

# THE BULLETIN

OF THE TULSA COUNTY MEDICAL SOCIETY

**OKLAHOMA STATE MEDICAL ASSOCIATION  
OKLAHOMA CITY, OKLAHOMA**

**June 5, 1940**

**RESOLUTION**

We, the House of Delegates of the Oklahoma State Medical Association in session assembled, want to very earnestly thank the Tulsa County Medical Society for their most excellent entertainment of our State Society this May Session, 1940.

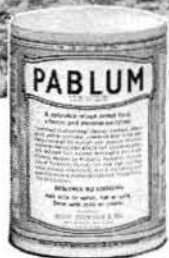
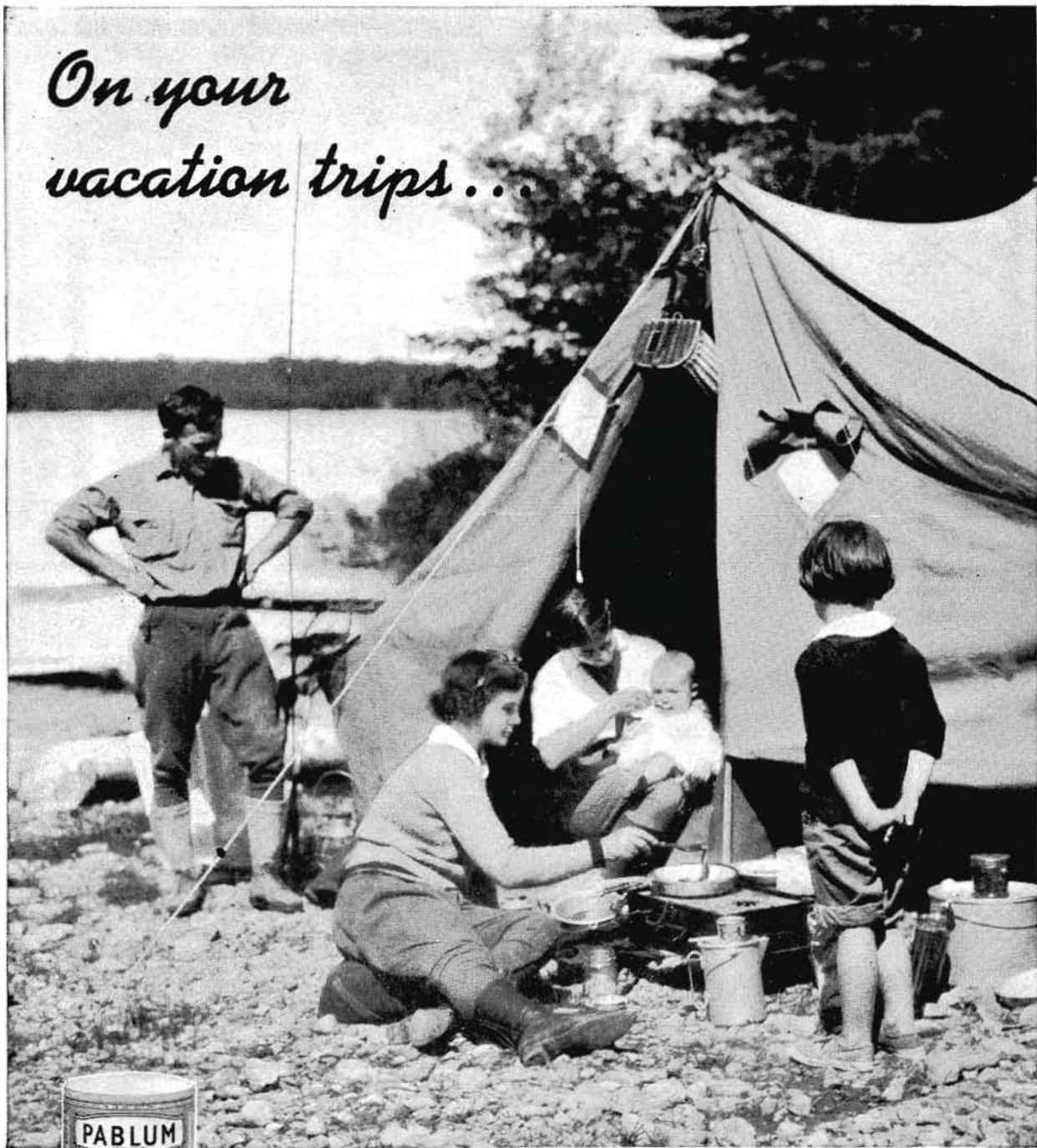
(Signed) H. K. Speed, Chairman

Resolutions Committee.

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Vol. 6 ▲ Tulsa ▲ JULY ▲ Okla. ▲ No. 7

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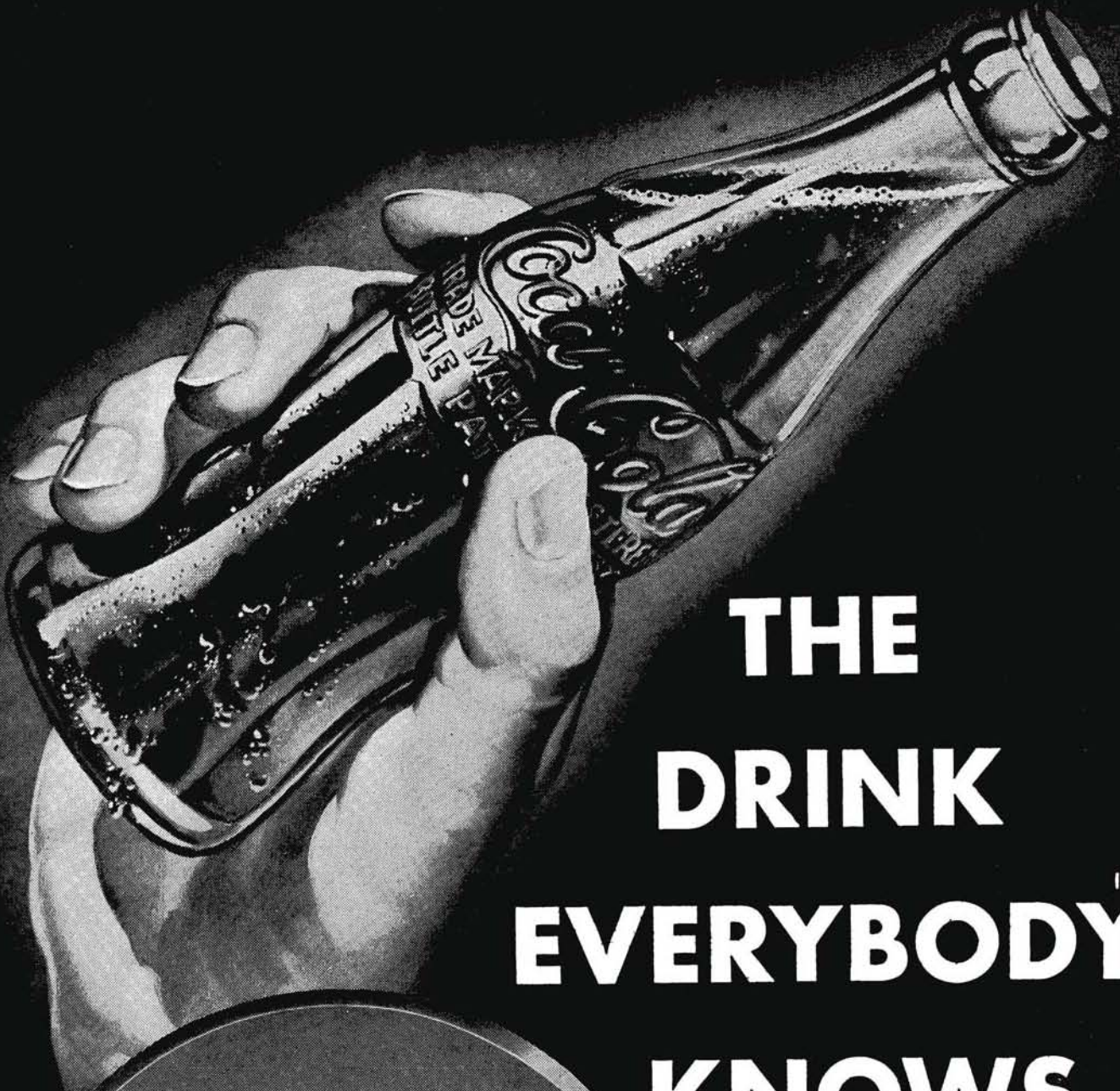
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## JUST WHAT THE DOCTOR ORDERED



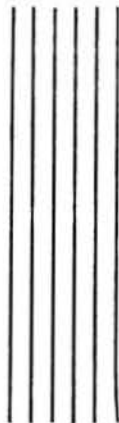
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# THE BULLETIN

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, JULY, 1940

NO. 7

## 12,700 Attend A. M. A. Meeting

Organization Votes to Accept Defense Plan Placing Profession Under the Army During War Emergency; Dr. Nathan Van Etten Ascends to Presidency; Dr. Frank H. Lahey of Boston New President-elect.

All roads led to New York last month, and more than 12,700 physicians from all parts of the United States attended the 1940 meeting of the American Medical Association and took part in one of the largest and most important sessions held by that organization. Dr. Nathan B. Etten of New York City succeeded Dr. Rock Sleyster as president of the American Medical Association while Dr. Frank Howard Lahey of Boston was named the new president-elect. Dr. Parke G. Smith of Cincinnati was elected vice-president. Other staff officers were reelected.

\* \* \*

The House of Delegates of the American Medical Association, America's "Medical Parliament," that formulates the basic policies for organized medicine in this country, adopted unanimously a comprehensive program, embodied in two resolutions, that in effect will make the organized medical profession in the United States a branch of the military forces, under direct Federal control, as soon as the government calls for it.

Under the program adopted the A.M.A. places all its vast facilities at the disposal of the Federal Government for purposes of the national defense in all its ramifications. Under its auspices, with the co-operation of the Medical Corps of the United States Army, the

more than 117,000 members of the association will be asked to join a Volunteer Medical Service Corps. This corps will be organized under the auspices of the component county and state societies of the A.M.A.

To set this medical mobilization in motion at once so as to have it ready to function as soon as called for, the House voted to create a committee of seven members of the House, with five officials of the A.M.A., to act as ex-officio members.

The program calls for distributing physicians in such a manner as to avoid stripping communities of their essential medical personnel, as was the case during the last war when physicians enlisted in vast numbers, leaving, in many instances, an acute shortage of medical personnel for civilian care.

By a standing vote the House adopted a resolution calling for "unwavering support of the President of the United States in his stand on the need for national unity and organization in the emergency."

"We admit the necessity of surrendering a measure of freedom under military necessity, but that freedom should be restored after the emergency is past," the resolution said.

The constitution and by-laws are to be amended to promote uniformity in the acceptance and qualification of members. Medical Service Plans, sponsored by medical societies, such as Michigan Medical Service, are to be coordinated through the Bureau of Medical Economics. On this subject the House said that the principles already promulgated should be re-enunciated and in those cases where hospital service contracts must include professional services, the benefits for the latter should be paid in cash to the subscriber.

\* \* \*

The United States Supreme Court was reported as having denied the A.M.A. writ of certiorari and the issue will be tried on its merits in the District Court for the District of Columbia; officers and administrative personnel of the A.M.A. were summoned to put in an appearance Friday morning, June 14th. (Subsequently a plea of not guilty was entered and the trial probably will be held in the fall.)

\* \* \*

Comprising three floors of attractive displays in Grand Central Palace, the Technical Exposition was a veritable panorama of the medical manufacturing industry. Here in the Technical Exposition each booth was in effect, a miniature portrayal of the business of the firm. Here everything was arranged for the convenience and the quick comprehension of the physician.

All three of the floors of the Technical Exposition were teeming with interest.

\* \* \*

Dr. John Murphy, Detroit, won the Championship of the American Medical Golfing Association in a field of 145 medical golfers, with a gross score of 160 for thirty-six holes. He was presented with the Will Walter trophy by Dr. George Washington Hall, Chicago, president of the association.

Dr. G. R. Love of Oconomowoc, Wis., was runnerup champion with a score of 162.

Dr. D. H. Houston was elected president, Dr. Harry E. Mock of Chicago,

first vice president, and Dr. James Craig Joyner, New York City, second vice president of the A.M.G.A. Bill Burns, Lansing, Mich., was reappointed executive secretary. Dr. Hall, the retiring president, was made a member of the board of directors. The next tournament will be held in Cleveland in June 1941.

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## EXAMINATIONS FOR NAVY MEDICAL CORPS

The next examination for doctors of medicine desiring to enter the Medical Corps of the United States Navy will be held on August 19, 1940.

Graduates of Class "A" medical schools who have had an internship in a civilian hospital and who are physically and professionally qualified may be commissioned in the permanent Medical Corps of the Navy as Assistant Surgeons with the rank of lieutenant (junior grade). Applicants must be less than thirty-two (32) years of age at the time they receive their commissions, citizens of the United States, Physically qualified for appointment as officers in the Medical Corps and must demonstrate their professional qualifications by competitive written, oral and practical examinations. The professional examination will embrace the subject of: (1) General Medicine, (2) General Surgery, (3) Obstetrics and Gynecology, and (4) Preventive Medicine and Medical Jurisprudence.

The pay and allowances for Assistant Surgeons with the rank of lieutenant (junior grade) in the Medical Corps of the Navy is \$2,699 per year if the officer has no dependents, and \$3,158 per year if he has dependents.

Additional information regarding physical requirements, etc., may be obtained by addressing a letter to the Bureau of Medicine and Surgery, Navy Department, Washington, D. C. Applications must be completed and received in the Bureau of Medicine and Surgery prior to August 1, 1940, in order that authorization may reach the applicant in sufficient time for him to appear for examination on August 19, 1940.



# Move To Take Clinic From "Politics"

**County Commissioners, on Motion by Morley and Shepard, Agree to Turn Operation of Clinic Over to Medical Society; Accept X-Ray and Radium Agreement to Reduce Costs.**

The Board of Tulsa County Commissioners, on a motion made by Mr. Morley and seconded by Mr. Shepard, voted to reaffirm the agreement it made with the Tulsa County Medical Society when the free medical clinic was established last November and by a vote of two to one agreed to co-operate with the Medical Society in every way in the operation and management of the Clinic and the hospital care of the indigent of Tulsa County.

By their action, the County Commissioners agreed to:

1. Permit the medical society to choose the county doctor and clinic employes.
2. Accept an offer to give the clinic a \$2,100 X-ray machine, the offer being made by a wealthy Tulsan.
3. Purchase all drugs at competitive bidding.
4. Rent radium at \$50 a month.
5. Give physicians authority to dismiss hospital patients.
6. Provide for more rigid examination of the financial status of those asking relief.
7. Appoint a civic advisory committee to control clinic policy, composed of presidents of the Chamber of Commerce, Retail Merchants Association, Community fund, League of Women Voters, Taxpayers League, and Tulsa Council of Social Agencies.
8. Remove politics from management of the clinic.

At the same hearing the Clinic Committee submitted recommendations for items to be included in the budget for the fiscal year which is now before the Excise Board for final action. The Medical Society's suggestions follow:

Item	1940-41 budget estimate	Approx. cost 1939-40
Drugs and supplies.....	\$15,000	\$20,000
(This includes drugs		

for the clinic, county jail, poor farm, colored and county doctors)		
Item for the Clinic:		
X-ray (diagnostic and therapeutic) .....	5,400	7,200
Radium treatment .....	600	1,680
Clerk (druggist) .....	1,800	1,800
Clerk (Laboratory) .....	900	900
Clerk (records) .....	1,200	.....
Four nurses (one at \$125, 3 at 100) .....	5,100	3,900
Contingent operating exp. ....	3,600	3,600
Clinic maintenance expense .....	900	.....
	\$34,500	\$39,080

"There are a number of items which affect the sick but over which we have no control," the society members wrote.

Following is the communication submitted to the County Commissioners outlining the stand of the Medical Society and demanding full co-operation in the operation of the Clinic:

I—The elimination of all politics in the treatment of the sick, indigent patient of Tulsa County. All employees of the County Clinic, including County Physicians, Nurses, Clerks and Druggist, to be appointed as originally specified in the written agreement. We had no voice, nor were we consulted when they were selected by the present County Commissioners. We have a County Clinic established, the Physical Equipment, including the proposed X-ray, costing about \$10,000.00 for which the County Commissioners have not been required to spend one cent of the taxpayers money.

In the written agreement, executed by the present County Commissioners, accepting the County Medical Clinic, the Medical Society or Clinic Committee was to recommend all employees of the County Clinic, including the County Physicians. However, the County Commissioners ignored our recommen-

(Continued on Page 12)

# PRESIDENT'S PAGE

Whether we like it or not, we are in politics. Most physicians resent the implication that they are mixed in politics, but if they had interested themselves in this field several years sooner, many problems of the medical profession might not now seem so formidable.

It is not to be understood that a "medical machine" is the answer to the question. Nothing is more repugnant to the writer than such a phrase. If each physician would study the qualifications of the candidates as painstakingly as he does a clinical case, he would be in a position to choose an officer of the government who would have a sympathetic attitude toward his view point; and, from a collective point of view, a sympathetic attitude toward the medical profession.

The medical profession has never been selfish in its requests for reforms. Every bit of legislation proposed by organized medicine has been proposed with the welfare of the public in mind. So long as such altruism in medicine is maintained, we can expect full cooperation from our office holders.

Experience in the immediate past has shown that our dealings have been with a reasonable and understanding group, both among our legislators and county commissioners. Unfortunately, we do not always see eye to eye but our general ideas are usually pretty much the same. It takes time to discuss problems adequately and iron out minor differences, but we are all working toward an end, and that end is better health for the community.



President.

# Medical Calendar

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**MONDAY, July 1st:**

Morningside Hospital Staff Meeting.

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**TUESDAY, July 2nd:**

No Mercy Hospital Staff Meeting.

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**SATURDAY, July 6th:**

Radio Broadcast at 4 p.m. Station KTUL. Dr. H. Lee Farris.

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**MONDAY, July 8th:**

No Tulsa County Medical Society meeting.

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**TUESDAY, July 9th:**

No Tulsa General Hospital Staff Meeting.

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**SATURDAY, July 13th:**

Radio Broadcast at 4 p.m. Station KTUL. Dr. Ned R. Smith.

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**MONDAY, July 15th:**

During July and August the staff meetings will be held at 8:30 a.m. instead of 8:00 p.m. There will be one case report and all associate and regular members are urged to attend.

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**TUESDAY, July 16th:**

No Flower Hospital Staff Meeting.  
Office Assistants meeting at Michaelis Cafeteria at 6:00 p.m.

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**SATURDAY, July 20th:**

Radio Broadcast at 4:00 p.m. Station KTUL. Dr. Mont Stanley.

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**MONDAY, July 22nd:**

No Tulsa County Medical Society meeting.

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**SATURDAY, July 27th:**

Radio Broadcast at 4:00 p.m. Station KTUL. Dr. Marvin D. Henley.

**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                      JULY, 1940                      No. 7

**DUES**

**for the last half  
of the year . . .  
are due and  
payable . . .**

**NOW!**

(Continued from Page 9)

dations and appointed every paid employee without consulting the Medical Society. The present employees are under no obligation to us and some frankly tell us so. No business can be run successfully on this basis. They work under our direction but we have no control of them. This cannot continue. Their continuance in county employ should be dependent on their efficiency and attention, to their jobs and no dismissals or changes in the clinic employees should be made solely for political reasons or political changes.

II—Acceptance at once of an offer to give the Clinic a complete diagnostic and therapeutic X-ray machine costing

\$2,100.00. This offer was made to the County Commissioners by the Clinic Committee about two and one-half months ago. It is badly needed, as now, we can take only about one-fourth of the X-ray pictures necessary at the Clinic—also, all cancer cases could be treated there. A saving of at least \$225.00 of the present cost to the county, could be effected each month and many more cases could be X-rayed and treated than at the present time. Why they will not accept a free gift of this magnitude and importance we do not know. This offer may be withdrawn very soon and we demand that they accept it, have it installed and save more money.

III—That the purchase of all drugs be made by competitive bids each month. This was agreed on. Our committee showed, in the three months they operated, all drugs could be bought at a saving of from 50 to 200 per cent. This has not been done in the past four months. Practically all of the drugs are bought from one drug store and some are bought without any competitive bids whatever. To save the taxpayers money and to prevent waste, we demand a return to this system. As the present county attorney expressed it, "The old system was lousy." We can soon expect the same condition again.

IV—That the radium used in the treatment of cancer cases be rented at \$50.00 a month. At the present time the County Commissioners are paying \$150.00 per month for this service. A saving of \$100.00 each month can be effected and we think the taxpayers of Tulsa County will appreciate any money saved during these times of high taxes and financial troubles.

V—That the physician and surgeon who operated or treated a county case, acting under the chief surgeon or medical man, be given the power to dismiss all patients under their care, from the hospitals. Our private patients beg to go home as early as is safe; county patients remain in the hospitals days or even weeks after their dismissal, on one excuse or another. The physician or surgeon,

who took care of their case, best knows their condition. The hospital exerts no special effort to get them home. Why should the hospital be concerned? The bed is occupied and is paid for by the county, and who occupies it is of no concern to them. We clinic men need that bed for another sick, helpless patient who is waiting. We have asked for this authority. It was denied us. Many dollars could be saved, many more sick patients could be taken care of and the yearly dispute and perplexing situation of hospital funds exhausted with many sick and needy patients on hand, could most certainly be avoided if when we wrote a written order on the chart dismissing the county patient, the hospital had positive orders that the county would not pay any hospital expense after that date.

We are now cutting down hospital costs by doing all minor cases, formerly costing \$10.00 or more per patient, such as tonsils, abscesses, minor fractures, etc., at the clinic during the past eight months. This effects a saving of several thousand dollars each year.

VI—We demand more rigid examination of the financial status of every person applying for medical care. An efficient and non-political social service department is absolutely necessary and would soon pay for itself. Many patients get free medical care and hospitalization, who can afford to pay. This is costing the taxpayers of Tulsa County and is not fair to the doctors who are donating their services. We are taxpayers of Tulsa County and demand that only indigent patients are admitted to the clinic and hospitals. This was in the original signed agreement, but has not been carried out so far.

VII—We are asking the president, or his representative, of the following organizations to serve on a board for permanent service without pay.

1. Tulsa Chamber of Commerce.
2. Tulsa Retail Merchants Ass'n.
3. Tulsa Community Fund.
4. Tulsa League of Women Voters.
5. Tulsa Institute of Governmental Research.

#### 6. Tulsa Council of Social Agencies.

This Board to meet once every month with the Clinic Committee and the Board of County Commissioners and act in an advisory capacity to help solve the many problems that come up. We believe that the citizens and taxpayers of Tulsa County are vitally interested in this charity problem and much good can be had from such a board.

VIII—There are about one hundred and fifty physicians and surgeons and forty dentists, many of them specialists, giving their time and their service at the clinic and hospitals in Tulsa, every day of the entire year (Sunday not excepted), without one cent of pay—each patient is treated by a department over which a specialist or outstanding man is in charge, thereby, giving more efficient service than could be given by anyone or two physicians as has been done in the past. All difficult cases are operated or consulted by a senior medical man or surgeon. Approximately 3,200 patients have been treated or operated in the various hospitals since the clinic was established, eight months ago.

In conclusion, the above conditions and abuses are the chief, but by no means the only ones, that must be corrected. We believe that under the present clinic set up, the amount of money appropriated each year is at the present time ample and sufficient to treat and hospitalize the sick of Tulsa County, for twelve months in every year, provided politics and waste are eliminated and a few business methods are installed. We demand that politics, waste and inefficiency be stopped and we are opposed to any man or politician who tries to make the care of the sick patient a political football. We believe the above conditions are reasonable, essential and imperatively demanded at this time and are as per our agreed and written contract. If the Board of County Commissioners of Tulsa County do not immediately agree on the above conditions, we do not see how we can successfully operate the present Tulsa County Clinic. We sincerely hope the citizens of Tulsa County will not allow this to occur.

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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

People being what they are, they continually do things. So if you know of any members of the Society who are doing things—or if you have gone on vacation—or made a speech—or moved your office—or most anything else—let us know as the editors are anxious to make this page of personals interesting . . . “AND NAMES IS NEWS” here as well as in the newspapers.

We cannot guarantee the accuracy of all of these items but our “Girl Friday” has done a great deal of scouting around and has picked up the following bits of information which she believes more or less authentic. So your editors pass them on to you.

The annual meeting of the American Medical Association held in New York City in June drew a number of visitors from this part of the country and a number from Tulsa. Among the 12,700 delegates who registered for the New York meeting were DR. W. ALBERT COOK, delegate from Oklahoma to the A. M. A., DR. I. A. NELSON, DR. IAN MCKENZIE, DR. J. G. BRASWELL, DR. HARRY GREEN and DR. HARRY STEWART. There may have been others who reached New York but who failed to get their names included in the official list of registrations.

A large number of members have taken time out this past month and went on their vacations. DR. M. O. NELSON left the last of June and as we go to press is somewhere in Minnesota. DR. H. J. BLACK is spending his vacation in South America and according to plans when he left, will be back the last of July. DR. W. H. CALHOUN is back from a two weeks' trip to Virginia. DR. A. B. CARNEY has put a “gone fishing” sign on his office door and he

and his family are vacationing. DR. J. O. LOWE was up on his farm in Missouri for a spell during the month. DR. L. C. NORTHRUP spent a week or so in West Virginia. DR. HUGH C. GRAHAM is reported in North Carolina for two or three weeks. DR. J. F. GORRELL was gone from the first of June to the 12th to Marietta, Ohio, and then on to Chicago to visit his daughter, Edith Ann, who is in the hospital there. DOCTORS DAVID AND MARGARET HUDSON and family have gone to Colorado for an extended trip.

DR. AND MRS. R. G. SHERWOOD attended the International Optometrist Club Convention in Kansas City on June 16. DR. AND MRS. PAUL ATKINS, have a new baby boy. DR. R. M. SHEPARD returned June 9 from his trip to Cleveland. DR. IAN MCKENZIE has moved his offices from 511 Medical Arts Building to 1105 same building. DR. E. RANKIN DENNY addressed the Texas Allergy Society in Dallas last month. DR. PAUL GROSSHART has moved into his new home, just purchased, at 2203 East 24th St.

We have picked up a number of members who are making big plans to take out and go places during the next few weeks. DR. J. W. CHILDS is leaving the middle of July to make a tour of Yellowstone Park, Glacier National Park, Grand Canyon, Carlsbad, DR. THOMAS H. DAVIS is going to the National Guard encampment on the Texas Louisiana border August 4th to be gone about a month. DR. O. C. ARMSTRONG will go to Minnesota in August for his vacation. DR. C. A. PAVY is leaving August 1st for his vacation.



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# HEALTH by Political Decree

Reprint of An Article Devoted to a Better Understanding of Free American Enterprise Published in "Nation's Business"; Copies Can Be Had from Society's Office Free.

In recent years many schemes have been cooked up in Washington to protect the people against all human woes.

One of these schemes, which has been simmering for a long time, has recently come to a boil.

The idea is to let government take over the distribution of the benefits of medical science to the whole population—either free or at bargain rates.

Laws to put this idea into operation have been proposed to the U. S. Congress and State Assemblies. This proposed legislation is defended by claims that great numbers of our people are denied medical care because they are unable to pay for it, and that as a result the national health is seriously endangered.

Emotional statements are made about "thousands dying simply because they haven't the wherewithal to pay," and "a future American citizenry rachitic, consumptive, undersized, sapped and degraded."

On the surface, the idea of providing free medical service for all, with government footing the bill, looks to the uninformed like a beautiful thing—an ingot of purest gold handed to a needful people on a silver platter. But what's underneath?

Government—Federal and State—cannot itself foot the bill. It has not one single copper penny of its own. Every dollar it spends for "social" or other service is exacted from the people in taxes or borrowed from the people by issuing bonds. Interest on the bonds, and their final redemption, must be paid by still more taxes levied on the children and grandchildren of this generation.

"But," says the average man, "I don't pay any taxes."

Don't fool yourself. Don't let anyone tell you that taxes are taken only from the pockets of the rich. You pay them in

the price of everything you buy. Producers and distributors of goods have to pass on part of their tax costs, or go out of business.

And if social medicine comes in the same form as Social Security, you will pay part of the bill directly, as a payroll tax, and much of the rest of it indirectly, in the increased cost and consequently the increased price of goods.

When government takes over the dispensation of any service to the people it puts a political bureau in charge. A government operated health program would employ thousands of bureaucrats, clerks and stenographers whose salaries and expenses would have to be added to the tax cost.

In Germany there is one of these bureaucrats for every 200 patients and at least one for each doctor.

Political overseers make sure that doctors serve many patients and serve them fast. No time for long discussions, or consideration of the psychic side.

In Great Britain the average Government doctor's panel includes about 1,000 names—which means, says the American Medical Association, that in the busy season he would have to see in his office about 21 patients a day. But some doctors have up to 2,500 names, which would mean a maximum of about 50 visitors a day. How would you like to be one of 50, waiting to see a doctor?

Worse, government health programs encourage hypochondriacs and spongers. Insured patients want all the service they can get. One comparison showed that four times as much was being spent for doctors and medicine for 35,000,000 insured as for 30,000,000 uninsured.

One of the doctors who resigned from a group health experiment in the United States said that patients were so numerous they had to be driven through the clinic "like a herd of sheep." There were

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so many calls for service, often of a trivial nature, that people who really needed attention sometimes had to wait for six or seven days.

Compare all this with the traditional American system of private medicine, in which the individual freely chooses the doctor and consults him in an atmosphere of intimate confidence!

This system has provided an abundance of service. We have in the United States 19,000 more physicians than the combined number in Great Britain, Germany (including Austria), France, Denmark, Poland, Sweden, Norway, Switzerland, Belgium and Holland, although the combined population of those countries exceeds the population of the United States by 90,000,000.

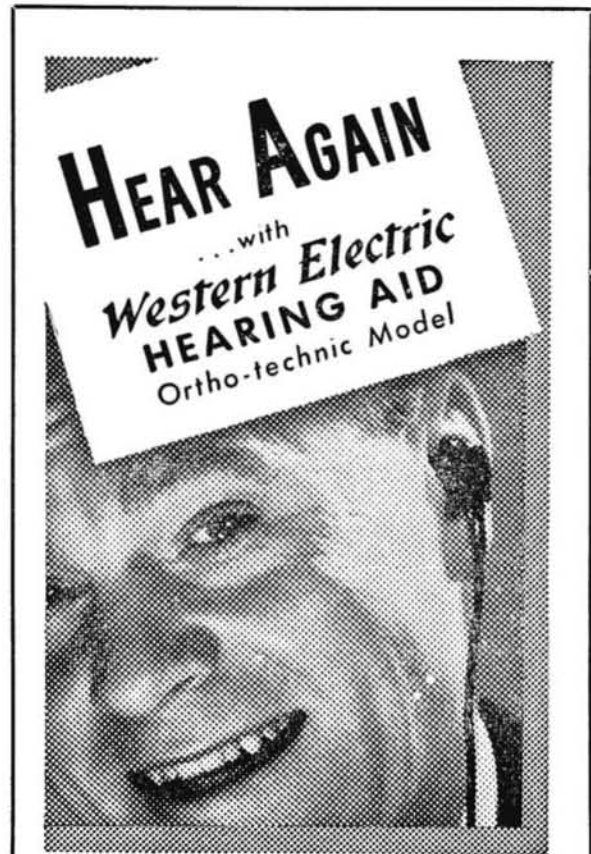
We have, on the average, nearly 200,000 unoccupied hospital beds—about 32 per cent of the total. It is estimated that all but 2 per cent of our entire population is within an hour's drive of a general hospital.

As many Americans know from experience, doctors and hospitals render needed services free to those who cannot pay. The profession has stood unqualifiedly for the treatment of every one who suffers whether or not he can pay for it. Not only treatment, but the best treatment of which the doctor is capable. No one is turned away.

And private medicine has done a magnificent work. The average expectancy of life in the United States is the highest ever enjoyed by any great people. The death rate has fallen in 100 years from 27 to 11.2 per 1,000. Scourge diseases are under increasing control. Infant and maternal mortality rates are lower than ever.

Why trade this for a thinly gold-plated scheme to put the healing arts under costly, demoralizing political control?

If you feel, as many informed people do, that agitation for government health legislation is unnecessary and unwise, why not say so in letters to your Congressman and Senator?



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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?

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

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# Of Special Interest!

## ASSISTANTS CONTINUE PROGRAMS

The Medical and Dental Assistants have had very helpful meetings in the past two months. In May, Mr. Hugh Davis lectured on birds and bird life, showing numerous colorful films on the same subject. Then The Dental Assistants entertained with the playlet, "They'll Do It Every Time," which was written by Ruth Chastain and ably enacted by Ruth and several others.

At the June meeting Dr. R. M. Shepard talked briefly about his favorite subject "Tuberclulosis," then answered questions for a great while on the subject. Outsiders would have been surprised at the information gleaned at this one time. After Ellowese Borden delivered a lively account of her experiences on a two weeks' trip through the east, the usual question-box was opened. Among the questions found and thoroughly discussed were: Whether the assistant should receive a percentage of her collections as pay or part pay; when asked questions in regard to fees for examinations, treatments, etc. — what should the answer be; does the assistant or her doctor make credit arrangements on a bill of any size; how long do you keep an account before you start "collecting"; how may one satisfactorily suggest to a patient that he has overstayed his time?

An employment bureau has been established by the T.C.M.D.A. for the purpose of furnishing efficient help to the doctors when their regular assistants are ill or on vacation. Miss Agnes Offutt, Medical Arts Building Office, is in charge of this work.

Tulsa County Medical Society  
1202 Medical Arts Bldg.  
Tulsa, Okla.

We appreciate your letter mentioned above advising us that shipment of the

torso model was made from Tulsa and thank you also for sending the express receipt to us.

We note with interest your comments regarding the popularity of this model at your exhibit. Should the County Medical Society have inquiries from its members regarding such demonstration material as models of the heart, brain, kidney, various anatomical charts, specially prepared demonstration skulls, etc., we would appreciate reference being made to our company as a preferred source for such equipment.

May we state at this point too that any such skulls or other items which we would send out to doctors would be guaranteed equal in all respects to similar items which we exhibit at the meetings of the American Medical Association, American College of Surgeons, and other professional groups. Any courtesy which the Society considers it reasonable and possible to extend, will be appreciated.

We are very happy indeed that the use of this model contributed in some measure towards the interest in your meetings and thank you also for writing us.

Very truly yours,

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Director, Natural Science Dept.



Radio speakers for June were: Doctors H. Lee Farris and Marvin D. Henley.

Radio speakers for July are: Doctors H. Lee Farris, Ned R. Smith, Mont Stanley and Marvin D. Henley.

# Professional Directory

<p>VICTOR K. ALLEN, M. D. Proctology 1001 Medical Arts Building Tulsa, Oklahoma</p>	<p>E. RANKIN DENNY, M. D. Diagnosis and Clinical Investigation Allergy 1105 Med. Arts Bldg.      Tel. 4-4444</p>
<p>W. S. LARRABEE, M. D. Roentgenology 411 Med. Arts Bldg.      Tel. 4-3111</p>	<p>I. A. NELSON, M. D. Tissue and Clinical Pathology 1107 Med. Arts Bldg.      Tel. 4-1835</p>
<p>RUSSELL C. PIGFORD, M.D., F.A.C.P. Internal Medicine Cardiology 1001 Med. Arts Bldg.      Tel. 5-3762</p>	<p>WADE SISLER, M. D. Orthopedic Surgery 807 South Elgin      Tel. 5-3132</p>
<p>JOSEPH FULCHER, M. D. Proctology—Urology 210 Med. Arts Bldg.      Ph. 3-4429</p>	<p>L. C. NORTHRUP, M. D. Surgery, Gynecology and Obstetrics 1307 S. Main      Ph. 4-5571</p>
<p>A. RAY WILEY, M.D., F.A.C.S. Surgery 812 Med Arts Bldg.      Ph. 3-0202</p>	<p>M. J. SEARLE, M. D. Pediatrics 202 Med. Arts Bldg.      Ph. 4-2901</p>
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<p>JAMES C. BROGDEN, M.D. Surgery and Diagnosis 414-415 Med. Arts Bldg.      Ph. 2-2516</p>	<p>FRED Y. CRONK, M.D. GIFFORD HENRY, M.D. Diagnosis—Surgery Industrial Surgery 801 Med. Arts Bldg.      Ph. 3-5101</p>
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