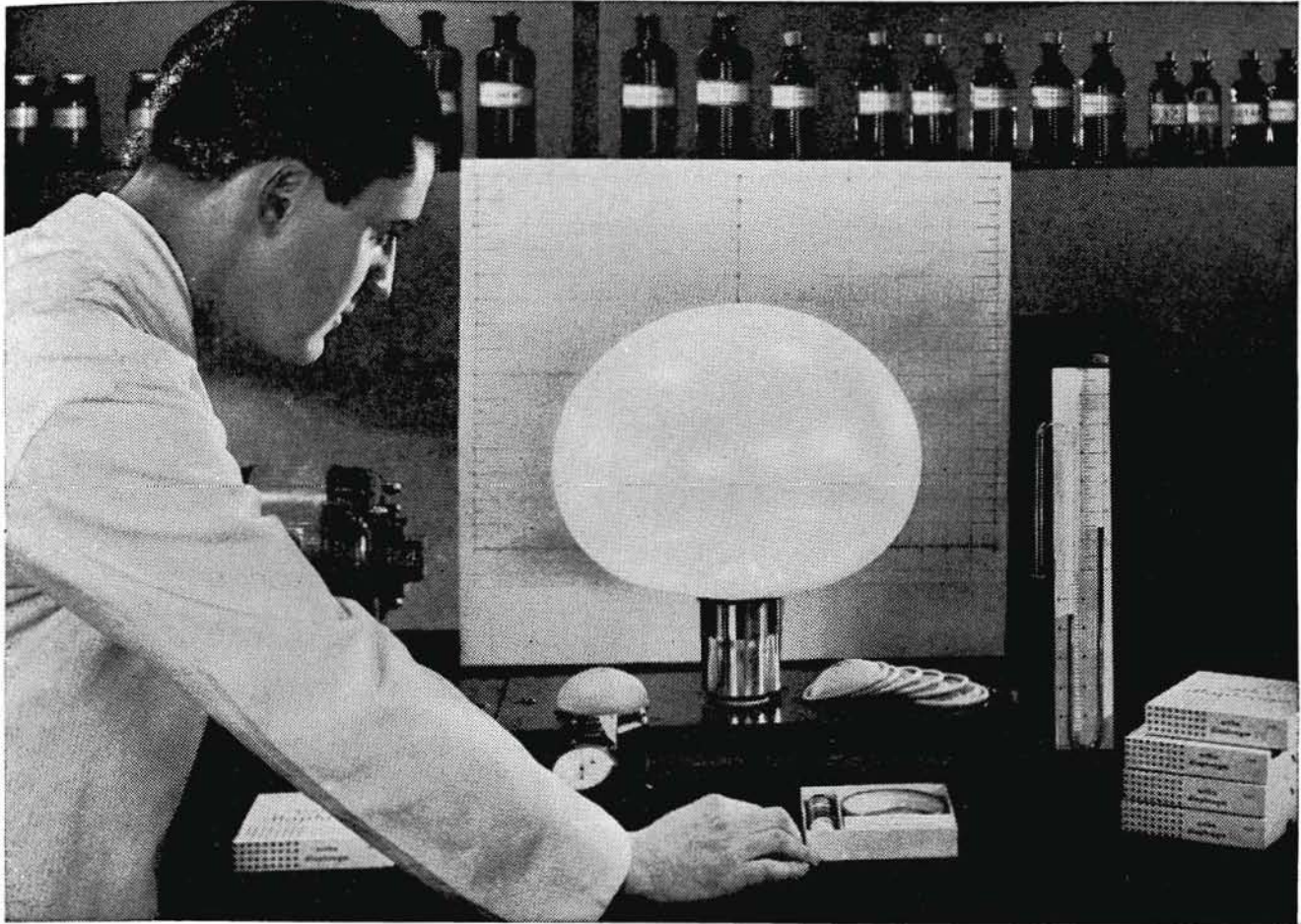


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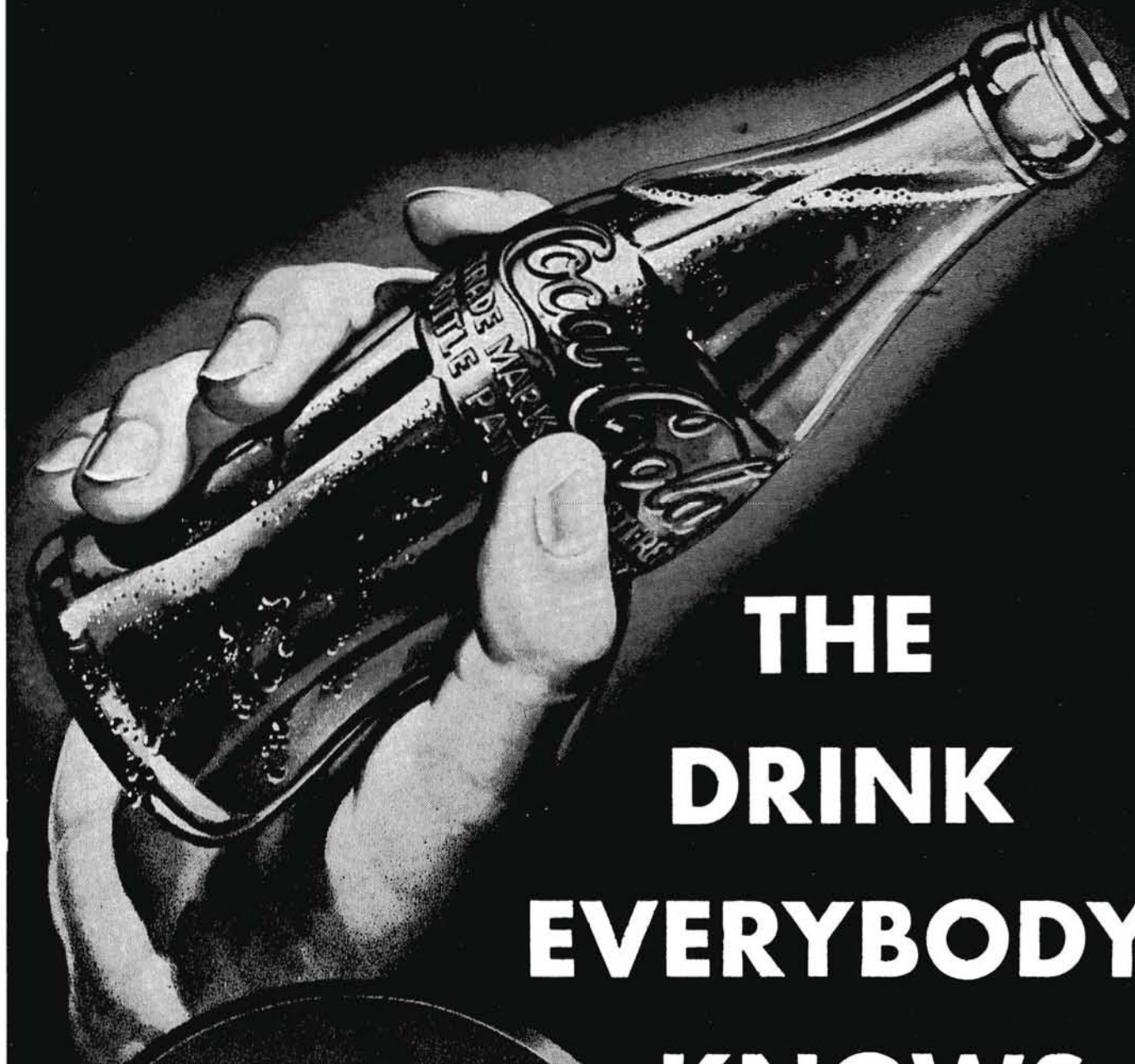
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THE BULLETIN

OF THE

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VOL. 7

TULSA, OKLAHOMA, AUGUST, 1941

No. 8

Clinic Again Taken Out of Politics

Medical Society closes doors of clinic when commissioners attempt to dictate changes in personnel; new agreement insures harmonious operation under present board of county commissioners.

The Tulsa County Medical Clinic operated by the Tulsa County Medical Society for the treatment of indigent patients will continue to function without the interference of politics or politicians the public was assured following an agreement reached between the Medical Society Trustees and the new Board of County Commissioners, J. B. Gray, Curtis Greer and Ralsa F. Morley, when the new commissioners took office early in July. However, this agreement was not reached until after a bitter argument which saw the doors of the clinic closed by the Medical Society when the commissioners attempted to make a number of changes in the clinic personnel and take the management out of the hands of the doctors.

Practically the whole story is told in the following news report carried in the Tulsa Daily World following the meeting in which the agreement to reopen the clinic was reached:

"Tulsa County's free medical clinic, closed since 5 P. M. Monday, July 7th, will reopen at 9 A. M. Thursday under a new agreement signed Wednesday night by the board of trustees of the Tulsa County Medical society and the board of county commissioners.

Under the agreement, the third signed since the clinic was established 18 months ago, Dr. J. Jeff Billington and Dr. M. V. Stanley will be reappointed county physician and assistant,

respectively, and the entire clinic staff will be retained. Billington was dismissed Monday and Stanley was reappointed only temporarily.

"County officials also agreed to turn over the management and supervision of the clinic to the medical society and allow it to be permanently removed from politics. This was one of the major demands of the society before the clinic was closed.

"Immediately after the agreement was reached, trustees of the society issued the following statement over the signature of Dr. Ned Smith, publicity chairman:

"At a meeting of trustees of the Tulsa County Medical Society and the county commissioners, held at the instigation of Mr. Fred L. Dunn, president, and Mr. Carl Pinkerton, vice president, respectively, of the Tulsa Community Fund, complete agreement was reached and the free medical clinic will be reopened at 9 A. M. Thursday, July 10.

"The action to open the clinic was taken Wednesday night at a special meeting of the board of trustees of the medical society.

"Terms of the agreement reached, virtually took control of the clinic out of politics. Dr. J. Jeff Billington was renamed county physician and Dr. Mont Stanley was named assistant county doctor. The

present nursing staff was left intact. Doctor Billington was given a new nurse who will act as office assistant. All drugs will be purchased on competitive bidding.

“In the future no doctor or clinic employe will be discharged without a hearing before a committee composed of the doctors and the county commissioners.”

“There was only one dissenting note to the new accord, and that came when Commissioner Ralsa F. Morley told his colleagues, trustees, Dunn and Pinkerton, that he could not vote to reappoint Billington, and presented affidavits to support his reason for the position.

“I am in full accord with the doctors over the new plan of supervision for the clinic except I cannot conscientiously vote to retain Billington,” Morley explained later.

“However, Morley disclosed that he has been authorized to present a resolution before the board of county commissioners indorsing the clinic set-up and pledging the board’s co-operation with the doctors in the future. This resolution will be offered Thursday morning.

“While the commissioners agreed to all major demands made upon them, the doctors agreed to accept the appointment of Ray Dittman, an employe of the William Penn drug store, as clinic pharmacist, replacing his brother, Charles A. (Chuck) Dittman, who has served in that capacity since the clinic was opened November 1, 1939.

“The doctors also agreed to accept Edna Richardson as hospital investigator. She will replace Flay McDonald, an appointee of Republican Commissioner Lincoln Sallee.

“Although county commissioners must shoulder all legal responsibility for the operation of the clinic, they virtually “washed their hands” as far as its management is concerned in the future.

“Commissioner Curtis Greer may have been responsible to some extent for the ultimate agreement reached when he offered a motion to the board of

commissioners Tuesday asking that Monday’s order dismissing not only Billington but Stanley and all clinic employes, be rescinded. Morley and Commissioner J. B. Gray demurred.

“However, public sentiment overnight changed Gray’s position, and he and Greer agreed to rescind the dismissal order at a meeting called for 2 P. M. Wednesday. As they sat down to act on the matter, Dunn notified them that he would appear before the board at 3:15 P. M. with a proposal that might save the clinic.

“When Dunn and Pinkerton arrived at the courthouse at the appointed hour, they went into closed conference with the three commissioners, and when all emerged at 4:45 P. M., it was announced that another meeting had been arranged with the doctors at Dunn’s office at 5:30 P. M.

“A lengthy discussion among all interested parties developed at Wednesday night’s meeting, and at 7:30 P. M., it was disclosed an accord had been reached and the clinic doors would be reopened to the indigent sick of Tulsa county at 9 A. M. Thursday. This report was later confirmed by the board of trustees of the Tulsa County Medical society.

“None of the commissioners attempted to deny that pressure had been brought to bear on them after hundreds of indigents were turned away during the two-day shutdown without medical aid. This was sufficient to change Gray’s former stand on the clinic.

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Personally Speaking

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

—The Editors

DR. R. G. SHERWOOD, Tulsa newly elected governor of the Optimist clubs, seventh district was installed in the office at the International Convention at Minneapolis, July 6 to 9th. He was elected governor at the meeting in Fort Worth in April.

DR. E. O. JOHNSON'S father has been very ill. DR. W. A. HUBER has gone on his vacation. DR. O. C. ARMSTRONG and wife have gone on a fishing trip to Minnesota. DR. HERBERT N. SCHWARTZ has offices with DR. W. A. HUBER, 1002 Medical Arts Bldg., and has made application for membership.

DR. HENRY S. BROWNE'S father passed away in Louisiana, July 22nd. DR. R. M. SHEPARD made a trip to Oklahoma City. DOCTORS S. C. VENABLE and RALPH A. MCGILL went to Dallas for a few days. DOCTOR A. W. PIGFORD and some house guests from Mississippi spent the weekend fishing at Spavinaw. They caught quite a number of nice fish. DR. RUSSELL C. PIGFORD is moving into his new home in Sunset Addition, August 1st.

DOCTORS SHIPP, F. L. UNDERWOOD, A. W. PIGFORD were guests at DR. LHEVINES cabin in Spavinaw July 24th. DR. JAMES STEVENSON and family spent the 4th in the Ozarks. DOCTOR S. C. SHEPARD and family spent the 4th fishing on White River in the Ozarks. DR. A. W. PIGFORD spent the weekend of July 26th at Spavinaw.

MRS. HUGH PERRY'S father passed away. DR. C. E. BRADLEY is convalescing at Hillcrest Hospital. DR. J. K. LEE spent a couple of weeks fishing in Minnesota. DR. J.

D. SHIPP and wife have been vacationing in Northern Michigan, and visited his brother who is in the army and then went on into Canada. They had a very nice trip. DR. MARY EDNA SIPPEL had a month's vacation in Los Angeles, San Francisco and Salt Lake City.

Some of the doctors that have gone to the army are C. G. STUARD, Station Hospital, Ft. Sill, SIMON POLLOCK, Station Hospital, Camp Hulén, Texas; DR. AKINS, Station Hospital, Camp Barkeley.

The following are new members of the Tulsa County Medical Society: DOCTORS SPOTTSWOOD, 708 Medical Arts Bldg., H. R. Yandell with DR. FRED GLASS, 404 Medical Arts Bldg., DR. DOLAN of Dawson, and THEODORE S. WILLIAMS at Sisler Hospital. DR. P. M. SCHRECK spent his vacation in Creede, Colorado, fishing. He had a very nice time and caught plenty of fish. DR. D. L. EDWARDS spent the month of July in Minnesota fishing. DR. W. O. SMITH will be gone the month of August on his vacation.

DR. HUGH GRAHAM left for an extended vacation to Colorado Springs for the ice skating and will probably go on to California. DR. L. C. NORTHRUP and wife spent a month in Columbia, South America. His main reason for going was to make pictures as you all know is his hobby.

DR. J. E. McDONALD has just purchased a nice yacht. He has it up at Grand Lake. DR. ROY SMITH and family spent the weekend visiting his mother in Neosho, Mo. DR. F. W. HENDERSON spent his vacation in Colorado.

PRESIDENT'S PAGE

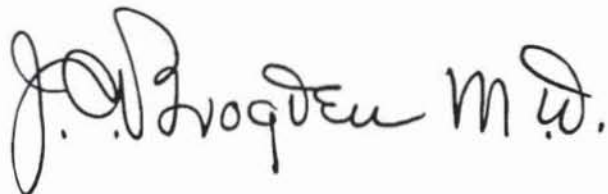
The practice of debtors who go out and get a job and then in order to beat their just debts, file bankruptcy proceedings in the Federal Bankruptcy Court is reaching such proportions that to me it is taking on the appearance of becoming a racket.

In the Federal Bankruptcy Court during the month of July 15 persons filed petitions in voluntary bankruptcy, listing doctors and hospitals among their debts. There were others who listed no doctors. The queer thing about every one of these cases was that the person asking bankruptcy was working for a reputable firm here in Tulsa. Some just recently started work, but without exception they all had jobs, most of them good-paying jobs.

Of course bankruptcies at times do serve a good purpose but something should be done about this class of debtors. The doctors and other creditors go along with them and advance credit when things are tough. Then they get jobs. And then into the bankruptcy court they go to beat these debts. Of course, they may say they intend to pay every cent they owe, but not one in a hundred ever does.

There is a new section under the Bankruptcy Laws which provides for a composition of creditors. Here the court takes the person's pay each month and deducts a certain portion of it to pay all creditors on a pro-rata basis. This is just to the debtor and is better than nothing for the creditors. It certainly beats the old bankruptcy dodge.

Very truly yours,

A handwritten signature in cursive script that reads "J. A. Brogden M.D." The signature is written in dark ink and is positioned below the typed name.

President.

Medical Calendar

FRIDAY, Aug. 1st:

Radio Broadcast at 1:45 p. m. Station KTUL. Dr. Lee Farris.

MONDAY, Aug. 4th:

Hillcrest Hospital Staff Meeting.

TUESDAY, Aug. 5th:

Clinic Meeting, 1202 Medical Arts Bldg. 12:30 p.m.

FRIDAY, Aug. 8th:

Radio Broadcast at 1:45 p.m. Station KTUL. Dr. R. M. Shepard.
Trustee Meeting, 1202 Medical Arts Bldg.

MONDAY, Aug. 11th:

No Tulsa County Medical Society Meeting.

FRIDAY, Aug. 15th:

Radio Broadcast at 1:45 p.m. Station KTUL. Dr. J. L. Miner.

MONDAY, Aug. 18th:

St. Johns Hospital Staff Meeting.

TUESDAY, Aug. 19th:

Office Assistant's Meeting. Round Table Discussion.

FRIDAY, Aug. 22nd:

Radio Broadcast at 1:45 p.m. Station KTUL. Dr. H. Lee Farris.

MONDAY, Aug. 25th:

No Tulsa County Medical Society Meeting.

FRIDAY, Aug. 29th:

Radio Broadcast at 1:45 p.m. Station KTUL. Dr. Marvin D. Henley.

The BULLETIN

Editorial

Committee.....

F. L. UNDERWOOD, M. D.,
Chairman
CARL J. HOTZ, M. D.
G. H. HENRY, 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. 7 AUGUST, 1941 No. 8

DOCTORS IN NO MAN'S LAND

The poor physician is out in No Man's Land these days. The barrage thunders over his head. First there is a great burst from the left: "We must have more medical care for more people." And from the right comes the answering salvo: "We will not be regimented." The left answers with a National Health Bill and an anti-trust suit, and the right comes right back with a lobby and a bevy of lawyers.

The shell fragments of this great battle whizz all around. They pop out of the mail, jump from the pages of periodicals, both professional and lay, fly out of the radio and ding dong, ding dong in committee meetings ad infinitum, ad nauseam.

Yet so seldom is heard the voice of reason, the questioning voice that asks: "Why has all of this happened?" and "How can this din be silenced so that a man can read a little fiction, a little science, see a few patients and really feel as if every time he sticks his head out of a shell hole he doesn't have to duck?"

Why has the medical profession become a political football? The rank and file of the peer of professions find it all very difficult to understand. The family doctor of yesteryear is still here tak-

ing care of his patients and giving them all he has to give. He wishes fervently that BOTH sides would leave him alone. Then why doesn't he talk to the people? This is not the Reich or the Soviet. The people still have the final say in these matters. If they knew the truth, they would demand that the guns stop, that the sniping cease and their family doctor be left alone.

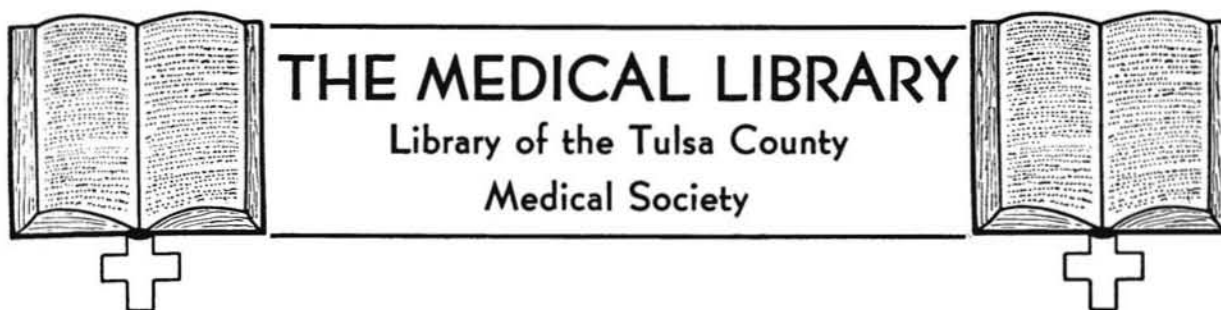
However, the truth is not that "Organized Medicine" is the best safeguard for the preservation of their health. To Mr. Average American one politico looks just like another. The leaders of the right as well as those of the left seem to him to have their own axes to grind. "As long as some organization is going to run things, the government might as well do it as a privately employed secretariat."

But if John Doe and Wm. Roe once get the idea that if the left wins then Dr. Brown and Dr. Smith will no longer be their patient advisers in sickness or in health, things would stop and stop right now, because the howl that would be raised could be heard the length and breadth of Pennsylvania Avenue.

Why doesn't the howl go up? The doctors know that a state program of medicine will mean just that. We have not made that clear to those around us. Various committees have decided to fight this battle for the doctors. These "committees" give off a slight odor of "vested interests," and all of those other things that make Mr. Doe and Mr. Roe a bit suspicious. The machine age can never invade the field of medicine, because the recipient of therapy is always a living, breathing person who by no stretch of the imagination can ever be compared to a machine. If every physician puts this idea across to each member of his clientele, the ensuing sudden silence will be both surprising and gratifying.—Jackson County Bulletin.

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RECENT ACCESSIONS

New Books—

E. Martin Scd., W. N. Haworth F.R.S., and Bernard Fantus, M.D., *Dextrose Therapy in Every Day Practice*. A gift of the Publishers at the request of Lloyd Stone.

Reprints—

A. L. Soresi, M.D., New York, N.Y. 1. *Workmen's Compensation Diagnosis of Hernia* read before the Scientific Session, International Medical Center, October 1940. 2. *Epidural Posterior Roots Anesthesia and Analgesia* Medical Record, 1941.

Donald E. Ross, M.D., Los Angeles, California, *Gastric and Duodenal Ulcer, a simplified Technic for Gastric Resection*. Western Journal of Surgery, Obstetrics and Gynecology, 1940.

Comdr. Ernest R. Eaton, Mc-V(S)USNR, *The Medical Reserve Officer of the U. S. Navy* New York State Journal of Medicine, 1941.

George G. Haydu, M.D., and Ernest R. Eaton, M.D., *Chronic Arthritis. A table of seven hundred and fifty-five patients receiving systemic treatment in 1933-1940 in hospital wards and clinics*. Journal of American Institute of Homeopathy, 1941.

Gifts of the Month—

Dr. Arthur H. Davis, *Southern Medical, Journal*, 1939, 1940 and current issues for 1941. Dr. Davis will donate this Journal to the Library each month.

Dr. A. W. Roth, *Current issues of the Digest of Ophthalmology and Otolaryngology*.

Dr. S. J. Bradfield, *The Medical and Surgical Survey and the Obsterics and Gynecology Survey of the Washington Institute of Medicine for 1937, 1938, 1939 and 1940*.

PRIVATE LIBRARY ADDED

We are in the midst of cataloguing and classifying a part of the Medical Library of the late Dr. C. D. Johnson. It consists mostly of text-books on surgery, dating from 1918 to 1940, which will add materially to our section in this field; also current Journals on Surgery, Gynecology and Obstetrics and several reprints.

"That there be one man die ignorant, who had the capacity for knowledge, this I call tragedy."—Carlyle.

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| Pollock, Simon | Station Hospital, Camp Hulen, Tex. | |
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The Low-Down on Group Practice and State Medicine is presented in this condensed article by Dr. Floyd Burrows; this is a brochure distributed by the Public Relations Bureau of the Medical Society of the State of New York.

By FLOYD BURROWS, M.D.

I wish to champion the "little man with the black bag." He forms that large but select body of physicians who usually are designated as "general practitioners," and I am a member of that body. We are assumed to be know-nothing fogies on the way out of the medical picture. We are believed to be clinging to the ropes of the sickroom arena waiting for a bureaucratic referee to finish the count and ruthlessly toss us from the ring.

But it was the "little man" who discovered vaccination; it was the "little man" in Georgia who first ventured to use ether for a surgical operation; it was the "little man" in England who introduced digitalis in the treatment of cardiac disease and it was the "little man," Ephriam McDowell, who in 1809, in Danville, Kentucky, while irate citizens threatened to lynch him if his experiment failed, had the courage to perform the first ovariectomy, an operation that paved the way for modern abdominal surgery.

Perhaps it will be some "little man" working in an obscure laboratory hidden in a garret or a cellar, alone and half starved but burning with unquenchable zeal, who yet will pick the locks of the vault in which is secreted the enigma of cancer. Who knows?

There are certain fundamentals governing the practice of medicine that should never be lost sight of, and should be taken into consideration by advocates of group practice.

After all that is said to the contrary, the indisputable fact remains—medicine always will be an art as well as a science, no matter what radical advances are made in the latter field.

It necessarily will be so because there is an art in establishing prompt obedience to directions; in obtaining the wholehearted cooperation of a patient; in imparting and in getting adopted useful health information and instructions; in winning the confidence of frightened children; in understanding comprehensively the discouraging problems of the aged, while sympathetically ministering to them; in entering strange homes and quickly achieving a commanding confidence among those present in one's ability to cope successfully with any emergency which has arisen. There is an art in comforting and assuaging the torturing pangs of a grief-torn soul; in being the tactful purveyor of sad, disastrous news to loved ones; in building up courage within those desperate in-

dividuals who, unfortunately, are forced by the exigencies of malignant disorders to go down into the depths of the valley of the shadow, their minds overwhelmed with the terrible fear that they never may return; and there is an art in smoothing the painful pathway of others who, without hope, are journeying somberly down the dreary road from which no traveler returns.

This should not be passed off with a lofty, condescending gesture, and disparagingly termed "selling a bedside manner." It must be realized that medical science is an intricate, highly complicated piece of mechanism, which has to be oiled by artful methods or it will squeak like the rusty hinges on an antiquated mausoleum—especially so if it ever is manipulated by a bunch of political bureaucrats.

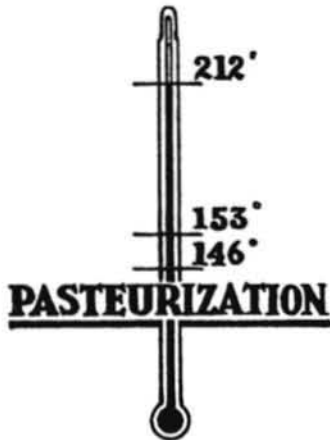
I am not maintaining that art is everything, or trying to detract from science and scientific attainments. No claim is being made that a medical man can succeed on art alone, for no one has a more profound respect for science and its useful application than I have.

The ubiquitous Jones family often is used as a typical example—a cross-section slice, so to speak, of the great middle class—for illustrating and elaborating the problems of the household that has a \$3,500 income or less.

The Joneses are the ones who usually ride up in automobiles to doctors' offices wearing fur coats and more costly raiment than medical doctors can afford for themselves or their families; who purchase, on the installment plan, electric refrigerators, radios, oriental rugs, mahogany furniture, and other lavish luxuries too numerous to inventory; who take vacations and gallivant around the country on pleasure trips; while physicians are forced to stay at home because their bills are unpaid; and who throw lavish parties, patronize unholy cafes, night clubs, and dancing orgies—but who can't manage to come across with cash on wood when they are sick.

(Continued Next Month)

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Lloyd Stone, Executive Secretary of the Tulsa County Medical Society, was a member of the class of graduating law students who appeared before the Supreme Court of Oklahoma, Tuesday, July 8th, to take the oath of an attorney and officer of the courts and become a full-fledged attorney. Lloyd was graduated this past June from the Tulsa Law School with the degree of Bachelor of Law after completing the four-year course of study. He had previously taken his pre-legal work at the University of Oklahoma. Stone took the state bar examination in June and was among the successful candidates.



RADIO SPEAKERS FOR AUGUST ARE: DOCTORS H. Lee Farris, R. M. Shepard, J. L. Miner, H. Lee Farris and Marvin D. Henley.

Medical Clinic

REPORT FOR JUNE 20 TO JULY 19 INCLUSIVE

| | |
|--------------------------|-------|
| Tumor | 38 |
| Rectal | 11 |
| Diathermy | 40 |
| Varicose | 34 |
| Ultra Violet Ray | 8 |
| Tonsils | 19 |
| Cardiac | 33 |
| Dermatology | 25 |
| Neurology | 20 |
| Orthopedics | 27 |
| Dental | 108 |
| Ear, Nose & Throat | 49 |
| Eye | 52 |
| Pediatrics | 46 |
| Gynecology & OB | 69 |
| Surgery | 125 |
| Urology | 56 |
| Medicine | 782 |
| | <hr/> |
| | 1542 |



RADIO SPEAKERS FOR JULY WERE: DOCTORS H. Lee Farris, J. E. McDonald, Ned R. Smith and Marvin D. Henley.

| | |
|--|------|
| Number of patients sent to Hospitals | 18 |
| Total Number of Patients | 1784 |
| Total number of prescriptions.. | 1241 |
| X-Ray Treatments | 98 |
| X-Ray Pictures | 48 |
| Fluoroscopic Exams | 32 |

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Beat three eggs, season with salt, and add all the Pablum the eggs will hold (about 2 cupfuls). Form into flat cakes and fry in bacon fat or other fat until brown. Serve with syrup, honey or jelly.

Pablum Salmon Croquettes

Mix 1 cup salmon with 1 cup Pablum and combine with 3 beaten eggs. Season, shape into cakes, and fry until brown. Serve with ketchup.

Pablum Meat Patties

Mix 1 cup Pablum and 1½ cups meat (diced or ground ham, cooked beef or chicken), add 1 cup milk or water and a beaten egg. Season, form into patties, and fry in fat.

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OUR CRITICS FORGET

Critics of the profession have made many accusations against men of medicine in the last few years. They have labelled us individually and collectively as selfish, mercenary, calculating, as obstructors of progress, as jealous guards of principles which they claim are outmoded. But they forget. . . .

That in 1940 medicine made many brilliant advances in the evolution of cures for hitherto fatal diseases.

That in 1940 the United States was again the healthiest nation in the world; that in Wisconsin and in Milwaukee all-time health records were shattered through the concerted efforts of private physicians in co-operation with public health agencies.

That medicine was the first of any organized group to place all its facilities at the disposal of the government in the current national emergency; that physicians all through the country are giving gratuitous service on draft boards.

That a new flu vaccine is in the process of development; that sulfanilimide is being studied as a possible cure for tuberculosis; that sulfathiazole is the object of clinical experiments with pneumonia; that a method of administering a synthetic male hormone preparation in tablet form has been discovered; that the number of cured cancer cases is gaining in the United States and that a new and apparently successful treatment of skin cancer has been developed at the University of Wisconsin; that dangerous medical research is being done in the stratosphere.

We would also remind our critics

that these studies and discoveries have been made by medicine for the common good. Each preventive or prophylactic advance is made available to the public. Each worthy therapeutic weapon is publicized and its benefits spread to all in need of it. If we are as selfish and as unprogressive as our accusers claim we are, would we devote our lives to improving our technique in the care of the sick, when such improvement obviously means a lessened use of our services?

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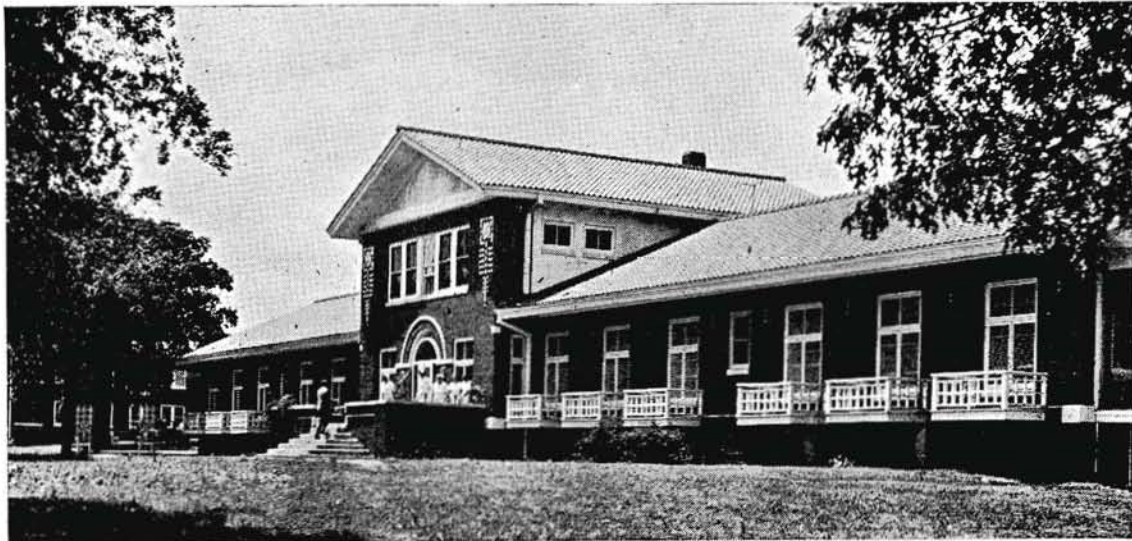
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