

# THE BULLETIN

OF THE TULSA COUNTY MEDICAL SOCIETY

## November Medical Meetings

### November 11:

Dr. D. L. Edwards: "What's New in Eye-Ear-Nose-Throat."

Dr. Arnold Ungerman: "What's New in Neuro-Psychiatry."

Motion Picture: "Nephrectomy for Tubercular Kidney."

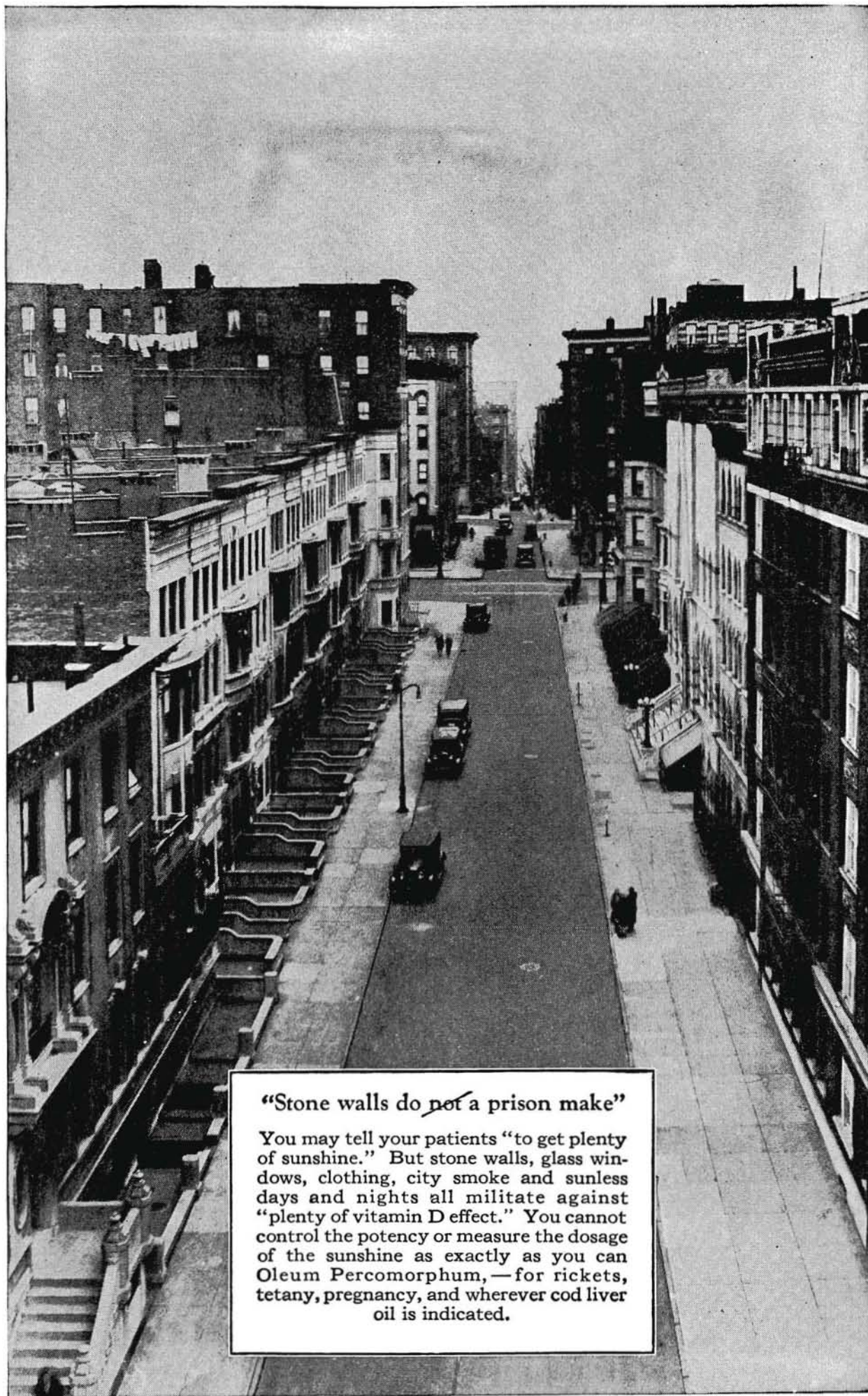
Business Meeting.

### November 25:

Dr. Otto Jason Dixon of Kansas City, Mo.—  
"An Operation for the Correction of Deafness."

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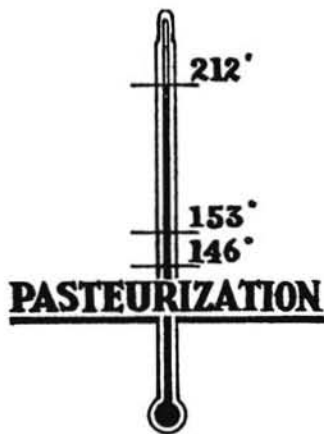
Vol. 6 ▲ Tulsa ▲ NOVEMBER ▲ Okla. ▲ No. 11



**"Stone walls do ~~not~~ a prison make"**

You may tell your patients "to get plenty of sunshine." But stone walls, glass windows, clothing, city smoke and sunless days and nights all militate against "plenty of vitamin D effect." You cannot control the potency or measure the dosage of the sunshine as exactly as you can Oleum Percomorphum, — for rickets, tetany, pregnancy, and wherever cod liver oil is indicated.

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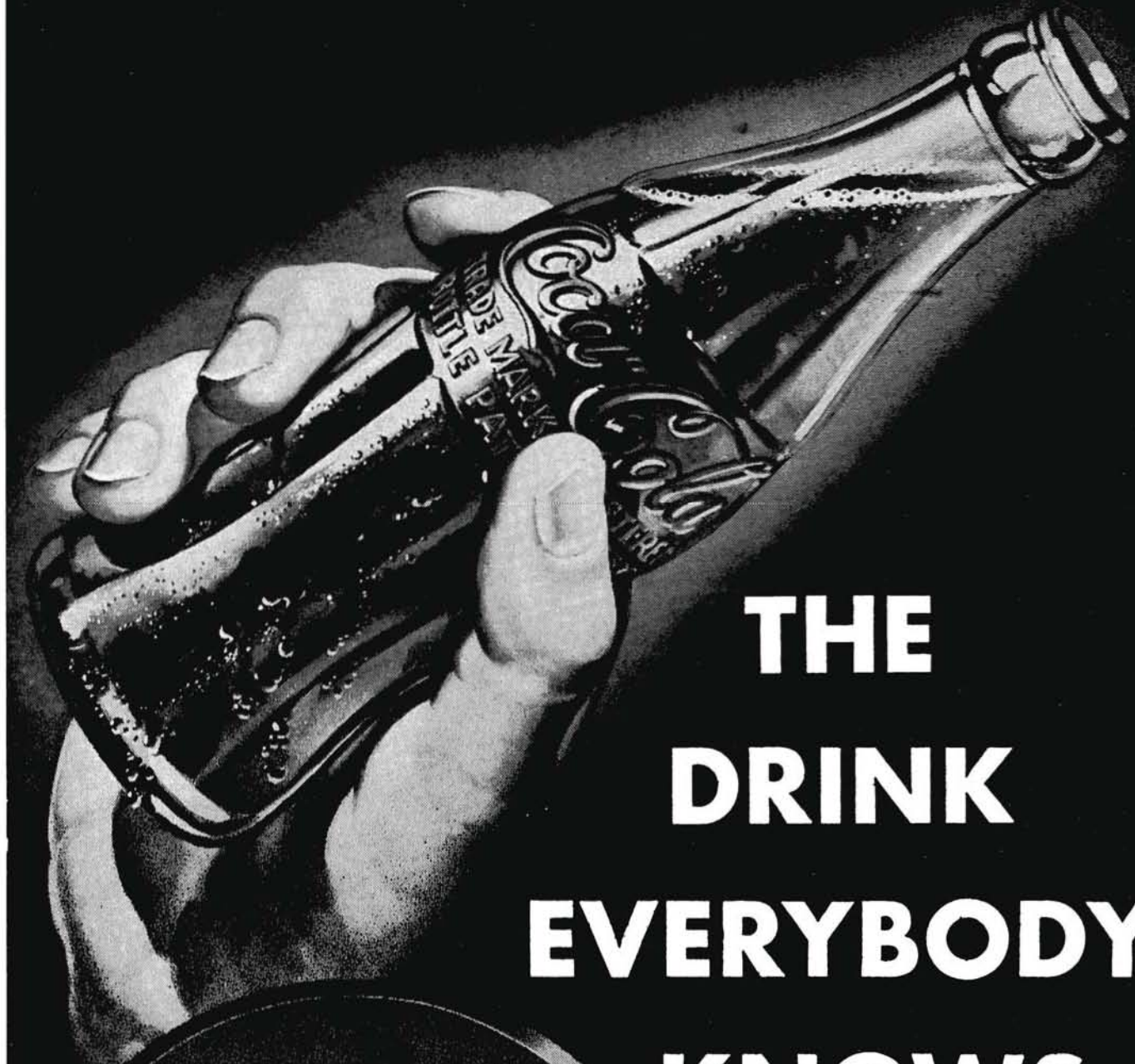
139°F. Tuberculosis Killed  
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134°F. Scarlet Fever, Streptococcic sore Throat and 27 Strains of Streptococci Killed  
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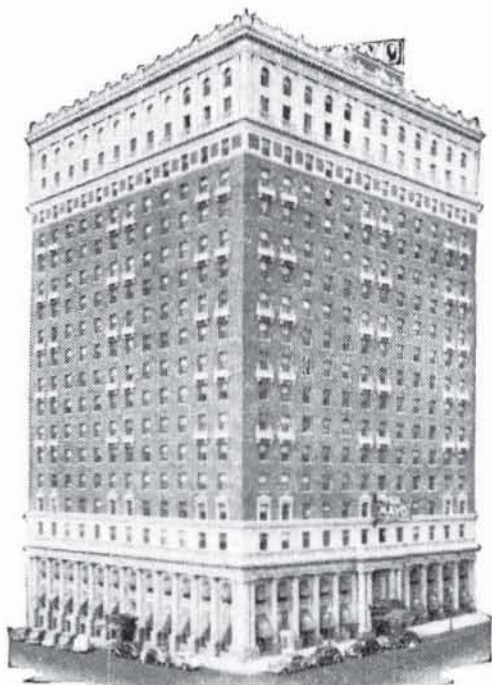
**CONTENTS**

Advertisers .....	5
Draft Machinery .....	7
Case for Private Medecine .....	8
Clinic Is One Year Old .....	10
President's Page .....	11
Editorial .....	12
Medical Calendar .....	13
Hillcrest Hospital .....	15
Public Health .....	17
Purely Personal .....	18
Dr. Smith Heads Group .....	19
Malpractice Insurance .....	21
Of Special Interest .....	23
Group Hospital .....	27

**ADVERTISERS**

Aloe .....	17
Audiphone Hearings Aids .....	22
Ball Drug Co. ....	20
Barnes Manley .....	26
Bearden Plumbing Co. ....	26
Birth Control .....	29
Cease Electric .....	5
Coca-Cola .....	4
Commercial Printing Company .....	32
Curtain's Prescription Laboratory....	6
Democratic Ad .....	14
Denver Chemical Co. ....	28
Fitzgerald Funeral Home .....	5
Glen Drug Store .....	20
Hillcrest Hospital .....	16
Mary-Peale Florist .....	24
Mayo Hotel .....	6
Mead Johnson & Co. ....	2
Meadow Gold Dairy .....	31
Medical Arts Prescription Shop....	16
Medical Credit Bureau .....	22
Merkel X-Ray .....	32
Metropolitan Life .....	28
Nurses Registry .....	32
Oaklawn Sanitarium .....	31
Ozark Pharmacy .....	20
Pasteurized Milk .....	3
Professional Directory .....	30
Tulsa Typewriter Co. ....	32
Voth and Wright .....	20
Wm. Penn Drug .....	26

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# THE BULLETIN

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## 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, NOVEMBER, 1940

No. 11

## Medical Machinery Ready for Draft

**Dr. James Miner, Tulsa County Medical Director completes appointments for local draft and appeal boards; all staffs ready for big job of examining first conscripts.**

The medical machinery for Tulsa County's conscription program has been placed in full readiness to function at a moment's notice, Dr. James Miner, Tulsa County Medical Director announced when Dr. Louis Ritzhaupt, State Medical Director, approved all draft and appeal board appointments for Tulsa County.

In Tulsa County there are seven draft boards and appointments have been made for one doctor and an alternate for each of these boards. Two dentists also have been approved for each board. The examining doctor on each board can call in all the medical help he needs in case of any rush.

Appointments for the Tulsa draft boards as announced are: Board Number 1: Dr. Roy L. Smith and Dr. C. M. Ament as alternate; District Board Number 2—Dr. S. S. Mohrman and Dr. J. B. Gilbert, alternate; District Board Number 3—Dr. J. C. Peden and Dr. H. H. Porter, alternate; District Board Number 4—Dr. E. O. Johnson and Dr. O. C. Armstrong, alternate; District Board Number 5—Dr. J. S. Chalmers and Dr. W. R. Turnbow, alternate; District Board Number 6—Dr. R. K. Goddard and Dr. O. E. Layton, alternate; District Board Number 7—Dr. R. E. Daily and Dr. S. E.

Franklin, and Dr. Logan Spann, alternates.

Dental appointments are: Board Number 1—Dr. R. W. Baker and Dr. R. E. Lovelette; Board Number 2—Dr. John Glass and Dr. E. W. Wise; Board Number 3—Dr. P. J. Brown and Dr. J. A. Wadlin; Board Number 4—Dr. R. M. Dunn and Dr. W. D. Rush; Board Number 5—Dr. F. A. Lenhart and Dr. J. F. Maness; Board Number 6—Dr. G. A. Roelke and Dr. L. E. Crume; Board Number 7—Dr. J. A. Williamson and Dr. C. A. Farrow.

Members of the Advisory Board for the Tulsa Region Appeal Board have been approved as follows: SURGERY, Dr. Fred Y. Cronk; INTERNIST, Dr. Frank Nelson; OTOLARYNGOLOGIST, Dr. Roy Dunlap; ELECTRO-CARDIOLOGIST, Dr. R. C. Pigford; UROLOGIST, Dr. Henry Browne; DISEASES LUNGS, Dr. R. M. Shepard; OPHTHAMOLOGIST, Dr. Charles Haralson; DERMATOLOGIST, Dr. James Stevenson; PROCTOLOGIST, Dr. Joseph Fulcher; PSYCHIATRY, Dr. Ned Smith; RADIOLOGIST, Dr. Leon Stuart; CLINICAL PATHOLOGIST, Dr. I. A. Nelson; ORTHOPEDICS, Dr. Frank Stuart and DENTIST, Dr. Scott P. Bowyer.

# The Case of 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*.

## "Underprivileged" Can Take It

An industrial psychologist at Harvard recently tested a group of young sharecroppers from Mississippi and an equal number of average Harvard boys to compare their resistance to fatigue. He found the sharecroppers superior to the "aristocrats" in capacity to undergo severe physical trials, although every one of them belonged to the "ill-clad, ill-housed, ill-fed and ill-doctored" bloc of the nation.

But these are isolated cases and not representative, you will be told. Let's look at the same question statistically. We find that the District of Columbia, seat of the national Government, has the highest death rate in the nation, if we except Arizona and New Mexico both of which have a large percentage of tuberculous health seekers from the East among their population. The District also boasts a higher per capita income than any one of the 48 states. That is reverse correlation, but we will not ape the political health faddists by trying to reason from it that better incomes necessarily mean worse health. It can be pointed out, however, that the four states with the lowest death rates are North Dakota, South Dakota, Oklahoma and Arkansas. Three of these are definitely "hvae-not" states.

With all this credulous preoccupation with bodily ills and the plausibility of claims for their class origin, it is not surprising that those who seek ruling power in perpetuity should make health programs to advance their purposes. Such programs provide something else that government can do to win the gratitude of people too thoughtless to recognize Greeks when they come bearing gifts labeled "other people's money."

For centuries men fought to free their churches from state control. Eventually, after rivers of blood had been shed, they

succeeded and now in large areas of the world we have religious freedom. During all those centuries, the state had nothing to do with the treatment of sickness. Now it is proposed to turn that function over to government, presumably to create a problem for posterity—the job of winning back freedom over their bodies as they once wrested freedom over the custody of their souls from government.

The most ambitious of health programs is compulsory health insurance. Like others, it is an importation from Europe.

In 1883 Bismarck proposed in Germany the first system of compulsory sickness insurance which was eventually to set the pattern for social security legislation in many nations. It was a system by which the employee contributes a portion of his wages, his employer another portion, and the state a third portion.

A deceptive device, since the worker pays most of the other two shares as well as his own. He helps to pay his employer's share, since the tax represents an added cost of doing business and must therefore be passed on to him and others wrapped up in the goods the employer makes and sells. And of course he pays the Government's share in the taxes also hidden in the goods he buys.

If the American worker were to have an actual estimation of his contribution to social security taxes by these three different routes, he would discover that the amount he pays against the hazards of old age and unemployment and as a contribution to other service under Title 6 of the Social Security Act represents a considerable sum.

Since the establishment in Germany of the concept that the State might thus begin to take over for the worker many of the responsibilities which American



workers have always shouldered themselves, the political value of the system became apparent to political leaders in many another state. Gradually the scheme has spread, with variations and modifications, to other countries. It is safe to say, however, that, in not one of them, is there a system which provides a type of medical service even approximately as good as that available to the vast majority of American workers today. Increasingly in some nations more and more of the private functions of the individual were taken over. The German worker contributes a large part of his wages to the State so that the State may carry out for him many of the most intimate and personal functions of his life.

### **British System Child of Politics**

In England after 1911, when it seemed possible that the Labor Party might take away from the then dominant Liberal Party the control of the Government, Lloyd George offered to British workers a similar system and combined with it the dole. That combination is probably subject even to more criticisms than some of those which are being offered to Americans today. Under the British compulsory sickness insurance system, the worker receives nothing but a general practitioner's service, the effectiveness of which is open to question. When he requires the services of hospitals and specialists, he becomes essentially a charity patient. Unfortunately, however, as a result of this system, the voluntary hospitals of Great Britain which give this service find themselves facing a catastrophe—an end of their existence as independent institutions.

Now it must be remembered that, in the United States, we have developed what is probably the finest hospital system in the world. The majority of the hospitals which give medical care are established on a non-profit voluntary basis with the support of the Catholic, the Protestant, the Jewish and other churches, and of trades, organizations, and communities. The care of the sick

has been a fundamental spiritual motive in every great religion since the earliest times. The extent to which removal of this motive from religious groups would interfere seriously with their spiritual function is a matter which deserves the most careful thought and consideration.

The years from 1905 onward witnessed the development in the United States of a new profession—the social service group—today numbering many thousands of persons whose full time is spent in the administration, distribution and control of public and private assistance to the needy and sometimes to those not quite so needy. Increasingly, members of that group have taken their inspiration for future development from foreign patterns. They observe housing projects in Australia and Sweden and state administered services in Russia and Germany. They try to transplant similar mechanisms into the American system of living.

They became more and more articulate in these attempts to change medical service at the time of the World War. During that conflict, mass handling of men began to be recognized as an exceedingly useful performance to achieve a definite objective. After the war, there was an effort to carry this mass handling of men over into civil life.

One of these was the Sheppard-Towner Act, passed shortly after the war, which provided federal aid for maternity care. Properly wrapped in Mothers' Day sentiments, it appealed powerfully to the emerging social consciousness of that decade. It functioned only where the states voted their own enabling legislation. The decrease in infant mortality in the seven or eight years the act was in force was not so marked as it had been previously, and no better than it was afterward. Illinois and Massachusetts, the two states that did not accept the federal handouts, showed an improvement equal to those that did subjugate themselves before the growing federal colossus.

*(To Be Continued)*

# Free Medical Clinic One Year Old

**Total clinic load of 4,457 indigent patients make 25,277 medical calls on clinic exclusive of Venereal-Disease Clinic; new patient load is showing decline.**

At the close of business on the night of October 31, 1940, the Tulsa County Free Medical Clinic operated for the indigent sick by the Tulsa County Medical Society had completed its first full year of service with a record of growth and accomplishment that even exceeded the fondest dreams of the Clinic Committee which has had charge of the establishment and operation of the institution.

Figures available show that there have been a total of 4,457 individual patients served by the Clinic during the first year of its existence. Records show that the total load of the Clinic is increasing but the rate is very much slower than during the first six months. During the last six months the increase has been at the rate of about 200 new patients per month, but during these same months approximately this same number of old patients are discharged from clinic treatment so the average daily load of patients shows no increase.

Since the opening of the Clinic on November 1, 1939, there have been two major expansions, with the addition of

two new departments. Shortly after the Clinic opened its doors, the Laboratory Department was added to enable the staff members to check their diagnosis more closely. This new expansion was carried on by the Clinic Committee out of the regular funds available. The second and most important addition to the Clinic was the X-Ray Diagnostic and Therapeutic Departments. The X-ray department was made possible by the contribution of Mrs. Waite Phillips who purchased the X-ray equipment for the Clinic Committee.

Records show that staff members of the various departments and special clinics have administered in excess of 25,277 treatments to the patients during this first year of operation. Laboratory figures show that more than 1,500 laboratory examinations and reports have been made. Figures for the X-ray department indicate that there are 64 patients now being treated with the huge 200 K.V. deep therapy unit.

The drug department which shows one of the most radical savings in the cost of indigent medical treatment filled a total of 19,357.

## CLINIC STATISTICS FOR YEAR ENDING OCTOBER 31, 1940

Total patient load ..... 4,457  
Total number of patients seen in Clinic ..... 25,277

### Classification:

Internal Medicine .....	9,588	Diathermy .....	210
Surgery .....	2,310	Neurology .....	294
Dental .....	2,924	Cardiac .....	464
Pediatrics .....	994	Orthopedics .....	723
Gynecology .....	2,172	Dermatology .....	726
Eye .....	1,608	Proctology .....	278
Ear, Nose and Throat .....	1,066	Tumor .....	174
Tonsils .....	714	Varicose .....	242
Urology .....	574	Miscellaneous .....	131

Total number of prescriptions filled from Clinic Drug Store Room.....19,357

Total number of laboratory tests..... 1,501

# PRESIDENT'S PAGE

The "Ides of March" come not the 15th day of March this year—but rather on election day, November 5th.

While the Romans were warned to "Beware of the Ides of March," let me warn every member of this society and every physician in the State of Oklahoma to beware of November 5th—because November 5th may and can become a very fateful day for the profession in Oklahoma.

On November 5th the electorate of Oklahoma will be called upon to vote on the State Question 241 (Initiative Petition 166) which is nothing but the old Cooperative Hospital Bill which has been bobbing up regularly, with a few new vicious features added for good measure.

See that you, your wife, your office girl, your relatives, and your patients VOTE NO on this question on November 5. I am sure you have sent out the small enclosures to all your patients.

Remember: This bill would make it possible for unscrupulous doctors to establish small "hospitals" under the guise of charitable institutions and send out "cappers"—agents—to bring patients to them. Second: This bill would change the present membership of the State Board of Medical Examiners in such a way that the bars might be lowered to allow unethical doctors from other states to come to Oklahoma and practice. Third: This bill would let down the present high standards which safeguard the public welfare and would liberalize and lower the present "Unprofessional Conduct" restrictions.



President

# The BULLETIN

Editorial

Committee.....

LOGAN SPANN, M. D.,  
Chairman  
F. L. UNDERWOOD, M. D.  
CARL 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      NOVEMBER, 1940      No. 11

## IN MEMORIAM

**Dr. Le Roy Long**

On this day in Gallie a mighty oak has fallen, when the all wise Creator presented to Dr. LeRoy Long the golden key of death that opens the portals to the palace of eternity, which must be the solace and abode of all tired and weary souls on their voyage to that haven of rest.

And characteristic of the sturdy and fruitful oak, he and his life has left implanted in the soil of Oklahoma, and in the medical profession in particular, budding or sprouting acorns in the lives of students and physicians who passed under or were blessed by his tutelage to the good of posterity by the glorified principles and tenets of a great scholar, character and physician as lived and exemplified by this good man.

Dr. Long was a medical satellite whose radiance was an inspiration to the youthful physician and an admiration to the elder—he lived and loved his profession—he stood for the better things in it and ardently restrained the unscrupulous ones—he was a devout student, untiring in his search for

knowledge and likewise unselfish in his passing it on to his students and fellow men. He was broad and considerate to the ideas of others.

During his life, Oklahoma medicine and the Oklahoma school of medicine had a worthy champion and defender during the time that he was dean; and grew from a mediocre school to one of recognized standing and efficiency, and its students are on a par with any in the country—which must have been a satisfying comfort to his laborious task and a crowning reward to a job well started and ending christened with the banners of a worthy accomplishment recognizant of his studious and efficient life and untiring efforts.

He was a character with a moral fiber that was unquestionable in his daily life—he no doubt tried to live the principles of goodness and purity as laid down by the Gallian, in his relation with his fellow men.

His name blessed the honorary roles of the leading surgical societies from the American College of Surgery on down.

The Tulsa County Medical Society, its officers, and members one and all, wish to join with the Oklahoma City Medical Society and the medical profession of Oklahoma in this bereavement and extend to his beloved wife and illustrious sons LeRoy Junior and Wendell our heartfelt sympathies in the crowning of this good mans work by the reaper of death and say what a privilege to be the sons of so illustrious peer and the wife of such a devoted husband.

Written by a graduate of the Medical School of Oklahoma,

John C. Perry, M.D.

And presented by the Necrology Committee of the Tulsa County Medical Society.

“My best man dined with us last Sunday and was so impressed with my bride’s cooking that he sent her a carving set.”

# Medical Calendar

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**SATURDAY, Nov. 2nd:**

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

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**MONDAY, Nov. 4th:**

Hillcrest Memorial Staff Meeting.

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**TUESDAY, Nov. 5th:**

Mercy Hospital Staff Meeting.

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**SATURDAY, Nov. 9th:**

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

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**MONDAY, Nov. 11th:**

Tulsa County Medical Society Meeting at Mayo Hotel at 8:00 p.m. Program: What's New in Neuropsychiatry by Dr. A. H. Ungerman. What's New in Eye, Ear, Nose and Throat by Dr. D. L. Edwards. Dr. R. H. Flocks, Associate Professor of Urology, University of Iowa, will give a talk on Calcium Urolithiasis. Movie-Nephrectomy for Tuberculosis Kidney.

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**TUESDAY, Nov. 12th:**

Tulsa General Hospital Staff Meeting.

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**SATURDAY, Nov. 16th:**

Radio Broadcast at 3:15 p.m. Station KTUL. Dr. A. L. Walters.

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**MONDAY, Nov. 18th:**

St. Johns Hospital Staff Meeting.

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**TUESDAY, Nov. 19th:**

Flower Hospital Staff Meeting.

Office Assistant's Meeting. Michaelis Cafeteria at 6:00 p.m. Remember the White Elephant Sale, and bring any and everything that you don't want and maybe someone else will.

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**SATURDAY, Nov. 23rd:**

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

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**MONDAY, Nov. 25th:**

Tulsa County Medical Society Meeting at Mayo Hotel at 8:00 p.m. Program: Dr. Otto Jason Dixon, Kansas City, Mo. Subject: An Operation for Correction of Deafness.

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**SATURDAY, Nov. 30th:**

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

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# Protect the Clinic

The free Medical Clinic now being operated by the Tulsa County Medical Society for the indigent sick of Tulsa County is the first forward step taken by the County in years. It is the most important development Tulsa and Tulsa County has seen during the past year. It is the most valuable contribution to the economic welfare of the County and the people of this County.

It would be a calamity if we should allow anything to hinder the development and growth of the Clinic. It would be a severe blow to the health of the indigent, to say nothing of the extra cost to the taxpayers if anything should happen to close the doors of this institution.

To safeguard the continued operation of the Clinic and to insure a closer cooperation between the Board of County Commissioners and the Tulsa County Medical Society elect all three Democratic candidates to the Board of County Commissioners on November 5.

Every member of the Medical Society knows I have been honestly behind the Clinic and have fought for every thing that would help make the operation of the Clinic a success. I pledge my continued support.  
(Signed)

Ralsa F. Morley.

I believe that the Free Medical Clinic is serving a great need. When I am elected, I promise to support the Clinic Committee in every way and to do everything I can to increase the scope and activity of the Clinic.  
(Signed)

J. B. Gray.

From the beginning of my campaign, I pledged my support to the Medical Clinic. This is a part of my platform. I am sincerely for the Clinic and again pledge my support to the Medical Society and will do everything I can to help support this institution of mercy for the indigent sick.  
(Signed)

Curtis Greer.

VOTE FOR

**ALL THREE DEMOCRATIC CANDIDATES**

**for Board of County Commissioners**

**November 5th**

(ADV.)

# Morningside now Hillcrest Memorial

**Bryce L. Twitty, widely known Texas Hospital operator, is new manager; Hospital is taken from receivership by sale to new group which will make this hospital outstanding.**

Morningside hospital ceased to exist in name at midnight Monday October 15 when Mr. and Mrs. M. J. McNulty, jr., relinquished control and the physical equipment officially became the property of the Hillcrest Memorial Hospital Association which will be guided by a man whose creed is this:

"Caring for the sick is the most sacred work on the face of this earth."

The man is Bryce L. Twitty, widely known throughout the nation as a hospital administrator and of particular fame in Texas where he long served as superintendent of the Baylor hospital.

He repeatedly speaks the phrase quoted above and just as often he remarks that anyone in hospital work "must have a shepherd's heart." He hopes to make Hillcrest Memorial a famous hospital and he confidently expects that "when we have built prestige" some wealthy individual will endow it. His conversation naturally strikes the notes of religion and humanitarian ideals and he declares himself as extremely happy at the head of his non-profit institution, "from which no individual will draw a cent of profit, so we will have means with which to grow and means with which to do much charity work."

Twitty told the said employes they need have no fears about a radical change in the personnel.

"We have no problems here that we cannot overcome. Our finances are arranged so that we can operate without embarrassment. We propose to make this a civic institution, from which none but those who work here will take a cent. We will have more room for charity patients because we will not be striving to pay dividends."

"The present board is temporary, appointed only for the sake of obtaining a charter. When I have been here awhile

and have become acquainted with people the board will consist of local business and civic leaders and leaders from the Tulsa trade territory, for this hospital should draw hundreds of people here annually from a territory within a radius of 200 miles."

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## TULSA TO ENTER HEALTH CONTEST

For the first time in history, Tulsa will be entered in the national city health conservation contest sponsored jointly by the American Public Health Association and the United States Chamber of Commerce, it was decided recently at a meeting of the Tulsa Chamber of Commerce Public Health Committee.

In addition to the general contest, Tulsa also will be entered in the special competitions for noteworthy achievements in the fields of tuberculosis and syphilis control, Sneed stated.

The contest is based on the year-to-year improvements made in the particular city's health conservation activities and is not based on comparative facilities in various cities. However, for purpose of fair ratings, the competing cities are divided as to population.

Members of the public health committee are Dr. W. A. Dean, chairman; D. D. Bovaird; Rev. Harry Carr, Frank G. Couper, Dr. Fred Y. Cronk, P. C. Lauinger, Glenver McConnell, Joe Parkinson, Dr. John C. Perry, Dr. A. W. Pigford, Dr. A. G. Reed, Lloyd Stone, Herbert R. Stuart. Dr. Arthur L. Walters and Dr. R. M. Adams, city health superintendent.

---

Most of us are like the letter "B" . . . often in debt when there is really no need for it.



# HILLCREST MEMORIAL HOSPITAL

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finer hospitals*

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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, M.D., County Physician    M. V. Stanley, M. D., Asst. Co. Physician

By DR. ALLEN C. KRAMER

During the month of October the following cases of communicable diseases were reported: Chickenpox, 1; gonorrhea, 3; influenza, 1; measles, 1; scarlet fever, 2; syphilis, 2; whooping cough, 2; typhoid, 2 (one found to be tuberculoma and the other quite questionable.)

Immunization of indigent children for the month totaled: smallpox, 306; diphtheria, 393; typhoid, 910; Shick tests, 79. There were seven Child Health Conferences held for infant and pre-school hygiene. Miscellaneous services were as follows: Admissions to service, 3; consultations with physicians, 5; field nursing visits, 3.

The School Hygiene Program consisted of the following: Inspections by nurse, 1,214; examinations by physicians, 24; office visits, 11; interviews with teachers, 67; lectures, 2 (attendance, 172).

General Sanitation in the County reports these inspections and investigations; field visits, 67; visits to schools, 18; visits to eating establishments, 43; water samples collected, 38; municipal water supplies treated, 15; supervised installation of septic tanks, 7.

Nurses in the Tulsa County Health Department are instructed not to make diagnoses of any kind or in any way prescribe. We do not feel that it is right for the child in school to come home and say that "the nurse said it was imperative that I get my tonsils taken out." All forms of ailments are referred to the family physician by these nurses for his diagnosis and treatment of each particular case.

By R. M. ADAMS, M. D.

It has been brought to our attention that the doctors of Tulsa have become a little lax in filling out the weekly Epidemiological card (the yellow card you receive every week).

It seems some of us think these cards are for reporting venereal diseases only.

The following is a list of diseases that should appear on the yellow card.

Chickenpox, diphtheria, infantile paralysis, measles, meningococcus, meningitis, septic sore throat, scarlet fever, smallpox, typhoid fever, anthrax, bubonic plague, dengue, diarrhea (all forms and specify), German measles, gonorrhea, hookworm, influenza, leprosy, malaria, pellagra, pneumonia (give type), rabies, Rocky Mountain spotted fever, Ophthalmia Neonatorum, syphilis, tetanus, trachoma, tuberculosis (all forms), whooping cough, tularemia, typhus fever, undulant fever, and vincent's angina.

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Tulsa Address

KETCHUM HOTEL

# 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

Here again we come to a page of news or sorts. Our star reporter for the "personal page" reports a lot of going-on so we are going to list the items just as she ran across them.

DR. H. D. MURDOCK will be the Oklahoma representative for the National Committee of Physicians for Wendell Willkie for President.

DR. WADE SISLER left Tulsa last week to attend a national meeting of the Clinic Orthopedic Society to be held in Milwaukee, Wisconsin. He will be out of the city until next Tuesday. Mrs. Akin, wife of DR. J. O. AKIN had seven-pound baby boy. DR. JOHN PERRY, wife and two daughters spent a couple of weeks in Colorado. DR. J. S. CHALMERS wife has been ill in the hospital here for several days.

DR. N. S. WHITE has gone to Arizona and Wyoming on a ten days deer hunt. DR. HUGH PERRY and FRANK STUART were inducted into the American College of Surgeons at the recent meeting. DR. FRED E. WOODSON attended the Congress of Anaesthetists in Chicago, Ill.

Doctors HENRY BROWNE, JOSEPH FULCHER and J. W. ROGERS attended the South Central Section of the American Urological Association in Denver, Colorado. Dr. HENRY BROWNE was elected Vice President. Doctors A. RAY WILEY, RALPH A. MCGILL and T. J. LYNCH attended the meeting of the American College of Surgeons at Chicago, Ill. Doctors HUGH J. EVANS and CHARLES HARALSON attended the American Academy of Ophthalmology meeting at Cleveland, Ohio.

DR. A. W. PIGFORD also attended the American College of Surgeons meeting in Chicago after which

he is going to Memphis, Tenn., to meet his wife and visit relatives in the South. Doctors NED R. SMITH and RUSSELL PIGFORD attended the Kansas Heart Association meeting in Emporia, Kansas.

Doctor and MRS. J. D. SHIPP spent the weekend in Fayetteville, Arkansas, with DR. and MRS. LEVIN. DR. R. B. FORD has returned to the United States Naval Hospital in Pensacola, Fla. R. S. C. VENABLE'S wife has been very ill, but is improving slowly. DR. MARVIN D. HENLEY and family were among the many Tulsans attending the Oklahoma vs. Nebraska football at Norman last Saturday. DR. ROY W. DUNLAP, with the little red cap was sharing fun of the Shriner's

DR. ALLEN C. KRAMER with some friends went on a hunting trip to South Dakota. DR. O. A. FLANAGAN'S son is in the army now. DR. O. C. ARMSTRONG and family have been fishing at Spavinaw for a couple of weeks. Doctors DAVID V. HUDSON and D. W. LEMASTER are going to attend the Medical Clinic Meeting at Oklahoma City together with DR. PIGFORD, DR. STEVENSON. DR. SEARLE and a host of others. DR. H.P.KEMMERLY who is a member of the Tulsa Roundup Club took part in the rodeo which they gave at the Oklahoma Penitentiary at McAlester. Doctors J. C. BROGDEN, H. D. MURDOCK and families spent the weekend recently at Grand River Dam. DR. L. C. NORTHRUP went up in Nebraska a couple week ago. DR. M. O. HART was sent to Vanderbilt University, at Nashville, Tenn., taking a post-graduate in Syphilis Control. Dr. and Mrs. GEO. R. OSBORN attended a Gynecologist meeting in Chicago.

# Dr. Smith Heads Medical Secretaries

Permanent organization formed at meeting in Oklahoma City; outstanding program is presented; Dr. Nathan B. Van Etten, President of A.M.A. is guest of honor.

Dr. Roy L. Smith, secretary of the Tulsa County Medical Society, was named permanent chairman of the state organization of County Medical Society Secretaries at the second meeting of this group held in Oklahoma City October 27, and plans were made to perfect the organization of this group and to enlist the co-operation of every county secretary in the state. The group plans to hold meetings bi-annually in the fall and during the state medical convention. The next meeting will be held during the state meeting in Oklahoma City in May.

From top to bottom the program planned for this one-day program was outstanding. Short reports or papers were prepared and presented on almost every important topic of interest to secretaries. The meeting was climaxed with an outstanding program at the dinner meeting. Dr. Nathan B. Van Etten, president of the American Medical Association, was the guest of honor at the meeting. Also on the program were Dr. Holman Taylor, Secretary of the Texas Medical Association, and Harvey Sethman, executive secretary of the Colorado Medical Association. The talk on public relations presented by Mr. Sethman was one of the finest papers of its kind presented in years and will be published in an early number of the Oklahoma Medical Journal.

Dr. Smith, Dr. R. C. Pigford, Dr. James Stevenson and Lloyd Stone represented the Tulsa County Medical Society at the meeting and took part in the discussion. Registration for the meeting showed that three-fourths of the county societies in Oklahoma were represented.

A glance at the following program will give some idea of the scope of the meeting and indicate the type of work that was presented at this meeting. Many of the topics drew considerable discussion and a great deal was accom-

plished during the day:

Call to order—Opening Remarks.—L. S. Willour, Presiding.

Report of Affairs of State Association.—Henry H. Turner, President.

Welcome to Secretaries.—Tom Lowry, President Oklahoma County Medical Association.

Discussion County Medical Society Membership.—John R. Walker, Enid.

Discussion County Medical Society Monthly Programs.—J. V. Athey, Bartlesville.

County Medical Societies and the Farm Security Administration.—G. G. Downing, Lawton.

Hospital Insurance and Medical Service Plans.—W. R. McBee, Director, Group Hospital Service.

Medical Preparedness.—Henry H. Turner.

General Discussion.

Public Relations—State Medical Association.—L. D. Hudson, Dewey.

County Health Units of Oklahoma State Health Department.—Hugh Payne, Oklahoma City.

State Insurance Fund.—Mott M. Keys, Director.

Oklahoma Public Welfare Department.

The Journal.—L. S. Willour, Editor.

Business Transactions Between County Societies and Executive Office.—R. H. Graham, Executive Secretary.

Election of Permanent Chairman.

Dinner. Permanent chairman presiding. Entertainment by Oklahoma County Medical Association. Dr. Holman Taylor, Secretary Texas State Medical Association: "The Necessity of Co-operation Between County Medical Societies and the Executive Office." Harvey T. Sethman, Executive Secretary Colorado State Medical Association: "The Relationship of the Medical Profession to the Economic and Political Problems of Today."

Here is a . . . .

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### *This Unusual Policy:*

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.

## Houston Fire & Casualty Company

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TULSA, OKLAHOMA

# Council Approves Liability Policy

Malpractice Insurance provided by Tulsa County Medical Society is endorsed for the Oklahoma State Medical Association members at meeting of Council.

The Oklahoma Group Malpractice Insurance Policy, sponsored by the Tulsa County Medical Society and in effect for the past two years, was endorsed for the Oklahoma State Medical Association by the State Council which went on record at its last meeting approving the insurance program.

This Group Policy, available only to physicians in Oklahoma who are members of their local County Medical Society, has been instrumental in reducing the premium rates of all malpractice insurance in Oklahoma to the present low level—25 to 50 per cent lower than it has been in years.

This Group Policy is handled in Oklahoma by the insurance agency, Voth and Wright and is available to physicians through their own local insurance agents or direct from the Voth and Wright Agency at 404 National Bank of Tulsa Building in Tulsa.

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.

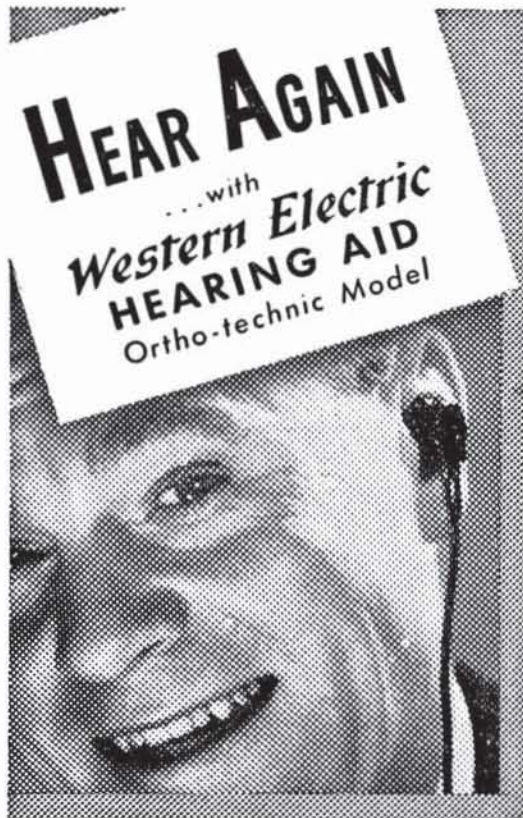
6. *Provides:* This complete malpractice insurance at the lowest rate ever offered physicians and surgeons in Oklahoma. The cost of the insurance for "General" Practice is \$26.25; for Surgeons, \$33.00 or for X-ray Therapy, \$36.25.

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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## DR. WHITE NAMED TO LIBRARY BOARD

Dr. Peter Cope White, 1522 South Carson, recently was appointed by Mayor C. H. Veale to the Tulsa library board, succeeding Mrs. Lee Clinton, resigned.



Accepted by A. M. A.

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## Caution in Opening Medical Accounts Assures Prompt Payment

### A Few Easy Questions That Will Obtain Valuable Information:

1. Is your present address new?
2. What do the Husband's and Wife's initials stand for?
3. The account will be due each month or when the services are completed. Is this satisfactory?
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.

## MEDICAL CREDIT BUREAU

Phone 4-8161 Day or Night

1202 Medical Arts Bldg.

# Of Special Interest!



RADIO SPEAKERS FOR OCTOBER WERE: Doctors H. Lee Farris, J. L. Miner, Marvin D. Henley and H. Lee Farris.

RADIO SPEAKERS FOR NOVEMBER ARE: Doctors J. L. Miner, H. Lee Farris, A. L. Walters, Ralph A. McGill and Marvin D. Henley.

## CIVIL SERVICE SEARCHING FOR NEEDED PHYSICIANS

Secretary  
County Medical Society  
Dear Sir:

In connection with the immediate authorized expansion of the army, there is going to be a need for about 600 civilian medical officers for temporary or part-time duty. The duties will later be performed by commissioned officers of the Medical Reserve Corps, if and when such officers are called to active duty.

The Civil Service Commission is trying to reach qualified physicians who will be available for this service at once, if needed. Copies of a questionnaire are enclosed which are for physicians use in acceptances, with copies of the "announcement" giving further information.

It is highly important that the Commission secure at once information concerning physicians who will be available for this work. The purpose of this letter is to ask your cooperation in circularizing members of your county association and, if you can conveniently, other physicians, whom you think will be suitable and qualified for this work, and will be

loyal in their service to the Government. It is realized that this will be an extensive project, but it is a highly important one, and it would be greatly in the interest of the National Defense program if you could give prompt assistance in the matter.

By direction of the Commission:

Very respectfully,

Wm. C. Hull,  
Executive Assistant.

## TECHNOLOGISTS MEET IN OKLAHOMA CITY

The Oklahoma Society of Medical Technologists, which is chartered by the American Society of Medical Technologists, and the State of Oklahoma, and whose members are registered with the American Society of Clinical Pathologists invites all technicians who are interested in laboratory problems and the progress of laboratory medicine to attend their annual fall meeting which will be held November 9, 1940, in Oklahoma City.

The following program has been arranged to cover current problems in laboratory technic, and to promote good fellowship among the technicians of the state.

- 10:00 to 10:45—Registration—Lobby of the Medical School, 801 East 13th Street. (During the registration period, the department of anatomy, the museum of the school of medicine, and the library will be open for your inspection.)
- 10:45 to 11:15—Demonstration and discussion of the Asheim-Zondek reaction and reading of vaginal smears. Lantern slides—Room 215—Department of Physiology, demonstrated by Dr. A. A. Hellbaum, Associate Professor of Physiology.
- 11:15 to 12:00—Demonstration: The frozen section method: Methods of overcoming objections and difficulties. By Dr. L. A. Turley, Professor of Pathology, assisted by Miss Katherine Aderhold, M. T., and Doris McClean. Room 222.
- 12:00 to 1:00—Dutch lunch at some nearby cafe. Transportation provided.

# TAKE A GOOD LOOK!

## At What You Can't See!



When a prescription leaves your hand and disappears behind the prescription counter—what can happen to it?

For the physician in a strange neighborhood, this list of long-established pharmacists will give assurance of safety. Their records of many years of careful, conscientious service are attested by the high regard in which they are held by their fellow pharmacists, and the confidence reposed in them by the physicians in their respective communities.

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- 1:00 to 1:30—Registration.
- 1:30 to 2:00 p.m.—Determination of blood gasses by the use of the Van Slyke Apparatus. Practical suggestions on colorimetric methods by Dr. I. S. Danielson, Associate Professor of Biochemistry. Room 215.
- 2:00 to 3:00 p.m.—Hematological technic—Dr. J. M. Thuringer, Professor of Histology, assisted by Miss Ellen Wright, M. T., and Mrs. Dorothy Nola Brown, M. T. Room 322.
- 3:00 to 3:45 p.m.—Dr. Orr, Oklahoma A. & M. College.
- 3:45 to 4:15—"Color reactions used for the detection of Alkanoids."—Demonstration by Dr. H. A. Shoemaker, Professor of Pharmacology. Room 215.
- 4:15 to 5:00—Demonstration: Blood cultures. Stool cultures for dysentery and typhoid with demonstrations of special media for stool cultures. Dr. H. D. Moor, Professor of Bacteriology. Room 200.

In addition to the above program there will be a demonstration of new and varied culture media by the Digestive Ferments Company (Difco) of Detroit, Michigan. This demonstration will be set up in the Department of Bacteriology.

7:00 p.m. Banquet Skirvin Hotel.

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## BIRTH CONTROL LEAGUE EXPANDING SERVICES

According to officers of the Tulsa Birth Control League, the records of the birth control clinic, held at the Tulsa General Hospital, justify the work of this organization with the low-income groups from Tulsa, Washington and Osage Counties. At the last meeting of the organization a special vote of recognition was given members of the Tulsa County Medical Society for the work done in the clinics.

Patients whose income exceeds \$60.00 per month are not accepted. The Clinic is financed by volunteer memberships of interested persons. Figures show that during the past six months there were 69 new patients accepted and of these families there were 37 unemployed and the total number of children in the families were 156.

## VITAMIN ADVERTISING AND THE MEAD JOHNSON POLICY

The present spectacle of vitamin advertising running riot in newspapers and magazines and via radio emphasizes the importance of the physician as a controlling agent in the use of vitamin products.

Mead Johnson & Company feel that vitamin therapy, like infant feeding, should be in the hands of the medical profession, and consequently refrain from exploiting vitamins to the public.

---

Tulsa County Medical Society  
1202 Medical Arts Building  
Tulsa, Oklahoma

Attention: Mr. Lloyd Stone, Executive Secretary:

Gentlemen:

We appreciate very much your cordial letter of the 21st. We are encouraged to learn again of the high esteem in which the Society holds us.

We also note with appreciation the reduction in advertising rates, and can assure you of our continued co-operation in every way possible.

With best wishes, I am

Faithfully yours,  
MEAD JOHNSON & CO.

---

## TULSA CONVALESCENT HOME WIDENING SCOPE OF CARE

The Tulsa Convalescent Home, 1315 South Boulder, is rapidly improving its plant and equipment and broadening the scope of its activities, according to Charles P. Emery, business manager, and Mrs. Bertha Ditzenberger, superintendent.

The Tulsa Convalescent Home was opened at its present address last June and in the few months has demonstrated the need for a high type home for elderly and convalescent patients needing special diets or hospital care. This home does not cater to mental, tubercular or obstetrical patients. The home has both male and female nurses and provides various types of care and service which determine the price of accommodations.

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Specialists*

COMPLETE LINE  
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FREE DELIVERY

You get exactly what  
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Doctor, you know that there is a vast difference between a clean towel and one you could use in surgery. We chemically treat every garment sent through this laundry. Cleanliness contributes a great deal towards health—cleanliness is not accidental.

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*"Fine Laundry and Dry Cleaning Service"*

# Group Hospital Questions and Answers

Flood of inquiries from doctors and laymen prompt preparations of facts concerning all phases of group hospital insurance by Director McGee.

Who may join?

A minimum number of 10 employees of one organization. If the total number of employees is over 30, approximately 1/3 must join to place the plan in effect.

What is the age limit for members?

Under age 65 years at the time of joining. However, the member may continue his membership at the same rate after attaining this age.

When does the service go into effect?

The service becomes effective immediately upon acceptance of the group, with the exception of maternity care which is covered after 10 months.

Who guarantees the service?

The participating hospitals guarantee the service to the members.

What are the benefits received?

(1) 30 days IN-PATIENT care each contract year (dependent 21 days).

(2) Two-bed room (not a ward).

(3) Meals and special diets.

(4) General nursing care.

(5) Operating room as often as needed.

(6) Ordinary surgical dressings.

(7) Ordinary drugs and medicines.

(8) Ordinary laboratory service.

(9) An allowance of \$4.50 a day toward the cost of any available private room; and all additional services as provided in the Membership Agreement are furnished to members choosing private instead of semi-private accommodations.

10. Ambulance service in emergencies resulting from accidents, or upon recommendation of a physician, for removal from hospital of first admission to a hospital of patient's choice, not to exceed a distance of 50 miles in either instance.

11. Maternity care for a period of 12 days after 10 months' membership, including delivery room and nursery care.

When a person uses a non-member hospital does the plan pay for this?

Yes. Group Hospital Service will reimburse the member or dependent up to \$4.50 per day in any general hospital anywhere in the world.

What illnesses are excluded?

Only those which are generally not acceptable to the hospital.

Does the plan pay doctor's fees?

No. This is a hospital service plan to include the expenses of hospital care.

What does the service cost monthly?

Employed members: \$1.00 enrollment fee, 75c monthly.

Dependents:

60c monthly for one dependent, 15c monthly for all additional dependents (not each).

Maximum family price \$1.50 monthly regardless of number.

NO ENROLLMENT FEE FOR DEPENDENTS.

(Eligible dependents at above rates include spouse; also all unmarried children under the age of 21 years. Mothers, fathers, sisters and brothers are not eligible as dependents.)

May an employed woman include her employed husband or vice versa? Yes, the employed husband or wife may be included as a dependent member.

When the employed person has a dependent mother or sister, can they be included as dependents?

No. Only the immediate family of husband wife, and children under the age of 21 years are extended the privilege of joining at the present time.

When a member leaves his place of employment, is the service discontinued?

No. He may continue his membership at the same monthly rate. However, we do request that he change his method of payment from monthly to semi-annually or annually to facilitate bookkeeping expense, etc.

If a member of the family is in the hospital at the time of enrolling, will this bill be paid by Group Hospital Service? No. The application for membership is reduced to a minimum amount of information, but it includes the statement that all persons are in good health and have not been advised or have knowledge of any present physical condition requiring hospital care.

Is a medical examination required?

No. None required at any time.

Do members have free choice of hospital and physicians?

Yes. The member and his doctor determine the hospital just as he does today.

Upon entering the hospital, should a member inform them of his membership?

Yes. A member should present his membership card so that the bill will be sent to Group Hospital Service.

Should a member then file a claim with Group Hospital Service?

No. Nothing more is required and red tape is completely eliminated.

Who determines when members should leave the hospital?

Their attending physician.

Must a member sign a contract for a year or longer?

No. They may withdraw at any time.

Is the contract cancellable by Group Hospital Service?

No. Group Hospital Service cannot cancel except for non-payment of dues, fraud or to

(Continued on Page 29)

## ***Antiphlogistine***

**T**HE production of *heat* is Nature's way of helping to combat inflammation and infection.

Antiphlogistine aids Nature by supplying prolonged moist heat.

Does Not Contain Guaiacol or Creosote

*Sample on Request*

**The Denver Chemical Mfg. Company**

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# ***DOCTOR . . .***

**What will happen to YOUR income in case of**

- **Accident**
- **Sickness**
- **Death**

Let us explain the protection to be provided by our  
**Accident and Health and Life Insurance Policies**

**METROPOLITAN LIFE INSURANCE CO.**

**H. T. HOFlich, Agent**

**822 Wright Bldg., Tulsa**

**Phone 3-3611**

comply with any Federal or State Laws which might be passed.

Who are the stockholders or investors in Group Hospital Service?

There are none.

Do all officers and trustees receive a salary?

None of them do. They all serve without pay, giving their services to the people of the community. Employees, both field and office are paid a salary and no commissions or bonuses are paid to anyone.

What happens to unrequired surpluses?

They are used to extend and buy more benefits for members.

Who started Group Hospital Service in Oklahoma?

The Oklahoma State Medical Association and the Oklahoma State Hospital Association. It also has the approval of the American Hospital Association.

Who supervises and regulates Group Hospital Service?

The Officers and Trustees and the Oklahoma State Insurance Department.

How many approved non-profit hospitalization plans in the United States and what is the total membership?

There are 60 approved plans with a membership of about 6,000,000 persons.

Is this movement in sympathy with or related to socialized or state medicine?

No. On the contrary, its tendencies and objectives are to preserve the voluntary American way of independence.

### SERVING ON COMMITTEES

Serving on a committee of a county medical society is a task which should be taken seriously or the appointment not accepted at all. This premise takes for granted that the committee appointed has something to do and has not been created merely to give some physicians an assignment.

Each committee member is under an obligation to serve faithfully and contribute something of real worth to his organization. Many do not realize this and are perfectly willing to let one or two members on the committee do all the planning and the work that is necessary. Are you that kind of a committee man?

It might be interesting to consider the ideal member of a committee. What are his qualifications and how does he meet his responsibilities?

First, he should have the interest of the medical profession at heart. This may seem a platitude; however, the physician who fulfills this qualification is rarer than is generally thought, for he must often submerge his personal feelings to aid in the accomplishment of what is best for the profession.

Second, he will give thought and study to the subjects which come up before the committee and will not just be one of those present. It is surprising how few people will assume responsibility or feel it their obliga-

tion to do more than is absolutely demanded of them. No committee can do much on behalf of the profession which is not made up of members who are genuinely interested in the tasks to which they have been assigned and are willing to give the time necessary to put through the plans they have evolved.

Third, he will make it a point to be on hand for all meetings unless his professional duties require him elsewhere. So many physicians accept committee appointments and fail to attend. These are often practitioners who for some time have felt that they deserve appointment to a committee.

Nothing is so demoralizing to a committee as to have 2 or 3 out of 10 or 15 members present. There is no quorum; therefore, no action can be taken. Those on hand become discouraged and unless interest is somehow stimulated they also drop out and the committee becomes dormant.

Fourth, he will not allow 1 or 2 members to assume entire burden for developing plans but will contribute ideas of his own. It is easy to find fault and not contribute oneself. Unless the physician has worth-while contributions to make to the committee, he should not serve on one. This does not mean that he must be in agreement with other members of the committee, but when a thorough discussion has been held the majority opinion should rule and he should subscribe to it.

Fifth, he will do what he can to contribute toward an orderly and not overlong meeting. Many committee members take up time with unnecessarily long discussions of unimportant details or, if the subject is of importance, too much time discussing it. Nothing is so discouraging to a committee as long and tiresome sessions.

Committees can do much to improve the efficiency of medical societies because most of the planning is in their hands. Their personnel, however, should be carefully selected from among those men who will meet the qualifications here described. Only then can they justify their existence.

—*The Milwaukee Times.*

## Birth Control Clinic

Every Wednesday  
8:30 to 11:00 A.M.

At the  
Tulsa General  
Hospital  
Auspices of the  
Tulsa  
Maternal Health League

# Professional Directory

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