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THE BULLETIN

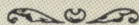
of the Tulsa County Medical Society

IN THIS ISSUE

Projected New St. Francis Hospital To Be
Located At 21st And Darlington Streets



Annual Meeting Personalities



Tulsa County Medical Society To Hear
Birmingham Dentist On March 12, 1956



The Strategy Of Malpractice

Vol. 22



No. 3



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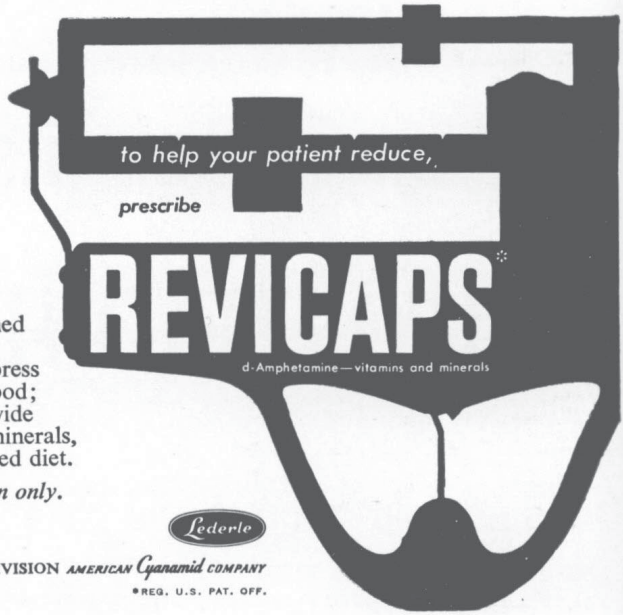
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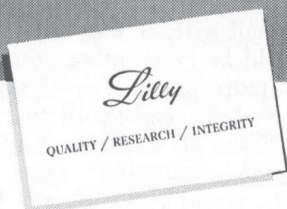
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With The Editor . . .

We can't subscribe to the recent action of the Mercer County Medical Society of New Jersey . . . To solve the problem of how to recognize major medical services from their colleagues, 216 of the Society's 235 members took out Blue Shield coverage . . . Professional courtesy should still be a recognized part of the principles of the Medical Profession . . . It has long been definitely set forth in the A.M.A. Code of Ethics that doctors have an obligation to care for their colleagues and their families without charge . . . Payment of any kind is specifically forbidden . . . True, the services rendered sometimes reach embarrassing proportions . . . But just the same the substitution of Blue Shield payments for professional courtesy should not be countenanced . . . Not all doctors agree, of course, and Blue Shield of Oklahoma has received several inquiries about the availability of its coverage for physicians . . . Doctors aren't eligible to join Blue Shield in Oklahoma . . . We think most doctors would prefer to continue professional courtesy . . . And that a small gift, if one feels it is indicated, would be much more desirable . . . That is a more sincere way of saying thanks and less embarrassing all the way around . . . Signs of medical progress: America's crude mortality rate has dropped 46% since 1900—from 17.2 deaths per 1,000 population in 1900 to 9.2 in 1954 . . . More than just a rumor: contemplated construction of a new medical office building at 21st and Lewis streets . . . Reports are that 35 doctors will tenant the building with most investing in its construction costs . . . The Tulsa Chamber of Commerce sees a continued increase in the general business index through the first nine months of 1956, then a leveling off . . . But no recession! . . . The Chamber is now estimating Tulsa population at 237,000 . . . The Program Committee will welcome your suggestions for speakers and topics for 1957 meetings of the Tulsa County Medical Society . . . The 1956 schedule is filled.

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THE BULLETIN

OF THE

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Vol. 22

TULSA, OKLAHOMA, MARCH, 1956

No. 3

SITE SELECTED FOR NEW HOSPITAL

**St. Francis Hospital To Be Built On
38-Acre Tract At 21st and Darlington
Streets. Completion of Structure Is At
Least Two Years Away.**

Tulsa's projected four million dollar St. Francis Hospital will be built on a 38-acre tract of land just east of Darlington Avenue on the south side of 21st street, it was announced last month by trustees for the institution.

Conditional purchase of the property was disclosed by Mr. R. Elmo Thompson, Chairman of a Site Selection Committee of the Tulsa Chamber of Commerce appointed at the request of the W. K. Warren Foundation, which will build and finance the new hospital and research center.

Mr. Thompson said the acreage was bought from Mr. and Mrs. F. C. Conkwright with the understanding that it would have to be approved for hospital use by the Tulsa City Board of Adjustment. Mr. Roy Sherrow, Director of the Adjustment Board, said the Board would schedule public hearings on the request before final decision was reached. As this issue of The Bulletin went to press, the public hearings, a routine policy procedure, had been scheduled for March 12, 1956.

The site of the new hospital is approximately two and three-quarters miles east of St. John's Hospital and is approximately three and three-quarters miles east and south of Hillcrest Medical Center. One of the chief stipulations in the selection of the site was that it be within easy driving distance of the other two major hospitals to conserve doctors' time in commuting.

Officials of the Warren Foundation

revealed last month that Mr. Frank Olston, Tulsa architect, had been retained as a consultant and "would probably be the general architect for the project." No plans have been completed for the proposed hospital. Mr. A. J. Murphy, Treasurer of the Warren Foundation, said that he had "no idea" when construction would start, pointing out that several months would be required to complete legal and architectural details alone. Observers have predicted construction of the hospital will probably not be completed until well into 1958.

The selected site is framed by 21st street, an unpaved continuation of 23rd street, Darlington avenue, and Hudson avenue. The area is entirely free of any buildings or improvements at this time except for a two-acre site occupied by the Berean Baptist Church, which is not included in the purchase. The site will be adjacent to the new Mayo Meadows Shopping Center where Sears Roebuck plan construction of a large suburban store.

The site was selected by the special Chamber of Commerce Committee from over 20 possible locations. Aerial photographs were taken of all proposed sites for study by the Committee. The announcement of the selection of the site put to end a public controversy over the suggested use of Woodward Park of Tulsa.

St. Francis Hospital will be operated by the Catholic Order of the Sister Adorers of the Most Precious Blood of Wichita, Kansas.

ANNUAL MEETING PERSONALITIES

LT. COL. JOHN P. STAPP

He has been called the fastest man on earth for his dangerous deceleration tests at Holloman Air Development Center.

Lt. Col. John P. Stapp has gone from a speed of 632 miles per hour to a dead stop in less than one and a half seconds and lived to tell the tale.

Called "the fastest man on earth," the Air Force medical officer who lived through the deceleration tests will be a visiting distinguished guest speaker at the 63rd Annual Meeting of the Oklahoma State Medical Association in Oklahoma City, May 6-9, 1956.

Colonel Stapp reached his record speed and deceleration in course of research into the effects windblast and tumbling will have on a pilot who is ejected from a plane traveling at supersonic speeds. His remarkable achievement drew worldwide recognition in December, 1954, when the tests were first performed. Time Magazine made him the subject of a cover story.

Dr. Robert M. Bird, Chairman of the Scientific Works Committee of the Oklahoma State Medical Association, said that Dr. Stapp would make two appearances at the 1956 convention. The first will be on Monday evening, May 7, 1956, in a public meeting in Municipal Auditorium. The second will be part of the scientific program limited to visiting physicians and will be of a more technical nature.

Although the panel of visiting guest speakers was not complete at the time this issue of The Bulletin went to press, Dr. Bird said the following had accepted invitations to appear:

E. Grey Dimond, M.D., Chairman of the Department of Medicine, University of Kansas Medical School, Kansas City, Kansas.

Paul C. Aebersold, Ph.D., Director of the Isotopes Division, United States Atomic Energy Commission, Oak Ridge,

Tennessee.

Edward C. Holmblad, M.D., Managing Director, Industrial Medical Association, Chicago, Illinois.

S. G. Gamble, M.D., Chairman of the Department of Physical Medicine, University of Oklahoma School of Medicine, and Medical Director, Rehabilitation Center, Oklahoma A. & M. School of Technical Training, Okmulgee, Oklahoma.

A number of other speakers will be announced later, Dr. Bird said.

The convention will open Sunday, May 6, 1956, with the annual meeting of the House of Delegates at Municipal Auditorium. The scientific program opens the day following and will continue through 12:30 P.M. on Wednesday, May 9th. Dr. Stapp's lecture is scheduled for Monday evening and the President's Inaugural Dinner Dance, featuring a big name orchestra, will be Tuesday evening at the Skirvin Tower Hotel.

The meeting also features 58 commercial exhibits in the basement of Municipal Auditorium, as well as a special program for members of the Auxiliary to the Oklahoma State Medical Association.

Oklahoma doctors are expected to be extremely interested in the presentations by Lt. Col. Stapp. Born in Brazil in 1910, the son of Baptist missionaries, he lived in South America until 1922, when he left to secure an American education. He received a B.A. degree in Zoology and Chemistry at Baylor University of Waco, Texas, in 1931, and the following year completed requirements for his Master's Degree. He later taught and did postgraduate work at the University of Texas, receiving his Ph.D. in Biophysics, Bacteriology and Physics in 1940. He then entered medical school and in 1944

received his M.D. from the University of Minnesota School of Medicine. His internship was served at St. Mary's Hospital of Duluth, Minnesota.

Dr. Stapp was called to duty as a medical officer in 1944 and served at numerous Air Force installations in the following years. In 1951 he was named Chief of the Special Projects Section at the Aero Medical Laboratory of Wright Field. Since 1953 he has been Chief of the Aero Medical Laboratory at Holloman Air Development Center, New Mexico. The two special subjects of this laboratory are Space Biology and Biodynamics. The human deceleration tests have been carried on since 1954 with Colonel Stapp as a volunteer for 26 of the 73 tests which have been run. His latest test run exposed him to a force 46.2 times gravity during a quarter of a second. He sustained two arm fractures, a rib fracture, retinal hemorrhage, and

moderate degrees of concussion in the course of the tests. For his work in these projects Dr. Stapp has twice received the Legion of Merit and more than ten other national and military awards.

The test vehicle which Dr. Stapp rode was a 2,000 pound sled mounted on rails and pushed by nine rockets with a total force of 40,000 pounds thrust. The sled reached its maximum speed in less than five seconds and braked to a complete stop in a fraction of a second.

Tulsa and other Oklahoma doctors planning to attend the 63rd Annual Meeting are urged to write now for hotel reservations. Requests should be addressed to the Oklahoma State Medical Association, 1227 Classen Drive, Oklahoma City, Oklahoma, stating type of accommodation desired, dates of arrival and departure.

A complete program is expected to be available late in March.



Lt. Col. John P. Stapp points to a chart on his experiments in human deceleration in his office at Holloman Air Development Center, New Mexico. The distinguished medical officer will be a guest speaker at the May meeting of the Oklahoma State Medical Association in Oklahoma City.



BIRMINGHAM DENTIST WILL SPEAK HERE MARCH 12, 1956

The Tulsa County Medical Society will meet jointly with the Tulsa County Dental Society on Monday, March 12, 1956, at 8:00 P.M. for a special program featuring Dr. J. F. Volker, Dean of the University of Alabama School of Dentistry, Birmingham, Alabama, as guest speaker. His subject will be "Diagnosis and Treatment of Oral Infections As Related to the Body As A Whole."

The meeting will again be in the Auditorium of the Blue Cross-Blue Shield Building at 1215 South Boulder, Tulsa. Telephone service is available by calling LUther 5-9149.

The unusual selection of a dentist to headline the Medical Society program was made by the Program Committee after hearing Dr. Volker's presentation at the annual meeting of the Oklahoma City Clinical Society in Oklahoma City last Fall. "Everyone was tremendously impressed with Dr. Volker's presentation," said Dr. Walter E. Brown, Chairman of the Program Committee, "and we felt that he had something unusual and worthwhile to offer the medical profession. We believe every doctor will profit by Dr. Volker's excellent presentation."

Dean Volker attended Rutgers University and in 1936 received his degree

in dentistry from Indiana University School of Dentistry. He subsequently completed his requirements for A.B., M.S. and Ph.D. degrees at the University of Rochester, where he majored in Biochemistry. Dr. Volker served a dental internship of one year at Mountain-side Hospital of Montclair, New Jersey, and in 1937 was appointed a Carnegie Fellow to the University of Rochester School of Medicine and Dentistry. In 1941 he was appointed Assistant Professor at the latter school. A year later he was named Professor of Clinical Dentistry at Tufts College and in 1947 was elevated to Dean of the Dental School. The following year he joined the University of Alabama School of Dentistry in his present position as Dean.

Dr. Volker has had a number of interesting academic assignments. In 1946 he was a member of the Unitarian Service Committee Medical Teaching Team of the UNRRA to Czechoslovakia. Two years later he served in a similar capacity for the WHO in Germany and Austria. In 1951 the United States Department of State sent him to Thailand as an advisor and consultant on medical and dental teaching problems.

The author of over fifty scientific articles in various phases of medical, dental and chemical research, Dr. Volker's special interests have included fluorosis studies, distribution of radioactive phosphorus in the teeth of experimental animals, and dental caries. He is a member of numerous dental and chemistry organizations.

Dr. Brown has announced the selection of Dr. H. Kenneth Jensen, Assistant Clinical Professor of Surgery at the University of Minnesota School of Medicine, Minneapolis, Minnesota, as guest speaker for the Tulsa County Medical Society meeting of April 9, 1956. Dr. Jensen's subject will be "Pancreatitis." There will be no meeting in May due to the annual meeting of the Oklahoma State Medical Association.

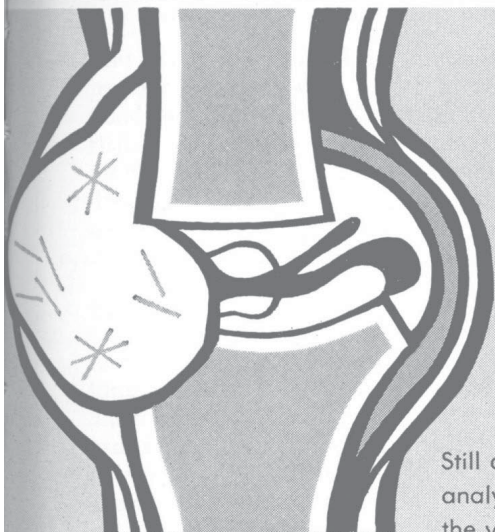
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1. Denko, C. W.; Ruml, D., and Bergenstal, D. M.: Am. Pract. & Digest Treat. 6:1865, 1955.

2. Holbrook, W. P.: M. Clin. North America 39:405, 1955.

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PRESIDENT'S PAGE

Next year we will celebrate the Golden Jubilee of the Tulsa County Medical Society. This is considered so important that a special committee has been appointed to arrange the details of the celebration.

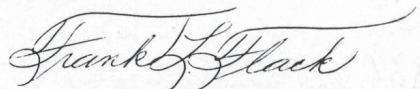
Diseases that were common and highly fatal at the time the Society was formed in 1907, such as typhoid fever, diphtheria, small pox and many other infections, are almost a thing of the past. Lincoln's son died when a few dollars worth of antibiotics would have saved his life. Death invaded the White House to take the son of President Coolidge because of an infection due to a blister; modern chemicals could have saved his life.

Let us not forget that these advances have been made by the great doctors of the past. In Tulsa County there are physicians who have been in practice for fifty years or more. They have worked hard and fought valiantly against unethical methods of practice. Some have exhausted themselves in the service of medicine, serving others better than themselves. They have been among our men of vision who founded and supported this Society, and you will remember it has been written, "Where there is no vision, the people perish."

The practice of medicine is both a vocation and avocation. Both contribute to make our profession what we deem it to be—the noblest of the arts.

Many of our colleagues have retired from practice. Taken from the long association with other doctors in the daily round of medical practice, they sorely miss these contacts. It is important that we do not forget these men, not only in a personal sense but for the contributions which they have made to medicine. "Old books, old wines, old friends are the best."

Sincerely,



President

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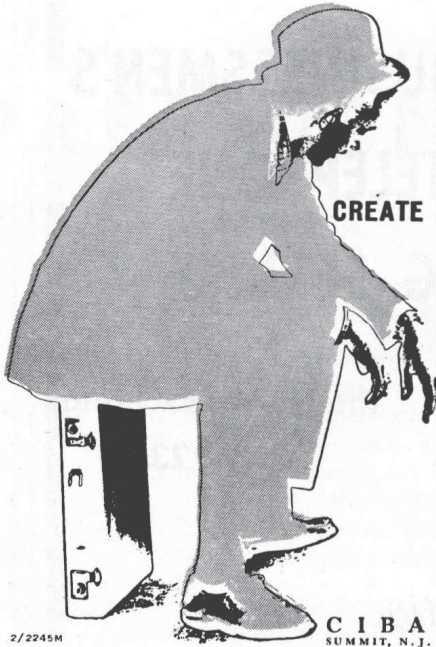
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THE STRATEGY OF MALPRACTICE

First in a Series

Malpractice is an ugly word.

It is a word that no amount of inflection and modulation of the voice can render pleasing to the ear. From its ominous first syllable it succeeds only in creating a sense of unrest and mistrust.

American doctors have good reason to find malpractice a particularly distasteful word. Once virtually unknown, it has risen in the professional consciousness with alarming speed. Where the physician at the turn of the century found the prospect of a malpractice suit as remote from reality as flight to Mars, the doctor of today must accept it as a commonplace hazard of the daily practice of medicine.

In 1955 many areas recorded from ten to twelve times as many malpractice suits filed or threatened as for the pre-World War II years. Judgments have risen to astronomical heights—as much as a quarter of a million dollars. Asking damages are frequently in six figures. The costs of defending or investigating the average threat or suit has risen as much as 350 per cent in the last ten years. So serious has the situation become that few insurance companies will write liability coverage; those that are writing are demanding and receiving record high premiums. It is now freely predicted in insurance circles that malpractice coverage may soon be entirely unavailable unless some positive and effective controls are instituted by the medical profession itself.

The phenomenal growth of malpractice suits may be attributed to a variety of causes. In some large measure it is due to a deterioration in the doctor-patient relationship. Doctors by their own admission no longer enjoy to the same degree the respect of the public which they were once accorded; patients are less hesitant to ask damages for real or imagined injuries. The hazards of modern methods of diagnosis and treat-

ment, frequently of the highest technical character, have increased the possibilities of errors in judgment, poor results, and accidents.

As much as anything, the startling increase in malpractice actions can be attributed to a new set of social values produced by the 20th Century. A seamy theory of social philosophy now widely prevalent has sharpened the desire for and need of "easy" money. Damage suits are filed on the slightest pretext, a situation deliberately encouraged by some unscrupulous attorneys. The wholesale marketing of liability coverage has been another factor in the growth of the damage suit; the theory that the insurance company will pay removes any personal scruples against litigation. Doctors, with better-than-average incomes for their earning years, are fair game, although it should be noted that the increase in malpractice actions is not an exception. All types of damages suits have risen wildly in the last two decades.

This new factor in medical practice has not been without its effects. The doctor of today must frequently sacrifice his trained professional judgment to the whims of the patient lest he face a suit for damages. Thus it is, for example, that surgeons operate with an inferior anesthetic because the patient has forbidden a spinal puncture. The whole approach of the doctor to his patient has been colored by a new awareness of the dangers of malpractice; the relationship is strained by cautiousness and it is increasingly difficult to reach the rapport between doctor and patient which good medicine demands.

What is to be done about this situation? Most malpractice experts agree the most serious weakness is a lack of understanding of the principles of malpractice prevention by the doctor himself. Few physicians seem willing to take the time

necessary for a comprehensive study of the problem; most do not realize that ordinary precautions are no longer adequate. An eternal vigilance in the smallest detail is essential if malpractice is to be prevented and controlled. Some doctors have learned this lesson by the hard road of a malpractice suit of their own; while this method of educating the profession is not recommended, it is unquestionably the most effective way. Neither do doctors appear to learn by experience of others; fully 75 per cent of the malpractice cases filed or threatened in Tulsa County were based upon situations which have proved costly in the courts previously. One hope lies in the courses of medical jurisprudence which most medical schools have now established. This should pay dividends as new crops of young doctors enter practice; even so, experience in the actual mechanics of practice must prove the final teacher.

There is little question that malpractice suits can be reduced substantially by the application of a simple set of common-sense precautions in daily practice. The following salient points in the strategy against malpractice stand out clearly:

1. The doctor must care for his patient with the most scrupulous attention to the requirements of good medical practice.

2. Professional ability alone is not enough in handling the patient. The doctor must exhibit the highest standards of attentiveness, tact and respect for the patient and the patient's family. The indifferent or impersonal approach to medicine is to be avoided at all costs.

3. Patient complaints and dissatisfactions, either in regard to services or fees, must never be disregarded or ignored. The doctor is no exception to the fundamental concept that goods and services must meet a general standard of consumer satisfaction. The refusal of a doctor to discuss complaints may frequently aggravate a relatively simple problem to the status of a damage suit.

4. Destructive and careless criticism of the work of other doctors is to be avoided at all costs. This includes not only oral statements but written reports as well.

5. The patient must never be abandoned. The legal relation of the doctor to patient must be terminated in a way to assure no interruption in the care of the patient.

6. The doctor must recognize his limitations and remain within the scope of work for which he is qualified by training and experience.

7. The physician must avoid promising too much to the patient. An over-optimistic prognosis which fails to materialize is a frequent invitation to disaster.

8. Personal supervision of nurses and other employees by the doctor is essential. The physician is legally responsible for the actions of these persons and cannot evade the penalties for their errors.

9. It is important that the doctor render sufficient instructions to the patient, particularly in the matters of frequency of visits, use of prescriptions and home procedures of treatment, laboratory investigations, and reporting of symptoms.

10. Complete medical records in every case are a must. The records should reflect what was done and when it was done. Copies of all communications with the patient should be attached. The records must clearly indicate that nothing was neglected to assure the safety and comfort of the patient. Records should be legible, should not be expressed in any private codes, and should be intelligible for presentation as evidence in court if necessary.

11. Patients should be advised in advance of any unusual or prolonged absences of the doctor from the office. Where possible, arrangements should be made with another physician to look after the practice during his absence. The doctor must assure himself when refusing to make night and emergency calls on regular patients that the matter can wait. If night calls are not made, the physician should again arrange with another physician to make such calls.

12. Written consent should be obtained for surgical operations and other unusual procedures. Never fail to secure consent of the proper parties to sterilize a person; this is a hazardous procedure which is best entirely avoided.

(Continued on Page 40)



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L LAKESIDE

DOCTORS FARE WELL IN PUBLIC SURVEY

Opinion Study Indicates 82 Per Cent Of Americans Have Family Doctors. Principal Criticisms Are Of Medical Charges.

American doctors had an opportunity last month to find out what patients think of them as results of an independent nationwide public opinion poll were made public.

They had little cause for concern, however. From the survey emerged a picture of what people like and expect from their doctor: sympathy, patience and understanding, rather than guaranteed cures and wonder drugs. What they criticized was a matter of time and economics, not of personality or ability.

Some of the major items in the study sponsored by the American Medical Association but conducted and tabulated by a private research firm included:

1. About five out of six or 82% of Americans have their own family doctor.
2. Physicians as individuals were given a vote of confidence by the public—96% like their doctor as a person.
3. While two-thirds of the people with regular family doctors once had other personal physicians, the reason for changing doctors rarely includes personality clashes or lack of faith. Only one-twentieth changed doctors because they lost confidence; the major reason for changing is that the patient or doctor moved.
4. While most people think highly of their own doctor, they are inclined to think less highly of other doctors. On the whole, however, attitudes about doctors are far more favorable than unfavorable.
5. Speaking of their own doctors, 91% deny that their doctor thinks he is better than other people; 87% say he is as dedicated to serving mankind as he should be; 82% deny that he is too quick to recommend operations; 80% say he is frank enough about their illnesses; and 78% deny he keeps patients waiting longer than necessary.
6. On some problems of medical economics: only 48% denied (while 39% had no opinion) that doctors charge higher fees to patients with insurance;

31% denied that doctors receive rebates from druggists (while 52% had no opinion); and 32% denied (while 57% had no opinion) that doctors split fees on referrals to and from other doctors.

7. Principal criticisms of doctors were: "their charges and interest in money," listed by 13%; "don't take enough time and hurry you," listed by 9%; and such miscellaneous complaints as "impersonal, cold and independent" and "not frank, speak half-truths." Most people in listing their complaints refer only to "some" and not "most" or "all" doctors.

8. The American Medical Association's pride suffered a rude blow when the survey revealed only 48% of those interviewed had ever heard of the organization. Of this number only one-fifth could remember anything, good or bad, about it.

9. Doctors do come in emergencies say three out of four.

10. Five out of six interviewed reported they felt their doctor did give them enough time and attention. Four out of five thought the doctor was frank with him in discussing illnesses and complaints.

11. Doctors' fees are reasonable, five out of six reported.

12. What do people like most about doctors? The principal answers: friendliness and personality; personal interest, sympathy and kindness; professional competence and intelligence; frankness and honesty; available and come when called; and dedication to the patient and to medicine.

The study interviewed 4,000 people during 1955, utilizing 289 surveyors in all parts of the country. A sizeable number of interviews were done in Tulsa, it was revealed, although individual tabulations on the Tulsa area were not made available. Financed by the American Medical Association, the survey was conducted by Ben Gaffin and Associates of Chicago, a private market research and

(Continued on Page 34)

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MARCH MEDICAL CALENDAR

FRIDAY, March 2nd:

Postgraduate Study Course, University of Oklahoma School of Medicine, Oklahoma City, Oklahoma. Time to be announced. Subject: "Diseases of the Liver." Continues through March 3rd.

St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.

St. John's Tumor Clinic, Clinical Conference, 9:30 A.M.

X-Ray Conference, Hillcrest Medical Center, 3:30 P.M.

Journal Club, Hillcrest Medical Center, 6:00 P.M. Subject: "Heart and Great Vessel Surgery." Speakers, Dr. Vance Lucas and Dr. Martin Leibovitz.

MONDAY, March 5th:

Postgraduate Study Course, University of Oklahoma School of Medicine, Oklahoma City, Oklahoma. Time to be announced. Subject: "Electrocardiography." Continues through March 9th.

Executive Committee Dinner Meeting, Hillcrest Medical Center, 6:00 P.M.

Staff Meeting, Hillcrest Medical Center, 8:00 P.M.

Medical Telecast, "Medic" series, Television Station KVOO, 8:00 P.M.

TUESDAY, March 6th:

St. John's Tumor Clinic, 8:00 A.M.

Interns and Residents Lecture, St. John's Hospital, 12:30 P.M. Subject: "Tumors of the Breast, Diagnosis and Treatment—Part Two." Speaker, Dr. Thomas J. Hardman.

WEDNESDAY, March 7th:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.

Medical Motion Picture, Hillcrest Medical Center, 4:30 P.M. Subject: "Surgical Anatomy of the Lumbo-Renal Area." Speaker, Dr. Howard M. Cohenour.

THURSDAY, March 8th:

Annual Meeting, Oklahoma City Academy of Ophthalmology and Otolaryngology, Oklahoma City, Oklahoma. Time to be announced. Continues through March 9th.

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject: "Diagnosis and Treatment of Abnormal Vaginal Bleeding." Speaker, Dr. Adolph N. Vammen.

Medical Motion Picture, Hillcrest Medical Center, 12:30 P.M. Subject: "Commisurotomy for Mitral Stenosis." Speaker, Dr. Martin Leibovitz.

FRIDAY, March 9th:

St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.

St. John's Tumor Clinic, Clinical Conference, 9:30 A.M.

X-Ray Conference, Hillcrest Medical Center, 3:30 P.M.

MONDAY, March 12th:

Sectional Meeting, American College of Surgeons, Little Rock, Arkansas. Continues through March 13th.

Scientific Meeting, Tulsa County Medical Society, Blue Cross-Blue Shield Building, 1215 South Boulder, Tulsa, 8:00 P.M. Subject: "Diagnosis and Treatment of Oral Infections As Related To The Body As A Whole." Speaker, Dr. J. F. Volker, Dean, University of Alabama School of Dentistry, Birmingham, Alabama. Joint meeting with the Tulsa County Dental Society.

TUESDAY, March 13th:

St. John's Tumor Clinic, 8:00 A.M.

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject: "Diagnosis and Treatment of Abnormal Vaginal Bleeding—Part Two." Speaker, Dr. Adolph N. Vammen.

Postgraduate Study Lecture, Hillcrest Medical Center, 5:30 P.M. Subject: "Gastrointestinal Bleeding." Speakers, Dr. Craig S. Jones and Dr. Terrell Covington, Jr. Byrne Memorial Hospital Staff Meeting, 8:00 P.M.

WEDNESDAY, March 14th:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.

Clinical Pathological Conference, Hillcrest Medical Center, 7:30 P.M.

University of Oklahoma School of Medicine Short Course in Urological Surgery, Oklahoma City, 3:30 P.M.-8:30 P.M.

MARCH MEDICAL CALENDAR

THURSDAY, March 15th:

Copy deadline for the April issue of The Bulletin.

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject: "Diabetes." Speaker, Dr. Earl I. Mulmed.

Medical Motion Picture, Hillcrest Medical Center, 4:30 P.M. Subject: "Surgery of the Aged." Speaker, Dr. Myra A. Peters.

Medical Postgraduate Conference, University of Oklahoma School of Medicine, Oklahoma City, 7:30 P.M. Subject: "Medical Implications of Newer Anaesthetic Procedures." Speakers, Dr. Howard A. Bennett, Dr. Joseph M. White, Jr., and Dr. Lawrence Stream.

FRIDAY, March 16th:

St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.

St. John's Tumor Clinic, Clinical Conference, 9:30 A.M.

X-Ray Conference, Hillcrest Medical Center, 3:30 P.M.

Journal Club, Hillcrest Medical Center, 6:00 P.M. Subject: "Surgery of the Peripheral Vessels." Speaker, Dr. Roger Q. Atchley.

MONDAY, March 19th:

Eighth Annual Meeting, American Academy of General Practice, opens at Washington, D.C. Continues through March 22nd.

Medical Telecast, "Medic" series, Television Station KVOO, 8:00 P.M.

TUESDAY, March 20th:

St. John's Tumor Clinic, 8:00 A.M.

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject:

"Diabetes—Part Two." Speaker, Dr. Earl I. Mulmed.

Medical Assistants Society of Tulsa Meeting, Michaelis Cafeteria, 6:30 P.M.

Surgical Section Meeting, Hillcrest Medical Center, 7:30 P.M.

Board of Directors Meeting, Tulsa County Public Health Association, 807 South Peoria, 7:30 P.M.

WEDNESDAY, March 21st:

St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.

Postgraduate Study Lecture, Hillcrest Medical Center, 4:30 P.M. Subject: "Urological Procedures for the Hospital Patient." Speaker, Dr. Howard M. Cohenour.

THURSDAY, March 22nd:

Medical Motion Picture, Hillcrest Medical Center, 12:30 P.M. Subject: "Surgical Treatment for Tetralogy of Fallot." Speaker, Dr. Martin Leibovitz.

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject: "Acute Injuries of the Hand and Their Management." Speaker, Dr. Jack L. Richardson.

FRIDAY, March 23rd:

St. John's Isotope Committee Meeting, St. John's Hospital, 8:30 A.M.

St. John's Tumor Clinic, Clinical Conference, 9:30 A.M.

X-Ray Conference, Hillcrest Medical Center, 3:30 P.M.

MONDAY, March 26th:

Scientific Meeting, Tulsa Academy of General Practice, Hotel Tulsa, 6:30 P.M.

Speaker, Dr. Theodore A. Watters, Professor of Neuropsychiatry, Louisiana State University School of Medicine, New Orleans, Louisiana. Subject: "Psychotherapy for the General Practitioner."

Medical Telecast, "Medic" series, Television Station KVOO, 8:00 P.M.

TUESDAY, March 27th:

St. John's Tumor Clinic, 8:00 A.M.

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject: "Lower Intestinal Hemorrhage and Diseases." Speaker, Dr. John G. Matt.

Postgraduate Study Lecture, Hillcrest Medical Center, 5:30 P.M. Subject: "Hemoptysis, Dyspnea, Cough." Speakers, Dr. Robert A. Nelson and Dr. Martin Leibovitz.

Obstetrical Section Meeting, Hillcrest Medical Center, 8:00 P.M.

WEDNESDAY, March 28th:

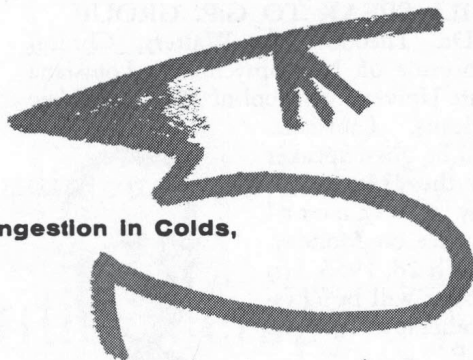
St. John's Isotope Clinic, St. John's Hospital, 8:30 A.M.

Medical Section Meeting, Hillcrest Medical Center, 6:15 P.M.

THURSDAY, March 29th:

Residents and Interns Lecture, St. John's Hospital, 12:30 P.M. Subject: "Lower Intestinal Hemorrhage and Diseases—Part Two." Speaker, Dr. John G. Matt.

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NEW ORLEANS PSYCHIATRIST WILL SPEAK TO G.P. GROUP

Dr. Theodore A. Watters, Clinical Professor of Neuropsychiatry, Louisiana State University School of Medicine, New Orleans, Louisiana, will be guest speaker for the Tulsa Academy of General Practice on Monday, March 26, 1956. His subject will be "Psychotherapy for the G. P."

The scientific program will be preceded by a social hour and dinner at 6:30 P.M. at Hotel Tulsa. Reservations are necessary and may be made by calling LUther 2-5904. All medical doctors are invited to attend. The scientific program will be at 8:00 P.M.

Dr. Watters is a graduate of Tulane University School of Medicine, Class of 1929. He served a two-year rotating internship at Charity Hospital of New Orleans and residencies in neuropsychiatry at the Neurological Institute of New York City and the Henry Phipps Psychiatric Hospital of Baltimore, Maryland. Returning to New Orleans in 1935 he joined the faculty of Tulane University School of Medicine. In 1950 he was named to his present teaching post with Louisiana State University School of Medicine.

The author of numerous papers in the field of neuropsychiatry, Dr. Watters is a diplomate of the American Board of Psychiatry and Neurology, fellow of the American Psychiatric Association, member of the American Psychosomatic Society, American Psychology Association, and the Southern Psychiatric Association.

DR. G. R. RUSSELL and DR. RALPH A. MCGILL attended the National Blue Cross-Blue Shield meeting at Chicago, Illinois, February 16-19, 1956.

DR. WALTER E. BROWN attended a meeting of the Council of the American College of Radiology at Chicago, February 8-9, 1956. Dr. Brown is Councilor from Oklahoma.



Dr. Watters

MEDICAL SCHOOL SETS MEET ON UROLOGICAL SURGERY

The University of Oklahoma School of Medicine has scheduled a one-day postgraduate study course in Urological Surgery for Wednesday, March 14, 1956, at Oklahoma City.

The program will begin at 3:30 P.M., and continue through the evening with an hour's break at 5:30 P.M. for dinner in the University Hospital Cafeteria. The following papers will be presented by Oklahoma City physicians:

"Excretory Urogram." Speaker, Dr. Meredith M. Appleton.

"The Kidney Stone Problem." Speaker, Dr. Jess E. Miller.

"Minor Surgical Procedure in Urology." Speaker, Dr. James S. Boyles.

"Management of the Senile Patient With Urological Problems." Speaker, Dr. Joseph Collins.

The course will close with a panel discussion of problem cases moderated by Dr. Don W. Branham. Panel participants will include Drs. J. M. Taylor, C. B. Dawson, J. Hartwell Dunn, A. M. Young, and Donald D. Albers. Visiting doctors are invited to bring pyelograms needing interpretation and to present problem cases for discussion.

The University's regular monthly Medical Postgraduate Conference has been scheduled for Tuesday, March 15th, on the subject of "Medical Implications of Newer Anaesthetic Procedures." Dr. Howard A. Bennett, Tulsa anesthesiologist, will moderate a panel including Drs. Joseph M. White, Jr., and Lawrence Stream. The Conference will be at 7:30 P.M. in Room 118 of the Medical School, Oklahoma City.

Eight veteran Tulsa doctors were honored February 15th with a testimonial dinner by officials of Hillcrest Medical Center in recognition of their services to the Hospital. Gold pins were presented to DR. W. J. BRYAN, DR. MORRIS B. LHEVINE, DR. H. D. MURDOCK, DR. T. B. COULTER, DR. ONIS FRANKLIN, DR. E. W. REYNOLDS, DR. JAMES D. MARKLAND, and DR. F. L. NELSON. All were named to the Honorary Staff.



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1. Busse, E.A.: Treatment of Rheumatoid Arthritis by a Combination of Cortisone and Salicylates. *Clinical Med.* 11:1105 (Nov., 1955).
2. Roskam, J., VanCawenberge, H.: *Abst. in J.A.M.A.*, 151:248 (1953).
3. Coventry, M.D.: *Proc. Staff Meet., Mayo Clinic*, 29:60 (1954).
4. Holt, K.S., et al.: *Lancet*, 2:1144 (1954).
5. Spies, T.D., et al.: *J.A.M.A.*, 159:645 (Oct. 15, 1955).

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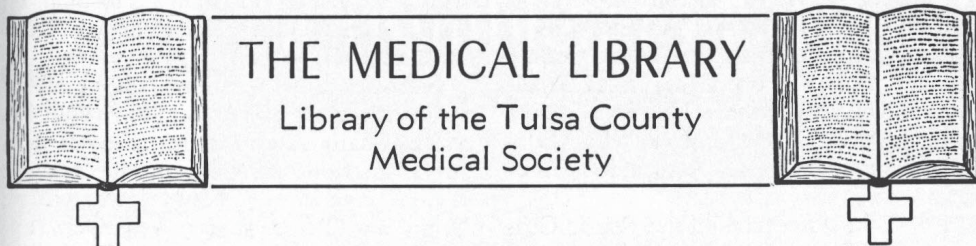
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GIFTS OF THE MONTH—:

Dr. David V. Hudson. Public Health Reports, Volume 65, Numbers 1-52, 1950.

RECENT PUBLICATIONS OF THE TULSA COUNTY MEDICAL SOCIETY—:

Dr. Henry S. Browne. An Improved Basket Bougie for Extraction of Ureteral Calculi. *Journal of Urology*, 75:55-56 (January) 1956.

Dr. Ernest S. Kerekes. A Simple Device for Stereoscopic Viewing of Films. *American Journal of Roentgenology, Radium Therapy and Nuclear Medicine*, 75:141-143 (January) 1956.

Dr. Robert M. Shepard, Jr. Indications, Technique and Aftercare of Tracheotomy. *Journal of the Oklahoma State Medical Association*, 49:6-9 (January) 1956.

LIBRARY JOURNALS HAVE HUGE REPLACEMENT COST

It may be of interest to learn what the replacement cost would be at present day prices of some of the journals found in the Library of the Tulsa County Medical Society. The prices listed are those charged by dealers in old periodicals. In some cases these prices will be approximate as a few issues may be missing; however, the Library may be missing a few issues or a few volumes in its holding. These prices do not include any issues for 1955. Where our holdings are incomplete it is so mentioned.

Journals in Library:

Dealers' Prices:

American Heart Journal, Complete	\$315-\$320
American Journal of Cancer, Volumes 4-49	\$350-\$500
Cancer Research, Complete	\$340
American Journal of Clinical Pathology, Complete	\$260
American Journal of Medicine, Complete	\$195, or \$175 unbound
American Journal of Obstetrics & Gynecology, Volumes 5-70	\$275-\$325 (some missing)
American Journal of Roentgenology, Volumes 9-74	\$425-\$550 (some missing)
American Journal of Surgery, Complete	\$425
Annals of Internal Medicine, Volumes 2-40	\$200-\$215
Annals of Surgery, Complete	\$800
Archives of Dermatology, Volumes 5-71	\$425-\$485
Blood, Complete	\$225-\$245 unbound
Journal of Allergy, Complete	\$450
Journal of the American Medical Association, Volumes 40-159	\$600
Journal of Biological Chemistry, Volumes 90-217	\$2,600 (Volumes 1-207) or \$3,250 (Volumes 1-214)
Journal of Urology, Complete	\$575 (partly bound)
Physiological Reviews, Volumes 8-35	\$525 (Volumes 1-34)
Quarterly Index Cumulative Medicus, Complete	\$800
Radiology, Volumes 2-66	\$450-\$475 (partly bound)

Who may use the Library of the Tulsa County Medical Society? Regulations adopted by the Library Committee and approved by the Board of Trustees limit borrowing privileges to members of the Tulsa County Medical and Dental societies. Visiting physicians, medical students, and pre-medical students may use the Library but may borrow books and journals only by permission of the Librarian. All other persons are not entitled to use the Library. Members of the Medical Society may sign a guest card, obtainable from the Librarian, to permit lay persons to use the library. Such persons may not borrow books or journals, and a guest card must be presented for each time the library is used. Doctors signing guest cards should be careful to understand fully the purpose for which the use of the Library facilities is sought.

TULSA PATIENT CARE COSTS BELOW NATIONAL AVERAGE

Hospital care costs in Tulsa County are less than the prevailing rates in almost all sections of the United States, a study released last month by the Oklahoma State Hospital Association indicates.

An eight-state area in the South Central United States, including Oklahoma, reported an average per day cost of \$23.43 in hospitals having 226 beds or more. This compares to a figure of \$21.27 per patient day for Hillcrest Medical Center

and \$19.00 for St. John's Hospital of Tulsa. The average per day rate in Tulsa is \$20.13.

Statistics from a national survey of the American Hospital Association show the average daily rate in Tulsa is lower than for all sections except a middle Atlantic region comprising New Jersey, New York, and Pennsylvania, where the average daily rate is \$19.69 for patients in the metropolitan class.

Average daily patient rates ran as high as \$32.13 on the west coast, the survey showed.

A breakdown of costs in the Oklahoma area are as follows: administration, \$2.70; dietary department, \$2.76; house-keeping, \$1.10; laundry, 42 cents; plant operation, \$1.45; medical and surgical \$2.53; operating and delivery rooms, \$1.96; pharmacy, \$1.58; nursing, \$4.28; anesthesia, 70 cents; laboratory, \$1.58; x-ray, \$1.21; and miscellaneous expenses, 66 cents.

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STUDY COURSE SET

A six-day Basic Course in Electrocardiography has been scheduled for the University of Oklahoma School of Medicine for March 5-10, 1956, at Oklahoma City. The course will be conducted by Dr. Robert E. Bayley and Dr. Loyal L. Conrad of the Department of Medicine. Registration will be \$75.00. A complete program has been mailed to all doctors.

DR. EDWIN R. SHAPARD is now associated with DR. WILLIAM R. R. LONEY in the practice of Obstetrics and Gynecology at 304 Medical Arts Building, Tulsa.

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SURGICAL CONGRESS TO MEET IN TUCSON, APRIL 16-18

The Southwestern Surgical Congress has announced the dates of its Eighth Annual meeting for April 16-18, 1956, at the Pioneer Hotel, Tucson, Arizona. Twenty-seven scientific papers will be featured on the program.

Visiting distinguished guest speakers for the event include:

John Adriani, M.D., Professor of Surgery and Anesthesiology, Tulane University School of Medicine, New Orleans, Louisiana.

Robert A. Wise, M.D., Associate Clinical Professor of Surgery, University of Oregon School of Medicine, Portland, Oregon.

Joseph H. Boyes, M.D., Assistant Professor of Surgery, University of Southern California Medical School, Los Angeles, California.

The program will also feature panel discussions of industrial and rural injuries of the hand, new concepts and recent advances in anesthesia, and carcinoma of the breast. Special breakfast meetings and roundtable luncheons will provide opportunities for forum discussions of surgical problems.

Social events will include the annual banquet, a chuckwagon feed with western entertainment, and a group tour to Mexico to see a bullfight. A complete printed program has been distributed to all members of the Congress, and other interested physicians may write for programs to the Southwestern Surgical Congress, 207 Plaza Court, Oklahoma City, Oklahoma. Non-members may attend.

DR. LAWRENCE A. RATCHFORD has been named a junior member of the American Society of Anesthetists.

DR. E. N. LUBIN has been named Co-Chairman of a special sub-committee of the Survey on Indigent Medical Care in Tulsa now being conducted by the Tulsa Council of Social Agencies. Dr. Lubin's group will study indigent care plans in other cities and their application to Tulsa. Other doctors named to the Sub-Committee include DR. JAMES W. KELLEY and DR. ALBERT W. WALLACE.

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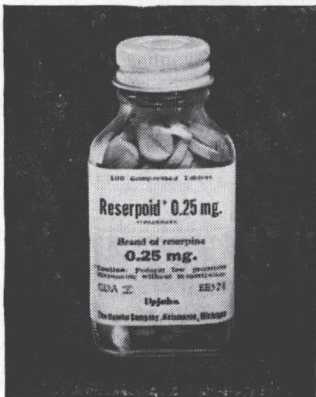
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Each doctor has been sent an initial order of 300 cards. Additional cards may be reordered from the Blue Cross-Blue Shield Plans, 1215 South Boulder, Tulsa. If the project proves successful, it will be continued indefinitely.

TULSANS ELECTED TO OFFICE

Two Tulsa physicians have been named as officers of the Oklahoma Academy of General Practice. They are Dr. Marshall O. Hart, delegate to the American Academy of General Practice, and Dr. Charles E. Wilbanks, alternate delegate. The pair were elected at the annual meeting of the organization last February 6-7 in Tulsa.

Other officers named by the general practice group were Dr. Elmer E. Ridgway, Jr., Oklahoma City, President-Elect; Dr. Virgil Gray, Muskogee, Vice-President; Dr. V. M. Rutherford, Oklahoma City, Secretary-Treasurer. Dr. Mark Holcomb of Enid is serving as President.

OEENT GROUP TO MEET

The Oklahoma City Academy of Ophthalmology and Otolaryngology has announced its 1956 Annual Meeting for March 8-9 at Oklahoma City. Guest speakers for the event will include Dr. Peter Kronfeld, Professor of Ophthalmology, University of Chicago Medical School, Chicago, Illinois, and Dr. Francis E. Lejeune, Chairman of the Department of Otolaryngology, Tulane University School of Medicine, New Orleans, Louisiana.

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PUBLIC OPINION SURVEY

(Continued From Page 18)

public opinion firm. Interviewees were selected as that the proportion of people from various age, economic, geographical and other groups matched the proportion of such people in the total United States population. The study included a sampling on selected questions of 500 physicians as well as 100 persons in each of five special groups — editors, columnists and commentators; attorneys; pharmacists; registered nurses; and executive secretaries of state and county medical societies.

The complete results of the survey have been published in two volumes which are available from the Library of the Tulsa County Medical Society.

The public does have a realistic idea of the number of years of training required to practice medicine. The most common answer, given by 28%, is eight years; the next most common, ten years.

According to the largest number (26%), doctors never retire. Twenty-one per cent gave 65-69 years as average retirement age, while other answers varied from 60 to 75 years or older. Only six per cent thought doctors retired before 60.

The public also estimated accurately the doctors' own work week of 63 hours with 12 per cent of his time devoted to charity.

Doctors are more critical of themselves than are their patients; their agreement that some of the listed complaints are true ranged as much as 20 per cent above the public's. They agree with public estimates on capability, intelligence, and willingness to accept advances. They are quicker to agree that they do not give as much time as they would like and on lack of availability for emergencies.

About half of the public but only a fifth of the doctors think there are not enough doctors in the United States. However, only nine per cent of the public blame this on the medical profession or the American Medical Association. Forty-five per cent say the profession itself encourages young people to become doctors.

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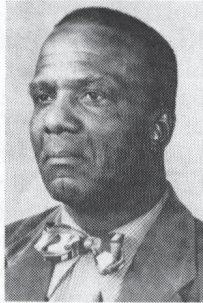
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NEW APPLICANTS

The following physician is an applicant for membership in the Tulsa County Medical Society:

Roscoe C. Bryant, M.D., 360 North Frankfort Place, Tulsa. Medical Degree, Meharry Medical College, 1922. Interned Hubbard Hospital, Nashville, Tennessee, 1922-23. In private practice, Tulsa, Oklahoma, 1923-56. General Practice. Member, North Tulsa Medical Society, Oklahoma State Medical, Dental and Pharmaceutical Association, John A. Andrew Clinical Society, and National Medical Association. Recommended by Dr. F. L. Flack and Dr. Charles J. Bate.



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BLOOD CENTER NEWS

DISTRIBUTION & REPLACEMENT REPORT

January, 1956

Hospital:	Bloods Used:	Replacements:	% Repl.
Hillcrest	320	204	63.8%
St. John's	574	203	35.4%
Byrne	23	14	60.9%
Mercy	9	13	144.4%
Osteopathic	102	33	32.4%
Moton	5	3	60.0%
Broken Arrow	11	17	154.4%
Tulsa Osteo.	8	1	12.5%
Other	28	20	71.4%
Totals	1,080	508	47.0%

The Tulsa County Red Cross Blood Center has received new standard mobile equipment to facilitate the efficiency of the Center's mobile visits to industrial plants of Tulsa and to the smaller towns of Tulsa County. The new equipment consists of four donor work tables and eight standard mobile donor beds.

The new work tables are packed in the form of a suitcase and each table contains sufficient supplies for two donor

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beds. The beds are light weight with plastic coverings that eliminate the use of sheets. The advantage of the new equipment is that it eliminates considerable packing and unpacking time because it remains in the luggage type carriers.

Dr. Betty Conrad, Medical Director, announced last month that a limited quantity of serum albumen will be available soon for distribution through the Tulsa County Red Cross Blood Center. Recipients of the serum albumen and blood derivatives from the Center will be asked to replace them with one unit of whole blood for each unit of derivatives received. There will be no charge for the serum albumen itself. Hospitals will make an administration charge to the patient, however. The amount of this charge is now being studied by the Tulsa County Red Cross Blood Center, and it is expected that a standard uniform charge will be agreed upon by participating hospitals within the near future.

Participating hospitals were reminded last month that regulations of the Center prohibit any disposal of blood other than by (1) administration to an in-patient or out-patient on the premises of the hospital, or (2) return to the Tulsa County Red Cross Blood Center. Unused blood must be returned to the Center.

Members of the Tulsa County Medical Society are urged to visit the Center to inspect its greatly enlarged and remodeled quarters and its large quantity of recently purchased equipment.

DR. MARSHALL O. HART has been named Chief of Staff at Byrne Memorial Hospital for the current year.

DR. and MRS. SAMUEL R. TURNER are the parents of a baby boy, born last month at Hillcrest Medical Center.

DR. PAUL O. SHACKELFORD has been named a Fellow of the American Academy of Dermatology and Syphilology.

DR. MANUEL BROWN attended the annual meeting of the American Academy of Allergy at St. Louis, Missouri, February 6-8, 1956.

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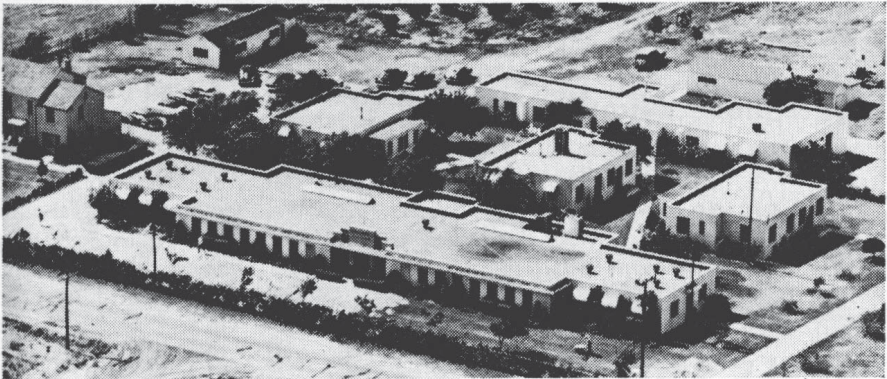
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MALPRACTICE CASES

(Continued From Page 16)

13. While the doctor should keep abreast of progress in the medical profession, he must avoid experimental or untried procedures.

14. A safety check of all equipment used by the doctor should be made at frequent intervals.

15. Examination of female patients should be done only when a third person is present. This is the best safeguard against charges of undue familiarity.

16. Telephoned prescriptions make possible the danger of errors in transmission. Prescriptions are best written and handed to the patient. Copies of prescriptions should be retained.

Once the doctor becomes aware that a malpractice suit against him is possible, he should take some further precautions:

1. The physician must avoid making any statements to the patient which constitute or might be construed as an admission of guilt. It is important to instruct employees to exercise similar care in this respect.

2. Immediately upon the first indication of a suit the doctor should notify his insurance carrier. This is required by all policies and failure to make a prompt report may release the company from its responsibility to defend the case.

3. No statements by the doctor to the patient, either written or oral, should be made except on advice of legal counsel. Under no circumstances should any statement be made to the attorney for the plaintiff without advice of counsel.

4. The physician should never reveal to the patient or the patient's attorney that he carries professional liability insurance.

5. The doctor should never make any attempt to personally settle a threatened malpractice action. Such action will again eliminate the insurance carrier from liability.

6. Malpractice actions should not be discussed or commented upon to the press.

7. Full cooperation with official malpractice committees of medical societies, such as the Insurance Committee of the Tulsa County Medical Society, is highly

desirable and usually required by the terms of the policy. These committees are experienced in malpractice matters and serve in the capacity of friends to the doctor concerned.

8. Idle discussion of malpractice suits with lay persons and friends is to be avoided.

The strict application of these basic rules will do much to reduce the incidence and severity of malpractice suits against doctors.

In attendance at the annual meeting of the American Academy of Orthopedic Surgeons at Chicago, Illinois, February 1-3, 1956, were DR. WORTH M. GROSS, DR. JACK L. RICHARDSON, DR. JOHN E. McDONALD, and DR. ALFRED H. BUNGARDT.

DR. JAMES H. NEAL, SR., has been named a Life Member of the Tulsa County Medical Society and its component organizations.

DR. ROBERT F. McCRARY, former Tulsa physician, has completed a two-year residency in Obstetrics and Gynecology at City Hospital, St. Louis, Missouri, and has entered practice at Hot Springs, Arkansas.

DR. G. R. RUSSELL has been named Chairman of the Polio Vaccine Committee of the Tulsa County Medical Society for 1956. Other members appointed by President F. L. Flack last month include DR. MARY V. GRAHAM, DR. H. J. RUBIN, DR. R. M. WADSWORTH, DR. T. PAUL HANEY, DR. DAVID V. HUDSON, DR. WILKIE D. HOOVER, and DR. HUGH C. GRAHAM.

DR. FRANK H. MCGREGOR has resigned his post as County Physician and Director of the Tulsa County Medical Clinic. As this issue of The Bulletin went to press no successor had been named.

DR. WILLIAM A. MEYERS has joined the staff of Mercy Hospital of Tulsa.

DR. MAURICE J. SEARLE has returned from a Mexican vacation.

DR. A. RAY WILEY has returned from a business trip to Chicago.



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Coming up! The 63rd Annual Meeting of the Oklahoma State Medical Association in Oklahoma City, May 6-9, 1956. Make your plans now to attend this fine meeting.

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