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TULSA COUNTY MEDICAL SOCIETY



# THE BULLETIN

*of the Tulsa County Medical Society*

*Hospital Issue*

## **IN THIS ISSUE**



City-County Hospital Bond  
Election Set For November 26



Caldwell Hospital Survey



Oklahoma City Clinical Society  
Meeting October 28-31



A Time For Decision

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Vol. 12

No. 10

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October, 1946

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## Old Way . . .

### CURING RICKETS in the CLEFT of an ASH TREE

FOR many centuries,—and apparently down to the present time, even in this country—ricketic children have been passed through a cleft ash tree to cure them of their rickets, and thenceforth a sympathetic relationship was supposed to exist between them and the tree.

Frazer\* states that the ordinary mode of effecting the cure is to split a young ash sapling longitudinally for a few feet and pass the child, naked, either three times or three times three through the fissure at sunrise. In the West of England, it is said the passage must be "against the sun." As soon as the ceremony is performed, the tree is bound tightly up and the fissure plastered over with mud or clay. The belief is that just as the cleft in the tree will be healed, so the child's body will be healed, but that if the rift in the tree remains open, the deformity in the child will remain, too, and if the tree were to die, the death of the child would surely follow.

\*Frazer, J. G.: *The Golden Bough*, vol. 1, New York, Macmillan & Co., 1928



It is ironical that the practice of attempting to cure rickets by holding the child in the cleft of an ash tree was associated with the rising of the sun, the light of which we now know is in itself one of Nature's specifics.

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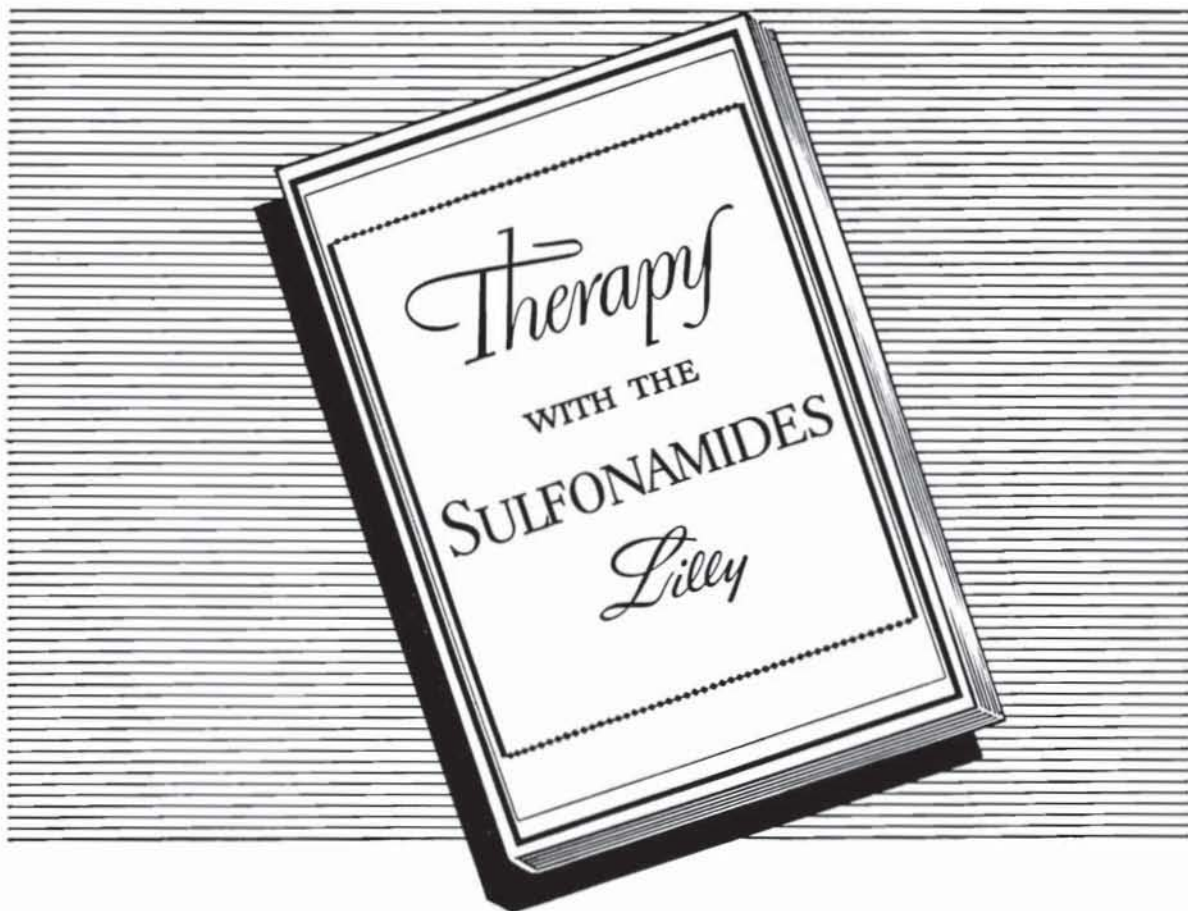
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## *Therapy with the Sulfonamides*

In 1937 sulfanilamide was introduced into general clinical use. During the next six years sulfapyridine, sulfathiazole, sulfadiazine, and sulfamerazine followed in rapid succession. The vast clinical literature which has accumulated in the interval has been carefully organized and condensed by the Lilly Research Laboratories into an eighty-three-page book entitled *Therapy with the Sulfonamides*. A bibliography of 323 references is included. The discussion is divided between systemic and local administration. Many helpful charts, including "Sulfonamides in Order of Choice for Systemic Use," "Dosage of Sulfonamides for Adults," and "Dosage of Sulfonamides for Infants and Children," are included. Request a free copy of *Therapy with the Sulfonamides* from the Lilly medical service representative or direct from Indianapolis. Sulfonamides, Lilly, for systemic and local administration are provided in a complete variety of dosage forms, subject to your specifications.

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# THE BULLETIN

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Vol. 12

TULSA, OKLAHOMA, OCTOBER, 1946

No. 10

## HOSPITAL BOND ELECTION SET NOV. 26

**Board of County Commissioners Fix Date For  
Special Election to Vote On \$1,250,000 Bond Issue  
For Proposed 200-Bed City-County Hospital. Public  
Hearing Held.**

Tulsa County voters will go to the polls in a special election November 26, 1946, to determine the rate of a county-wide bond issue of \$1,250,000, estimated construction cost of a 200-bed city-county hospital long sought by the Tulsa County Medical Society and Tulsa Chamber of Commerce. Action of the three county commissioners came after an open hearing on Tulsa hospital conditions last September 19, at which time three medical society representatives and many other civic leaders hurled a blunt and flat-studded indictment at the community for permitting "deplorable" inadequacies in county hospital facilities.

The fixing of the date of the special election climaxed more than 18 months of intensive study and campaigning by the Tulsa County Medical Society-Tulsa Chamber of Commerce joint investigating committee, appointed in March, 1945, following newspaper charges of Tulsa's hospital deficiencies. The proposed city-county hospital appeared doomed for failure in last-minute developments during September when the Board of County Commissioners did an abrupt about-face on the matter and rescinded an earlier agreement to call a bond election. At that time the Tulsa County Medical Society asked for a public hearing to present evidence of the need. An estimated 140 persons, meeting in courtroom quarters, barraged commissioners with insistent demands for a public vote on the question. The Board's action culminated

the lengthy hearing with the commissioners' decision not to include the matter on the November ballot, but to call a special election for the last Tuesday in November.

Mr. J. B. Gray, chairman of the Board of County Commissioners, asserted at the public hearing that the Commission had never denied the need for the proposed facilities but were concerned with financial details of maintenance. The projected hospital is expected to require a minimum of \$230,000.00 annually to operate at capacity. A special ways and means committee of the Tulsa Chamber of Commerce had previously determined that this sum could be raised by pooling present tax funds from various city and county sources. Mr. John Rogers, prominent Tulsa attorney, assured the commissioners that Tulsans would find a way to create the necessary operating funds once the hospital was built.

Commissioners also balked earlier on a legal question when an opinion rendered by County Attorney Dixie Gilmer asserted Tulsa County would legally be required to assume full financial responsibility for operation of the hospital. The proposal of the Tulsa County Medical Society and Tulsa Chamber of Commerce had called for a pooling of funds from many sources and development of the project as a combined city and county effort. As this issue of The Bulletin went to press, the County Attorney's opinion was under fire by many propo-

ents of the project.

As proposed by the Tulsa County Medical Society and Tulsa Chamber of Commerce, a 200-bed city-county hospital will be constructed within city limits. It is to include 160 beds for the care of the indigent sick, 20 beds for tuberculosis holdover cases, 10 beds for a mental ward for holdover cases awaiting transfer to the state institutions, and 10 beds as a desperately needed contagious diseases ward. It is to be operated under the supervision of a non-partisan board with medical care to be continued to be furnished to the indigent without charge by members of the Tulsa County Medical Society. The present Tulsa County Clinic, operated under Society supervision at 212 West Sixth Street, is to be made part of the hospital as an out-patient department. An efficient administrator shall be employed, and he shall be responsible only to the board of supervisors. Support shall be received from present health funds of the county, city, city schools, income from pay patients, endowments from several health agencies, and from savings effected through consolidation of the present county clinic with the proposed hospital.

Speakers at the public hearing of September 19 were Dr. John C. Perry, president of the Tulsa County Medical Society; Dr. Frank J. Nelson, co-chairman of the joint hospital investigating committee; Dr. H. A. Ruprecht, former Society president and member of the committee; Mr. Oakah L. Jones, chairman of the Civic Department of the Tulsa Chamber of Commerce; Mr. H. B. Dowell, president of the Tulsa Council of Social Agencies; Mr. Charles Follansbee, Tulsa County representative of the National Foundation for Infantile Paralysis; Mrs. H. V. Stedman, president of the Tulsa League of Women Voters; Mr. John Rogers, Tulsa attorney; Miss Goldie Davis, director of the Tulsa County Public Health Association; Mr. Primus Wade, negro attorney and civic leader; Mrs. Ruth Wells, assistant manager of the Tulsa County unit of the American Red Cross; and several others.

Dr. Perry discussed Tulsa's general hospital situation, outlining the growing need for both private and charity beds. "Any member of the Tulsa County Medical Society will tell you that our acute hospital bed shortage places the entire public and individual health of this community in peril," he said. The president of the medical group asserted Tulsa had less than two-thirds as many beds as were required by recognized standards to meet minimum requirements for the population served. He quoted facts and statistics from the official committee report published last Fall, and again pointed out the startling lack of communicable disease facilities in Tulsa hospitals.

Dr. Homer A. Ruprecht struck sharply the present standards of hospital care for the indigent sick. Paying tribute to the physicians who donated their medical skill in the care of the county patients at the Tulsa County Clinic, he asserted that much of their medical attention was neutralized for lack of needed hospitalization. Dr. Ruprecht said it had become virtually impossible to secure a hospital bed for county patients except in the most urgent cases. He bluntly stated that many deaths were occurring which could be prevented by prompt hospitalization of patients. "We charge," he said, "that the obligation (of the county commissioners) is not being met as long as it remains virtually impossible to place a county patient in a hospital."

The Board of County Commissioners remained silent on all charges brought by the doctors and made no attempt to minimize the sharply worded statements of the speakers.

Dr. Frank J. Nelson, co-chairman and spark plug of the project committee, introduced further startling testimony by quoting portions of an independent survey of Tulsa hospital conditions conducted last November by a representative of the Oklahoma State Health Department, Dr. Bert F. Caldwell. (Details of the Caldwell report are to be found elsewhere in this issue of *The Bulletin*.) Listeners winced as Dr. Nelson described

(Continued On Page 21)



# CALDWELL RAPS TULSA NURSING HOMES

**Oklahoma State Health Department Investigator  
Praises Tulsa Hospitals But Condemns County In-  
firmary, Four Nursing Homes, Recommends 300-  
Bed Charity Hospital.**

Tulsa County hospitals have been described as well-managed, well equipped and efficiently operated institutions in a formal report of an independent survey conducted under Oklahoma State Health Department auspices by Dr. Bert F. Caldwell, former president of the American Hospital Association. At the same time the veteran hospital administrator worded a sharp criticism of the county infirmary and of four unnamed Tulsa nursing homes.

Sections of the report, which covered every county in Oklahoma, were introduced as testimony by Dr. Frank J. Nelson at public hearings on the need for additional hospital facilities in Tulsa County, conducted last September 19. The survey was made last October and November, 1945, and was not made public until copies were received by the Tulsa County Medical Society last month. Purpose of the study was to provide a basis for allocation of federal hospital construction funds to needy areas of the State of Oklahoma.

Dr. Caldwell paid special attention to Hillcrest Memorial Hospital and St. John's Hospital of Tulsa. Both of these institutions were said to be "well managed, well staffed and equipped." The report called them "in point of size and of quality of service, among the first six in the State." Dr. Caldwell called attention to the expansion plans of the comparatively new Byrne Memorial Hospital and termed it and other smaller hospitals in the City "well above the average." Of Moton Memorial Hospital, Tulsa negro institution, the report stated that it would meet all requirements of an acceptable hospital. The Franklin Clinic and Hospital of Broken Arrow was termed "a well equipped, well operated unit of 12 beds and privately owned."

Personal recommendations for improvement of Tulsa's hospital situation as

made by Dr. Caldwell included the following:

1. Expansion of present hospitals to decrease a present general bed deficiency calculated to be a minimum of 468 beds.

2. Recommended construction of a 300-bed city-county, city, or county hospital. (Tulsa County Medical Society studies conducted last year indicate a need for a 200-bed institution of this character).

3. Inclusion of facilities for holdover tuberculosis cases to the extent of 60 hospital beds, preferably included as part of the 300-bed hospital recommended above.

4. Consideration to the need for a convalescent home for the aged and chronic sick of 250 beds. This project, while anticipated to be a long way off, has earlier been broached in Tulsa and is understood to be part of a long-range program of expansion contemplated by Hillcrest Memorial Hospital.

5. Improvement of "deplorable" conditions presently existing in four Tulsa nursing homes and at the County Infirmary.

The "deplorable" conditions referred at the County Infirmary were described in some detail by Dr. Caldwell. Housing 24 white and five negro patients at the time of his visit, it was referred to as follows: "It could not be classed as a hospital nor an infirmary under any reasonable standards. The building used to house the white inmates was a one-story stone veneer building. The only equipment it had was the furniture, all of which was in bad repair and dirty. The sanitary arrangements were inadequate and conspicuous by their absence. The rooms for the patients were dirty, vermin infested, and poorly furnished. In two of the rooms the latrines were a metal bucket covered by a box with a hole cut in its top and sitting in the

middle of the room. In a building in which ten patients might be accommodated, twenty-four were housed. There was not a hospital bed in the building. On the back porch was a young patient slowly dying of tuberculosis. *The whole presented a picture that Dickens at his best would have found difficult to describe.*"

Investigators sent to the County Infirmary in mid-September by the Tulsa Tribune asserted conditions were still bad but had been improved since the

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### MILTON L. SHURR NAMED AS TULSA HEALTH CONSULTANT

Milton L. Shurr, former Omaha health consultant, has been named Director of Public Health Education and Coordination for Tulsa County, newly created post within the Tulsa City Health Department. Mr. Shurr's position as health consultant and educator will include a program designed to coordinate functions of Tulsa's numerous health and welfare agencies. Although something in the nature of an experiment, presently set up on a trial basis for three years, this new program is expected to remain a permanent part of the Tulsa health education facilities. Mr. Shurr is jointly sponsored by the Tulsa Council of Social Agencies and participating members.

A graduate of the University of Rochester, the new consultant holds a Master of Science in Public Health degree obtained from the University of Michigan as well. Following a training period with the Rochester Tuberculosis and Health Association, he served from 1937 to 1942 as executive secretary of the Omaha-Douglas County Health Council, public health education and coordination unit. For the past three years he was a health and welfare officer in the G-5 section of the 1st United States Army in occupied countries of Europe. For a time he operated the liberated Buchenwald Concentration Camp.

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visit of Dr. Caldwell late last Fall.

The survey also included an inspection of eight Tulsa County convalescent and nursing homes, none of which were mentioned by name in the report. Four of the homes were stated to have "little to criticize except for overcrowding." The other four, Dr. Caldwell stated, "constituted a disgrace to any organized community." Describing one home, the report said: "Twenty-six old ladies were housed in a basement undivided by partitions, 25 by 30 feet in dimensions. The beds were iron cots, the mattresses were filthy from decaying urine and fecal discharges. The disagreeable odor could be smelled ten feet from the entrance to the building. There were no sanitary arrangements that were adequate. There was no nursing care. Two of the patients were definitely ill and were lying on their cots, half covered and half clothed."

The report describes similar conditions in housing provided by the home to men inmates, and comments that the degree of overcrowding was excessive. Most inmates were found to be beneficiaries of old age or pension benefits, paying their small pension in exchange for the care provided. One operator is reported to show \$600.00 profit monthly on the transactions, the report stated.

The Tulsa County Medical Society has learned subsequently that these conditions are being remedied in the nursing and convalescent homes. The Hospital Standards Act of 1945 provides for licensing of such homes, and not all Tulsa units have been licensed as yet. Certain nursing homes in the area have been required to correct faulty conditions found by an inspector of the Oklahoma State Health Department. Representatives of the Department told a Bulletin reporter that the operators of the homes were showing fine cooperation in most instances and were making sincere attempts to remedy the objectionable circumstances found by the official inspectors.

Copies of the sections of Dr. Caldwell's report are on file at the offices of the Tulsa County Medical Society and may be inspected by members.

# Medical Calendar

**TUESDAY, October 1st:**

Medical Broadcast, "Accident Prevention In The Home," Radio Station KOME, 3:15 p.m. Speaker to be announced.

Members who have not paid the Oklahoma State Medical Association special assessment of \$25.00 are requested to remit at once. Send checks to Tulsa County Medical Society, 1202 Medical Arts Building, Tulsa.

**FRIDAY, October 4th:**

Board of Trustees Meeting, Tulsa County Medical Society, Medical Arts Coffee Shop Mezzanine, 1:00 p.m.

**MONDAY, October 7th:**

Hillcrest Hospital Staff Meeting.

**TUESDAY, October 8th:**

Medical Broadcast, "Care Of The Aged," Radio Station KOME, 3:15 p.m. Speaker to be announced.

**FRIDAY, October 11th:**

Finance Committee Meeting, Tulsa County Medical Society, 1202 Medical Arts Building, 1:00 p.m.

**MONDAY, October 14th:**

Members of the Tulsa County Medical Society are advised the Society will not meet during the month of October, although two scientific meetings will be held in November. Next regular scientific meeting will be November 12, 1946.

**TUESDAY, October 15th:**

Medical Broadcast, "Rheumatic Fever," Radio Station KOME, 3:15 p.m. Speaker to be announced.

**FRIDAY, October 18th:**

Board of Trustees Meeting, Tulsa County Medical Society, Medical Arts Coffee Shop Mezzanine, 1:00 p.m.

**SATURDAY, October 19th:**

Copy deadline for the November issue of The Bulletin.

**MONDAY, October 21st:**

St. John's Hospital Staff Meeting.

**TUESDAY, October 22nd:**

Medical Broadcast, "Housing And Health," Radio Station KOME, 3:15 p.m. Speaker, Mr. Friendly Ford.

**MONDAY, October 28th:**

No Tulsa County Medical Society meeting on this date.

**TUESDAY, October 29th:**

Medical Broadcast, "Family Adjustments," Radio Station KOME, 3:15 p.m. Speaker, Dr. Felix M. Adams.

# *Announcing The Sixteen Oklahoma Ci*

October 28

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# Annual Conference of The Clinical Society

October 31, 1946

## LECTURERS

**WILEY M. PENICK JR., M.D., SURGERY**, Associate Professor of Clinical Surgery, Tulane University School of Medicine, New Orleans, Louisiana.

**JOHN G. RIGLER, M.D., RADIOLOGY**, Professor and Chief of the Department of Radiology and Physical Therapy, University of Minnesota School of Medicine, Minneapolis, Minnesota.

**FRISON H. SHOULDERS, M.D., PRESIDENT, THE AMERICAN MEDICAL ASSOCIATION**, Nashville, Tennessee.

**HARD H. SWEET, M.D., SURGERY**, Instructor in Surgery, Harvard Medical School, Boston, Massachusetts.

**HARD W. TE LINDE M.D., GYNECOLOGY**, Professor of Gynecology; Chief Gynecologist, Johns Hopkins University School of Medicine, Baltimore, Maryland.

**JAMES E. M. THOMSON, M.D., ORTHOPAEDIC SURGERY**, Lecturer in Plastic Surgery to the College of Dentistry, University of Nebraska; President, American Academy of Orthopaedic Surgeons, Lincoln, Nebraska.

**E. VAN ALYEA, M.D., OTOLARYNGOLOGY**, Clinical Associate, University of Illinois, College of Medicine, Chicago Illinois.

**WELLS WARREN M.D., PATHOLOGY**, Assistant Professor of Pathology, Harvard Medical School, Boston, Massachusetts.

**JOHN A. WOODS, SR., M.D., OPHTHALMOLOGY**, Professor of Ophthalmology; Ophthalmologist-in-Chief, Johns Hopkins University School of Medicine, Baltimore, Maryland.

## SESSIONS

## DINNER MEETINGS

## COMMERCIAL EXHIBITS

ALL the above features.

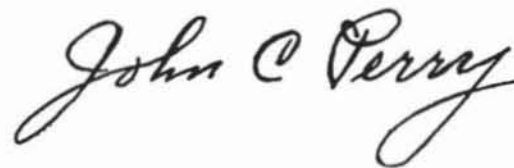
Medical Arts Building, Oklahoma City, Oklahoma

# PRESIDENT'S PAGE

I am pleased to report that the Board of Trustees of your Tulsa County Medical Society recently had a most interesting meeting with the newly-appointed attorney for the Oklahoma State Board of Medical Examiners. As an organization which has long advocated a state-wide clean-up of fraudulent "practitioners," the Tulsa County Medical Society takes special interest in the embryo plans of the State Board. While the activities of this attorney must, for financial and other reasons, be limited at the outset, there is hope that his program can eventually be expanded to compare with the fine job done in Michigan, Wisconsin, and many other states in eliminating medical quacks. There is a strong need in Tulsa at the present time for a good program of sanitation in the cultist ranks, and we are assured that any of our complaints or requests will be given prompt attention by the attorney for the State Board. Such assurance is encouraging and helps the local Society to overcome one of its major problems in effecting its own program of fraudulent practices control—the lack of funds and personnel to carry out such investigations and prosecutions.

I should like to also, at this time, thank certain officers of the Oklahoma State Board of Medical Examiners for their recent and repeated praise of the Tulsa County Medical Society and its officers and employees. It serves to strengthen the relations between these groups, to promote greater understanding of mutual problems, and at the same time is sincerely appreciated by us.

Sincerely yours,



President

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*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.*

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Vol. 12      OCTOBER, 1946      No. 10

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**A TIME FOR DECISION**

Elsewhere in this issue of *The Bulletin* are to be found the details of a special bond election presently set for November 26, 1946, at which time Tulsa voters will determine their willingness to invest \$1,250,000 in the construction of a much-needed city-county hospital of 200 beds. This action culminates nearly two years of intensive study and activity by the Tulsa County Medical Society and the Tulsa Chamber of Commerce, and it represents the answer to a sharp challenge flung at the medical profession by local groups who believed that it was part of the Tulsa profession's obligation to keep the public informed of our deficiencies in hospital facilities. Now that the obligation has been fulfilled, and the need stated so bluntly, some of the same demanding citizens are perturbed at the costs of operation and maintenance. Some are questioning the need, and many are frankly opposed because of the prospect of spending greater sums of money in its upkeep. We have little doubt that there will be barrages of misstated facts and misinterpreted motives before the day of the election dawns. It is already apparent that the issue—which is the need for the hospital—will be confused, perhaps in good faith and perhaps deliberately. Ultimate-

ly however, it will be the individual voters who must make the decision.

The Tulsa County Medical Society is actively supporting this proposal and will encourage the approval of the bond issue. It is to be hoped that the individual members will support this action in the same manner in which they have supported it as a group. It is the desire of the Tulsa County Medical Society to project the need for these facilities as the paramount issue, and not to take a role as financiers or attorneys or politicians. As doctors, we are scientists first, financiers last. We have performed the obligation which we are qualified to perform—that of advising the public as to our hospital needs. How these recommendations are placed into action is a matter for more informed heads of our community to determine. We offer our support to any sound-thinking proposals, and we believe the present method of financing suggested by the Tulsa Chamber of Commerce is sound.

This issue is now up to the voters. Our responsibility will end if this proposal is defeated. If it is accepted, as it will be, the Tulsa County Medical Society will work in cooperation with other individuals and groups to place the hospital into operation as quickly as possible.

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Members who have not yet paid the \$25.00 special assessment levied by the Oklahoma State Medical Association are requested to send their checks at once.

**CLINICAL DATES SET**

The annual fall clinic of the Oklahoma City Clinical Society will be held October 28-31 at the Biltmore Hotel, Oklahoma City, with 17 leading physicians as guest speakers. Details of this program are to be found on pages 12 and 13 of this issue of *The Bulletin*. Doctors wishing hotel reservations should advise the Executive Secretary at once, telephone 4-8161.



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**MEDICAL ARTS BUILDING  
SOLD TO HUNT INTERESTS**

The 12-story Medical and Dental Arts Building of Tulsa and considerable adjoining property were purchased September 1 by the Hunt Building Corporation of Tulsa in what was believed to be one of the largest real estate transactions in the city within recent years. Although the price was not disclosed, it is understood to be in excess of \$750,000. The sale was made by the G. H. Galbreath Company of Tulsa, agents for the former owners, the Western and Southern Insurance Company of Ohio.

Included in the purchase was the entire frontage on the West side of Boulder street south to 7th street, at present the site of a parking lot. Mr. Thomas A. Hunt, prominent Tulsa realtor and representative of the new owners, said a long-range building program to utilize the property is contemplated. No specific details of the plans of the new owners were made public.

In a letter to the Tulsa County Medical Society in mid-July, it had been denied that the building was for sale by the former owners. Although a Tulsa newspaper hinted at changes in the management policy, Mr. Hunt informed physicians and dentists who are tenants that no changes were anticipated at the present time. Rumored increases in rentals had not materialized by the end of September.

**TULSA DOCTORS TO CONDUCT  
SEVEN AREA CANCER CLINICS**

Tentative details for seven mobile cancer clinics to be conducted in the Tulsa area during the month of October were agreed upon by 30 participating Tulsa doctors at a special meeting of the Oklahoma Division of the American Cancer Society in the City last September 20. Physicians will donate their services to the clinics, only part of a total of 30 such clinics scheduled in the state during the next four months. Dr. H. A. Ruprecht is temporary chairman of the Tulsa County unit, substituting for Dr. Ralph A.

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McGill, who has been ill.

The clinics will be as follows: October 1, Claremore; October 2, Vinita; October 4, Miami; October 8, Muskogee; October 10, Tahlequah; October 15, Sallisaw; and October 16, Vian. The mobile cancer clinics are an extension of the program begun in the state early this year.

## PERSONALS

DR. CHARLES A. PIGFORD has removed his practice to Seminole, Texas.

New members of the Tulsa County Medical Society elected at the regular meeting of September 23 are DR. NEVIN W. DODD, 1453 S. Quaker; DR. HOWARD F. TURNER, 910 South Boston; DR. W. CARL LINDSTROM, 1619 E. 15th Street; DR. BEN F. GORRELL, 610 Medical Arts Building, and DR. W. H. NEWLIN, Broken Arrow.

Applicants for membership in the Tulsa County Medical Society are DR. JAMES C. PETERS, 915 S. Cincinnati; DR. H. GRAY CARTER, 915 S. Cincinnati; DR. WILLIAM BIVENS, 507 Medical Arts Building; DR. PAUL O. SHACKELFORD, 915 S. Cincinnati; DR. PAUL V. STRONG, Court Arcade Building, and DR. W. L. SMITH, Admiral and Lewis.

DR. FRANCIS N. BRILL has removed his practice to Peoria, Illinois.

DR. DONALD W. McCAULEY has been discharged from the United States Naval Medical Corps and will shortly announce the removal of his practice to Clinton, Oklahoma.

DR. HARRY P. PRICE has been ill at St. John's Hospital.

DR. KARL F. SWANSON has rejoined the medical staff of Springer Clinic.

DR. WILLIAM R. TURNBOW was speaker for the Osage County Medical Society on September 16 at Pawhuska.

DR. PHILIP M. SCHRECK has returned from a brief vacation.

DR. H. LEE FARRIS was speaker for the September 3 "How's Your Health?" series of medical broadcasts.

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## COUNTY HOSPITAL

(Continued From Page 8)

sanitary conditions in Tulsa nursing homes and at the Tulsa County Infirmary. The speaker told the Board of Commissioners that he did not introduce the report as criticism of the Board or any individual, but as an indictment of the community at large. Dr. Nelson also introduced results of an independent survey of Tulsa nursing homes by Dr. R. M. Adams, city superintendent of health, alleging that 35 to 40 per cent of nursing home inmates were in need of formal hospitalization.

Mr. Charles Follansbee, Tulsa attorney and former Junior Chamber of Commerce president, presented notarized copies of portions of the recent Grand Jury investigations in Tulsa County. The report called attention to glaring hospital needs, especially for contagious disease cases, and recommended construction of a county hospital through a bond issue.

Mr. H. B. Dowell, president of the Tulsa Council of Social Agencies, told the group not less than 21,000 persons in Tulsa County were recipients of some form of indigent benefits, and that at least 126 beds would be required to provide adequate hospitalization for this group alone.

Miss Goldie Davis, director of the Tulsa County Public Health Association, deplored the lack of beds for a large number of holdover cases of tuberculosis and said that many persons with active cases were now being quartered in homes and in daily contact with other adults and children.

Mrs. Ruth Wells, American Red Cross officer, called attention to the lack of facilities to care for mental cases awaiting transportation to institutions or commitment to same, and said that at present such cases must be quartered in the jails.

Public reaction to the proposed bond issue has not been fully determined but most observers believe it was pass the voters by a wide margin. The general public, acutely aware in many instances

of the shortage of hospital beds in the county, is expected to authorize the issue as a matter of community need. The proposal is not without opposition, one Tulsa newspaper being definitely committed as against it and a second yet to make a formal expression in its editorial columns.

As the Bulletin went to press, Dr. John C. Perry said the Society planned an intensive campaign in cooperation with other civic and professional groups to lay the facts of the matter before the general public.

---

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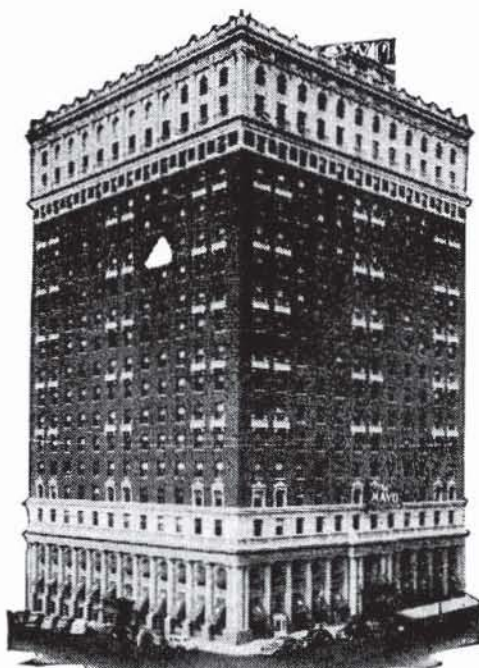
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