

THE BULLETIN

OF THE TULSA COUNTY MEDICAL SOCIETY

October Medical Meetings

October 14:

Dr. F. A. Boutwell of Dallas, Texas: "The Medical Program of the Farm Security Administration As it Will Apply in Tulsa County."

Motion picture: "Subtotal Thyroidectomy".

October 28:

Dr. W. A. Showman: "What's New in Dermatology."

Dr. Ralph McGill: "What's New in Radium."

Dr. Leon Stuart: "What's New in X-Ray."

Motion picture: "Bobby Goes to School."

Vol. 6 ▲ Tulsa ▲ OCTOBER ▲ Okla. ● No. 10

BRIEF HISTORICAL NOTES

ON

MEAD'S CEREAL AND PABLUM

HAND in hand with pediatric progress, the introduction of Mead's Cereal in 1930 marked a new concept in the function of cereals in the child's dietary. For 150 years before that, since the days of "pap" and "panada," there had been no noteworthy improvement in the nutritive quality of cereals for infant feeding. Cereals were fed principally for their carbohydrate content.

The formula of Mead's Cereal was designed to supplement the baby's diet in minerals and vitamins, especially iron and B₁. How well it has succeeded in these functions may be seen from two examples:

(1) As little as one-sixth ounce of Mead's Cereal supplies over half of the iron and more than one-fifth of the vitamin B₁ minimum requirements of the 3-months-old bottle-fed baby. (2) One-half ounce of Mead's Cereal furnishes all of the iron and two-thirds of the vitamin B₁ minimum requirements of the 6-months-old breast-fed baby.

That the medical profession has recognized the importance of this contribution is indicated by the fact that cereal is now included in the baby's diet as early as the

third or fourth month instead of at the sixth to twelfth month as was the custom only a decade or two ago.

In 1933 Mead Johnson & Company went a step further, improving the Mead's Cereal mixture by a special process of cooking, which rendered it easily tolerated by the infant and at the same time did away with the need for prolonged cereal cooking in the home. The result is Pablum, an original product which offers all of the nutritional qualities of Mead's Cereal, plus the convenience of thorough scientific cooking.

During the last ten years, these products have been used in a great deal of clinical investigation on various aspects of nutrition, which have been reported in the scientific literature.

Many physicians recognize the pioneer efforts on the part of Mead Johnson & Company by specifying Mead's Cereal and PABLUM.

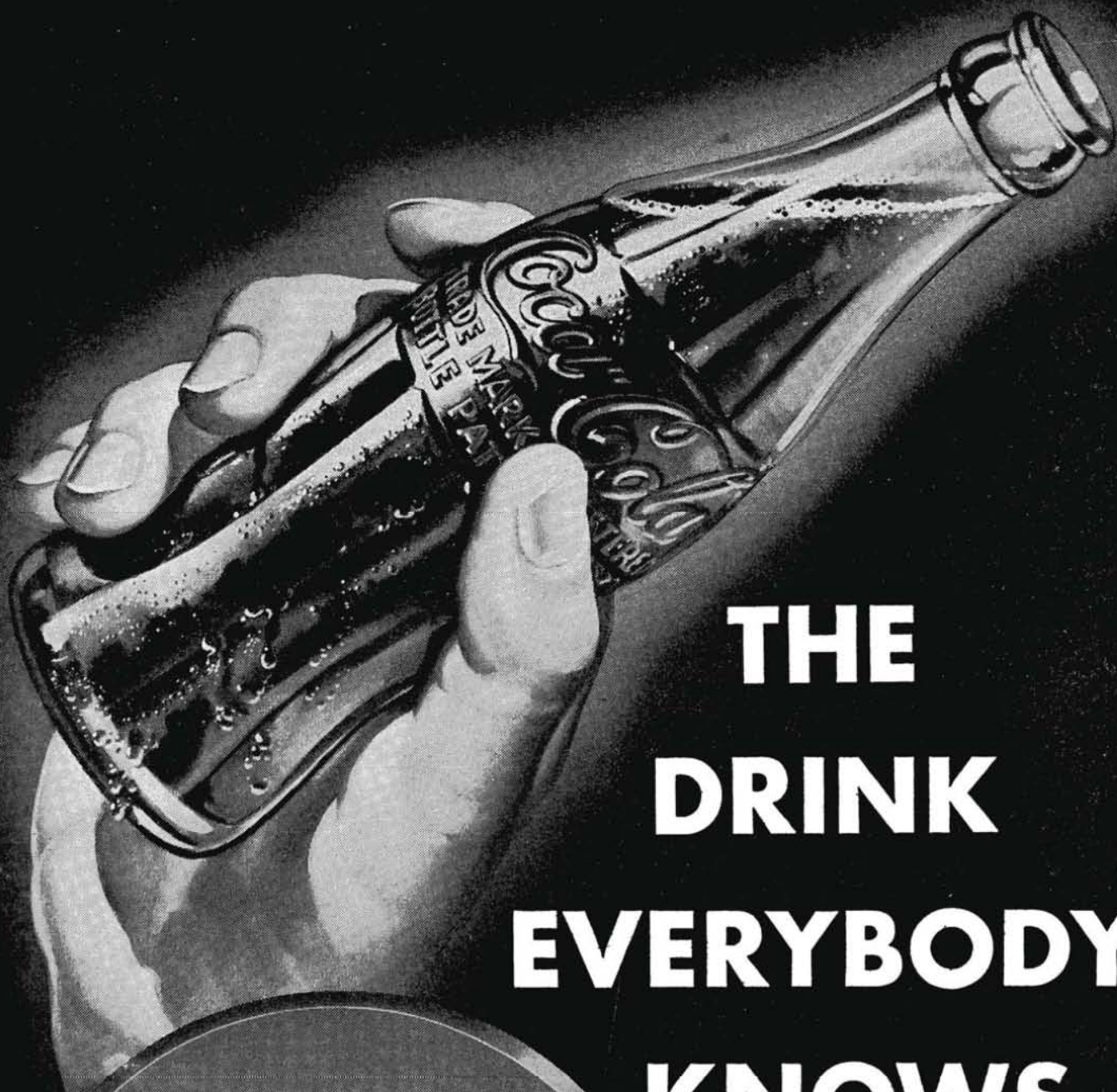
Only Pasteurized Milk is Safe Milk!



ONLY PASTEURIZED MILK IS SAFE MILK!

During that 16-year period, 1923-38 inclusive, the official records of the United States Public Health Service show the occurrence of 680 outbreaks of milk-borne epidemic diseases, resulting in 27,498 cases and 736 deaths, predominantly in infected raw milk supplies. No case of communicable disease has ever been traced to properly pasteurized milk. This is incontrovertible affirmation of the dictum: "ONLY PASTEURIZED MILK IS SAFE MILK."

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THE BULLETIN

OF THE

TULSA COUNTY MEDICAL SOCIETY

R. C. Pigford, M.D., *President* J. C. Brogden, M.D., *President Elect*
 Ralph McGill, M.D., *Vice-President* Roy L. Smith, M. D., *Secretary-Treasurer*
 LLOYD STONE, *Executive Secretary*

VOL. 6 TULSA, OKLAHOMA, OCTOBER, 1940 No. 10

Tulsa Doctors Lose \$7,027 Monthly

Bankruptcies Filed Continue to Show Big Increase; Record Reveals that Many Persons Seem to "Use" Doctors with No Thought of Ever Paying for Services.

Bankruptcies filed during the month of August in Tulsa County cost the physicians of this county \$7,027.27 and multiplied by twelve gives you an idea of the staggering beating the medical profession is taking annually from persons who are taking the easiest way out to beat their legitimate obligations. This is one phaze of the economic problem that is being faced by the physicians and while little attention is being paid to this "leak" it is proving one of the most expensive drains on the income of the profession.

A Credit File Is Maintained By the Medical Credit Bureau. You Can Use It Without Cost.

In August there were 37 bankruptcies filed in Federal Court in which physicians were included. In some cases the physicians bills were merely incidental in the total amount, but in a large number of the 37 cases considered here they were aimed principally at the doctors, some of them exclusively.

One person claiming bankruptcy filed physicians' bills totaling \$1,464.00 from thirteen (13) doctors. Another claim lists ten doctors for a total amount of \$624.00. One lists 7 doctors for \$341.00. Another lists 5 doctors for \$665.00. In the list of 37 bankruptcies there are twelve who list debts to more

than five doctors each. The total "rap" taken by Tulsa physicians reached the almost unbelievable total of \$7,027.27 for one month.

The Medical Credit Bureau is your only protection against the practice of some people in running up a large bill with one physician, and then changing to another, — and then changing and changing so on ad infinitum. The Medical Credit Bureau has accumulated a credit file of approximately 15,000 cards on persons in Tulsa who are not the best credit risks in the world. This list is maintained for your information. Any time any member of the Tulsa County Medical Society has a new patient about whom they might desire more information, this credit file is available without cost. All you need to do is to call the Medical Credit Bureau in the Executive Offices of the Medical Society and ask for the information on the persons you have in mind. If there is anything in the file the Bureau will be glad to tell you.

They are not entirely lost, because if followed up properly it may be that final adjudication is never reached in the six-months period allowed. Sometimes a person might make a new "promise to pay." Your best protection is to send all of your accounts to the Medical Credit Bureau for collection after they pass one year so that they can be followed up promptly.

"The Case For Private Medicine"

This Is the Much Commented upon Article which Appeared in the May, 1940, issue of Nation's Business. Because of its great Interest It Is Reprinted Through Courtesy of the Editors of Nation's Business.

Nation's Business for May 1940 carried a most interesting and illuminative article as the fifth of its series of articles on free enterprise against dictocracy. Permission was obtained to reprint this article which deals with physicians and medical practice. Because of the length of the article it will be printed in installments. Be sure and read it. This is the first installment and includes the foreword.

THE CASE FOR PRIVATE MEDICINE is a review of the accomplishments of the American system of private medicine together with an interpretation of relevant developments now shaping in the field of public policy."

Give the Doctors a Hand

This is the day of the superficial survey, the short-cut solution, the infallible formula, the half-truth, the wisecrack rejoinder, the pat analogy, the argument *ad hominem*, *ad nauseam*. Any counterfeit reasoning passes as sound currency of thought if only it has some ring of humanitarian theory. In Washington and elsewhere young intellectuals speaking the dialectic of a long discredited German fanatic rebuke the "reactionary" ideas of their betters.

In this country, they will tell you, we have all the resources and the scientific knowledge necessary to abolish pain and death from the world. They need only to be used. But, according to this silly syllogism, a dark conspiracy by entrenched "interests" prevents the full employment of life-saving science.

Inevitable, then, that there should be hauled out the most ubiquitous, most infallible of all formulas in this mad decade: Let political agencies take over the distribution of the boons of medical science. With the Government's unlimited power to tax, death can be routed.

But men of science object that politics has usually been an enemy of science, that there is an irreconcilable conflict between the method of science and the method of politics.

Then observe the argument *ad hominem*: "those who oppose our great-hearted plans belong to the medical trust. Believe them not."

To clinch the point, there is adduced the argument by pat analogy: "Do you favor the public school system, Doctor? Do you think our schools are any good? Then, why do you oppose government running a health system?"

When the "social" cause is backed into a corner there is the old reliable refutation by constructive alternative:

"You don't agree with our Great Plan; then what do you suggest in its place? Just how would you improve it?"

Too often conservatives have been subdued by one or another of these polemical tricks. Doctors, like business men, are not trained in the art of making the worse cause appear the better. Nevertheless, they are making a courageous resistance to the march of collectivism, a fight that deserves the support of all believers in American as opposed to imported European institutions. That is why *Nation's Business* presents as the fifth in its series of articles on free enterprise against dictocracy, "The Case for Private Medicine."

The doctor's job is to alleviate misery while others declaim about it. He has learned that the healer cannot indulge in sentiment.

As a man of science he has learned to be patient. Evolution marches slowly. Perfection always eludes the grasp of mortals because some improvement must be left to future generations. Looking back on the furrow of the past he sees that the profession of life-saving has

come a long way. It has far to go yet, but Americans should be willing to leave his trained hand on the plow and reject the clamor to substitute in the place of control the man of words.

The Case for Private Medicine

A beginning must be made with the task of reconciling the laboring classes with the State. Whoever has a pension assured to him in his old age is much more contented and easy to manage than the man who has no such prospect. Compare a servant in a private house and one attached to a Government office or to the Court; the latter, because he looks forward to a pension, will put up with a great deal more . . . —Prince Otto Von Bismarck, the father of social insurance.

It has been said that, wherever two or more persons meet and talk, it is a sporting bet that they will discuss one of three matters: sickness, death or the cost of things. Whether or not this is literally true, it scarcely exaggerates the human interest in those ills to which flesh is heir.

Credulity reaches its farthest limits of absurdity in these three subjects. It would be hard to imagine a fallacy with regard to any one of them so fantastic that at one time or another groups of people have not embraced it. Even in these enlightened times, thousands believe that washing the hands in stump water will kill warts, others that laying on of hands will make a paralytic take up his bed and walk, and still others that the same bottled elixir "cure" hardening of the liver, prostatic enlargement of gallstones.

Every imaginable superstition clusters around death and its aftermath. And as for the price of things, no form of credulity is more current today than the belief that the prices of goods and services can be set by decree and in complete defiance of supply and demand.

Small wonder, then, that people listen to medical quacks and vote as political quacks prescribe for the royal road to health. A blind faith has grown up in the land that money buys health under

any and all circumstances. If health can be bought at so much a head, then it follows those who have must be made to disgorge so that others who have not may live. Ergo, the man who owns a home and a bank account is guilty of murder because babies die among families who have neither.

There often is some degree of correlation between certain diseases and economic status. Havelock Ellis showed that there is also a modicum of correlation between tuberculosis and genius. But to reason from his findings that people have tuberculosis because they are geniuses or that they are geniuses because they have tuberculosis is as absurd as the current assumption that people who are sick are sick because they are poor or that, if they are economic failures, it is because they have been sick.

Yet writers in the scientific field, like the eminent Paul de Kruif, shout this fallacy in emotional, intemperate language. When he writes of "thousands dying simply because they hadn't the wherewithal to pay" for treatment, many of the intellectually defenseless believe him. When he scorches the paper in his typewriter with flaming passages about "A future American citizenry rachitic, consumptive, undersized, sapped and degraded," sympathetic Americans, always moved through the heart more easily than the mind, mutter that we must do something about it.

One doesn't have to look far to see that this economic interpretation of the healthy life is grossly exaggerated. All the money of John D. Rockefeller could not buy the health enjoyed by the humblest "white wing" or stevedore. The young bruisers from well-to-do families who go to Harvard, Yale and Princeton have no corner on health, as their football record in recent years demonstrates when compared with that of Notre Dame, Southern Methodist or Minnesota. Joe Louis is not exactly a weakling, although he came from an underprivileged Alabama family.

A.H.A. Approves Group Hospital Plan

Only Hospital Insurance Program in Oklahoma To Receive Approval by the American Hospital Association; 8,400 Persons Covered by the Oklahoma Plan.

The American Hospital Association, Commission on Hospital Service at a recent meeting in Boston, Massachusetts, formally and officially approved Group Hospital Service, the Oklahoma Plan.

Members of the Commission, a division of the American Hospital Association are: Basil C. MacLean, M. D., Chairman; C. Rufus Rorem, Ph. D., C. P. A., Director; R. C. Buerki, M. D., S. S. Goldwater, M. D. and Rt. Rev. Msgr. Maurice F. Griffin.

Announcement of the approval was made to the office of Group Hospital Service in Tulsa by C. Rufus Rorem, Director of the Commission. The approval is based on compliance with established standards governing method of organization, operation and accomplishments over a six months period. Some of the salient provisions of these standards established by the Commission are that:

1. No private investors should advance money in the capacity of stockholders, or owners. Initial working capital may be provided by individuals, hospitals, chests, councils or other civic agencies, but should be repayable only out of earned income, over and above operating expenses, payments to participating hospitals and legal reserves.

2. Opportunity should be given for all institutions of standing in each community to become participating hospitals, and subscribers should have free choice of hospital and physician at the time of sickness.

3. The benefits be guaranteed through contracts with "member hospitals," which assume the ultimate responsibility to provide services, in accord with definite contracts with subscribers and the hospital service plan.

4. Benefits to subscribers be guar-

anteed through "service" contracts with member hospitals as opposed to cash indemnification contracts for hospital expenses.

5. A majority of the hospitals in each area where a hospital service association enrolls subscribers should be member hospitals.

6. Participating hospitals be approved for membership by an appropriate state regulatory body.

7. Arrangements be made for provision of service in non-member hospitals in case of emergency.

8. Initial working capital should be sufficient to carry all acquisition costs and operating expenses for a stated period (e.g. six months), after contracts first become effective, thus making earned income available in full for payments to hospitals during this period. Financial statements of operations and condition should be prepared by certified public accountants at regular intervals, at least annually. Other miscellaneous provisions are included.

Through 135 firms and organizations, the Oklahoma Plan has extended its protection to 8,400 persons. It has paid hospital bills for 150 of its members.

The plan operates without profit and its 21 trustees, including the officers serve without remuneration. It is the 61st plan to receive the approval award. It is designed to serve the entire state of Oklahoma. These plans have extended their protection to approximately 6,000,000 persons.

Group Hospital Service, the Oklahoma Plan, is now the only hospitalization plan in the state to have the individual or joint approval of the Oklahoma State Medical Association, the Oklahoma State Hospital Association and the American Hospital Association.

PRESIDENT'S PAGE

THE PRESIDENT'S PAGE for this month may resemble a bulletin board because there are a number of very important announcements which should be emphasized and I believe I could use this space for no better purpose.

First: Oklahoma is away behind other states in the percentage of Medical Preparedness questionnaires which have been returned. Tulsa County is no better than other parts of the state. If you have failed to fill out and mail in your questionnaire you can get another one at the Executive Offices of the Society.

Second: From the standpoint of outstanding speakers and scientific papers, there is no medical meeting in the southwest as important or imposing as the fall conference of the Oklahoma City Clinical Society which will be held in Oklahoma City, October 28-29-30. Every physician in Tulsa County would do well to attend the sessions of this clinical conference.

Third: The next meeting of the Tulsa County Medical Society, on October 14 will be very important. The Farm Security Administration Medical program for Tulsa County will be presented.

Fourth: Have you paid your dues for the last half of the year . . . read the article on page seven of this Bulletin . . . Use the Medical Credit . . .



President

The BULLETIN

*Editorial
Committee*.....

LOGAN SPANN, M. D.,
Chairman
F. L. UNDERWOOD, M. D.
CARI. J. HOTZ, M. D.

Managing Editor.....LLOYD STONE



Published monthly on the 3rd day of each month, at the executive offices of the Tulsa County Medical Society, 1202 Medical Arts Building, Tulsa, Oklahoma.

VOL. 6 OCTOBER, 1940 No. 10

"OC" CLINICAL MEET DRAWS MANY LEADERS

Marked by the appearance of seventeen guest lecturers, all outstanding physicians in their respective fields, the fall clinical conference of the Oklahoma City Clinical Society is expected to attract a record attendance for its tenth annual program opening in Oklahoma City October 28. The conference, which yearly is gaining widespread national attention will continue through October 31, with a full schedule each day of general assemblies, post graduate courses and entertainment features.

The appearance of Dr. Nathan B. Van Etten, President of the American Medical Association, will be a highlight of the four-day conference. Dr. Van Etten will be feted by the Oklahoma County Medical Association at a banquet on Monday night, October 28, when he will address members of the county society and their guests, members of the Oklahoma City Clinical Society. Other interesting guests on the roster of lecturers will be Dr. Francis M. Pottenger, tuberculosis specialist of Monrovia, Calif., and Dr. Ernest Sachs, neurological surgeon of St. Louis, Mo., both of whom appeared as guest speakers during the course of the first annual conference of the clinical society in 1930.

While attendance records last year soared to new heights, members this year are making arrangements for the largest in the ten-year history of the conference—this, in view of the pre-conference enthusiasm already being aired. As at the 1939 session, associate members will be here from all parts of Oklahoma, Kansas, New Mexico, Colorado, Missouri, Arkansas, Louisiana, and from as far distant localities as Wyoming, California, Arizona, Philadelphia, and Rochester, N. Y.

Tuesday night, October 29, will be featured by a dinner and dance at the Chamber of Commerce, with visiting doctors and their wives as guests. The annual popular and well-known stag party has been scheduled for Wednesday night, October 30, at the Oklahoma Club.

Wives accompanying their husbands to the conference will not lack for entertainment, as a daily round of entertainment features is being planned by the Women's Auxiliary of the county medical association.

All sessions and commercial exhibits will be at the Biltmore Hotel. A complete list of guest speakers will be found on the cover of *The Journal*, and additional information may be learned by corresponding with the clinical society secretary, 512 Medical Arts Building, Oklahoma City.

BAD 'GRAMMER!'

"Over there," said the host, "are my grandma's ashes."

"Oh," commiserated the guest. "She's passed on, eh?"

"No," said the host. "She's just too lazy to look for an ash tray."

CAPITAL PUNISHMENT

On being asked to write down a definition of "capital punishment," a Glasgow schoolboy submitted the following amusing effort:

"Being locked in an ice cream or chocolate factory for a week end would, in my opinion, be capital punishment."

Medical Calendar

TUESDAY, October 1st:

Morningside Hospital Staff Meeting.
Mercy Hospital Staff Meeting.

SATURDAY, October 5th:

Radio Broadcast at 3:15 p. m. Station KTUL. Dr. H. Lee Farris.

TUESDAY, October 8th:

Tulsa General Hospital Staff Meeting.

SATURDAY, October 12th:

Radio Broadcast at 3:15 p. m. Station KTUL. Dr. J. L. Miner.

MONDAY, October 14th:

Tulsa County Medical Society Meeting at Mayo Hotel at 8:00 p. m.
Program: Dr. F. A. Boutwell of the Farm Security Administration.

TUESDAY, October 15th:

Flower Hospital Staff Meeting:
Office Assistant's Meeting. Michaelis Cafeteria at 6:00 p. m.

SATURDAY, October 19th:

Radio Broadcast at 3:15 p. m. Station KTUL. Dr. Ralph A. McGill.

MONDAY, October 21st:

St. Johns Hospital Staff Meeting.

SATURDAY, October 26th:

Radio Broadcast at 3:15 p. m. Station KTUL. Dr. Marvin D. Henley.

MONDAY, October 28th:

Tulsa County Medical Society Meeting at Mayo Hotel at 8:00 p. m.
Program: What's New in Pediatrics by Dr. Luvern Hays; What's
New in Dermatology by Dr. W. A. Showman; What's New in Radium
by Dr. Ralph A. McGill; What's New in X-Ray by Dr. Leon H.
Stuart.

Are You Saving Your Questionnaire?

Oklahoma is lagging behind the rest of the United States; Dr. Miner appointed to represent Tulsa Society on Preparedness Board; Dr. Cook on State Board.

With Oklahoma lagging far behind the average of other states in the return of Medical Questionnaires in the American Medical Association's Preparedness activities, every effort is being made to speed up physicians and bring this state's record up to the other states.

Dr. James L. Miner has been appointed chairman of the activities for Tulsa County Medical Society to work with other county representatives on the Oklahoma Preparedness program. Dr. W. Albert Cook is a member of the State Medical Preparedness Committee of which Dr. Henry Turner, Oklahoma President, is chairman.

In order to speed up this work, a supply of questionnaires have been sent to the Executive Secretary's office and they are available for any physician who has lost, misplaced or otherwise failed to return his medical questionnaire sent out by the American Medical Association. If you have not mailed in a questionnaire, just call the office of the Medical Society and another one will be sent to you immediately.

Further organization of the state's medical preparedness activities in cooperation with the medical preparedness program of the American Medical Association has been effected during the past month with the establishment of an Oklahoma State Medical Preparedness Committee and the appointment of committee members to represent their respective localities over the state.

Named by Dr. Henry H. Turner, Chairman of the committee, to serve as Vice-Chairman was Dr. L. S. Willour, McAlester. Dr. Turner's appointments of physicians to represent the councilor districts in providing detailed correlation of medical preparedness work over the state are as follows:

Councilor district one, Dr. John L.

Day, Supply; district two, Dr. J. M. Bonham, Hobart; district three, Dr. J. M. Watson, Enid; district four, Dr. R. M. Howard, Oklahoma City; district five, Dr. James L. Patterson, Duncan; district six, Dr. W. Albert Cook, Tulsa; district seven, Dr. Robert M. Anderson, Shawnee; district eight, Dr. F. L. Wormington, Miami; district nine, Dr. J. M. Harris, Wilburton; district ten, Dr. John A. Haynie, Durant. To round out the state committee, three physicians have accepted appointment to the committee in an advisory capacity. They are: Dr. G. F. Mathews, in the field of public health; Dr. Robert U. Patterson, field of medical education; and Dr. Louis H. Ritzhaupt, field of army requirements.

In an effort to make Oklahoma's part in the national program as complete and efficient as possible, presidents of the various county medical societies were requested by Dr. Turner to appoint a member of their societies to handle preparedness activities in their respective counties. The county chairmen who have been appointed are:

Atoka-Coal: J. S. Fulton, Atoka; Bryan: R. E. Sawyer, Durant; Caddo: Odis A. Cook, Anadarko; Canadian: J. T. Phelps, El Reno; Carter: F. W. Boadway, Ardmore; Cherokee: J. S. Allison, Tahlequah; Choctaw: E. A. Johnson, Hugo; Cleveland: W. T. Mayfield, Norman.

Jackson: E. S. Crow, Olustee; Jefferson: L. L. Wade, Ryan; Kay: L. H. Becker, Blackwell; Lincoln: John S. Rollins, Prague; McClain: W. C. McCurdy, Purcell; McCurtain: W. B. McCaskill, Idabel; McIntosh: D. E. Little, Eufaula; Marshall: J. L. Holland, Madill; Murray: Paul V. Anna-down, Sulphur; Muskogee: H. T. Balandine, Muskogee.

State Health Meeting October 3-4

350 Members of State-wide Organization Will Descend Upon Tulsa for Annual Convention; Program Will Include Speakers from All Parts of United States.

Public health education will take the center of the stage at the annual meeting of the Oklahoma Public Health Association to be held October 3 and 4 at the Hotel Tulsa.

Dr. C. H. Turner, professor of public health education at the Massachusetts Institute of Technology, Cambridge, will be among the public health leaders chosen to speak on this subject. Doctor Turner will talk on "The Trend of School Health Education" at 10:15 o'clock on the morning of the opening day.

His paper will be discussed by two Oklahoma educators, Dr. A. Linscheid, president of East Central State college, Ada, and Ernest E. Brown, curriculum director for the Oklahoma state department of education.

Registration for the convention will begin at 8 o'clock Thursday morning, October 3. Mayor C. H. Veale will officially open the convention with the address of welcome. Dr. G. F. Mathews, commissioner of the Oklahoma State Health Department, will make the response. Governor Leon C. Phillips has been invited to attend the convention.

Separate sessions will be held in the afternoon by medical directors of local health departments, public health nurses, sanitarians and clerks.

A joint open meeting of the 350 public health workers with members of the Oklahoma Welfare Association, also in convention at that time, is scheduled for Thursday evening, October 3.

Miss Katherine Lenroot, chief of the children's bureau, United States department of labor, will speak at 9 o'clock Friday morning, October 4, on "The Future of the Public Health Worker."

Also on the Friday program will be Dr. Henry Turner, Oklahoma City, president of the Oklahoma State Medi-

cal Association, "discussing" Public Health, a New Essential to Organized Medicine."

Other speakers during the two-day program will be Dr. Nathan Sinai, professor of sanitary engineering, University of Michigan School of Public Health, Ann Arbor, and Vernon Sanford, executive secretary, Oklahoma Press Association.

Serving on the convention arrangements committee are Dr. R. M. Adams, commissioner of the Tulsa City Health Department; Dr. Allen Kramer, county health superintendent, Mrs. Lee Mulhall, secretary of the Y.W.C.A., and Dr. R. M. Shepherd, member of the Public Health Association Board of Directors.

AUXILIARY SOCIETY STARTS YEAR'S WORK

Mrs. James Stevenson will be hostess to the Medical Auxiliary when the group meets in her home at 2126 E. 38th St. for coffee Tuesday, October 1, from 10:30 to 12:00.

Mrs. Hugh Evans, social chairman for the organization had charge of arrangements, assisted by the Mesdames K. C. Reese, Charles H. Eads, Fred E. Woodson, A. Ray Henley, Robert B. Witcher, Harry P. Price, W. J. Trainor and Ralph A. McGill. Mrs. A. W. Roth, past president, and one of the oldest members, will pour.

The coffee will be the first meeting of the season and precedes the philanthropic program planned for the year.

New officers are President, Mrs. J. W. Rogers; President-elect, Mrs. T. B. Coulter; Vice President, Mrs. Carl T. Hotz; Recording Secretary, Mrs. D. L. Garrett; Corresponding Secretary, Mrs. E. O. Johnson; Treasurer, Mrs. J. W. Childs; Historian, Mrs. A. W. Pigford; Parliamentarian, Mrs. W. R. Turnbow.



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The Public Health

City Health Department

R. M. ADAMS, M. D.,

City Physician

J. H. NEAL, M. D.,

Asst. Physician

County Health Department

ALLEN C. KRAMER, M. D.,

Superintendent

W. M. WOOD, M. D.,

Director



J. Jeff Billington, County Physician

M. V. Stanley, Asst. Co. Physician

By DR. ALLEN C. KRAMER

Due to the flood early in September, the Tulsa County Health Department has carried an emergency load in addition to the regular child health conferences, school inspections, communicable disease control and sanitation work.

Clinics for typhoid immunization were organized in those sections of the county endangered by the flood. A total of 3,625 typhoid immunizations were given during the month.

In the north and west section, 1,090 immunizations were administered as follows: Garfield School, 89; Tanglewood, 55; Central (Sand Springs) 58; Westside, 2; Sand Springs High School, 78; Lake Station, 95; Twin Cities, 86; Washington (Sand Springs colored) 259; Limestone, 20; Keystone, 25; Fischer School, 88; Sand Springs City Hall, 10; Mingo School, 35; and Sperry, 240.

In the south part of the county 2,535 typhoid immunizations were given as follows: Bixby, 893; Jenks, 543; Liberty School, 317; Leonard, 306; Snake Creek (colored) 213; Lone Star School, 42; and Broken Arrow, 221.

For general sanitation, the department has tested city and private water supplies, directed the installation of chlorinators, and issued lime for the treatment of wells and cisterns.

With the completion of the current emergency work the department will continue its normal program of typhoid, diphtheria, and smallpox immunizations, shick tests, child health conferences, school examinations health conferences, communicable disease control, and general sanitation.

By DR. R. M. ADAMS

As might be expected at this time of the year, a great part of the activities of the city health department is centering about the schools, pre school children, school hygiene and related activities. Records for the month of August show a large increase in this field of public health work.

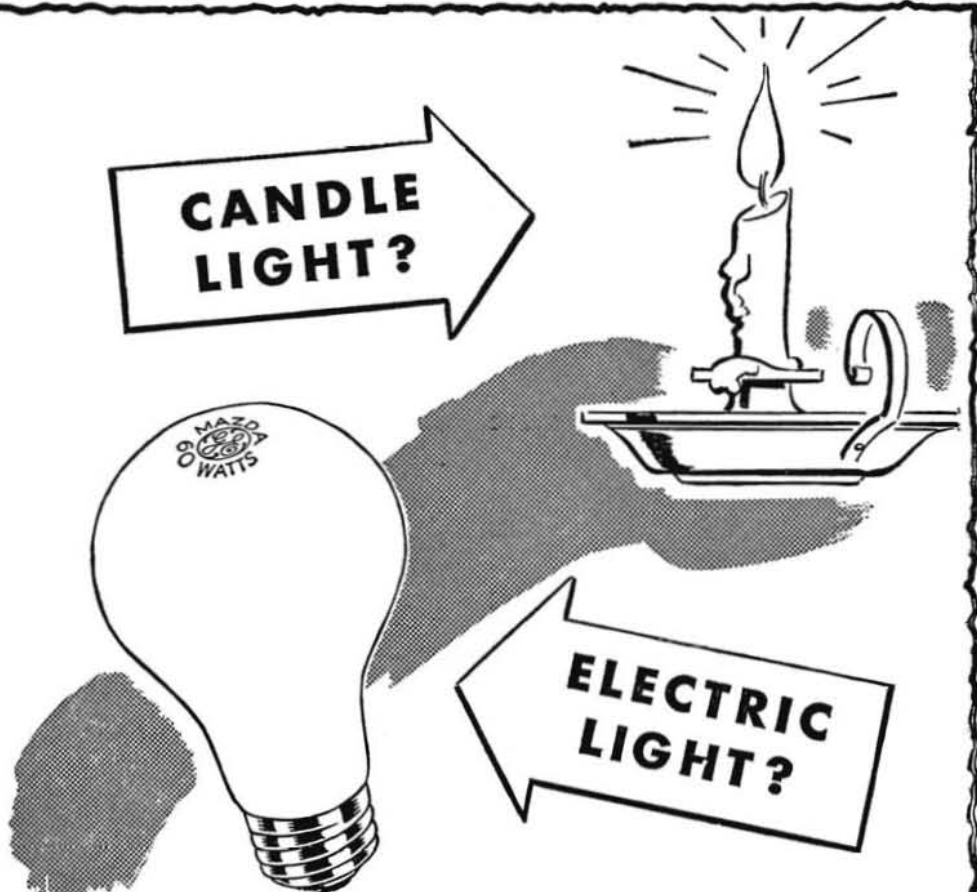
Immunizations continue to take a great part of the time of staff members with particular attention being given to typhoid and smallpox. Attached is the tabulated departmental report for August as transmitted to the State Health Department:

A. COMMUNICABLE DISEASE CONTROL

	Total This Month	Total to Date
Admissions to service	13	123
Consultation with physicians	1	35
Field Visits:		
Diphtheria		22
Typhoid fever and paratyphoid fever		14
Scarlet fever	8	134
Smallpox		3
Measles	1	51
Whooping cough	95	794
Others	85	467
Chicken pox	2	256
Immunizations (persons immunized):		
Smallpox	82	472
Diphtheria, under 1 year	6	29
Diphtheria, to 4 years	17	303
Diphtheria, over 5	18	120
Typhoid fever	122	722
Shick tests	24	250
Others	11	17
Public lectures		6
Attendance		144

Continued on Page 29

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F S A Medical Care Program

**Dallas director will appear before Medical Society
To Outline Proposal for Program in Tulsa County;
Plan in Operation in Many Oklahoma Counties**

Already approved in half the counties in Oklahoma, Dr. F. A. Boutwell of Dallas, regional director for the Farm Security Administration, presented the medical program of the Farm Security Administration as it would apply to families in Tulsa County, to the Board of Trustees of the Medical Society at its last meeting and was invited to appear before the Medical Society at the meeting on October 14.

Following is a brief synopsis of the program as explained by Dr. Boutwell in a folder sent to the Medical Society and explains some of the outstanding points of the program:

Nearly 70,000 low-income farm families, or about 300,000 persons—borrowers from the Farm Security Administration—are banded into small groups to obtain medical care at a cost which they can afford. This medical program was an outgrowth of the desperate economic situation in which one-fourth of the farm population found itself during the depression.

Five years ago, nearly two million farm families were unable to support themselves without some kind of public aid. Flood and drought had played havoc with crops; credit had vanished; crops were selling at ruinous prices. It was a period of foreclosures and "penny" auctions. Farm families migrated from one area to another seeking work. For these stricken farmers, relief was the only means of support, until the Farm Security Administration began making small loans to enable farmers to make their own living from the land.

These rehabilitation loans, repayable within five years at five per cent interest, pay for the seed, livestock and tools necessary for farming operations. Often the loans also help the family to buy clothing and food until the next harvest.

To borrow from the Farm Security

Administration, a farmer must be unable to get satisfactory credit from any other source, public or private; he must be physically able to run a farm, have farming experience, and must be located on a farm. Finally, he must be approved for the loan by a local county committee, which can vouch for his character and ability.

Every loan is based on guidance of the farm family during the period of rehabilitation, to make sure that the money is put to the best possible use. Farm Security Administration supervisors work with the farmer and his family until the loan is repaid, helping him to plan his farming operations and advising him on the most effective methods of raising crops, conserving the soil and caring for livestock.

Most rehabilitation borrowers are rapidly repaying their loans and becoming self-supporting. It was soon apparent, however, that other families with equal opportunities were making slow progress. A careful investigation disclosed that more than half of the families which failed to make ends meet were handicapped by poor health. Knowing that they could not pay the bills, many of these people had hesitated to consult a doctor. They had let minor ailments go until they became grave. Then the family's livestock or farm tools often had to be sold at a sacrifice to pay for a serious operation or prolonged hospital treatment. Other farmers limped along for years with malaria, pellegra, hookworm, hernias, abscessed teeth or other chronic diseases, which cut down their working ability.

Consequently, the Farm Security Administration started a medical care program for its borrowers, on the theory that a family in good health was a better credit risk than a family in bad health. So far as the government was concerned, this program was simply a

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matter of good business—if the family's health handicaps were cleared up, it could get back on its feet and become self-supporting; if they were not, the family might remain dependent on relief for years.

The entire program has been worked out in close co-operation with the State Medical Associations and local medical societies. Before a medical care plan is set up in any state, a memorandum of understanding is drawn up by FSA representatives and the State Medical Association. County agreements, based on this understanding, then are reached with local medical societies.

Although county medical plans vary in detail, according to local conditions and preferences, they follow a general pattern. They all provide for the use of existing local facilities, and fees are based upon the ability of the families to pay—a principle long recognized by the American Medical Association. Every plan is founded upon three basic principles: (1) Each family has a free choice of its physician from among the participating doctors; (2) Fees are paid by every participating family at the beginning of the operating period, and are held by a bonded trustee; (3) Fees are based upon the ability-to-pay of the families, as indicated by their farm management plans and records.

Under a typical medical care plan, all of the FSA borrowers in the county who wish to participate pay a fixed sum each year for medical care. For the first year, this sum usually is included in the rehabilitation loan. These payments are pooled, in the hands of the county trustee, to serve as a kind of voluntary health insurance system. If a member of the family becomes ill, he may go for treatment to any doctor in the county who is taking part in the plan. All of the doctors submit their bills at the end of each month to the trustee for payment.

Benefits covered in the plan usually include; (a) ordinary medical care, including examination, diagnosis, and treatment in the home or in the office of the physician; (b) obstetrical care;

(c) ordinary drugs; (d) emergency surgery; (e) emergency hospitalization.

Some counties have added dental services either as a part of the regular medical care program or under a separate plan. In Arkansas, 40 counties have separate dental plans under which a family obtains emergency dental treatment, simple fillings, extractions, prophylaxis and cleaning at a cost of \$4.00 a year for the man and wife and 50c for each child.

The amount paid for medical care varies according to extent of benefits, size of average farm incomes in the locality, and size of family. A typical payment schedule for medical care in a low-income county is \$18 annually for man and wife plus \$1.00 for each child, the maximum payment being \$26 per family.

All medical care funds are pooled; a proper amount is allocated for hospitalization and emergency needs, including surgical care; and the balance is divided into equal monthly installments.

Physicians' bills are paid from the amount on hand for a particular month, after the bills have been received by the trustee and reviewed by a committee of the local medical society. If possible, all bills are paid in full. If the total bills for a given month exceed the amount available, all bills are proportionately reduced and each physician is paid his pro rata share. If there is some money left over for a particular month, it is carried forward to the next month or to the end of the period, and used to complete payment of old bills.

I. (DON'T) O. U.

Two friends were on a train which was held up. As the hold-up men came through the train taking cash and valuables from the passengers, one of the men became more and more nervous. Finally, with the robbers only a few seats away, he put his hand in his pocket and drew out a bill and held it out to his friend.

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Personally Speaking

All we know is what we hear and what we hear will appear in these columns. If you have done anything or gone anywhere or know of anyone who has—let us know. . . .

—The Editors

DR. J. C. BROGDEN spent his vacation the last of August in South Carolina.

The good word is that Frank Stuart is going to Chicago on October 21st to be initiated into the American College of Surgeons.

DR. J. H. HAMMOND was really dressed up in his army uniform, and has gone to Ft. Sill. DR. B. L. BRANLEY spent a couple of days fishing up at Spavinaw. DR. JAMES STEVENSON spent his August vacation in Yellowstone Park. DR. HENRY S. BROWNE, went to New Orleans, La., to see his father who has been ill.

The 10 day old son of DR. AND MRS. D. M. MacDONALD, 2457 E. Twenty-sixth pl. died September 18th in a Tulsa hospital of pneumonia. Ironi-

cally, DR. MacDONALD, who is widely known as an obstetrician, delivered a baby to another Tulsa family only a few hours after he lost his own. The body was sent to Cleveland, Ohio, for interment.

DR. K. F. SWANSON has recovered from his illness and gone on his vacation. We still have Dr. T. J. Lynch with us as you know he bought a ticket for the disastrous plane that wrecked, killing twenty-five passengers. But due to some important business decided to wait about going on to Washington so that is why he is still here. DR. J. F. GORRELL'S daughter, Edith Ann Gorrell, passed away September 12th. DR. ARTHUR H. DAVIS is leaving for Cleveland, Ohio, where he will attend the American Academy of Otolaryngology.

MEDICAL CLINIC REPORT FOR SEPTEMBER

TOTAL NUMBER OF PATIENTS	2312
Varicose	19
Tonsile	12
Tumor	20
Neurology	18
Rectal	79
Eye	113
Ear, Nose and Throat	83
Dermatology	53
Diathermy	42
Cardiac	40
Orthopedics	54
Dental	138
Urology	63
Surgery	235
Synecology	114
Medicine	1044
Pediatrics	185
Total number of patients sent to hospitals	27
Nursing homes	1
Total number of prescriptions	1583
Fluoroscopic Examinations	13
X-Ray Pictures	39
X-Ray Treatments	40

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PROFESSIONAL LIABILITY

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Here is a policy written by the Medical Profession for the medical profession. It offers you the most complete protection against all real or alleged claims arising from your practice.

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1. Was written under the supervision of the Tulsa County Medical Society and is available to every physician or surgeon in Oklahoma who is a member of his County Medical Society.
2. PROVIDES: Complete protection from all claims which might arise from your practice of medicine, surgery or x-ray.
3. PROVIDES: A \$25,000 protection against any one claim or \$40,000 for claims arising in any one year.
4. PROVIDES: All the protection of the Houston Fire and Casualty Company plus all the resources of an adequate reinsurance program.
5. PROVIDES: Unusual protection by allowing the Medical Society to choose its own attorney to represent physicians in Oklahoma. Gives further protection by allowing our Oklahoma attorneys to make actual cash adjustments at once.
6. PROVIDES: This complete malpractice insurance at the lowest rate ever offered physicians and surgeons in Oklahoma. The cost of the insurance for "General Practice" is \$26.25; for "Surgeons", \$33.00 or for "X-Ray Therapy", \$36.25.
7. PROVIDES: A reducing scale of premium rates based upon the number of doctors insured and the total amount of claim losses, making it a "cost-plus" insurance.

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TULSA, OKLAHOMA

Liability Insurance Agency

No change made in Malpractice coverage Oklahoma Group Policy written by Houston Fire and Casualty Company; Ben Voth again has supervision of state-wide protection.

Although no change has been made in the Oklahoma Group Malpractice Insurance written by the Houston Fire and Casualty Company, the Board of Trustees did ask the Houston company to name Voth and Wright as the Oklahoma Agency to handle this insurance instead of The Frates Company and this change has been put into effect. In the future the new policies and all renewals will be handled by Voth and Wright.

This change in the general agency handling the policy in the state was made partly to widen the scope of sales and in the future all insurance agents in the state will be allowed to write the policy and receive payment for the brokerage business. The physicians in each town will be able to take advantage of the greatly reduced insurance rates and at the same time get the insurance through their regular local insurance agent.

Ben Voth of Voth and Wright was called into this insurance program originally when the Tulsa County Medical Society sought to establish this group policy to get away from the steadily increasing cost of malpractice insurance. Mr. Voth again is actively interested in the coverage and under his direction "Hi" West, who is associated with the firm and well known to every physician in Oklahoma, will have direct supervision of the malpractice insurance in Oklahoma.

Under this new policy the medical profession of Oklahoma will be able to secure the following protection and benefits through their own local insurance agent handling their other lines of insurance:

1. Was written under the supervision of the Tulsa County Medical Society and is available to every physician or surgeon in Oklahoma who is a member of his County Medical Society.

2. *Provides:* Complete protection

from all claims which might arise from your practice of medicine, surgery or x-ray.

3. *Provides:* A \$25,000 protection against any one claim or \$40,000 for claims arising in any one year.

4. *Provides:* All the protection of the Houston Fire and Casualty Company plus all the resources of an adequate reinsurance program.

5. *Provides:* Unusual protection by allowing the Medical Society to choose its own attorney to represent physicians in Oklahoma. Gives further protection by allowing our Oklahoma attorneys to make actual cash adjustments at once.

6. *Provides:* This complete malpractice insurance at the lowest rate ever offered physicians and surgeons in Oklahoma. The cost of the insurance for "General Practice" is \$26.25; for Surgeons, \$33.00 or for X-Ray Therapy, \$36.25.

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October 28, 29, 30, 31 — 1940

SEVENTEEN DISTINGUISHED GUEST LECTURERS

- DR. ELMER BELT, Urology, Los Angeles; Associate Prof. Urology, College of Medical Evangelists; Urologic Consultant U. S. Military Hosp., Sawtelle.
- DR. W. B. CARRELL, Orthopedics, Dallas; Prof. Orthopedic Surg., Baylor Medical School; Chief Surg. to Scottish Rite Hosp. for Crippled Children.
- DR. ROBERT J. CROSSEN, Gynecology, St. Louis; Prof. Clinical Obstetrics and Gyn., Washington U. Med. School; Ass't. Obs. and Gyn. to Barnes Hosp.
- DR. M. EDWARD DAVIS, Obstetrics, Chicago; Asso. Prof. Obs. and Gyn., U. of Chicago; Attending Obs. and Gyn., Chicago Lying-in Hosp.
- DR. EDGAR L. GILCREEST, Traumatic Surgery, San Francisco; Clin. Instructor in Surg., U. of Calif. Med. School; Visiting Surg. of Stanford, St. Francis, Franklin and Children's Hospitals.
- DR. ELLIOTT P. JOSLIN, Diabetes, Boston; Clin. Prof. Emeritus, Harvard Medical School; Med. Director Geo. F. Baker Clinic of New England Deaconess Hosp.
- DR. NORMAN M. KEITH, Internal Medicine, Rochester; Prof. of Medicine, Mayo Foundation, U. of Minn. Consultant on Staff of Mayo Clinic.
- DR. JOHN G. McLAURIN, Otolaryngology, Dallas; Executive Staff Med. Arts Hosp.; Courtesy Staff Baylor Hosp. and St. Pauls Sanitarium.
- DR. KARL A. MEYER, Surgery, Chicago; Assoc. Prof. of Surgery, Northwestern U.; Sr. Attending Surg. Cook County Hosp.
- DR. JOSEPH EARLE MOORE, Syphilology, Baltimore; Assoc. Prof. of Medicine Johns Hopkins University.
- DR. JOHN deJ. PEMBERTON, Surgery, Rochester; Prof. of Surgery, Mayo Foundation; Surgeon at Mayo Clinic.
- DR. HENRY G. PONCHER, Pediatrics, Chicago; Associate Prof. of Pediatrics, Univ. of Ill.; Attending Phys. Cook County Children's Hosp. Charge of Pediatric Ward, Research and Education Hospitals.
- DR. FRANCIS M. POTTENGER, Tuberculosis, Monrovia; Clinical Prof. of Med., Univ. of Southern Calif. Sch. of Med.; Consultant, Los Angeles Gen. Hospital.
- DR. ERNEST SACHS, Neurological Surgery, St. Louis; Prof. of Clin. Neurosurg., Wash. U. Sch. of Med. Asso. Surg. to Barnes, St. Louis Children's and St. Louis Maternity Hospitals.
- DR. EDMUND B. SPAETH, Ophthalmology, Philadelphia; Prof. of Oph. Grad. School of Med., U. of Pennsylvania; Chief of Clinic, Grad. Hospital; Attending Surg. Wills Hospital.
- DR. NATHAN B. VAN ETTEN, President A.M.A., New York; Med. Director Morrisania City Hosp., President since 1932; Pres. Union Hosp., 1936.
- DR. RICHARD S. WEISS, Dermatology, St. Louis; Ass't. Prof. of Clinical Dermatology, Sch. of Med., Washington University. Derm. to Barnard Free Skin and Cancer Hosp.

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Of Special Interest!



RADIO SPEAKERS for September were Doctors H. Lee Farris, R. M. Shepard, Marvin D. Henley and H. Lee Farris.

RADIO SPEAKERS for October are Doctors H. Lee Farris, J. L. Miner, Ralph A. McGill and Marvin D. Henley.

ASSISTANTS LAUNCH FALL PROGRAMS

T.C.M.D.A. marches on! After two months of vacation from the regular business meetings we put our noses to the grindstone at the September meeting and gleaned a lot of good tips from the sound film "CREDIT—THE LIFE OF BUSINESS," presented by the Retail Merchants Association. This is a picture that all good business people should see. After this we sat back and relaxed while Mrs. Charles Haralson talked to us on "FLOWER ARRANGEMENT", demonstrating some twenty-five different and practical arrangements of flowers, that any assistant could manage for her office at little or no expense.

We wish that our bosses could listen in on our question box which is on every program. You would find that we have real problems and that we do sincerely try to solve them. (These problems aren't all presented by the patients, either—meaning that the bosses give us their share.)

All of you who failed to see the film, "Life Begins Again", presented

by the Audiphone Company to the Medical Society are invited to join us at our October meeting to see it. It is a non-commercial picture showing an animation of the ear which has been recorded on film for the first time. There is also a story throughout which is very interesting. For further details ask your assistant.

Sarah Victory and Mary Hobson braved the wilds of Canada and remembered us less fortunate ones by bringing back loads of fish with which they, together with the Social Committee, treated members of the T.C.M.D.A. to a good old "Tennessee Fish Fry and Hill-Billy Tacky Party." This affair held at the Texas Company Club Rooms and it goes without saying that everyone present had a grand time and loads of fun.

Does your assistant belong to the T.C.M.D.A. Society. If not, tell her she is missing something worthwhile every day. Come to visit us yourself, sometime.

MEAD-JOHNSON NEWS LETTER

Any Physician May Exhibit "When Bobby Goes to School" to the Public.

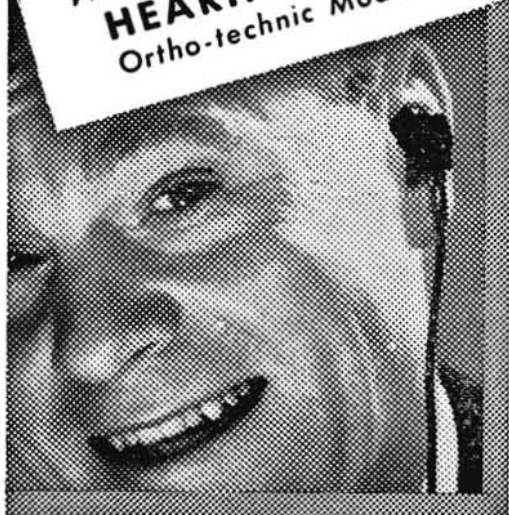
Under the rules laid down by the American Academy of Pediatrics, their new educational - to - the - public film "When Bobby Goes to School" may be exhibited to the public by any licensed physician in the United States.

All that is required is that he obtain the endorsement by any officer of his county medical society. Endorsement blanks for this purpose may be obtained on application to the distributor, Mead Johnson & Company, Evansville, Ind.

Such endorsement, however, is not required for showings by licensed physicians to medical groups for the purpose of familiarizing them with the message

Continued on page 29

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HEARING AID
 Ortho-technic Model



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4. With what other physicians do you have credit established? (This question will obtain information to secure Medical Credit experience.)
5. Have you followed your present occupation for some time, and how long have you been with your present employer?

If the Patient Is a New Resident of the City:

1. What occupation did you follow at your former address?
2. With what physician had you established credit?
3. What was your former address and how long did you reside there?

People asking for credit expect to give information. Obtaining answers to these questions will impress the patient with their responsibility and will help to check Medical Credit and your secretary in securing prompt payment of accounts.

Use your Bureau for those slow and doubtful accounts. Call us about Medical Credit information on your new patients. 10,000 names are listed in our files.

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of the film.

"When Bobby Goes to School" is a 16mm. sound film, free from advertising, dealing with the health appraisal of the school child, and may be borrowed without charge or obligation on application to the distributor, Mead Johnson & Company, Evansville, Ind.

**HEALTH COMMITTEE
URGES DISPOSAL PLANT**

The following resolution was adopted by the Board of Directors of the Chamber of Commerce following upon recommendations presented by the Public Health Committee of the Chamber of Commerce. Dr. W. A. Dean is chairman of this committee and included in the membership is Dr. John Perry and Lloyd Stone.

RESOLUTION

WHEREAS, the Public Health Committee of the Tulsa Chamber of Commerce is wholeheartedly in accord with the efforts now being made to extend and enlarge the storm and sanitary sewer system in the City of Tulsa, because the situation as it now exists warrants the expenditure of public funds on these projects.

WHEREAS, since 80 per cent of the sewage of Tulsa is dumped untreated into the Arkansas River, the Committee is of the opinion that from a public health standpoint the construction of an adequate sewage disposal plant is of greater importance than the building of additional storm and sanitary sewers.

BE IT THEREFORE RESOLVED, that the Public Health Committee of the Tulsa Chamber of Commerce recommends that before any proposal calling for the construction of storm and sanitary sewers be submitted to the voting public a thorough study be made to determine the advisability and feasibility of building a sewage disposal plant, either prior to or in conjunction with the extension and enlargement of the storm and sanitary sewer mains.

UNANIMOUSLY ADOPTED by the Board of Directors of the Tulsa

Chamber of Commerce in regular session September 17, 1940.

VICTOR F. BARNETT,
President.

ATTEST:

C. A. BORDER,
Secretary.

PUBLIC HEALTH

Continued from page 17

H. MORBIDITY SERVICE			
Admission to medical service			92
Admissions to nursing service	1	22	
Clinic visits	540	674	
Field medical visits	140	489	
Field nursing visits	17	118	
Office nursing visits	2	48	
Patient-days of hospital service			1
Other service (specify)			
J. GENERAL SANITATION			
Water supplies treated			3
Privies restored	24	305	
New septic tanks installed	1	3	
Field Visits:			
Private premises	315	1,126	
Swimming pools	115	520	
Water supplies	5	5	
Sewerage plants improved	3	101	
Sewer connections	2	69	
Nuisances abated	73	697	
K. PROTECTION OF FOOD AND MILK			
Food-handling establishments improved	174	1,491	
Field visits to same	565	5,341	
Field visits to dairy farms		2,165	
Milk plants registered	6	42	
Pasteurizing plants	6	42	
Carcasses condemned	267	2,295	
Other service (specify)	106	962	
L. LABORATORY			
Water—chemical	125	214	
Milk or milk products	594	4,592	
Typhoid: blood cultures	1	8	
Typhoid: widal	4	6	
Typhoid: stool cultures	24	224	
Typhoid: urine cultures	18	210	
Diphtheria cultures	28	816	
Syphilis	1,757	9,629	
Malaria	2	7	
Gonorrhea	74	559	
Tuberculosis		2	
Feces for parasites		39	
Urinalysis	18	68	
Rabies	1	10	
Other service (specify)			
Misc. Chemical	2	10	

Professional Directory

VICTOR K. ALLEN, M. D.
Proctology
 1001 Medical Arts Building
 Tulsa, Oklahoma

E. RANKIN DENNY, M. D.
Diagnosis and Clinical Investigation
Allergy
 1105 Med. Arts Bldg. Tel. 4-4444

W. S. LARRABEE, M. D.
Roentgenology
 411 Med. Arts Bldg. Tel. 4-3111

I. A. NELSON, M. D.
Tissue and Clinical Pathology
 1107 Med. Arts Bldg. Tel. 4-1835

RUSSELL C. PIGFORD, M.D., F.A.C.P.
Internal Medicine
Cardiology
 1001 Med. Arts Bldg. Tel. 5-3762

WADE SISLER, M. D.
Orthopedic Surgery
 807 South Elgin Tel. 5-3132

JOSEPH FULCHER, M. D.
Proctology—Urology
 210 Med. Arts Bldg. Ph. 3-4429

L. C. NORTHRUP, M. D.
Surgery, Gynecology and Obstetrics
 1307 S. Main Ph. 4-5571

A. RAY WILEY, M.D., F.A.C.S.
Surgery
 812 Med Arts Bldg. Ph. 3-0202

M. J. SEARLE, M. D.
Pediatrics
 202 Med. Arts Bldg. Ph. 4-2901

JOHN G. LEFTWICH, D.D.S.
Practice Limited to Orthodontia
 803 Oklahoma Building Ph. 4-7592

W. ALBERT COOK, M.D.
Eye-Ear-Nose-and-Throat
 1106 Med. Arts Bldg. Ph. 3-6008

RALPH A. MCGILL, M.D.
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