hall. Moving the sculpture was no task for amateurs. It took a crew of five professional art handlers a whole morning to maneuver the 450-pound statue and the 1000-pound pedestal, using hydraulic lifts and pulleys. Wrapped in mylar and soft padding, and securely tied to a pallet truck, Athena was walked down 11th Street in a procession including the crew and nine anxious Jefferson staff. Curious pedestrians and motorists craned their necks to gape at this little old lady on wheels.

In preparation for the move, Athena had been examined by two conservators from the Philadelphia Museum of Art. Their condition report indicated that the statue was safe to move, because the restored head and arms were securely attached and there was no evidence of internal flaws in the marble. The report suggested the following technical analyses for additional information: radioisotope proveniencing to identify the location of the marble quarry; optical microscopy to study the marble crystals; basic petrographic examination of original and restored marbles; and more exhaustive search for pigment remains under the microscope, perhaps aided by infrared or x-ray techniques.

Since ancient Greek and Roman statues were originally painted in bright colors, the conservators had inspected the statue for pigment remains with short and long wave ultraviolet light. This did not reveal pigment remains, but the examination was not exhaustive because the Thompson elevator lobby could not be darkened sufficiently and there was no magnification.

Russell W. Schaedler, M.D., the Plimpton-Pugh Professor and Chairman of the Microbiology Department, and Chairman of the University Art Committee, has been a dedicated supporter of and participant in Athena research and he arranged for radiographs of the sculpture. While the sculpture was still at Thompson, George McCardle, Radiology Department Administrator, supervised technicians Mary Ellen Porpiglia and Gerard Mullen who used a portable x-ray unit. After trial and error with the power settings they discovered the proper exposure for the beam to penetrate the marble.

The films were read by David C. Levin, M.D., Professor and Chairman of the Radiology Department, assisted by Mr. McCardle and John M. Boone, M.D., Assistant Professor of Radiology. The films clearly showed the "modern" drill holes, serrated metal pins and bonding material that fastened the restored head and arms, and also the shallow penetration of the ancient iron pin. Dr. Levin quipped that this patient who had suffered such traumatic head and limb amputations was one of his most interesting and cooperative.

Jefferson's Art Committee agreed with all consultants to keep the sculpture intact with its restored parts. Even if we never learn another fact about the provenance, the sculpture speaks for itself about several cultures: ancient Greece and Rome, which attributed great power and responsibilities to the goddess Athena/Minerva; the Neoclassical period which venerated antiquity and restored damaged artworks to recapture an ideal beauty of the past; and the modern era which can still learn valuable artistic and philosophical lessons from ancient art. While the work is not a great masterpiece, its size, origin, and good condition make it an historic treasure, the kind of object rarely owned by an American health care institution. □
Jefferson’s Program on Health Policy

by David M. Macfadyen, M.D.

A motto of the first President of the Jefferson Alumni Association, Samuel D. Gross, M.D., 1828, was *Nulla dies sine linea* - no day without writing. How many physicians follow the discipline, instilled in Gross at Wilkes-Barre Academy, of spending just a little time each day committing ideas to paper? My own lines for today are ideas on health policy which I wish to share with Jefferson alumni.

In his sixth decade, Samuel Gross dedicated “whatever of life or health or strength remain to me, to the cause of my alma mater, to the interest of medical science and to the good of my fellow creatures.” The dedication he mentioned first is reflected today in the strong loyalty that Jefferson graduates have for their Medical College—a loyalty which is striking and impressive to newly-arrived faculty such as myself. Similarly, the commitment to medical science at Jefferson is undiminished; indeed biomedical research is in an expansive phase within the institution, with a new Life Sciences Building on the drawing board. Jefferson’s emerging involvement in health policy is complementary to this research expansion, and is part of a long-term strategy of University President Lewis W. Bluenle, Jr., M.D., and Vice President and Dean of the Medical College, Joseph S. Connella, M.D. for ensuring that the University is able to adapt to the environment of health care delivery in the 1990s.

Dr. Gross’s final dedication, to the good of his fellow citizens, is the goal of our nation’s and of our profession’s efforts in health policy. The 1990 *Health Objectives for the Nation*, published by the Public Health Service in 1979, identified priorities for federal programs and activities. The goals of the 226 Objectives were to improve health status, reduce the risks of disease, increase public and professional health awareness, advance health services and improve health surveillance. Progress towards realizing many, but not all, Objectives has been impressive. The policy efforts of professional organizations are focused on supplying the right mix of health professionals, providing appropriate and affordable technology, organizing health resources, communicating health information, ensuring quality of and access to health care, paying the bill, and preparing the future through research.

**STRATEGY FOR DEVELOPING A PROGRAM ON HEALTH POLICY**

The Health Policy Program is part of the Dean’s Office and the staff is modest, comprising the writer plus a secretary. This is purposeful, since the strategy is to initiate action by using the existing resources of the College and its affiliates, including the student population. The direction of the Program is illustrated in this article with reference to four topics:

- the Health Policy Library,
- a proposed Master of Science program in health management for physicians and nurses,
- the *Health Policy Newsletter*, and
- other aspects of Program content.

**HEALTH POLICY LIBRARY**

Faculty must be well-informed if they are to be involved in policy development, public relations or public debate. An integrated Health Policy Information Room and Library have been established in 621 Curtis. The former has remote access to databases, and the latter has been organized by Jefferson student Gordon C. Minin (Class of 1990), as a summer project. Scott Library Director, Edward Tawyea and Senior Associate Dean, Robert S. Blacklow, M.D. are helping to secure foundation support for this as a special library. The vast array of health policy information is to be found not only in professional journals, but in newspapers, newsletters and within a grey literature of government and other publications. A general movement in modern libraries is to guide the user through selection procedures that yield and archive the spe-
specific information needed. The Health Policy Library is being built upon such "hypermedia" procedures.

Policy analyses must be based on data, and a structured archive of data on health status and health service utilization is being established for use with various computer-based presentation programs, and will be accessible to users, off and on the campus, through a network maintained by the Office of Academic Computing.

Another student, Adam Lewis Wilkes (Class of 1991) has produced a self-instructional program on health policy for generalized use in U.S. medical colleges. This project was developed in association with the Office of Academic Computing. One of the nation’s 226 disease prevention and health promotion Objectives for 1990, is that 50 percent of adults 65 years of age or older should be engaging in appropriate physical activity, e.g. regular walking, swimming or other aerobic activity. The self-instructional program on national health policy provides the user first with baseline data, namely, that in 1975, about 35 percent in this age group took regular walks. Next it presents the current status. For instance, in 1985, the National Health Interview Survey found that 43 percent of the population 65 years of age or over reported walking for exercise.

Finally the user chooses either a brief or a full comment on the likelihood of the Objective’s being attained. For example, the full comment on the exercise objective is as follows:

Based on improved data and a definition for physical activity that relate to criteria for prevention of disease, it appears unlikely that this Objective will be met by 1990. Although data from several surveys are available for persons 65 years and older, the variable definitions of activity preclude comparability and an evaluation of secular trends. One important issue for this particular Objective is the intensity of activity that should be required for older adults to achieve the Objective. Older adults need not achieve the same absolute speed or vigor of activity as younger adults in order to achieve 60 percent VO2 max. Less vigorous activities, such as walking at a pace of four miles per hour, are sufficiently strenuous to require 60 percent VO2 max for persons 65 years or older. With that assumption, the estimated proportion of older adults achieving this Objective is 10 to 20 percent. For this age group, walking at a pace of about three miles per hour requires 50 percent VO2 max. Also, activity at less than 50 percent VO2 max probably has a favorable impact on other aspects of health and physical fitness. In particular, regular daily

There has been little attention, in medical education, to management as a skill in its own right.

activities that promote the maintenance of the ability to care for oneself are important. Progress toward achievement of this Objective will require further development of a social or economic environment conducive to an active lifestyle for large segments of the population.

MASTER OF SCIENCE IN HEALTH MANAGEMENT FOR PHYSICIANS AND NURSES

There has been little attention, in medical education, to management as a skill in its own right. The financing, coverage and quality of personal health services have not been adequately addressed. Jefferson Medical College is therefore developing a Master of Science program in health management for physicians and nurses.

The emergence of health as big business has led to the perception that decisions on the future of health care are no longer in the hands of clinicians. The Jefferson program is designed to equip the physician and nurse to be more involved in health care management and policy decisions. In this new environment, health care organizations are realizing the need for managers who have had both clinical and managerial training. While many physicians desire management training, few medical schools or residency programs have taken the initiative to offer such training, an exception being the Jefferson-affiliated Geisinger Medical Center.

In an analysis of trends in health care, the A.M.A. Council on Long-Range Planning and Development has studied the role of physician managers, particularly their potential for putting financial decisions within the context of sound medical judgment and the patient’s best interests. The A.M.A. Report states that physician managers will need educational opportunities in addition to traditional M.B.A. programs. The Jefferson program will train leaders who understand both health and business.

Nursing in particular has been considered to be underpaid and to lack opportunities for advancement to senior management. The Jefferson program will provide a means of breaking down barriers to advancement.

Subject to Board of Trustee approval, this postgraduate program will take in 20 candidates in September 1990. The Jefferson degree of Master of Science in Health Management will be offered as an executive program, conducted on Fridays and weekends, in order to give trainees the option of continuing clinical practice while receiving managerial training.

The University Development Office is helping to secure start-up funds and operating costs. A workshop for potential faculty took place in December, 1988. The Center for Research in Medical Education and Health Care (CRMHC) is the academic partner in developing this program, and collaboration is being discussed with the University of Delaware. Case-study material developed for the program will be designed for inclusion in the training packages for residents being developed jointly between JMC and the clinical services, under the coordination of Associate Dean Joseph F. Rodgers, M.D.
HEALTH POLICY NEWSLETTER

The Jefferson Health Policy Newsletter is distributed to residents and junior and senior faculty for the purpose of stimulating discussion on public and professional policy issues relating to current health care practice. Each Newsletter is devoted to a particular theme in which there is a Jefferson health policy interest, and is coordinated with faculty/student discussion groups on the same topic.

The first issue was about health risk appraisal. The first-ever Health Hazard Appraisal Tables were published at Jefferson around 1963 by Lewis C. Robbins, M.D., who worked with Robert I. Wise, M.D., Chairman of the Department of Medicine at that time, and with E. Harold Himman, M.D., of the Department of Community Health and Preventive Medicine.

The second issue dealt with physician income. Since 1970, Jefferson Medical College’s Center for Research in Medical Education and Health Care has asked graduating medical students what they expect their annual personal incomes will be at points five and ten years after graduation. Any change in physician reimbursement policy which reduces an individual’s income could disrupt careers and lifestyles.

The last quarterly issue of 1988 treated quality of care. In evaluating quality of medical care, one has to control for the severity of the patient’s illness. One approach to measuring illness severity is “Disease Staging,” developed at Jefferson by Joseph S. Gonnella, M.D. and Daniel Z. Louis together with clinical faculty. In Disease Staging, diseases are classified in a taxonomy of stages and substages. Jefferson’s Center for Research in Medical Education and Health Care evaluated the stage of illness for a sample of patients admitted with selected diagnoses. Patients hospitalized “late”—i.e. with complications that could have been prevented by earlier hospitalization—accounted for about one in five admissions to hospital. Patients admitted late had, of course, poorer prognosis.

The March 1989 issue focuses on career choice and health manpower. Jefferson Medical College initiated the Physician Shortage Area Program (PSAP) in 1974. This program preferentially admits medical school applicants from rural backgrounds who intend to practice family medicine in rural and underserved areas. Evaluation of the program by Howard K. Rabinowitz, M.D. of Jefferson’s Department of Family Medicine has shown that PSAP graduates from the classes of 1978 to 1981 were seven to 10 times as likely as their peers to combine a career in family medicine with practice in a rural or underserved area, thereby fulfilling the goals of the PSAP. The study shows that the medical school admissions process can have a major influence on the specialty choice and practice location of physicians, and suggests one mechanism for increasing the number of family physicians in rural and underserved areas.

The summer 1989 issue will be on international medicine. Jefferson has a tradition of attracting students and scholars from other countries, and of aiding the development of medical services overseas. The Jefferson classes of 1965-70 included students from several foreign countries, including Canada, Central and South America and the Caribbean. There were occasional students from Germany, Sweden, India, China and Japan. Pioneering work in international health was done by Jeffersonians Victor Heiser in the Philippines, Carlos Finlay in Cuba and John Glasgow Kerr in China. The Newsletter shows that the tradition continues. It describes, for example, an Overseas Medical Scholars Program, supported at Jefferson by the Education Commission for Foreign Medical Graduates, which provided opportunities for advanced study to educational leaders from China, Japan and Korea.

The Newsletter can be distributed free of charge because it is produced inexpensively, using desktop publication. The editorial team comprises Donald J. Balaban, M.D., Family Medicine; Trevor A. Fisk, Thomas Jefferson University Hospital; Jerold A. Glick, Jefferson Medical College; and Daniel Z. Louis, CRMEHC; plus the writer. Back issues may be obtained from the Health Policy Room, 621 Curtis, 1015 Walnut, Philadelphia, PA 19107.

OTHER ASPECTS OF PROGRAM CONTENT

International health seminars

The purpose of these faculty/student seminars is to provide a platform for sharing experiences of health care in other countries, describing overseas electives and discussing ideas for international projects. International electives of Jefferson senior students in 1989 include clerkships in Tanzania and Thailand. Beginning in 1990, a senior student exchange program has been arranged at Oxford, England by Senior Associate Dean Robert S. Blacklow, M.D.

The focus of the first international seminar was on Jefferson surgeon John H. Moore, Jr., M.D.’s volunteer service with “Operation Smile” in Liberia and the Philippines. Operation Smile is a people-to-people project of community development, based on the correction of cleft lip and palate deformities. It is not however limited to plastic surgery, and Operation Smile would welcome individual offers of personal support from the Jefferson community.

The second session was a presentation by Sir Gordon Wolstenholme, FRCP, Director of Action in International Medicine (AIM). AIM was established in 1988 and works with medical institutions which are committed to raising the standards of medical education in the developing world. Projects are implemented on an organization-to-organization basis and include exchange programs for graduate medical education teachers, and research cooperation between medical school faculties.
Special topic seminars—AIDS

As a response to the Report of the Philadelphia Commission on AIDS, a joint faculty/student seminar was held to “tell the world what we’re doing about AIDS.” The Commission’s report reiterates the view of the Health and Public Policy Committee of the American College of Physicians that the AIDS crisis places in bold relief inadequacies that are felt throughout the health care system, such as inadequate funding of preventive measures, insufficient home care and inadequate care for the chronically ill. Seminar presentations included a description by Jefferson student Deena Neff (Class of 1991) of her involvement in a home care project, which re-emphasized the doctor’s role in caring, as well as curing. Other presentations included summaries of invited submissions that had been made by Jefferson pediatrician Loretta P. Finnegan, M.D. and by geropsychiatry social worker Jeanette Bressler, on AIDS in children and in older people, to the President’s and to the Philadelphia AIDS Commission, respectively.

The place of biomedical ethics in the Jefferson Curriculum

A photograph of a reading and discussion group on biomedical ethics composed of freshman students of the class of 1991 was published in the Summer 1988 issue of the Alumni Bulletin. A videotaped student evaluation of this discussion group was viewed by Ronald P. Jesh, Ph.D., Chairman of the Curriculum Committee, and was shown by Dean Joseph S. Connella, M.D. at the Annual Meeting of the Japan Society for Medical Education. The corresponding Class of 1992 reading and discussion group on bioethics takes account of this student evaluation, involves University of Delaware philosopher Paul T. Durbin, Ph.D., and is organized by John D. Engel, Ph.D. It is the students’ view that the teaching of ethics should be mandatory.

Tools to support clinical decision-making

A presentation on currently available decision support tools was made on behalf of an informal Jefferson special interest group (Expert SIG) to the Alumni Association Executive Committee in December 1988. If Jefferson is to be involved in the flow of this upstream technology into the mainstream, we have to provide present and potential faculty with the necessary computer hardware and software for developing expert systems.

In isolated environments, a computer that can simulate the best decisions and practices of a teaching hospital could be an important source of a “second opinion.”

Expert systems are computer applications which use stored medical knowledge and diagnostic processes to make inferences concerning medical actions. They aim to emulate the capabilities of human experts in particular domains, and have met with success.

Expert systems developed as “computer consultative aids” exist for specialized fields of medicine, such as those which aid antimicrobial selection (Mycin) or give chemotherapy advice for clinical oncology (Oncochin). Others, such as DxPlain, Quick Medical Reference (QMR), and Physician Database Manager generate differential diagnoses.

Decision analysis uses probabilities to increase the predictive effectiveness of diagnosis or treatment. Philadelphia surgeon John Clark’s McBurney Program, for example, uses decision analysis to aid differential diagnosis of abdominal pain. Jonathan E. Gottlieb, M.D. in Jefferson’s Department of Medicine, who trained in decision analysis at Boston University, and Dr. Farrokh Alemi, whose Ph.D. is in decision analysis from University of Wisconsin/Madison, are preparing a syllabus on clinical decision-making for postgraduate training. Jefferson projects described to the Expert SIG group have included a computer tool being developed by M. Andrew Levitt, M.D. to prompt the physician on the appropriate use of pelvic examination in Emergency Medicine, and the use of neural networks by John M. Boone, Ph.D., of the Department of Radiology to teach computers pattern recognition. Marvin V. Gozum, M.D. from the Center for Research in Medical Education and Health Care is a user and developer of several decision support tools, including QMR.

Interaction between health professional and computer must be simple. McBurney requires the user to move a pointer on the screen to an appropriate box and click a button. No typing is required. Research on the human/machine interface focuses on natural (i.e. non-computer) language, speech processing and speech synthesis. The NLM’s computer-based Time project answers the physician’s spoken questions with a videodisc simulation of an appropriate patient response. Touch screen interactive videodisc presentations are being developed by F. Scott Beadenkopf and Rodney B. Murray, Ph.D. of the Office of Academic Computing.

In isolated environments, a computer that can simulate the best decisions and practices of a teaching hospital could be an important source of a “second opinion.”

Expert systems use the collective wisdom of good practice and follow explicit rules defined by content area specialists. This permits examination of diagnostic processes and interventions against these rules. Because of their consistent, systematic approach to decision-making, such programs are valuable aids in teaching students how to manage clinical problems.

Ten to fifteen years are probably necessary to bring decision-making tools to the state in which the Jefferson doctor will be using them as part of her/his workstation. One of the objectives of the Jefferson Expert SIG group is to demonstrate to alumni, faculty and students the state of the art in decision support tools. Such a demonstration is planned for the summer of 1989. □
At the Annual Business Meeting in Jefferson Hall on March 2, 1989 Nancy Szwec Czarnecki, M.D., '65 assumed the Presidency of the Alumni Association from William H. Baltzell, M.D., '46. It was an historic moment: the first woman to be accepted by and to graduate from Jefferson Medical College had become the first woman President of its alumni.

Dr. Czarnecki, a family practitioner in Philadelphia since 1966, completed her internship at Nazareth Hospital. The following year she joined her husband, Joseph E. Czarnecki, D.O., in a family practice partnership. Certified by the American Academy of Family Practice and the American Board of Family Practice, she is a member of the staffs of Frankford Hospital, Nazareth Hospital and Northeastern Hospital.

A member of the Pennsylvania Medical Society, the Philadelphia County Medical Society, and the Philadelphia Academy of Family Practice, she serves on the Advisory Board of the National Cancer Institute Community Health Watch. In 1984 she also served on a ten-member committee of the American Board of Family Practice which considered the relevancy of questions used in the Board examinations.

Dr. Czarnecki has been a very active member of the Jefferson Alumni Association, having served both as Vice President and as Secretary of the Alumni Executive Committee. She was a member of the Executive Committee Dean Search Committee, and for six years served as Chairperson of the Jefferson Career Day Committee.

Withal she has found time to raise four children, and to develop her hobbies of gardening and collecting period furniture, as well as taking part in civic and school affairs.

When asked about her choice of a career as a physician, Dr. Czarnecki replies that she decided upon medicine somewhat belatedly, as a biology major in her senior year at Temple University. She believes she was influenced considerably by her experience in a summer job during college, when she worked for Elizabeth Brown, M.D., an allergist who practiced in the Bywood section of Philadelphia. "She was a wonderful person . . . quite a lady, able to manage family and practice. She became a role model for me. I never had thought I'd be interested in medicine. I just kind of filtered into there [the position at Dr. Brown's office] . . . I guess it was fate. I did all sorts of things . . . office work, learned to give injections. There were not many women in medicine at that time. Dr. Brown was the only woman physician I knew."

Dr. Czarnecki continues, "Being a woman physician takes a supportive spouse and a commitment to both your family and your practice. There is a
way . . . there seems to be a niche that you find that you are comfortable with; a pattern that seems to work for you.”

Dr. Czarnecki and her husband were married after their second year of medical school, while her husband was in school in Iowa and she at Jefferson. Their four children, now teenagers, have been encouraged to work at their parents’ office in some capacity since each was about five years old. “They stuffed envelopes, set out pills, whatever tasks of that sort needed doing,” she explains, “especially the two older ones.” Asked if their children are now contemplating careers in medicine, she says Joseph, Jr., 19, a student at Haverford College, is interested in a possible career in radiology, and Andrea, 18, now at Villanova University, may also be interested in becoming a physician. Nancy, 16, and John, 14, are still undecided.

During her year as President of the Alumni Association Dr. Czarnecki hopes to develop some sort of forum where women in medicine—and particularly Jefferson women in medicine—can discuss comfortably their developmental ideas on career, family, and practice in a relaxed atmosphere. She hopes that alumni will give her their reactions to this idea. She explains, “So many of us women think, ‘Oh, I’m the only one who can’t handle this family and career business.’ They’ve got to realize that others have this same concern.”

Dr. Czarnecki has invited women graduates to plan a special mini session at Reunion this June, and hopes to expand upon ideas raised there in the course of the year. In a subsequent issue the Alumni Bulletin will include a feature on Women in Medicine which will touch upon some of the ideas raised.

In the Fall 1966 issue of the Alumni Bulletin, when she had just completed her internship, and was opening her practice with her husband, Dr. Czarnecki was invited to reflect upon her first year away from medical school. Describing her year of internship she said, “We discovered that medical schools don’t have a monopoly on excellent physicians, clinicians, and teachers; most communities also are well endowed. We learned that there is an art to medicine, an individualism as unique as dermatoglyphics.”

Twenty-three years later, discussing her role as President of the Alumni Association, Dr. Czarnecki believes that her major job is to promote good feeling and good will among the alumni. She comments, “At Jefferson that is not hard to do. Jefferson is truly one of the loves of my life. It is a unique place because of the people. They are really warm and caring and willing to help, and very loyal also.” She hopes to promote a stronger relationship with the students and with the younger graduates, as well as to strengthen ties with alumni of all ages in other parts of the country.

Dr. Czarnecki hopes that more alumni will plan to return for reunions. “Jefferson has so much to be proud of. I think that the alumni who come back will see for themselves the progress that the Medical College and the University have made. The faculty heads of departments are outstanding, and under the aegis of President Bluemle and Dean Gonnella I think the school has made great advances.”

Nancy S. Czarnecki, ’65 assumes the Presidency of the Alumni Association from William H. Baltzell, ’46, as Past President Robert Poole, ’53 applauds.
William H. Baltzell, '46 is pictured with recipients of Honorary Memberships in the Alumni Association: left to right Carl M. Mansfield, M.D., Professor of Radiation Oncology and Nuclear Medicine and Chairman of the Department; James W. Stratton, Vice Chairman of the University's Board of Trustees; and Michael J. Bradley, Vice President for Health Services and Executive Director, Thomas Jefferson University Hospital.

John R. Prehatney, '57 (left) with Franz Goldstein, '53.

Joseph S. Gonnella, M.D., Dean of Jefferson Medical College, addresses the meeting as William H. Baltzell, '46 looks on.

L. to R.: Nancy S. Czarnecki, '65; Robert M. Cohen, '65; Arthur N. Triester, '65; Carla E. Goepp, M.D., Associate Dean of Student Affairs.

Joseph Hodge, '52 (left) compares notes with John R. Prehatney, '57. At right is James M. Delaplane, '64.
SUPPORT GROUP FOR WIDOWS AND WIDOWERS

The idea of a support group for widows and widowers of Jefferson Medical College Alumni has recently been discussed with members of the Alumni Association, and has met with an enthusiastic response. An initial planning session was held at Jefferson Alumni Hall on February 24, and a second meeting is scheduled for March 6.

Many believe that the families of physicians share experiences unique to the profession, and that in bereavement other support groups, while potentially very helpful, may not address these special areas of interest or concern. The Jefferson group hopes to offer programs relevant not only to those recently bereaved, but also to those who may feel that they have progressed beyond the initial period of adjustment. The organizing committee seeks to include members of all age groups.

Present plans call for monthly meetings on weekdays, alternating between the noon hour and the early evening. The first program, which will feature a guest speaker, is to be held in early April.

Persons interested in learning more about the Jefferson Widows and Widowers group are invited to telephone Estelle J. Ivker, widow of Milton Ivker, Class of 1955, at (609) 428-8242 or (609) 428-1946, or to write to her at 1767 Tearose Lane, Cherry Hill, NJ 08003.

SMOKE-FREE ENVIRONMENT

Thomas Jefferson University is implementing a No Smoking policy to help diminish the many proven health risks associated with smoking. Beginning in mid-March 1989, smoking will be permitted in designated areas only.

Effective September 1, 1989, smoking will no longer be permitted in any buildings at Thomas Jefferson University.

Alumni Calendar

March 17
Parents' Day for Sophomore Medical Students
Jefferson Alumni Hall

March 21
Reception during the meetings of the Federation of American Societies for Experimental Biology
Hilton Hotel
New Orleans

April 27
Meeting
Alumni Association Executive Committee
Jefferson Alumni Hall

May 25
Meeting
Alumni Association Executive Committee
Jefferson Alumni Hall
Au Revoir, Byberry

by John A. Koltes, Jr., M.D., '47

The notorious record of the Philadelphia State Hospital, commonly known as Byberry because of its location in Byberry Township, Philadelphia, was recently published (July 10, 1988) in the Sunday Inquirer. The purpose of the article apparently was to bring to the awareness of the public the long and tragic history of an institution whose name was destined to become synonymous with feelings of hopelessness and despair in the care of the mentally ill and indeed even with bad treatment or worse, no treatment. The reporter recounted some of the great difficulties that befell the institution and undoubtedly the article produced a sense of disgust in its readers. Sadly he likened the hospital to the Holocaust; that is a grossly incorrect comparison. Physicians and staff of the hospital were not jailers or guards and the goal of the institution was not servitude or death but the return of the patient, however long it required, to his natural environment and recovery. The article may have revulsed some readers but for me it produced a sense of nostalgia and deep concern for the treatment and understanding of the mentally ill.

I grew up in the shadow of Byberry Hospital and heard many stories about it in the 1930s. And in addition I knew many of the farm families of the area of Byberry, the Eberts who farmed 700 acres for the hospital, the Humphreys, Heists, and Palzers, all of whom farmed in that area and were personal friends for many years. Now as one drives out the boulevard toward Byberry Township, all that farmland has been converted to manufacturing and rows of houses. Progress has evolved a variety of changes.

In 1946, as a medical student from Jefferson, I spent the summer working at the hospital in “C” building on the male service. The building contained 400 men, the majority diagnosed as schizophrenic or epileptic with psychosis. Treatment modalities were very limited; drugs consisted only of sedatives, tincture of stramonium, or tincture of hyocyanus. Hydrotherapy was available and was in popular use, not only there but also at Friends Hospital and the Pennsylvania Hospital. Insulin shock treatment, invented in 1936 by Dr. Sakel in Hungary for the treatment of schizophrenia, was used in selected patients. Electroshock therapy, invented by Dr. Ugo Cerletti at the University of Rome, was first used in America by Dr. Joseph Hughes at the Pennsylvania Hospital in 1944, and was in use at Byberry shortly afterward. Patients who were considered “treatment failures” at the private mental hospitals were often transferred to Byberry for “further care.”

True, the conditions of housing of patients were deplorable. The hospital was built as an extension of the Philadelphia General Hospital from which the majority of patients were received. Patients were admitted to PGH Psychopathic Department for acute intensive treatment, and if the patients did not respond in a reasonable period of time, they were transferred to Byberry, both children and adults. PGH had a large number of chronic patients, many with neurosyphilis for which there was no specific treatment until penicillin was introduced in the late 1940s. PGH tended to continue the 18th and 19th century circumstances of caring for the medically indigent. Many patients transferred to Byberry fell into this group or had no family who could offer any form of support if the patient improved and could be discharged.

The saddest fact of all was the abuse of the hospital by political and bureaucratic forces; insufficient funds, pressure to keep undesirable employees, violent differences of opinion about the role of the hospital in the care of the mentally ill between the medical staff and the politicians, all of which contributed to some of the intense problems which plagued the hospital throughout its history.

It is difficult to remember now that the nursing staff and the medical staff lived on the grounds in the “Nurses Residence” and the “Physicians Residence,” and that salaries were appallingly low, $2000 per annum. The state had significant difficulty attracting qualified physicians, and during the war the hospital was woefully understaffed.

Two events occurred within a decade that highly influenced the direction of all state hospitals, including Byberry: the introduction of the phenothiazine drugs as a major tranquilizer (known in Europe since the middle of the last century but used exclusively for drenching sheep and goats), and the major development in the Johnson administration toward “equality” as a social factor. Both factors contributed to a major reduction in hospital population. The drugs did so

Dr. Koltes is a Clinical Professor of Psychiatry and Human Behavior at Jefferson Medical College.

Dr. Koltes
by reducing the severity of mental disease, and the social programs, aimed at returning mentally ill patients to the community, also contributed. These two changes, more than any other, ushered in an entirely new perspective of treatment for the mentally ill and rang the death knell to the huge structures that housed so many thousands of patients suffering from various forms of mental derangement.

Where are all the patients now who once clogged the halls of the psychopathic wards of the Philadelphia General Hospital and those who were sent to Byberry for "continued care"? Has mental illness gone away so that these hospitals are no longer needed? The answer is clearly no, it hasn't, neither in this country nor anywhere else in the world according to the literature. Schizophrenia is as common as ever but is treated now in much earlier phases so that its devastating effects do not continue to demolish the sufferer. In addition, local facilities, psychiatric clinics, mental health clinics, private practitioners, and family physicians giving drugs, have greatly reduced the need for custodial care. But neither drug therapy nor changing social attitudes have diminished the frequency of these tragic disorders, and if one visits boarding homes, some nursing homes, "halfway houses," and looks carefully at the "street people," one will see where the patients are now living, those who once would have been shepherded into the state hospital system.

Mental illness has been with us since recorded time, and in my judgment always will be as long as humankind is obliged to resolve its inner conflicts in fantasy. And should the day occur when that no longer will be the case, then humans no longer will be as we have known them through recorded history.

It may be good to close Byberry; it is truly a place of fierce pressures, but its closing is only the end of a sad and tortured life—mental illness in all its fury rages on in different climes, its shrill voice echoing down the halls of time.

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1935

James V. Carr, 1306 Broadway, McKees Rocks, PA, and his wife, Dorothy Mae, marked their golden wedding anniversary on May 28, 1988 with a mass in the same cathedral in Richmond, Virginia, in which they were married in 1938. They, their children and grandchildren then celebrated the occasion at the home of their daughter, Mary Ann Valentour.

1936

J. Edward Berk, 894-C Ronda Sevilla, Laguna Hills, CA, has been selected to receive the Clinical Achievement Award of the American College of Gastroenterology. The purpose of the Award is to recognize a physician’s contributions to clinical gastroenterology in areas such as clinical medicine, technology application, health care delivery, and humanism and ethical concern.

1937

Bernard B. Zamostien, 139 Colwyn Ln., Bala Cynwyd, PA, is the recipient of the Philadelphia County Medical Society's Cristol Award. Established in 1984, the Award is presented to a "physician making a significantly valuable contribution to the Society, furthering and enhancing the educational, scientific and charitable goals, purposes and functions of organized medicine."

1940

Willard E. Knowles, 7200 Pine St., Upper Darby, PA, who retired early in 1988, was praised in a profile in the Catholic Standard & Times in July, 1988, for being one of a "rare but not forgotten breed . . . a family doctor who still makes house calls." In the interview, Dr. Knowles recalls going out to treat a sick boy, and checking the whole family—even the dog, which had a skin tumor. As he put it, "I took care of men, women and children—the skin and its contents."

1943

John J. Hosay, 483 Ridgewood Av., Glen Ridge, NJ, is President of the Medical Staff at St. Francis Hospital in Jersey City. He also has a private practice in urology, in which he is joined by his son, John Jr. He has been at St. Francis since the end of World War II. "I still like it, so I'm still here." Despite more restrictions and regulations, "there also have been great improvements in medicine . . . giving us more ability to help people."

1944

John G. Oliver, 527 Pennsylvania Av., Pen Argyle, PA, has passed the certification examination of the American Medical Society on Alcoholism and Other Drug Dependencies. He is Medical Director of the Slate Belt Medical Center, advising the Center's 26-bed in-patient adult chemical dependency program. In addition, he is a Diplomate of the American Board of Family Practice, and a member and charter Fellow of the American Academy of Family Practice.

1946

Daniel S. Harrop, Jr., P.O. Box 9, West Warwick, RI, has closed his office in the house in which he was born, ending a 42-year career. He would like to practice part-time, but insurance costs will probably prevent it. However, he says, "We'll see what happens." Besides his private practice, Dr. Harrop was State Medical Examiner in Kent County for ten years, and has been examining athletic teams at the Community College of Rhode Island. He is also Past President of the Kent County Medical Society, and Past President of the Rhode Island Family Practice Society.

1948

Stanley E. Zeeman, 2947 Chew St., Allentown, PA, received the Pool Prize in 1988. The Prize is awarded annually by the Dorothy Rider Pool Health Care Trust. Dr. Zeeman has been Chief of Cardiology and President of the Medical Staff at Lehigh Valley Hospital Center; he received the Prize for "outstanding contributions to the provision of superior health care for the citizens of the region."

1950

James R. Hodge, 295 Pembroke Rd., Akron, OH, became the 65th President
of the Central Neuropsychiatric Association in October 1988. Dr. Hodge, a former Chairman of the Department of Psychiatry at the Northeastern Ohio Universities College of Medicine and a Past President of the Ohio Psychiatric Association, is presently affiliated with Saint Thomas Medical Center.

Bernard V. Hyland, 1003 Greenbriar Dr., Clarks Summit, PA, in September 1988 was honored by the University of Scranton for his support of the University's "Second Cornerstone" capital campaign. On September 24, the Kathryn and Bernard Hyland Hall was dedicated, named for his parents.

Ralph D. Moyer, Jr., 300 Depot Rd., Harwich, MA, joined the staff of Medcenter Five in July 1988. Previously, he had practiced at the Groton Community Health Care Center in Groton, New York.

Charles G. Silberman, 71 W. Parish Rd., Westport, CT, has opened offices for the practice of psychiatry in Norwich and Gales Ferry. He is an Assistant Clinical Professor of Psychiatry at Yale, and recently joined the psychiatric staff of the William W. Backus Hospital in Norwich.

Aris M. Sophocles, 4469 S. Broad St., Yardville, NJ, was inducted into the Golden Hall of Fame of the American Hellenic Educational Progressive Association, Trenton Chapter No. 72.

1952

Frank S. Bakewell, Jr., 430 E. Wheeling St., Washington, PA, has joined the staff of Canonsburg General Hospital. Dr. Bakewell is a board certified general surgeon.

Paul L. Hermann, 4th and Chew Sts., Allentown, PA, was named Physician of the Year by Sacred Heart Hospital in Lehighton. He was honored for his outstanding dedication to the practice of medicine, education and patient care. Dr. Hermann is Director of the Family Practice Residency Program at the hospital, and an Assistant Clinical Professor in Family and Community Medicine at Temple University. He also was an Associate Clinical Professor of Family Practice at the University of Pennsylvania Medical School until 1985.

Howard Fugate, Jr., 633 Maple Av., DuBois, PA, spoke before the Elk County Diabetes Organization in October 1988. The subject of his talk was "What's New for Diabetics."

1953

Richard W. Hill, 6701 Scottsdale Rd., Scottsdale, AZ, was chosen to head the Mayo Clinic Scottsdale, a state-of-the-art outpatient center that opened on June 29, 1987. This is the world-renowned center's second satellite clinic; the first opened in Florida in October, 1986. Dr. Hill stated that the Scottsdale clinic has two goals: "to build a clinic much like what we have in Rochester, and ... to become a medical referral institution for the Southwest." According to Dr. Hill, the satellite clinics are a response to population growth in the Sunbelt and the popularity of prepaid insurance plans that restrict access to health care facilities.

1954

Jerome Dersh, R.D.1, Box 1488, Mohn­ton, PA, is Chairman of the Albright College Fine Arts Commission, and helped found the Freedman Art Gallery—this in addition to being President of Eye Physicians Associates in Reading, and Chief of Ophthalmology at St. Joseph Hospital. He is also Past President of the Pennsylvania Academy of Ophthalmology and Otalaryngology, and for ten years edited its journal, Transactions.

Eugene G. Stee, R.D. 2, Dalton, PA, was elected President of the Mercy Hospital Medical Staff. He had previously served as Vice President.

1955

Herbert E. Cohn, 111 S. 11th St., Suite 8229, Philadelphia, PA, was honored by the Physicians and Surgeons Division of the Jewish National Fund. He is Program Director of the Graduate Training Program at Jefferson, as well as Vice Chairman of the Department of Surgery. Dr. Cohn is also active in the medical field in Israel, being one of the organizers and a Past President of the American Division of the World Fellowship of the Israeli Medical Association. He has also served on the Executive Committee of the College of Continuing Education of the Israel Medical Center, and currently raises funds for the Children's Medical Center of Israel.

J. Hubert Conner, 420 Fox Chase Ln., Media, PA, has been appointed Director of Utilization Management and Quality Assessment at Brandywine Hospital and Trauma Center.

John A. Shoener, R.D. 3, Box 175, Camp Meeting Rd., Sewickley, PA, has been appointed a Trustee of the Sewickley Valley Hospital. Dr. Shoener is on the hospital's medical staff.

1956

Nelson M. Chitterling, Box 59, Wilmot Flat, NH, has been appointed an interim selectman for the Town of Wilmot.

1957

John C. Flanagan, R.D. 1, 17 Lake Vista Dr., Cape May Court House, NJ, has joined the staff of the Burdette Tomlin Memorial Hospital, specializing in substance abuse treatment, detoxification and rehabilitation. Prior to that, he had served as Medical Director of the Prescott Samaritan Village in Prescott, Arizona, and was Chief of Medical Service at the Veterans' Administration Medical Center there.

Howard S. Richter, 26 Suzanne Rd., Lexington, MA, has opened a practice in West Medford. Dr. Richter is board certified in internal medicine and primary care, a Fellow of the American College of Physicians and a member of the American Academy of Medical Directors.

1959

Sandy A. Furey, 748 Quincy Av., Scranton, PA, has been reappointed Director of Medicine at Moses Taylor Hospital. He also serves as Director of the Cardiac Treatment Center, which he established at the Hospital in 1974.

1960

Bruce B. Montgomery, 1200 Ridge­wood Rd., Bryn Mawr, PA, has been elected Director of the Department of Obstetrics and Gynecology at Bryn Mawr Hospital.

1962

Lawrence A. Altaker, S12 Conod­quinet Dr., Camp Hill, PA, has been named Director of Psychiatry for Polyclinic Medical Center. He is President of the Central Pennsylvania Psychiatric Medical Society and Secretary of the Pennsylvania Psychiatric Society.

G. Stephens Nicoll, 26 E. Riding Dr., Cherry Hill, NJ, was voted Teacher of the Year by surgery residents from Graduate Hospital in Philadelphia who
rotate through Underwood-Memorial Hospital in Woodbury, NJ. Dr. Nicoll is Chairman of the Department of Surgery at Underwood-Memorial and President-elect of the Gloucester County Medical Society.

Mark Pliskin, 239 E. Brown St., East Stroudsburg, PA, co-authored an article on “Atypical Downhill Skiing Injuries” which appeared in the April 1988 issue of the Journal of Trauma. Dr. Pliskin has been a member of the staff of the Pocono Medical Center since 1972, and is in practice with Pocono Radiology Associates.

Michael J. Prendergast, Apple Hill Medical Center, 25 Monument Rd., York, PA, has been elected President of the York Hospital Medical Staff.

William E. Staas, 323 Mimosa Dr., Cherry Hill, NJ, received the 1988 Alumni Award from the Philadelphia College of Pharmacy and Science for his “contributions to the health and welfare of the community.” He is Professor of Rehabilitation Medicine at Jefferson, a consultant at Methodist Hospital, and President of Magee Rehabilitation Hospital.

Peter L. Zemo III, 924 E. Colonial Av., York, PA, attended a two-day seminar on the diagnosis and management of balance disorders sponsored by Brain-tree Hospital in Boston. He is a member of the Division of Otolaryngology at York Hospital.

1965

James F. Lally, 32 Todmorden Dr., Wallingford, PA, has been appointed a Clinical Assistant Professor of Radiology at Jefferson Medical College.

Lottie A. Varano, P.O. Box 396, Hilltop, Hershey, PA, has been appointed to the medical staff of Lancaster General Hospital, as a radiologist.

1966

Charles T. Curtin, Box 372, RD 1, Dalton, PA, has been elected Treasurer of the Moses Taylor Hospital. He also serves as Pathologist and Director of the Hospital’s Laboratory.

Francis J. Viozzi, 4430 Cross Country Dr., Ellicott City, MD, has become Senior Vice President/Medical Director at St. Agnes Hospital, with responsibility for medical and patient care affairs. Dr. Viozzi also coordinates medical education programs in medicine, obstetrics and gynecology, pediatrics and surgery.

1967

Ralph R. Dobelbower, Jr., Dept. of Radiation Therapy, Medical College of Ohio, Toledo, OH, was named a Fellow of the American College of Radiology during the College’s 1988 annual meeting.

1969

William G. Chodoff, 1801 JFK Boulevard, Apt. 2113, Philadelphia, PA, has been appointed an Instructor in Pediatrics at Jefferson Medical College.

1970

John M. Shovlin, 55 Laurel St., Carbondale, PA, has become a Trustee of St. Joseph’s Hospital. Dr. Shovlin is on the active medical staff of the Hospital, and also serves as the Medical Director of the Northeast Tri-County MH/MR.

Neil O. Thompson, Christian Hospital, Manoram, Chainat, Thailand, describes life at the Hospital in Central Thailand: “... it kind of depends on whether you’re describing the tail, trunk, tusks or legs of the pygmy elephant.” One time, peaceful countryside; another, after a bus accident nearby, “intense activity: triage, pain medications... transfusions...” For local staff, “lifeblood, employment, economic security...” He closes with a request to keep in touch.

1971

Lawrence J. Chase, 1881 So. Delsea Dr., Suite #2, Vineland, NJ, has moved from Bryan, Texas to open a private practice here in plastic and reconstructive surgery. He has been appointed to the medical staff at Newcomb Medical Center. His wife, Elizabeth, will be joining him in his Vineland office; she is a certified medical assistant and certified surgical technician.

David H. Hennessey, 621 Grove St., Sewickley, PA, is practicing pediatric and adolescent medicine at the newly opened Marshall Township Family Health Center.

James P. Noone, Medical Arts Center, Towanda, PA, has been appointed President of the Medical Staff of Memorial Hospital for 1988-89. He is also a member of the Hospital’s Board of Trustees.

Gregory J. Salko, 37 Honesdale Rd., Carbondale, PA, and the Whites Crossing Medical Center which he founded in 1974 have become affiliated with the Guthrie Clinic. The Clinic is a multispecialty group practice of 180 physicians covering 40 specialties and subspecialties. Its central office is in Sayre, and it operates offices in several north central Pennsylvania and New York State communities. Dr. Salko is board certified in family practice and is awaiting notice of certification in geriatrics.

1972

Steven A. Ager, 111 N. 49th St., Philadelphia, PA, was inducted into the Camden County Medical Society. He is an attending psychiatrist at The Institute of Pennsylvania Hospital, and has a private practice in Cherry Hill.

Stephen H. Smith, 24-26 S. Fourteenth St., Quakertown, PA, has been named to the medical staff of Grand View Hospital.

Gerald C. Zabiecki, 11702 N. 91 Way, Scottsdale, AZ, has changed his practice from family medicine to obstetrics and his office from Colorado to Arizona.

1973

Mark S. Reuben, Box 392, RD2, Birdsboro, PA, is a partner in Reading Pedi atrics Inc., located in Douglassville. The partnership treats children from birth through young adulthood and
covers emotional as well as physical aspects; its aim is to have each child reach his or her maximum potential.

**John M. Sundheim**, 795 Foothill Ct., Toms River, NJ, has received board certification in geriatric medicine. He is a member of the medical staff at Community Memorial Hospital.

**1974**

**John H. Brown**, 53 N. Main St., Greensville, PA, has joined a practice in plastic and reconstructive surgery. Most recently, he was Assistant Chief of Plastic Surgery at the Landstuhl Army Regional Medical Center in West Germany. At the same time, he was an Assistant Professor of Surgery at the Uniformed Services University of Health Sciences, and Chief of the Maxillofacial Stabilization Team.

**Lee E. Denlinger**, 418 N. Washington St., Titusville, PA, is now a Diplomate in geriatric medicine, having successfully completed a first-of-its-kind examination administered jointly by the American Board of Internal Medicine and the American Board of Family Practice.

**Raymond J. Hauser**, Box 81, Bowers, PA, has received certification in geriatric medicine, after successfully completing an examination jointly administered by the American Board of Family Practice and the American Board of Internal Medicine. Dr. Hauser is Co-Director of Medicine at the Lutheran Home in Tipton.

**James A. Kenning**, 445 Hughes Rd., Gulph Mills, PA, is now on the staff of the Bryn Mawr Hospital as an assistant attending neurosurgeon. He is also Clinical Associate Professor of Neurosurgery at Temple University School of Medicine, and is a member of the staffs of Temple University and Paoli Memorial Hospitals, and St. Christopher’s Hospital for Children.

**Joseph A. Kuchler**, 2 Tanbark Ct., Voorhees, NJ, has been appointed to the Associate Staff, Department of Surgery/General Surgery at West Jersey Hospital.

**1976**

**Frederic B. Kremer**, 516 Conshohocken State Rd., Bala Cynwyd, PA, became an ardent proponent of radial keratotomy when he went to the Soviet Union in 1979 to study and evaluate the procedure. He felt then that the safety and accuracy of the operation could be improved, but could not find the technical tools to do it. So he invented them. Now there are ten tools which Dr. Kremer (who also holds a degree in electrical engineering from Drexel University) has developed which ophthalmologists all over the world use to perform radial keratotomy.

**1977**

**Bruce R. Bender**, 3179 Meadowridge Ct., Gibsonia, PA, after three years with the Public Health Service in McKees Rocks, has joined the medical staff of Ohio Valley General Hospital, specializing in rheumatology.

**Joseph A. Gerard**, 201 Arcadia Ct., 9380 McKnight Rd., Pittsburgh, PA, has been elected a Fellow in the American College of Cardiology.

**Kevin G. Robinson**, 27 Latham Pk., Melrose Park, PA, is now board certified in cardiovascular disease. He has also achieved certification in internal medicine.

**S. David Scott, Jr.**, 2 Chesney Ln., Erdenheim, PA, has been named to the Pulmonary Diseases Section of the Department of Medicine at Germantown Hospital.

**1978**

**Gary H. Cassel**, 8415 Bellona Ln., Suite 104, Baltimore, MD, was married to Lois J. Ratner, M.D. on June 5, 1988. They are in practice together in Towson.

**William G. Elien**, 31 Fox Run Drive, Mt. Laurel, NJ, has joined the staff of Hampton Hospital in Westhampton, NJ as Associate Director of the Adult Psychiatric Unit. He will oversee one of two teams that treat adult patients at the facility. He says he was attracted to Hampton because the Hospital uses only staff physicians; this “group medical practice” allows doctors more frequent opportunities to work together and to become familiar with the work each does.

**Marc J. Finder**, 2178 Woodcrest Dr., Johnstown, PA, has been appointed Emergency Room Director at the Memorial Hospital of Bedford County. Prior to this appointment, Dr. Finder served at Windber Hospital, assisting the Hospital in obtaining its certification as a Medical Command Center. He is also an instructor in advanced cardiac life support.

**David S. Ginsburg**, 201 Sycamore Ln., Wallingford, PA, is a member, with **Gill Alderfer** of Suburban Obstetrics & Gynecology, Ltd., a three-location professional association in Delaware County. He is also a Clinical Assistant Professor at Hahnemann Medical College.

**Joseph M. Kmonicek**, 2494 Edgefield Rd., Florence, SC, is one of several physicians who recently joined the medical staff at the McLeod Regional Medical Center. Dr. Kmonicek specializes in Internal Medicine and Cardiology.

**Nat E. Levinson**, 746 Jefferson Av., Scranton, PA, was recently awarded board certification in critical care medicine, after passing the first examination of its kind given in the United States. He had previously received certification in internal medicine and pulmonary diseases.

**Richard A. Martin**, 609 Carnation Dr., Clarks Summit, PA, is Medical Director of the Geisinger Medical Center-Lake Scranton.

**Jean G. Riley**, Lancaster General Hospital, P.O. Box 3555, Lancaster, PA, has joined the Neonatology Unit at the Hospital.

**Michael P. Russo**, 321 Blue Ridge Dr., York, PA, has joined the medical staff at Memorial Hospital. He is also in a group practice of obstetrics and gynecology in York.

**Christopher H. Wendel**, Omega Professional Center, Bldg. G, Suite 38, Omega Dr., Newark, DE, was married to Claudia Jean Heisler on August 5, 1988.

**1979**

**G. Alan Bridenbaugh**, 22 S. Meadow Lark Ln., Lock Haven, PA, has joined Hanover Cardiology Associates in Hanover.

**Philip Dzwonczyk**, 690 W. German St., Herkimer, NY, is a member of the first group of physicians in the United States to be certified in geriatric medicine, following an examination conducted jointly by the American Board of Internal Medicine and the American Board of Family Practice.

**Douglas R. Hough**, 47 Musket Dr., Morrisville, PA, has joined Princeton Rheumatology Associates in Concordia.
Brian E. O'Byrne, 563 Flock Rd., Trenton, NJ, was appointed to the Section of General Surgery, Department of Surgery at St. Francis Medical Center.

James W. Vick, 300 Centre St., Haddonfield, NJ, is another in the first group of physicians to receive a Certificate of Added Qualifications in Geriatric Medicine, in 1988. The examination was administered jointly by the American Board of Internal Medicine and the American Board of Family Practice.

Dennis R. Wittner, 1716 Hancock St., Wilmington, DE, became a Fellow of the American College of Surgeons in October 1987.

Raymond M. Ishman, 40 Green Ct., Denver, PA, has joined the Department of Emergency Medicine at the Ephrata Community Hospital.

Andrea G. Jordan, 1623 S. 2nd St., Philadelphia, PA, has been appointed Assistant Professor of Pathology and Cell Biology at Jefferson Medical College.

Frances P. Mohan, 241 S. Tulpehocken St., Pine Grove, PA, has opened a practice in general family medicine in Pine Grove.

Deborah A. Schaudt, 748 Quincy Av., Scranton, PA, has joined a group practice in internal medicine in Scranton and Archbald.

Dr. Hessen is Assistant Professor of Medicine at the College.

Stephen F. Ponchak, Jr., 7316 Pershing Av., 1 West, University City, MD, has joined the Obstetrics and Gynecology Service of Salem Hospital.

James R. Powell, 105 Brunner Dr., Pittsburgh, PA, recently completed a residency in internal medicine at Western Pennsylvania Hospital where he currently is a Fellow in pulmonary diseases. On April 20, 1988, his wife, Debra, gave birth to their first child, Emily Ann.

John E. Songer, 6300 Spring Creek Dr., Guntersville, AL, has opened a practice specializing in orthopaedic surgery and sports medicine.

Mark W. Stull, 472 Wetherburn Dr., Lancaster, PA, has joined Anesthesia Associates at Lancaster General Hospital.

Thomas J. Turissini, 108 Clarkson Av., Jessup, PA, has joined the Cardiology Associates group practice in Plains.

1980

Martin J. Carney, Plastic Surgery Center, 1037 First Colonial Rd., Virginia Beach, VA, was married to Nadia Suzanne Masri on April 23, 1988.

Ronald N. Eister, 1001 First Av., Williamsport, PA, received a special Bachelor of Liberal Studies degree from Randolph-Macon College, which he left in 1974 to attend Jefferson.

Barnard C. Proy, Jr., 19095 Hillcrest Dr., Corry, PA, has been named Chief of the Medical Staff of Corry Memorial Hospital.

Richard R. Sandrowicz, R.D. 1, Box 774, Patton, PA, has joined the medical staff of Miners Hospital of Northern Cambria.

Arthur H. Shedden, 6807 S. Lewis 13, Tulsa, OK, was named Associate Director of Clinical Research at Merck Sharp & Dohme Research Laboratories in October, 1988. He will be particularly involved in ophthalmology projects for the Laboratories.

Richard M. Yelovich, 603 Milleson Ln., West Chester, PA, has become a member of the medical staff of Brandywine Hospital and Trauma Center, Department of Medicine, Radiation Oncology Service.

Sophia C. Young, 4310 Walnut St., Philadelphia, PA, has been appointed to the staff of the Department of Radiology at St. Francis Medical Center.

1982

VICTOR F. ALTADONNA, Lancaster Urological Group, 822 Marietta Av., Lancaster, PA, has been named to the staff of Lancaster General Hospital.

Charles M. Amadee, 373 Bohama Loop, Fayetteville, NC, was awarded the Army Achievement Medal at Fort Bragg. The medal is given for meritorious service, acts of courage or other accomplishments.

Anthony Billas, Jr., R.D. 6, Box 383, Danville, PA, has been appointed Instructor in Family Medicine at Jefferson Medical College.

Margaret T. Hessen, 1856 Windsor Park Ln., Havertown, PA, was awarded the Mary DeWitt Pettit Fellowship given by the Special Trust Fund of the Medical College of Pennsylvania Alumnae/i Association.

1981

Ina M. Gilmore, P.O. Box 423, Muncy, PA, has been certified as a Diplomate of the American Board of Internal Medicine. She is on the medical staff of Muncy Valley Hospital.

David N. Gingrich, 1165 Ortronna Rd., Ortronna, PA, has been appointed to the staff of Gettysburg Hospital, with privileges in the Department of Emergency Services.

Stuart L. Gordon, 619 College Av., Haverford, PA, has opened an office in the Springfield Medical Imaging Center.

Ina M. Gilmore, P.O. Box 423, Muncy, PA, has been certified as a Diplomate of the American Board of Internal Medicine. She is on the medical staff of Muncy Valley Hospital.

David N. Gingrich, 1165 Ortronna Rd., Ortronna, PA, has been appointed to the staff of Gettysburg Hospital, with privileges in the Department of Emergency Services.

Stuart L. Gordon, 619 College Av., Haverford, PA, has opened an office in the Springfield Medical Imaging Center.
member of the medical staff of Doylestown Hospital.

**Kenneth Hill**, 47 Daniels Rd., Saratoga Springs, NY, has opened a family practice office in that town.

**Susan J. Kucirka**, 940 N. New St., Bethlehem, PA, joined St. Luke’s Hospital’s Department of Medicine, Division of Dermatology in September 1987. In addition, she has become a member of a dermatology group practice in Bethlehem.


**Stephen E. Pascucci**, 600 Carnation Dr., Clarks Summit, PA, has joined the staff of the Northeastern Eye Institute, practicing ophthalmology with a subspecialization in cornea and external eye diseases. While completing a fellowship at Georgetown, Dr. Pascucci served as attending physician for the ocular trauma team of the National Eye Trauma System, and also as consultant for cataract surgery to the Institute of Health Policy Analysis. In addition, Dr. Pascucci authored a subsection on corneal diseases for the *Encyclopedia of Birth Defects.*

**Joel F. Rach**, 717 Maple Dr., Mononga­hela, PA, was named to the medical staffs of Brownsville General Hospital and Monongahela Valley Hospital, specializing in urology.

**Irene Phillips Raisis**, 1003 Ashbrook Ct., Voorhees, NJ, has been appointed Instructor in Radiology at Jefferson Medical College.

**John J. Ruffini**, 23 Chester Pk., Ridley Park, PA, is now a member of the Department of Surgery, Section of Ophthalmology at Taylor Hospital. His appointment there gives the Hospital for the first time the capacity for corneal transplant surgery.

**Susan L. Rogers**, 39 West Side Dr., Rehoboth Beach, DE, opened a family medical practice in Lewes on May 2, 1988. Bayside Health Associates is operated as a multi-specialty facility. Dr. Rogers is an instructor in the Advanced Cardiac Life Support program through the Beebe Medical Center, and is an advisor in Trauma Life Support. She is also a medical consultant for Planned Parenthood of Sussex County and a medical examiner for the state of Delaware.

**Thomas J. Spinuzza**, R.D. 1, Box 467-B, McClellandtown, PA, was married to Susan J. McCall on April 16, 1988.

**Robert J. Talano**, 701 4th Av., New Kensington, PA, has joined the Trappe Family Practice in Pottstown. He had been a family practitioner at General Medical Care in Vandergrift.

1984

**Robert E. Briggs**, P.O. Box 959, Wagner, SD, joined the staff of Wagner Public Health Service Hospital in August 1987, in the field of family practice. His wife, Peggy Kay, is a registered nurse at Wagner Community Hospital.

**Peter A. DeMaria, Jr.**, 2705 Hopkinson House, Washington Square South, Philadelphia, PA, has been named Medical Director of the Narcotic Addict Rehabilitation Program of Thomas Jefferson University and Instructor in Psychiatry and Human Behavior at Jefferson Medical College.


**Ernest F. Gillan**, 13 Beverly Av., Malvern, PA, is a member of the medical staff of Paoli Memorial Hospital, Department of Family Practice. He is also Medical Director of Main Line Nursing and Rehabilitation Center.

**Kathleen M. Guarneri**, 1 Independence Pl., #2309, 6th and Locust Sts., Philadelphia, PA, has been appointed Instructor in Anesthesiology at Jefferson Medical College.

**Cheryl A. Hlavac**, 1 Thorndale Place, Thorndale, PA, has joined the Department of Family Practice of the Brandywine Hospital and Trauma Center.

**Sarah Hultsch-Smith**, 8100 Ashford Ct., Frederick, MD, opened an office in Frederick in August 1988. Her practice includes general adult medicine, routine office gynecology and health screening. She is a Diplomate of the American Board of Internal Medicine.

**Michael J. McGee**, 206 Hillcrest Rd., New Holland, PA, has been appointed to the active medical staff at Ephrata Community Hospital. He is also in practice with the New Holland Family Health Center.

**Randolph J. Miller** and **Carrie A. Hufnal-Miller**, 1016 Spruce St., Philadel-phia, PA, both recently became board certified in pediatrics. Dr. Miller is in practice with Yardley Pediatrics, and on the staffs of St. Mary Hospital in Langhorne and Mercy Medical Center in Trenton. Dr. Hufnal-Miller is a second-year Fellow in neonatology at Children’s Hospital of Pennsylvania.

**Gail A. Reedman**, 115 Federal Ct., Apt. 4, Princeton, NJ, has opened her practice, Newtown Family Medicine, in Newtown.

**Michael S. Rosenblatt**, 60 Bishops Forest Dr., Waltham, MA, became engaged to Patricia L. Roberts, M.D. in January, 1988.


1985

**Robert A. Ball**, 705 Pine St., Philadelphia, PA, has become engaged to **Rebecca A. Zuurbier ’86.**

**Paula R. Bennett**, 635 Park St., Hones­dale, PA, in February, 1988 returned to her hometown of Honesdale to do a rural rotation with Highland Physicians, Ltd. She liked it so much that in July she rejoined the group to start her practice. Eventually, she plans to have a complete family practice, including pediatrics and obstetrics.

**Daniel M. Bubenheim**, Medical Office Bldg., Ste. 101, Ohio Valley General Hospital, McKees Rocks, PA, has opened his family practice in the town in which he grew up—a dream he has had since his youth.

**Carol M. Elkins**, 325F Market St., Clearfield, PA, has opened a family practice with **Katherine K. Welty ’85** in Curwensville. Both physicians are on the medical staff of Clearfield Hospital.

**Linda S. Frantz**, Tall Trees Garden Apts. #504, Scranton, PA, has joined a group practice specializing in internal medicine which has offices at Mercy Hospital.

**Robert M. Greco**, 2 Pear St., Schuylkill Haven, PA, has joined a practice in Pottsville, with a specialty in internal medicine.

**Gayle A. Hopper**, 5474 Delphinium Ct., Columbia, MD, and her husband, Steve Weisberg, “are excited to share the news of the birth of their daughter, Sara, on November 15, 1988. Gayle fin-
ished her chief residency in family practice at the University of Maryland in July 1988, and is working as Assistant Director of Student and Employee Health and Assistant Professor in the University of Maryland Department of Family Medicine. The proud papa is Departmental Manager at Versar, Inc., an environmental consulting firm."

Scott Kruger, 5150 Diamond Heights Blvd., B-104, San Francisco, CA, is serving with the Army at Letterman Medical Center, Presidio of San Francisco.

Mark R. Lentz, 5120 Ferguson Rd., Indiana, PA, has joined the medical staff at Indiana Hospital, specializing in internal medicine.

Harvey L. Madonick, Berkshire Medical Center, Dept. of Medicine, Pittsfield, MA, has become a member of the Center’s staff, in the Emergency Department.

Robert J. Motley, 1303 Clymer Rd., Hatfield, PA, has joined the medical staff of North Penn Hospital, specializing in family medicine. He is also affiliated with the Lansdale Medical Group.

Kathryn A. Reihard, 1741 Edgewood Hill Cir., Apt. 201, Hagerstown, MD, has completed her residency in emergency medicine at Charlotte Memorial Hospital and Medical Center, and has accepted a position as Assistant Medical Director of the Emergency Department at Washington County Hospital in Hagerstown.

Michael S. Rosner, 730 Yours Way, Westminster, MD, has joined the medical staff at Carroll County General Hospital, specializing in pediatrics.

Thomas C. Smith, Geisinger Medical Center, North Academy Av., Danville, PA, has joined the active medical staff of J.C. Blair Memorial Hospital, in internal medicine. He also has opened a private practice in internal medicine in Huntington.

Gregg A. Sonsini, 4000 Gypsy Ln., Apt. #309, Philadelphia, PA, has completed his residency in pediatrics and will be opening a practice in Plymouth Meeting.

Katherine K. Welty, 502 Park St., Clearfield, PA, has opened a family practice with Carol M. Elkins ’85 in Curwensville. Both doctors have also been appointed to the medical staff of Clearfield Hospital.

1986

Dennis A. DeBias, 301 Albina Way, Latrobe, PA, became Chief Resident at Latrobe Area Hospital in August, 1988.

Winslow W. Murdoch, 1110 Ivymont Rd., Rosemont, PA, has been appointed Chief Resident of the Montgomery Hospital Family Practice Residency Program.


Rebecca A. Zuurbier, 3810 Benton St. N.W., Washington, DC, has become engaged to Robert A. Ball ’85.

1987

David J. Bozentka, West Virginia University Hospital, Medical Center Dr., Box 6401, Morgantown, WV, was married to Michele Roe Steimach on May 21, 1988.

Gregory L. Lavanier, Reading Hospital and Medical Center, Sixth Av. and Spruce St., Reading, PA, was married to Erin Ann Kearney on October 1, 1988.

Mark E. Liebreich, West Jersey Health System, Evesham Av., Voorhees, NJ, and Connie Marie Keeler were married November 13, 1988.

Michael R. Zaragoza, Eastern Virginia Graduate School of Medicine, 700 Olney Rd., P.O. Box 1980, Norfolk, VA, has become engaged to Sandra M. Howal.

Obituaries

Russell S. McGinnis, 1921
Died June 4, 1988 at the age of 92. Dr. McGinnis had been Chief of Surgery at St. Luke’s Hospital in Cleveland, OH from 1930 until his retirement in 1970. Earlier he had served as a member of the Pathology Department of St. Vine-
cent’s Charity Hospital and Health Center. An avid golfer, Dr. McGinnis was a member of the Canterbury Golf Club in Cleveland, and a charter member of the Jupiter Hills Golf Club in Tequesta, FL, where he played until 1986. He is survived by his wife, Irene, a daughter and a son.

Archibald Morrison, 1925
Died November 21, 1988 at the age of 90. Dr. Morrison had been a family practitioner in Wayne, PA from 1925 until his retirement in 1975. A member of the staff of Bryn Mawr Hospital, he served for 27 years as President of the Radnor Township Board of Health, retiring from that position in 1973. After serving 50 years in the Wayne Lions Club, Dr. Morrison was honored with Life Membership in Lions International. He was also well known as a musician, and will be remembered as a pianist with his own orchestra while at Jefferson. Dr. Morrison is survived by a daughter and two sons.

Meade D. Schaffner, 1925
Died September 21, 1988 at the age of 93. Dr. Schaffner had been a family practitioner in the Lancaster, PA area for more than 50 years. A member of the staff of Lancaster General Hospital, he was active in numerous professional and civic organizations including the Pennsylvania Medical Society, and the Lancaster County and Medical Society, which honored him in 1975 for years of service. A Mason, he was honored as a 50-year member in 1970. Dr. Schaffner is survived by two daughters and a son.

Charles C. Hubbard, 1930
Died in September, 1987. Dr. Hubbard had been a general surgeon before moving to Highland Beach, FL several years ago. He is survived by his wife, Mary.

Nelson C. Woehrle, 1930
Died September 14, 1988. Dr. Woehrle had been a general practitioner in Plains, PA for more than 50 years, following a long family tradition of medical service to the Wyoming Valley. A member of the staff of General Hospital, he also served as physician to several schools in the district. He was a member of the Pennsylvania Medical Society and the Luzerne County Medical Society. Dr. Woehrle is survived by his wife, Ruth, and four sons.
Thomas K. Rathmell, 1931
Died September 2, 1988 at the age of 84. Dr. Rathmell had been Director of Pathology at Mercer Medical Center in Trenton, and was a retired consultant for Upjohn Pharmaceuticals in King of Prussia. He had also served as an Assistant Professor at Hahnemann Medical College, now Hahnemann University. A Fellow of the American Society of Clinical Pathologists, Dr. Rathmell was a member of the College of American Pathologists and the International Academy of Pathologists. He was also active in the New Jersey Medical Society and the Mercer County Medical Society. Dr. Rathmell is survived by his wife, Eleanor, two daughters and a son.

Edward Schwartz, 1934
Died October 31, 1988 at the age of 79. Dr. Schwartz had been an ophthalmologist in Chester, PA for 43 years until his retirement in 1978. He was a member of Phi Beta Kappa and a Mason. Dr. Schwartz was also an enthusiastic tennis player who participated actively in the sport until shortly before his retirement. He is survived by his wife, Sylvia, a daughter, and a son, Louis W. Schwartz, Jr., '67.

Bernard B. Rotko, 1935
Died January 10, 1989 at the age of 80. Dr. Rotko had been an internist in private practice for many years in the Philadelphia area before founding and building Rolling Hill Hospital in 1953, and shortly thereafter, Warminster General Hospital. These two hospitals, along with two others in the area, formed the nucleus of R. H. Medical Services, Inc., of which Dr. Rotko was Director and Board Chairman and served as President until 1977. The hospitals were sold in 1980, and Dr. Rotko became Board Chairman of Mediq, Inc., a successor company that concentrated on medical support businesses which had been subsidiaries of the earlier corporation. He served as Board Chairman of Mediq, Inc. until 1988, and continued as a Board Member until his death. Dr. Rotko is survived by his wife, Bessie, a daughter and a son.

Nicholas L. Chasler, 1937
Died June 22, 1988 at the age of 75. Dr. Chasler had been a pediatrician in Brownsville, PA and a member of the staff of McKeesport Hospital, and Children's Hospital in Pittsburgh.

Alfred F. Domaleski, 1937
Died November 8, 1988. A specialist in colon and rectal surgery, Dr. Domaleski practiced in Potter County, PA from 1940 until 1988. Active in numerous professional organizations, he was a Fellow of the American College of Surgeons and a Fellow of the American Society of Colon and Rectal Surgeons. An enthusiastic pilot, he was a member of the Flying Physicians Association. Dr. Domaleski is survived by his wife, Mary, and one son.

Anthony A. Tannais, 1943
Died August 5, 1988 at the age of 71. Dr. Tannais had been a family practitioner in the Hanover, PA area, and a member of the staff of Hanover General Hospital. He is survived by his wife, Helen, four daughters, a brother, Leonard J. Tannais, '54, and a nephew, Leonard J. Tannais, Jr., '89.

Wayne E. Turner, 1931
Died December 9, 1988 at the age of 82. Dr. Turner, an otorhinolaryngologist, had practiced in Berwick, PA from 1947 until his retirement in 1972. Earlier he had practiced in Weatherly and in Hazleton. A Past President and former Trustee of the Berwick Hospital Corporation, Dr. Turner was active in many professional and civic organizations, including the Columbia County Medical Society, the Pennsylvania Medical Society, and the Weatherly Rotary Club. He is survived by his wife, Eleanor, two daughters and a son.

Robert M. Dacus, Jr., 1933
Died October 8, 1988. Dr. Dacus had been an obstetrician and gynecologist in Greenville, SC. He is survived by his wife, Bina.

Joseph A. Hesch, 1934
Died January 15, 1989 at the age of 80. Dr. Hesch was the first Medical Director of Mercy Catholic Medical Center, a position he assumed after having served as Director of Pediatrics at Misericordia and Fitzgerald Mercy Hospitals, and as Director of Medical Education at Misericordia. He retired from his position at Mercy Catholic Medical Center in 1973 and moved with his wife to Avalon, NJ, where he held a position with the Children's Seashore House, a home for disabled children in Atlantic City. He was a Diplomate of the American Board of Pediatrics and a Fellow of the American Academy of Pediatrics. Dr. Hesch is survived by two daughters.

Harry E. Fidler, 1946
Died April 27, 1988 at the age of 68. A Diplomate in otolaryngology, Dr. Fidler had been affiliated with St. Peter's Medical Center in New Brunswick, NJ, and was member of the New Jersey Medical Society. After retiring from practice he divided his time between Delray, FL and Hawley, in the Poconos.

Leonard F. Bender, 1948
Died November 21, 1988 at the age of 63. Dr. Bender had been Chairman of the Department of Physical Medicine and Rehabilitation at Wayne State University. Earlier he had served as Professor of Physical Medicine and Rehabilitation Medicine at the University of Michigan. He was a Past President of the American Academy of Physical Medicine and Rehabilitation, and Past President of the American Academy for Cerebral Palsy and Developmental Medicine. A member of numerous professional societies and community service organizations, Dr. Bender had also served as Associate Editor for the Newsletter of the American Academy for Cerebral Palsy. He is survived by his wife, Nancy, two daughters and two sons.

Randall S. Naden, Jr., 1953
Died October 9, 1988 at the age of 60. Dr. Naden had been a Clinical Assistant Professor of Medicine at Jefferson. He is survived by his wife, Audrey, and three daughters.

Carl F. Baisden, 1954
Died August 16, 1988 at the age of 62. Dr. Baisden had been a pathologist in the Philadelphia area for 30 years, and was a member of the staff of German-town Hospital.

Robert G. Perrine, 1966
Died October 3, 1986. Dr. Perrine had been a specialist in Emergency Medicine in Los Angeles, CA.

Patricia F. Tenn, 1977
Died October 1, 1987 at the age of 40. Dr. Tenn had been an ophthalmologist at Howard University Hospital in Washington, DC.
Reunion Class Parties
Saturday, June 10, 1989

1929 60th Reunion, 1:00 P.M.
Luncheon, Faculty Club
Jefferson Alumni Hall

1934 55th Reunion, 5:30 P.M.
Dinner, Eakins Lounge
Jefferson Alumni Hall

1939 50 Reunion, 7:00 P.M.
Dinner (Black Tie)
The Union League
Broad and Sansom Streets

1944J 45th Reunion, 7:00 P.M.
Dinner
The Cosmopolitan Club
1616 Latimer Street

1944S 45th Reunion, 7:00 P.M.
Dinner
Sheraton Society Hill
One Dock Street

1949 40th Reunion, 7:00 P.M.
Dinner
The Union League
Broad and Sansom Streets

1954 35th Reunion, 7:00 P.M.
Dinner Dance
The Historical Society of Pennsylvania
1300 Locust Street

1959 30th Reunion, 7:00 P.M.
Dinner
Carpenters’ Hall
320 Chestnut Street

1964 25th Reunion, 7:00 P.M.
Dinner Dance (Black Tie)
The Downtown Club
Public Ledger Building
Sixth and Chestnut Streets

1969 20th Reunion, 7:00 P.M.
Dinner Dance (Black Tie)
The Four Seasons Hotel
Eighteenth and the Parkway

1974 15th Reunion, 7:00 P.M.
Dinner
Raymond Haldeman’s Restaurant
110-112 South Front Street

1979 10th Reunion, 7:00 P.M.
Dinner Dance
The Barclay Hotel
Rittenhouse Square

1984 5th Reunion, 7:00 P.M.
Buffet Dance
The Port of History Museum
Delaware Avenue and Walnut Street