

1 1954

TULSA COUNTY MEDICAL SOCIETY

June, 1955

THE BULLETIN

of the Tulsa County Medical Society

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Oklahoma State Medical Association Announces
Plans To Construct Headquarters Building



Dr. Fred S. Clinton Obituary



Blue Cross-Blue Shield Plans Reflect
Progress In Annual Reports For 1954



The Medical Library

Vol. 21

No. 6



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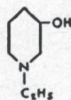
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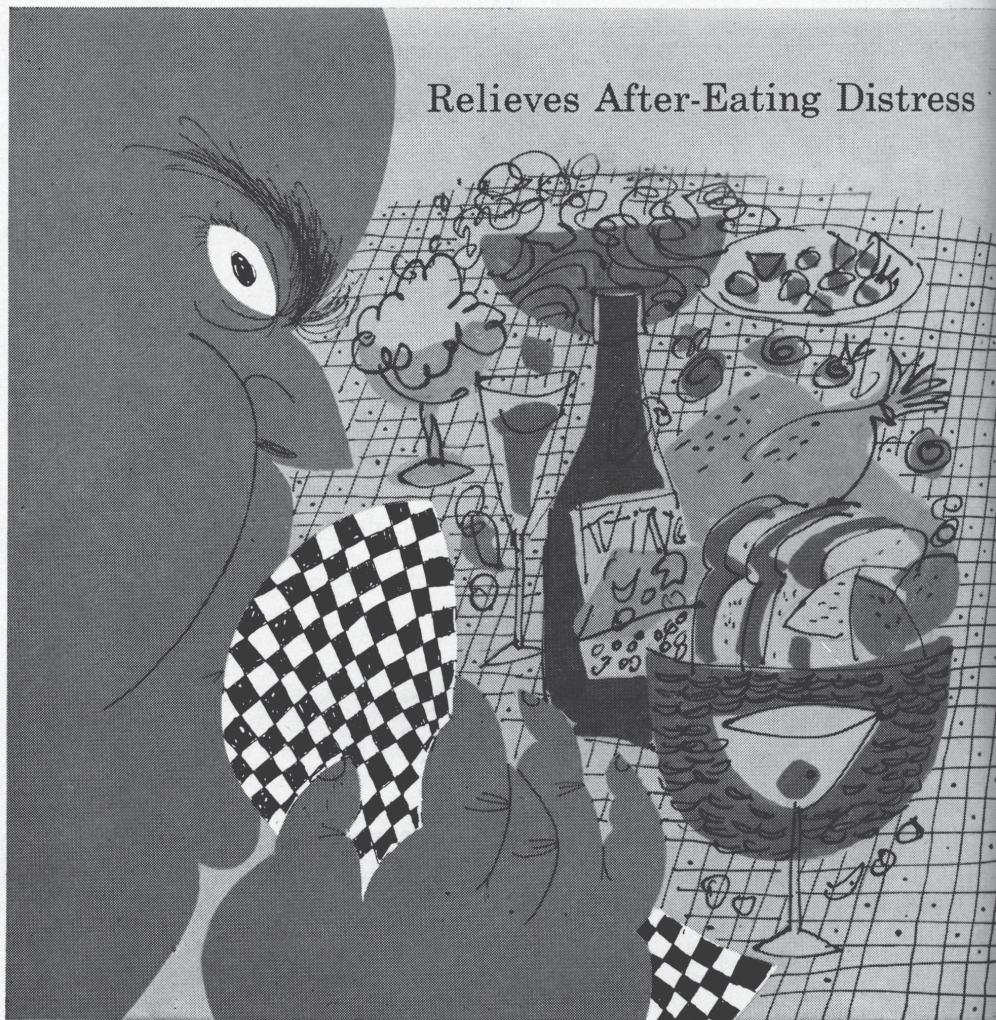
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With The Editor . . .

The loss of John K. Hart as Associate Executive Secretary of the Oklahoma State Medical Association will be keenly felt . . . John leaves June 1st to take a new post as Executive Secretary of the American Academy of Orthopedics in Chicago . . . In seven years of service to Oklahoma Medicine, he has won a host of friends, both in and out of the profession, for his efficient work and wonderful public relations . . . Lot's of good luck in your new job, John! . . . The Oklahoma State Medical Association's 62nd Annual Meeting in Tulsa last May 9-11 proved to be a record-breaker in every possible way . . . Over fifty doctors were turned away when the President's Inaugural Dinner Dance sold its capacity of 500 persons . . . The meeting clearly pointed up the big deficiency in convention facilities in Tulsa . . . While the Cimarron Ballroom was splendid for the exhibits, its makeshift meeting room was hot, airless and small . . . Dancing at the dinner dance was a sardine affair with plenty of bruises to show for each dance . . . Tulsans must come awake to the fact that an auditorium here is an absolute must . . . If it does not materialize soon, the Oklahoma State Medical Association may of necessity meet only in Oklahoma City where facilities are more adequate . . . Such an auditorium would pay for itself in the extra convention business in a matter of months . . . Short-sighted penny-pinching by too many narrow-minded people . . . It isn't like Tulsa . . . Those of you who missed Dr. Charles S. Houston's delightful travel talk on the climbing of K-2 missed a real experience . . . Just ask anyone who heard him . . . Dr. Houston set the pattern for all the guest speakers—a bunch of grand guys, modest and unassuming, yet possessing some of the best medical brains in the world . . . The thanks for the success of the convention go to a hard-working committee . . . Dr. James W. Kelley, Dr. Walter E. Brown, Dr. Jack L. Richardson, Dr. E. N. Lubin, Dr. Richard E. McDowell, Dr. R. W. Goen, and Dr. Simon Pollack.

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THE BULLETIN

OF THE

TULSA COUNTY MEDICAL SOCIETY

Frank J. Nelson, M.D., *President*F. L. Flack, M.D., *President-Elect*Hugh C. Graham, M.D., *Vice-President*R. M. Wadsworth, M.D., *Secy.-Treasurer*Jack Spears, *Executive Secretary*

Vol. 21

TULSA, OKLAHOMA, JUNE, 1955

No. 6

STATE ASSOCIATION PLANS BUILDING

Special Assessment of \$35.00 Levied To Finance New Headquarters. Oklahoma City Physician Takes Office As State President.

The Oklahoma State Medical Association last month announced plans for the construction of a headquarters building in Oklahoma City at a cost of approximately \$100,000. The project will be financed by a special assessment of \$35.00 to be levied on all members of the Association.

Acting at its regular session of May 8, 1955, the Association House of Delegates accepted a report of a Building Committee calling for the construction of a completely air conditioned building of 4,800 square feet. The structure will be located on a tract of 2.26 acres recently purchased by the Association on the North side of the Highway 66 by-pass, midway between the Santa Fe tracks and North Western Avenue at about 55th Street in Oklahoma City.

The special assessment of \$35.00 was levied in lieu of an alternate proposal that dues be increased eight dollars annually for a period of five years. The assessment makes possible the saving of \$6,750 in interest charges. It is expected

to produce \$52,500, the balance of an estimated cost of \$91,615 to be taken from the Association's present surplus funds.

The assessment is now due and should be paid to the Tulsa County Medical Society. Members have until December 31, 1955, to make payment, at which time members who have not paid the assessment will be dropped from membership.

Named as President-Elect of the Oklahoma State Medical Association was Dr. H. M. McClure, Chickasha surgeon. He will serve in 1956-57, succeeding Dr. R. Q. Goodwin, Oklahoma City internist, who assumed office as President at inaugural ceremonies held May 10, 1955, at the Mayo Hotel.



DR. R. Q. GOODWIN

Other officers to serve this year are Dr. George Ross, Enid, Vice-President, and Dr. W. W. Rucks, Jr., Oklahoma City, reelected Secretary-Treasurer.

The House of Delegates also:

1. Approved a resolution protesting an announced policy of the United Mine Workers to limit its medical benefits in

the surgical specialties to diplomates of the various American Boards and to fellows of the American College of Surgeons.

2. Directed a special study of the Grievance Committee procedures with a view to expanding its scope and disciplinary powers to those comparable to the widely publicized Grievance Committee of the Colorado State Medical Society.

3. Defeated a proposed amendment to the By-Laws repealing sections which automatically revoke the membership in the Association of any doctor whose federal narcotics permit is cancelled for proved violations of local, state or federal narcotics law. The proposal, introduced by the Tulsa County delegation, was designed to offer offenders a greater opportunity for rehabilitation by making the revocation of membership at the option

of the Council after a careful investigation.

The dates for the 1956 annual meeting were fixed for May 6-9 at Oklahoma City.

The House of Delegates session was followed by the 62nd Annual Meeting of the Association in Tulsa, May 9-11. The event saw a record attendance of 780 Oklahoma doctors present to hear an outstanding scientific program. Special features of the event included the President's Inaugural Dinner Dance, a complimentary buffet dinner and program tendered by the Blue Cross-Blue Shield Plans of Oklahoma at their new headquarters building, and commercial and scientific exhibits. The annual golf tournament was cancelled by rain, but will be rescheduled later in June.

(Continued On Page 36)



Visiting distinguished guest speakers at the 62nd Annual Meeting of the Oklahoma State Medical Association in Tulsa last May 9-11 pose for their photograph. From left to right, first row, are Dr. Robert B. Lawson, pediatrician, Miami, Fla.; Dr. J. A. del Regato, radiologist, Colorado Springs, Col.; Dr. Walter C. Alvarez, internist, Chicago, Ill.; Dr. James K. Stack, orthopedic surgeon, Chicago, Ill.; and Dr. Elmer Hess, President-Elect of the American Medical Association, Erie, Pa. Back row, left to right: Dr. Arthur Purdy Stout, pathologist, New York, N. Y.; Dr. William W. Scott, urologist, Baltimore, Md.; Dr. George Crile, Jr., surgeon, Cleveland, Ohio; Dr. John L. Parks, obstetrician, Washington, D. C.; and Dr. Charles S. Houston, internist, Exeter, N. H. Not pictured is Dr. William A. Sodeman, internist, Columbia, Mo. (Photo by Leslie Ashton)

BLUE CROSS PLAN ENROLLMENT INCREASES

Hospital Care Plan Nears Five Million Dollar Annual Operation. Blue Shield Plan Shows Similar Advances For 1954. Physician Payments Increase.

The Blue Cross Plan of Oklahoma, completing fifteen years of operation in the field of hospital care insurance, approached a five million dollar operation in 1954, a study of the Plan's annual report for last year reveals. A total of \$4,914,267.98 was paid to hospitals for care of Blue Cross members during the year at an average cost per case of \$85.63.

The companion Blue Shield Plan of Oklahoma, celebrating its tenth anniversary, paid physicians \$2,502,269.39 during 1954. The bulk of these payments was for surgical and obstetrical care services. The figure represents an increase of more than a half-million dollars over the previous year.

Tulsa physicians collected \$630,216.77 for surgical and obstetrical care services rendered to policyholders in 1954 or 50.2 per cent of the total charges made. Another \$53,140.00 was paid to Tulsa doctors under provisions of the limited medical care benefits, representing 42.1 per cent of such charges. For x-ray, anesthesia and radiation therapy, Tulsa physicians were paid \$103,609.70 or 43.0 per cent of total charges. Total payments to Tulsa doctors were \$786,966.47 or 48.5 per cent of the physicians' charges.

Both plans continued to show growth during 1954. Total enrollment in Blue Cross at the year's end stood at 425,486, a gain of approximately 30,000 over the previous year. Blue Shield enrollment reached 367,158 with a gain of approximately 47,000 over 1953. Both plans continued to face the problem of cancellations. While Blue Cross actually enrolled 93,353 new members during the year, the Plan suffered a cancellation of 69.3 per cent of this amount on an overall basis. For Blue Shield 105,175 new enrollments were recorded with cancellations at 55.3 per cent of this figure. The percentage of cancellations was considerably smaller in 1954 for both plans than was experienced in each of the last three years.

In Tulsa County enrollment in Blue Cross reached 140,020 or 55.6 per cent of the total population. The Tulsa County enrollment in Blue Shield was 123,171 or 48.9 per cent of the County population. Numerically, Tulsa County continued to outstrip all other counties in enrollment, the nearest being Oklahoma County with 82,575 enrolled in Blue Cross. 73,684 in Blue Shield.

Utilization of Blue Cross premium income for benefits represented 85.6 per cent of the total amount paid by subscribers in 1954. Utilization for Blue Shield was 75.5 per cent. In Tulsa County utilization was well above these figures, reaching 93.8 per cent for Blue Cross and 79.1 per cent for Blue Shield. With operating expense for Blue Cross at 8.2 per cent of premium income for the year, the high utilization rate in Tulsa County created a loss for the Plan on the County operations. Blue Shield, operating at 12.5 per cent for the year, was able to create some reserves on the County operations.

Despite the poor record in Tulsa County for Blue Cross, both plans were in excellent condition at the end of the year and made a material increase in reserves.

Adult women patients continued to account for the greatest number of cases handled by Blue Shield as well as for the highest amount paid in benefits. The breakdown by sex on the number of cases paid by Blue Shield is as follows: adult women, 46.3 per cent (of which 7.7 per cent were obstetrical cases); adult men, 28.3 per cent; minor males, 20.2 per cent; and minor females, 18.6 per cent.

Analyzing Blue Shield surgical payments by diagnosis, 23.2 per cent of the total were for diseases and injuries of the skin including neoplasms, 13.6 per cent for pregnancy, 10.3 per cent for diseases and injuries of the bone, muscles, and tendons, and 10.2 per cent for tonsillectomies. The remainder of the payments

are scattered over a wide variety of surgical procedures.

In terms of the amount of payments made, Blue Cross surgical procedures paid 18.5 per cent of the total payments for deliveries, 10.2 per cent for diseases and injuries of the bones, muscles and tendons, 9.4 per cent for hysterectomies, and 9.0 per cent for appendectomies.

In the annual report for 1954, the Blue Cross Plan reported its total payments of \$4,426,640.67 for in-patient cases represented 51,692 cases at an average cost per case of \$85.63. This was for a total of 322,622 patient days, an average of 6.2 days per case, and an average per day cost of \$13.72. The Plan also paid \$33,784.31 for 7,199 out-patient cases at an average cost per case of \$4.69.

For Blue Cross the greatest number of medical cases was represented by tonsillectomies, followed in order by diseases of the digestive system, diseases of the genito-urinary system, and diseases of the

circulatory system. The most costly cases were for diseases peculiar to the first year of life and neoplasms.

For Blue Cross surgical cases, pregnancy with delivery accounted for the greatest number, followed in order by tonsillectomies, diseases of the genito-urinary system, and injuries and poisonings. The most costly cases were those dealing with infectious and parasitic diseases.

The breakdown of admissions by sex in Blue Cross were: adult females, 44.0 per cent; adult males, 24.6 per cent; minor females, 9.6 per cent; and minor males, 7.2 per cent.

Blue Cross babies for the year amounted to 7,962, bringing the total number of births paid by the Plan to 56,501 (as of December 31, 1954).

The greatest utilization of Blue Cross by age continues to be for the 1-18 group. It then falls until age 26, when it begins to increase again. For the years 31-45, the utilization is fairly constant, after which it falls sharply again.

Paying tribute to the staff and to the doctors who made Blue Cross possible, Dr. Arthur S. Risser of Blackwell, President, called for a greatest effort to enroll a larger percentage of the population of Oklahoma. "We must rely upon our hospitals to search for ways and means for reducing the cost of care to our subscribers," he said. "We must constantly seek the cooperation of our doctors in finding ways to reduce the rate of admission and length of stay; and we must seek the cooperation of the businessmen together with the professions, in designing ways to bring more of the unenrolled population in our program."

DR. E. LEE GENTRY has returned to practice in Tulsa after several months at Pawnee, Oklahoma. He will occupy offices at 908 Medical Arts Building.

DR. EARL I. MULMED has returned from Rochester, Minnesota, where he attended a postgraduate study course in cardiology at the Mayo Clinic, May 9-15.

DR. ROBERT E. DILLMAN has been ill at St. John's Hospital.

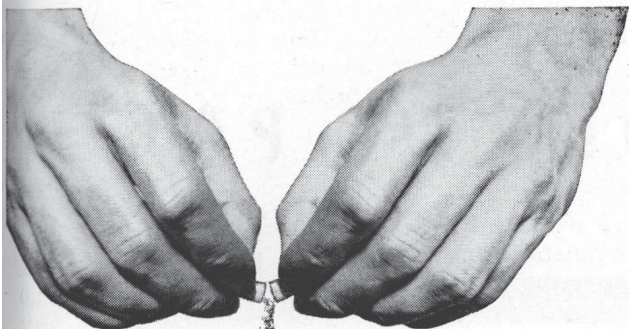
DR. ELNORA G. MILLER has taken new professional offices in the Braniff Building, Tulsa, for general practice.

WALTER H. CALHOUN, M.D. 1897 - 1955

Dr. Walter Henry Calhoun, 57, prominent Tulsa general practitioner, died May 9, 1955, at the Mayo Clinic, Rochester, Minnesota. Death was attributed to a rare blood ailment from which he had suffered for the past nine months.

Born in New Bern, North Carolina, Dr. Calhoun graduated from Virginia Military Institute. His medical degree was obtained at the University of Virginia Medical Department, Class of 1925. He interned at University Hospitals of Oklahoma City and later completed a residency in General Surgery at St. Luke's General Hospital of Chicago. He entered practice in Tulsa in 1928. Two years ago Dr. Calhoun built his own clinic building at 5323 South Lewis.

Dr. Calhoun's condition was diagnosed as Thrombocytopenic Purpura. In recent weeks he had required daily blood transfusions. Survivors include the widow and two daughters.



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PRESIDENT'S PAGE

How much should a doctor tell his patient?

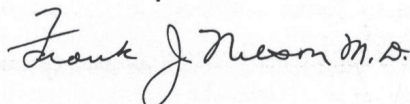
This is a question which has puzzled physicians more and more in recent years. There are those who feel the doctor should go into considerable detail in educating the patient as to the nature of his ailment, the treatment and the prognosis. Other doctors believe in the "tell-em-nothing" technique, basing this attitude upon a too-prevalent conception that the patient is unable to comprehend medical details.

A recent survey conducted by a national public opinion organization found that one of three major public criticisms of doctors was the failure of the physician to tell the patient about his case. This is a significant criticism, not only in terms of public relations but in the necessity of preserving a confidence in the doctor-patient relationship. It is one which, I believe, must influence physicians into new ways of thinking on this subject.

The patient of 1955 is a better educated, more complex and better ordered patient than that of fifty years ago. His thirst after knowledge of all things medical is reflected in the great volume of popular literature about disease and injury. I feel that it is a definite mistake to underestimate his ability to comprehend what you may tell him, especially if care is taken to couch your language in layman's terms. What to me is equally important is the concept that the patient, having engaged his physician for a fee, is entitled to know these things. I believe that most doctors, recognize this, and that most want their patient to be better informed about modern medicine. Our modern methods of diagnosis and therapy are largely based upon an effective partnership between doctor and patient; the success of this partnership is frequently a major factor in the ease and effectiveness with which healing is obtained.

The result of the practical application of this new concept can only be for the good of medicine, the doctor and the patient.

Sincerely,



President

from an editorial in the J.A.M.A.
(156:991, Nov. 6, 1954):

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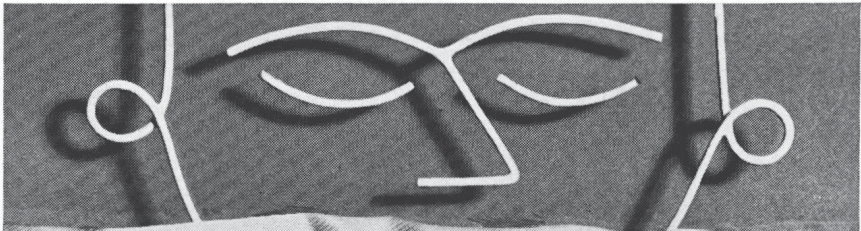
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The Public Relations Forum

A STUDY OF THE MODERN PROBLEMS OF AMERICAN MEDICINE

In This Issue

THE DOCTOR AND HIS FEE

The doctor has a reputation for being a poor businessman.

In many respects this shortcoming—if it can be described as such—is just as well. Were the doctor to apply the cold principles of the financial world to his daily practice with everything carefully calculated in dollars and cents, medical public relations would abruptly plunge to zero. An outraged public, stunned by the true costs of medical care, would be unwilling to pay for what it so freely demands of the doctor.

No business or profession offers such a generally unbusinesslike picture as that presented by medicine. Were industry operated on the same principles, financial chaos would be inevitable. No where else are we presented with an economic philosophy which permits: services rendered on virtually unlimited credit, an income which frequently fails to recoup the investment in education and the loss of earnings during education, a startling ratio of out and out charity services frequently representing money out of pocket, and the continuation of a bad debt ratio which would wreck any commercial business.

Fortunately, medicine has not chosen to operate as a business. From its roots in antiquity it has been guided by cardinal principles placing service to humanity over pecuniary reward. This philosophy has earned a stature which no other profession, except possibly that of the ministry, can hope to attain.

Unfortunately, this same lack of understanding of business principles has led to new and serious problems for the medical profession. A combination of circumstances has necessitated that the doctor give his attention to these strictly 20th Century problems. These circumstances may be defined as:

1. The growing cost of medical care and the insistence of the public for the very best.

2. High levels of prosperity which are basically built upon consumer credit. In contrast to the conservative family finances of fifty years ago, the average wage earner of 1955 is heavily indebted for expensive consumer goods purchased on the installment plan. Thus, the distribution of his income must be done judiciously and in keeping with planned budgets.

3. Hospital and medical care insurance, although desirable and necessary assets to modern medicine, have brought new problems to medicine. Not the least of these is the public's impression that the insurance should pay all costs of medical care; this impression is frequently fostered by misleading sales appeals.

4. Office economics which require a greater proportion of income in meeting the costs of efficient equipment and personnel. To this must be added the rising costs of lengthening periods of medical education.

5. A marked increase in the number of persons consulting doctors, a situation resulting in increased problems of financial management.

Generally speaking, most doctors have managed to meet these new financial problems without too much difficulty. A few, basically incapable of conducting their practice in a sound balance between patient satisfaction and financial success, have created bad public relations for the profession; another element, fortunately small, can be described only as the "larcenists" which mark every profession and business.

These problems come into focus in the matter of fees. The final act of the doctor-patient relationship is represented in the cold black-and-white of the doctor's statement. It is the ultimate test. In 95 out of a 100 cases, the bill is satisfactory; for the remaining five per cent it may come as a severe shock, a source of anger and dissatisfaction, and as a

permanent rupture in the doctor-patient relationship.

The success with which a doctor prevents or adjusts these differences depends in large measure upon his approach to the problem. In most cases a few basic rules can be effectively applied as guides for conduct. These are:

1. *Always discuss fees in advance.* Your patient is entitled to know what the services will cost. Where it is not possible to immediately ascertain these costs, give the patient as much information as possible and advise him of the conditions which may arise to affect the final cost.

2. *Make sure that your patient understands about auxiliary medical services: the laboratory, anesthesiologist, surgical assistant, consultant, etc.* These items are billed separately in most cases and may

come as a shock to the patient who is not prepared for them.

3. *Do not hesitate to discuss fees after they have been billed to the patient.* A study of cases brought to the attention of grievances committees over the nation indicate that patient dissatisfaction frequently first arises when the doctor arbitrarily refuses to discuss the fee.

4. *Do not hesitate to adjust a fee when indicated.* The old fallacy that this will lower the patient's opinion of you and your services is outmoded and no longer tentable in this era.

5. *Always itemize the bill.* The vast majority of people believe that physicians, like any other businessman, should account for the total of his charges.

6. *While the sliding fee scale is not always accepted, most physicians do recognize that some patients are not able to pay the same fees charged of those with higher incomes.* A judicious use of the sliding fee scale will keep fees within reason and eliminate the humiliation and dissension created by a bill which is beyond the patient's ability to pay.

7. *Similarly, care must be taken that the fee is not unreasonably high merely because the patient is well to do and able to pay.* This theory of charging has been described as "biological blackmail." Some physicians may argue that medical service has no price. While it is priceless in many respects, it is absurd to conclude that a doctor may charge whatever he wishes. His fee must be justified in the eyes of the patient.

These simple seven rules are the basic keys to a good doctor-patient relationship in the matter of fees. They are not, of course, a panacea for all troubles which may or do arise from the matter of fees. The problem of patient dissatisfaction with the services rendered is probably the most serious. Here again, many medical leaders believe that the doctor must take the initiative in correcting misunderstandings which may arise or have already arisen; frequently these misunderstandings have been due to an inadequate rapport between doctor and patient.

Collection problems pose a second avenue of concern. Assuming the patient is

ELI P. NESBITT, M.D.
1873 - 1955

Dr. Eli P. Nesbitt, 81, retired Tulsa general practitioner, died in a Tulsa hospital on April 23, 1955, after suffering a heart attack at the home of his brother, Dr. P. P. Nesbitt.

At the time of his death Dr. Nesbitt was visiting in Tulsa. Since his retirement in 1951 he had lived at Sheridan, Missouri.

Dr. Nesbitt was born in Palo, Missouri, in 1873. He attended Chillicothe Normal School of Chillicothe, Missouri, and later received his medical degree from Central Medical College of St. Joseph, Missouri, Class of 1897. He practiced at Gaynar, Missouri, for five years, and later at Sheriday, Missouri, where he remained until 1926. After a brief time at Wagoner, Oklahoma, he moved to Tulsa and did general practice until 1946 at which time he moved to Michigan. Retiring five years later, he returned to Sheridan.

He was an honorary member of the Tulsa County Medical Society and its component organizations. Services were held April 26th at Stanley's Funeral Home. Survivors include the widow and brother.

(Continued On Page 33)

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THE MEDICAL LIBRARY

Library of the Tulsa County
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Miss Irma A. Beehler, *Librarian*

GIFTS OF THE MONTH—:

Arthritis and Rheumatism Foundation of Eastern Oklahoma, Inc. The following volumes: Textbook of Rheumatic Disease. Edited by W. S. C. Copeland, M.D. Second Edition. 794 pp., illustrated (part colored), E. & S. Livingston, Ltd., Edinburgh and London, 1955.

Parathyroid Glands and Metabolic Bone Disease. By Fuller Albright, M.D., Assistant Professor of Medicine, Harvard Medical School, and Edward F. Riefenstein, Jr., M.D., Consultant-in-Charge, Department of Clinical Investigation, Sloan-Kettering Institute of Cancer Research, New York, N. Y. 392 pp., illustrated, bibliography, Williams & Wilkins Company, Baltimore, Maryland, 1948.

Bone; And Introduction To The Physiology Of Skeletal Tissue. By Franklin C. McLean, M.D., Professor Emeritus of Pathological Physiology, University of Chicago, and Marshall R. Urist, M.D., Associate Clinical Professor of Surgery (Orthopedics), University of California School of Medicine. 181 pp., illustrated, bibliography. University of Chicago Press, Chicago, Illinois, 1955.

Roentgenologic Diagnosis of Diseases of Bones. By David G. Pugh, M.D., Assistant Professor of Radiology, Mayo Foundation, and Consultant on Roentgenology, The Mayo Clinic. 568 pp., bibliographies, Williams & Wilkins Company, Baltimore, Maryland, 1951.

Dr. Berget H. Blocksom and Dr. Maxwell A. Johnson. Miscellaneous issues of various journals.

Dr. Safety R. First. Miscellaneous issues of various journals.

The Hegeman Fund. The Behavior of Pulmonary Tuberculosis Lesions. By E. M. Medlar, M.D., Chief Pathologist, Division of Tuberculosis, New York State Department of Health, Herman M. Biggs Memorial Hospital, Ithaca, N. Y., and Lecturer in Pathology, Chest Service, Bellevue Hospital, New York. 241 pp., illustrated (part colored). The Hegeman Fund, 1955.

Dr. Paul O. Shackelford. Treatment in General Practice. By Harry Beckman, Professor of Pharmacology, Marquette University School of Medicine, Milwaukee, Wisconsin. Fifth Edition, 1,099 pp., W. B. Saunders Company, Philadelphia, Pennsylvania, 1945.

National Nephrosis Foundation. Proceedings of the Sixth Annual Conference on the Nephrotic Syndrome. Edited by Jack Metcoff, M.D. Held at Western Reserve University School of Medicine, Cleveland, Ohio, November 5-6, 1945.

Tulsa County Medical Society. Contributions to the Medical Library Endowment Fund in memory of Dr. Walter H. Calhoun, Dr. Fred S. Clinton, and Dr. E. P. Nesbitt.

Dr. Fred E. Woodson. Miscellaneous issues of various journals.

RECENT ACQUISITION—:

American Medical Directory, Fifth Edition, American Medical Association, Chicago, Illinois, 1916.

The South Room of the Medical Library has been air conditioned through the installation of a Fedders 1½-ton air conditioner. This will provide comfortable reading quarters for the members in the Library and for the Librarian. The room is being closed off from the shelf area by a folding door.

In accordance with usual custom, the Tuesday evening hours for the Medical Library will be discontinued through the summer months. The next Tuesday evening hours will be on October 3, 1955.

CHILDRENS MEDICAL CENTER TO HEAR O. U. RADIOLOGIST

Dr. Simon Dolin, Professor of Radiology at the University of Oklahoma School of Medicine, Oklahoma City, will be guest speaker at the quarterly clinical conference of the Children's Medical Center on Friday, June 24, 1955, at 8:00 A.M. His subject will be "Normal and Abnormal X-Ray Changes in Children."

The meeting is open to all members of the Tulsa County Medical Society. The program has been approved for post-graduate study credit by the Oklahoma Academy of General Practice.

SHORTAGE OF 626 HOSPITAL BEDS SEEN IN TULSA COUNTY

A hospital bed shortage in Tulsa County of 626 beds was seen last month by Mr. Cleveland Rodgers, Executive Secretary of the Oklahoma State Hospital Association. In a report to the Public Health Committee of the Tulsa Chamber of Commerce, he recommended six beds per thousand population. With the current population estimated at 275,723, the existing 1,028 beds falls far short of the indicated 1,654 beds needed.

The breakdown of bed capacity is as follows: Byrne, 38; Hillcrest, 350; Mercy, 50; Oklahoma Osteopathic, 47; St. John's, 460; Tulsa Osteopathic, 16; Walden Hospital, 6; Moton Memorial, 42; Broken Arrow, 19. These figures do not include the convalescent facilities of Children's Medical Center.

New construction will provide 180 beds at St. John's Hospital about the end of 1956. Another 38 additional beds will be available next year through additions to Oklahoma Osteopathic Hospital.

STATE DIRECTORY PUBLISHED

The Oklahoma State Medical Association last month published its bi-annual Directory containing the current membership roster, officers, constitution and by-laws, and pertinent information about related medical organizations. The roster is listed both alphabetically and by counties. An innovation of the listing is the inclusion of date of birth, medical school, and specialty.

ATLANTIC CITY SESSION SET BY A.M.A. FOR JUNE 6-10

The American Medical Association will open its 1955 Annual Meeting on Monday, June 6th, at Atlantic City, New Jersey. The program will feature five days of scientific presentations in all fields of medicine. Over 100 commercial exhibits will be on display at convention hall. Special nation-wide television programs are also scheduled for Tuesday and Wednesday evenings, June 7-8.

The A.M.A. House of Delegates is expected to have a quiet session with greatest fireworks anticipated over a report seeking a closer liaison between medical doctors and osteopathic physicians. Oklahoma will be represented by Dr. James Stevenson of Tulsa and Dr. John F. Burton of Oklahoma City, delegates, and by Dr. E. H. Shuller, McAlester, and Dr. E. Malcom Phelps, El Reno, alternate delegates.

Many specialty groups will also meet. The National Medical Civil Defense Conference will be held Saturday, June 4, at the Traymore, and the Medical Society Executives Conference will meet the same day at the Ritz-Carlton. The Conference of Presidents and other County Society Officers will meet on Sunday, June 5th.

Desirable hotel accommodations are still available.

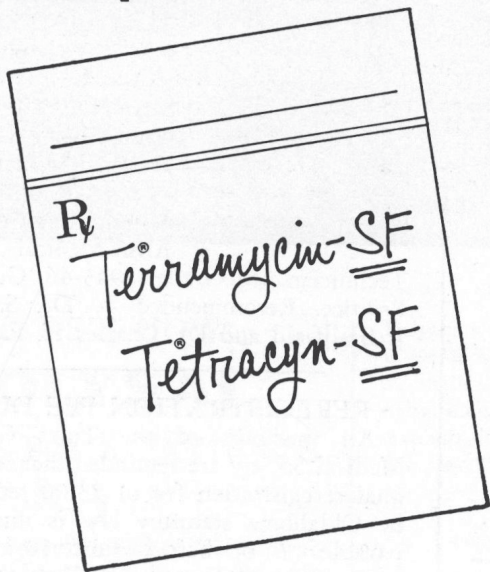
TEXAS MEDICAL ASSEMBLY SESSION SET FOR JULY 18-20

The Postgraduate Medical Assembly of South Texas has announced the dates of its 1955 session for July 18-20, at the Shamrock Hotel, Houston, Texas. Twenty visiting distinguished guest speakers will highlight the scientific program. Commercial and scientific exhibits, roundtable luncheons, and social events are also included in the registration fee of \$20.00.

Tulsa physicians planning to attend should write the Executive Committee, Postgraduate Medical Assembly of South Texas, 412 Jesse H. Jones Library Building, Houston, Texas, for complete information.

DR. JAMES W. KELLEY has been vacationing in St. Louis, Missouri.

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National Research Council:

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Thiamine mononitrate	10 mg.
Riboflavin	10 mg.
Niacinamide	100 mg.
Pyridoxine hydrochloride	2 mg.
Calcium pantothenate	20 mg.
Vitamin B ₁₂ activity	4 mcg.
Folic acid	1.5 mg.
Menadione (vitamin K analog)	2 mg.



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NEW APPLICANTS

The following physicians are applicants for membership in the Tulsa County Medical Society.

William B. Perry, M.D. 124½ North Greenwood, Tulsa. A.B., University of



Pennsylvania; medical degree, University of Pennsylvania School of Medicine, 1930. Interned Harlem Hospital, New York, N. Y., 1930-31. Resident in Surgery, Harlem Hospital, New York, N. Y., 1931-32. In private practice, Atlantic City, New Jersey, 1932-39. Captain, United States Public Health Service, 1939-46. In private practice, Tulsa, Oklahoma, 1946-55. Formerly Administrator of Moton Memorial Hospital of Tulsa. General Practice. Recommended by Dr.

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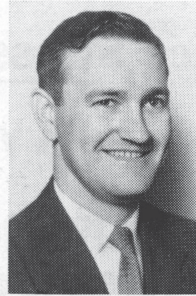
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South and East

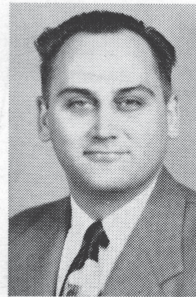
Homer A. Ruprecht and Dr. Felix T. Gastineau.

Charles D. Holland, M.D. Broken Arrow, Oklahoma. B.S., Northeastern State College. Medical Degree, University of Oklahoma School of Medicine, 1954. Interned St. Joseph's Hospital, Wichita, Kansas, 1954-55. Military service, United States Navy, 1945-47, Ph. M.3. General Practice. Recommended



by Dr. W. H. Newlin and Dr. Samuel E. Franklin.

A. B. Eddington, M.D. 1419 East 15th Street, Tulsa. B.S., University of Tulsa, 1949. Medical Degree, University of Oklahoma School of Medicine, 1953. Interned University Hospitals, 1953-54. Staff Physician, Eastern Oklahoma State Hospital, Vinita, Oklahoma, 1954-55. Military Service, Army Medical Corps,



Technician 3rd Grade, 1943-46. General Practice. Recommended by Dr. Samuel J. Bradfield and Dr. Charles H. Eads.

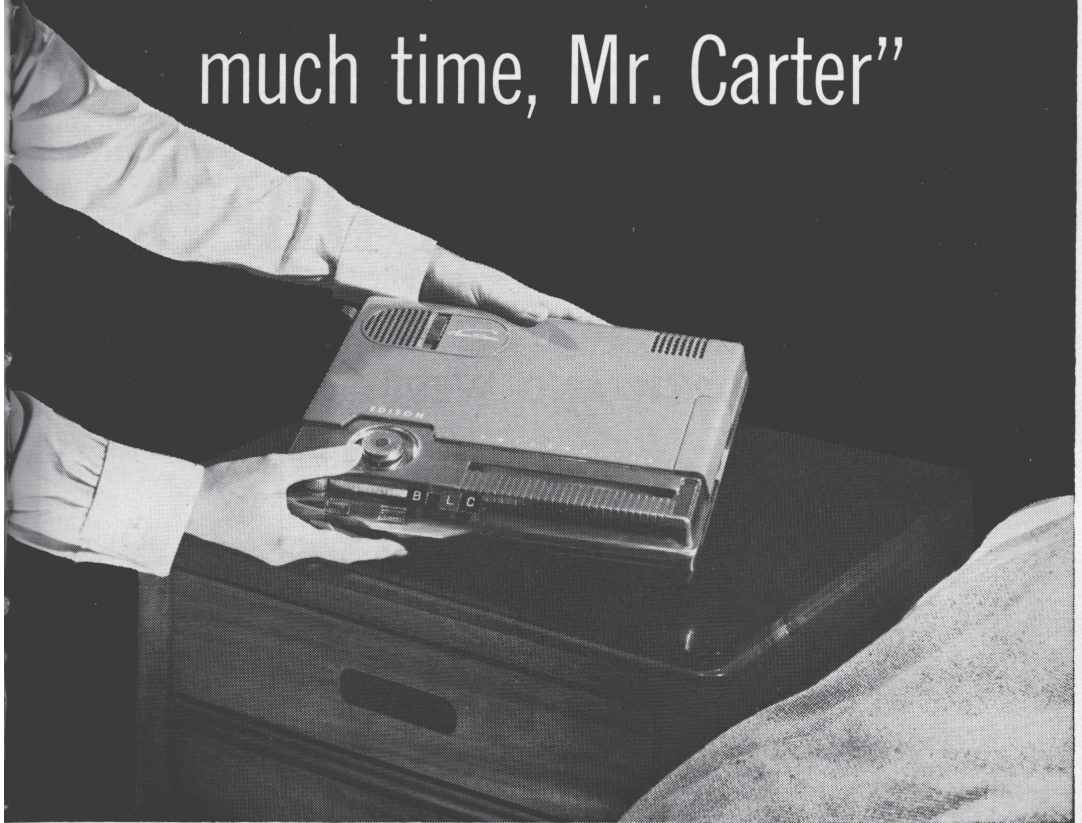
REREGISTRATION FEE DUE

All members of the Tulsa County Medical Society are reminded that the annual reregistration fee of \$3.00 required by Oklahoma statutory law is due and payable on or before June 10, 1955. Statements will be mailed from the offices of the Oklahoma State Board of Medical Examiners. Failure to pay makes the offender subject to prosecution and/or revocation of license to practice.

DR. MARY V. GRAHAM has been named a Diplomate of the American Board of Pediatrics.

DR. MILTON L. BERG has returned to his offices after major surgery performed last month.

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JUNE MEDICAL CALENDAR

WEDNESDAY, June 1st:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.
 Postgraduate Study Course in Surgery, Hillcrest Medical Center, 12:30 P.M.
 Subject: "The Investigation and Treatment of Epilepsy." Speaker, Dr. H. F. Flanigan, Jr.

THURSDAY, June 2nd:

Interns and Residents Lecture, St. John's Hospital, 12:00 Noon. Subject:
 "Meningeal Disturbance." Speaker, Dr. James W. White.

FRIDAY, June 3rd:

St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.
 St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.
 X-Ray Conference, Hillcrest Medical Center, 3:00 P.M.

SUNDAY, June 5th:

Conference of Presidents and Other Officers of State and County Medical Societies,
 Traymore Hotel, Atlantic City, New Jersey, 1:00 P.M.

MONDAY, June 6th:

American Medical Association, 1955 Annual Meeting, opens at Atlantic City, New
 Jersey, continuing through June 10th.
 Medical Telecast, "Medic," Television Station KVOO-TV, 7:00 P.M.
 Hillcrest Medical Center, Staff Meeting, 8:00 P.M.

TUESDAY, June 7th:

St. John's Tumor Clinic, 8:00 A.M.
 Postgraduate Study Course in Medicine, Hillcrest Medical Center, 5:30 P.M.
 Subject: "Common Upper Gastrointestinal Syndromes." Speaker, Dr. Robert D. Grubb.

WEDNESDAY, June 8th:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.
 Postgraduate Study Course in Surgery, Hillcrest Medical Center, 5:30 P.M.
 Subject and Speaker to be announced.
 Clinical Pathological Conference, Hillcrest Medical Center, 7:00 P.M.

THURSDAY, June 9th:

Interns and Residents Lecture, St. John's Hospital, 12:00 Noon. Subject:
 "Poliomyelitis." Speaker, Dr. Rayburne W. Goen.

FRIDAY, June 10th:

Final date to pay Annual Reregistration Fee of \$3.00 to the Oklahoma State Board of
 Medical Examiners.
 St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.
 St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.
 X-Ray Conference, Hillcrest Medical Center, 3:00 P.M.

MONDAY, June 13th:

No Tulsa County Medical Society meeting on this date. Meetings suspended until
 Monday, September 12, 1955.
 Medical Telecast, "Medic," Television Station KVOO-TV, 7:00 P.M.

TUESDAY, June 14th:

St. John's Tumor Clinic, 8:00 A.M.
 Postgraduate Study Course in Medicine, Hillcrest Medical Center, 5:30 P.M.
 Subject: "Office Psychiatry." Speaker, Dr. Milford S. Ungerman.

WEDNESDAY, June 15th:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.
 Postgraduate Study Course in Surgery, Hillcrest Medical Center, 12:30 P.M.
 Subject and speaker to be announced.
 Oklahoma State Medical Association, Annual Golf Tournament, Tulsa Country Club,
 12:00 Noon. Social Hour and Dinner, 6:30 P.M. Compliments Pfizer Laboratories.

JUNE MEDICAL CALENDAR

THURSDAY, June 16th:

Interns and Residents Lecture, St. John's Hospital, 12:00 Noon. Subject: "Peripheral Vascular Diseases." Speaker, Dr. B. W. Ward.
Copy deadline for the July issue of The Bulletin.

FRIDAY, June 17th:

St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.
St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.
X-Ray Conference, Hillcrest Medical Center, 3:00 P.M.

MONDAY, June 20th:

St. John's Hospital, Clinical Pathological Conference, 7:15 P.M.
St. John's Hospital, Staff Meeting, 8:00 P.M.
Medical Telecast, "Medic," Television Station KVOO-TV, 7:00 P.M.

TUESDAY, June 21st:

St. John's Tumor Clinic, 8:00 A.M.
Postgraduate Study Course in Medicine, Hillcrest Medical Center, 5:30 P.M.
Subject: "Headache—Diagnosis and Therapy." Speaker, Dr. Arnold H. Ungerman.
Medical Assistants Society of Tulsa, Michaelis Cafeteria, 6:30 P.M.
Surgical Section Meeting, Hillcrest Medical Center, 8:00 P.M.

WEDNESDAY, June 22nd:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.
Postgraduate Study Course in Surgery, Hillcrest Medical Center, 12:30 P.M.
Subject and speaker to be announced.
Medicine Section Meeting, Hillcrest Medical Center. Dinner, 5:45 P.M., followed by Grand Rounds.

THURSDAY, June 23rd:

Interns and Residents Lecture, St. John's Hospital, 12:00 Noon. Subject: "Analgesia and Anesthesia in Labor." Speaker, Dr. Dixon N. Burns.
Board of Trustees Meeting, Tulsa County Medical Society, 2020 South Xanthus, 1:00 P.M.

FRIDAY, June 24th:

Quarterly Clinical Conference, Children's Medical Center, 4900 South Lewis Road, 8:00 A.M. Subject: "Normal and Abnormal X-Ray Changes in Children." Speaker, Dr. Simon Dolin, Professor of Radiology, University of Oklahoma School of Medicine, Oklahoma City.
St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.
St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.
X-Ray Conference, Hillcrest Medical Center, 3:00 P.M.

MONDAY, June 27th:

No meeting of the Tulsa Academy of General Practice on this date. Meetings suspended until September 26, 1955.
Medical Telecast, "Medic," Television Station KVOO-TV, 7:00 P.M.

TUESDAY, June 28th:

St. John's Tumor Clinic, 8:00 A.M.
Postgraduate Study Course in Medicine, Hillcrest Medical Center, 5:30 P.M.
Subject and Speaker to be announced.
Obstetrics and Gynecology Section Meeting, Hillcrest Medical Center, 8:00 P.M.

WEDNESDAY, June 29th:

St. John's Isotope Clinic, 8:30 A.M.
Postgraduate Study Course in Surgery, Hillcrest Medical Center, 12:30 P.M.
Subject and speaker to be announced.

THURSDAY, June 30th:

Second semi-annual installment on annual membership dues to Tulsa County Medical Society due and payable on this date.
Interns and Residents Lecture, St. John's Hospital, 12:00 Noon.
Subject and Speaker to be announced.

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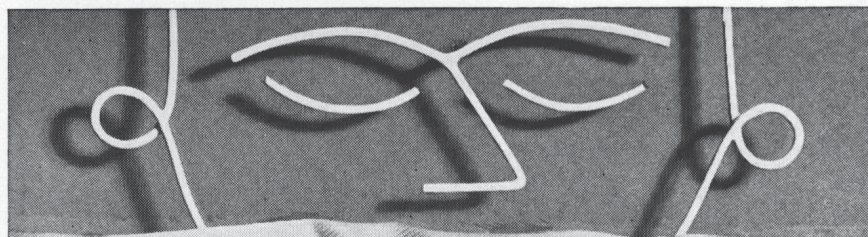
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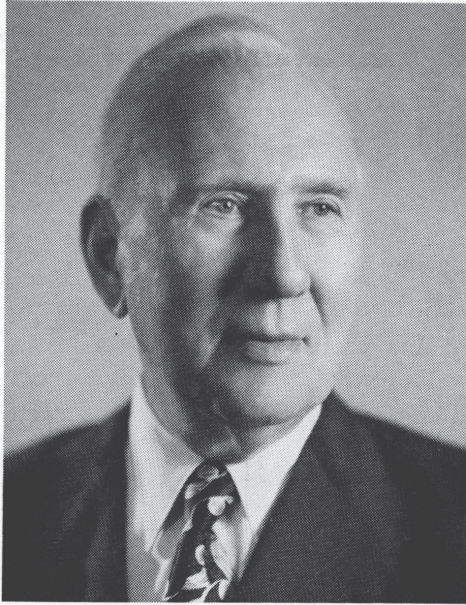
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FRED S. CLINTON, M.D.

1874 - 1955

Dr. Fred Severs Clinton, 81, pioneer Tulsa surgeon and hospital owner, died at a Tulsa hospital on April 25, 1955, after an illness of five months.

A colorful figure in Oklahoma history, Dr. Clinton was associated with the late Dr. J. C. W. Bland in the drilling of the first oil well in Tulsa County in 1901. His 600-foot well in the Red Fork area touched off an industrial development which materially contributed to Tulsa's growth as the nation's oil capital.

Born at Okmulgee in 1874, Dr. Clinton attended Drury College of Springfield, Missouri, and the Kansas City College of Pharmacy. His medical degree was obtained at the University of Kansas School of Medicine, Class of 1897. He entered practice shortly thereafter at Red Fork and soon moved to Tulsa. In 1900, Dr. Clinton and several associates formed a small emergency hospital to help care for victims of a smallpox epidemic. Five years later he opened Tulsa's first hospital, the old Tulsa Hospital at 5th and Lawton avenues. Two years later a nurses training school was opened there. In 1907 he was a charter member of the Tulsa County Medical Society. In the same year Dr. Clinton represented the newly formed Oklahoma State Medical Association at the annual meeting of the American Medical Association and secured the charter for the state group. He served successively as secretary-treasurer, vice-president, and president of the Oklahoma State Medical Association.

In 1915 Dr. Clinton built the old Oklahoma Hospital at 9th and Jackson streets. It was Tulsa's leading hospital for many years and was eventually purchased by the Oklahoma Osteopathic Association for operation as an osteopathic hospital. Dr. Clinton help organize the Oklahoma Hospital Association in 1919 and was its first President.

Dr. Clinton retired from the practice of medicine in 1926 and for several years devoted himself to the management of his oil and real estate holdings. He is survived by the widow, one brother and a sister.



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BLOOD CENTER NEWS

DISTRIBUTION AND REPLACEMENT REPORT

April, 1955

Hospitals	Bloods Used:	Replacements:	% Repl.
Tulsa Osteopathic ..	11	0	0.0%
Hillcrest	366	160	43.7%
Osteopathic	76	10	13.2%
Byrne	16	5	31.2%
Mercy	15	28	186.7%
Moton	13	1	7.7%
Broken Arrow	12	15	125.0%
St. John's	586	333	56.7%
Other	21	8	38.0%
Total	1,116	560	50.2%

Of interest to Tulsa physicians is a distribution of the blood collected by the Tulsa County Red Cross Blood Center by types. This distribution is as follows: O Positive, 40.21%; A Positive 23.7%; O Negative, 8.40%; B Positive, 7.42%; A Negative, 6.06%; AB Positive, 3.03%; B Negative, 1.56%; AB Negative, 0.58%. The distribution in Tulsa varies widely from the Standard Availability Table, showing a preponderance of O Positive, A Positive, and B Positive. However, it does compare more favorably to a distribution table developed by Dr. Max M. Strumia and Dr. John J. McGraw.

There are many contributing factors for these differences, and actually the tabulations should cover a longer period of time. The standard table of availability is never practical for all localities. Differences in local racial elements are an important factor; for instance, the American Indian will run to over 50 per cent O Positive and the negro population has a strong trend to B Positive type.

The distribution very clearly shows the need for advance requests on elective surgery where the donor is a rare type. The Center must first meet reserves for emergency needs in these types; by giving as much notice as possible, preferably up to one week, the doctor can assure a ready supply of blood for surgery on rare types.

It's twins, a boy and a girl, for DR. and MRS. ROBERT D. GRUBB, born May 12 at St. John's Hospital.



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DOCTOR AND HIS FEE*(Continued From Page 16)*

satisfied with both service and fee, other reasons exist for non-payment of the doctor's fee. The most common is personal financial troubles, which may provide a valid reason for the doctor deferring part of his fee. Other people simply do not pay bills or are inclined to pay them slowly; the doctor is generally considered the easiest to put off. Statistics show there is less chance of stringent or legal action to collect the bill; the delinquent debtor knows and relies upon this.

Many doctors make it a practice never to turn an account to a collection agency. Generally speaking, this is not a desirable policy, either from the point of view of the individual doctor or the profession as a whole. It serves to remove some of the discipline which should be required of every person to meet his just obligations. In the absence of mitigating circumstances, delinquent accounts should be referred to the collector as soon as it appears certain that such action is necessary.

The selection of a collection agency must be done with care. A few basic rules should always be observed:

1. Use a local agency which is well established and with a reputation for reliability.

2. Do not use mail-order or out-of-state agencies.

3. Visit the agency and inspect the collection methods used.

4. Better agencies do not require signed contracts.

5. Make certain that you understand the schedule of fees and the circumstances under which they are applicable. Investigate the financial rating of the agency and its reputation for settling obligations.

6. Assure yourself that no legal action will be instituted without your specific permission.

7. Avoid agencies using gimmicks, tricks, and other unethical collection procedures.

8. Assure yourself that the agency will respect your wishes in the handling of all accounts, and that it will report to you cases deserving special consideration. In this way the agency can be a part of your

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9. Do not leave the selection of the agency to an assistant. Satisfy yourself personally that it meets the requirements noted above.

10. Never give an account to more than one collection agency at any one time.

The most worthy addition to the problem of office economics would appear to be a greater amount of reliable instruction about the nature of fees while the embryo doctor is still in medical school. Too many physicians graduate without any understanding of the matter of fees; a course in medical economics in medical school, implemented by instruction from practicing physicians during internships and residencies, would be invaluable. The continuation of such consulting services on problems of fees would help the young doctor in getting his practice off to a successful start.

The elimination of fee problems will eliminate fully half of the problems now prevailing in the field of medical public relations.

NURSING SERVICE EXPLAINED

A new leaflet entitled "Can I Have Part-Time Nursing Care In My Home?" has been prepared for public distribution for the Tulsa County Public Health Association. The leaflet outlines the conditions under which patients may utilize the visiting nurse service of the Association, emphasizing that it must be authorized by a qualified physician. The cost (\$3.00 minimum) is also explained. Copies of the leaflet have been sent to all doctors for their inspection. The publication has already gone into public distribution.

DR. WILLIAM J. OSHER has taken attractive new professional offices at 608 Medical Arts Building, Tulsa.

DR. JAMES C. PETERS has returned from New York, N. Y., where he attended the annual meeting of the American College of Cardiology, May 18-20.

DR. CARL H. GUILD, JR. has been certified as a Diplomate of the American Board of Anesthesiology.



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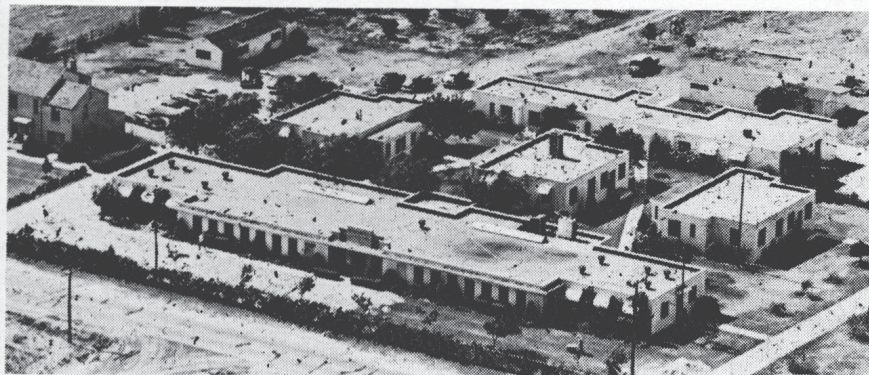
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ASSOCIATION TO BUILD

(Continued From Page 8)

The Association's plans to build its own building originated at the Spring meeting of the House of Delegates in 1954 when a special committee was appointed to study the problem. Dr. R. Q. Goodwin of Oklahoma City was named Chairman of the Committee, with the following members: Dr. W. A. Howard, Chelsea; Dr. Paul B. Champlin, Enid; Dr. Alfred R. Sugg, Ada; Dr. Henry H. Turner, Oklahoma City; Dr. C. E. Northcutt, Ponca City; and Dr. John E. McDonald, Tulsa.

The Committee subsequently recommended construction of the Association's own building in an area at the edge of Oklahoma City. Original plans to purchase one acre was later expanded to the present 2.26 acres.

The building will be a modern one-story structure designed by the architectural firm of Coston, Frankfurt and Short of Oklahoma City. It will include offices for the personnel, mimeograph and mailing room, publication offices for the Journal, committee rooms, and a large meeting room to house 60 to 75 persons (designed for use by the Council).

The land was purchased at a cost of \$6,215.00. The building is estimated at \$72,000.00. Road construction and parking area costs will amount to \$5,000.00. Equipment and decorations are budgeted at \$2,400.00 and the drilling and connecting of a water well at \$2,000.00. The architects and attorneys fees will be \$4,000.00. The present total estimated expenditure is \$91,615.00.

MOBILE X-RAY SCHEDULE

The schedule for Mobile X-Ray Unit of the Tulsa County Public Health Association has been announced as follows: June 1-3, Western Auto Supply Company; June 6-8, Century Geophysical Company; June 9-18, Davis Sporting Goods Company, 104 E. 3rd. The schedule for the balance of June will be announced later.

DR. WILLIAM M. BENZING has returned from a brief visit to Cincinnati, Ohio.

DR. WILKIE D. HOOVER has been added to the membership of the Post-graduate Study Committee of the Tulsa County Medical Society. Another addition is that of DR. E. N. LUBIN to the Press, Radio and Television Sub-Committee of the Public Policy Committee.

DR. JOHN G. MATT took second place in the Regional Sports Car Races at Coffeyville, Kansas, May 8-9. He drove a Jaguar.

DR. T. PAUL HANEY attended the annual meeting of the Southern Section of the American Public Health Association at New Orleans, Louisiana, May 9-11.

New members of the Tulsa County Medical Society elected last month by the Board of Trustees under interim membership regulations were DR. ROBERT A. NELSON, DR. EVELYN M. RUDE, DR. HAROLD W. FRIEZE, and DR. EARL E. SMITH, JR.

The Mobile Cancer Detection Clinic held May 3, 1955, at Eufaula was staffed by DR. CLEMENS M. HARTIG, DR.

E. MALCOLM STOKES, and DR. LUCIEN M. PASCUCI. On the same day a similar clinic was held at Wagoner, Oklahoma, with DR. BYRON W. STEELE, DR. DONALD L. MAURITSON and DR. MATTHEW B. MOORE participating.

DR. HENRY S. BROWNE has returned from Los Angeles, California, where he attended the 1955 Annual Meeting of the American Academy of Urology, May 16-18.

DR. HAROLD L. BEDDOE, former Tulsa physician now Assistant State Medical Examiner for the Commonwealth of Virginia, Richmond, visited in Oklahoma City last month to present five lectures in medico-legal procedures at the Southwestern Homicide Investigator's Seminar, May 16-20.

DR. EVELYN M. RUDE has taken new professional offices at 904 Medical Arts Building for the practice of Pediatrics.

DR. FRANK J. NELSON is vacationing in Colorado Springs, Colorado, and Cambridge, Massachusetts.



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