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TULSA COUNTY MEDICAL SOCIETY



THE BULLETIN

of the Tulsa County Medical Society

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IN THIS ISSUE



Tulsa Red Cross Plans
Blood Donor Center



The Medical Library



Ten Causes of Delinquent
Medical Accounts



A Time for Action

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*Tulsa County
Medical Society*

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Every Tuesday

K O M E

Vol. 13

No. 11

November, 1947

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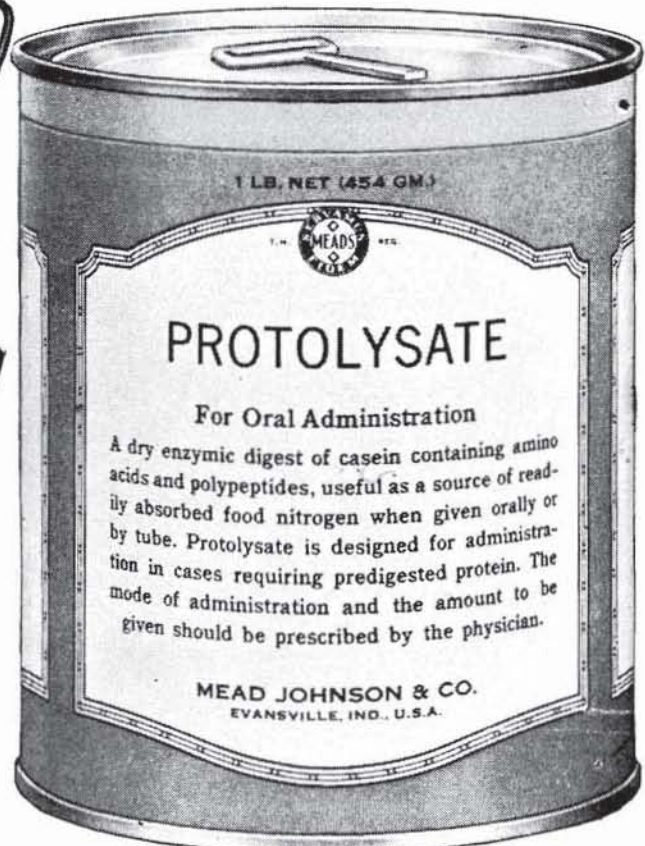
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CONTENTS

Blood Donor Center Plans	7
The Medical Library	8
President's Page	10
Delinquent Medical Accounts	11
Cease Fire!	12
Medical Calendar	13
Text of Proposed Amendment	14
New Radio Time	14
Editorials	16
New Applicants	19
Cancer Symposia	19
Federal Propaganda	21
Personals	21

ADVERTISERS

Akins Natural Foods	22
Audiphone Company	18
Babyland	21
Ball Drug Company	18
Catron Pharmacy	21
Ciba Pharmaceutical Products.....	3
Coca-Cola	4
Commercial Printing Company.....	24
Courtright Optical Co.....	24
Coyne Campbell Sanitarium	22
Curtain's Prescription Laboratory	17
Eli Lilly and Co.....	6
George A. Breon Company	15
Getman Drug Company.....	5
Harvard Drug Company	22
Hillcrest Hospital	22
Mayo Hotel.....	23
Mead Johnson & Company.....	2
Meadow Gold Dairy.....	23
Medical Arts Prescription Shop.....	4
Merkel X-Ray.....	24
Mid-Continent Co.....	24
F. H. Paxton Co.	17
St. John's Hospital	18
T. Roy Barnes Drugry	15



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THE BULLETIN

OF THE

TULSA COUNTY MEDICAL SOCIETY

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Vol. 13

TULSA, OKLAHOMA, NOVEMBER, 1947

No. 11

BLOOD DONOR CENTER SET FOR TULSA

**Tulsa County Medical Society to Jointly Sponsor
Project of Red Cross. Proposed Center Expected
to Open by January 1, 1948.**

The Tulsa County Medical Society has been requested by the Tulsa Red Cross to jointly sponsor the establishment of a blood donor center to serve Tulsa County and the surrounding area. Announcement of the project came last month after several months of preliminary study by officials of the two organizations. Tentative approval to the Society's participation in the proposal was given by the Board of Trustees last August. It is hoped that the center will be in operation by January 1, 1948.

According to present plans of the Red Cross, the blood donor center will be patterned after the center now in operation at Wichita, Kansas, in which the Sedgwick County Medical Society plays a prominent role. The extent of the Tulsa County Medical Society's participation in the project is not definitely known at this time. Dr. E. O. Johnson, president, has announced that a special committee will be shortly appointed to work with Red Cross officials in developing plans for the center.

Dr. Johnson paid high tribute to the many organizations that have been active in supplying volunteer blood donors to Tulsa hospitals. He emphasized the necessity of a regularly scheduled blood bank, adequately stocked, with proper typing and cross matching of blood completed well in advance of its need. Dr. Johnson offered the Society's cooperation to the Red Cross, stating that the project merited the support of all medical doctors in Tulsa County.

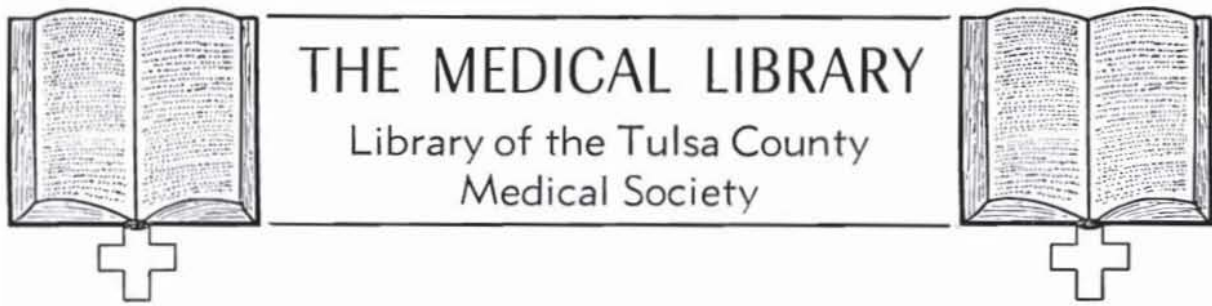
The Wichita Plan, which will probably be employed here, is entirely depend-

ent upon volunteer blood donors as a source for blood. A reception center is established in a convenient downtown location, where blood is taken under the direction of a licensed medical doctor. Donors are not paid. The blood is then taken to the hospitals where it is typed, processed, and stored until needed. If the project proves to be of sufficient magnitude, a separate central laboratory may be established where typing and processing can be done. In all cases, the blood will be stored at hospitals as needed. At present about 40 pints are used daily by all hospitals combined.

The proposal, estimated to cost upwards of \$15,000 will be financed by surplus funds of the Tulsa Red Cross. The blood will be available without charge to patients except for a small sum necessary to cover the costs of storage and processing. This sum, estimated at \$3.00 to \$6.00 per pint, will go to the hospital where such processing and storing is done. This figure compares with the present sum of \$25.00 now charged by most professional blood donors. Tulsa hospitals have been approached by the Red Cross relative to participation in the project and all have extended enthusiastic cooperation.

John Esau, president of the Tulsa Chapter of the Red Cross, said that the mass of technical complications to be overcome would preclude the center from being placed into operation for several months. Esau reported that earliest possible opening date to be January 1, 1948.

The blood center program is part of an extensive national program undertaken by the American Red Cross at its annual meeting in Cleveland last Spring.

**Medical Library Committee:**

Robert E. Funk, M.D., Chairman
 Morris B. Lhevine, M.D.
 John G. Matt, M.D.
 Fred E. Woodson, M.D.
 W. A. Showman, M.D.

Mrs. Billie-David Anderson, *Librarian*
 Telephone 4-1461

Gifts Of The Month—:

The following members of the Tulsa County Medical Society have very generously contributed subscriptions or made available to the Medical Library the following publications for the year 1948.

- Dr. P. P. Nesbitt. Military Surgeon, Southern Medical Journal.
 Dr. W. J. Trainor. American Heart Journal, Archives of Surgery.
 Dr. Berget H. Blocksom. Journal of Urology.
 Dr. I. H. Nelson. Cancer Research, Journal of Biological Chemistry.
 Dr. Ian MacKenzie. Journal of Bone and Joint Surgery.
 Dr. Arnold H. Ungerman. Journal of Nervous and Mental Diseases.
 Dr. S. C. Shepard. American Journal of Medical Science. Annals of Internal Medicine, American Journal of Digestive Diseases and Nutrition.
 Dr. Arthur H. Davis. American Journal of Ophthalmology.
 Dr. Edward L. Moore. American Journal of Surgery.
 Dr. James Stevenson. Archives of Dermatology & Syphilology.
 Dr. Philip M. Schreck. Archives of Internal Medicine.
 Dr. Marvin D. Henley. Archives of Otolaryngology.
 Dr. Emil E. Palik. Archives of Pathology.
 Dr. W. A. Showman. British Journal of Dermatology.
 Dr. Paul Grosshart. Bulletin of the Johns Hopkins Hospital.
 Dr. J. D. Shipp. Gastroenterology.
 Dr. J. K. Lee. Journal of Clinical Investigation.
 Dr. Averill Stowell. Archives of Neurology and Psychiatry.
 Dr. Robert E. Funk. New England Journal of Medicine.
 Dr. G. H. Henry. Occupational Medicine.
 Dr. W. A. Dean. American Journal of Obstetrics & Gynecology.

New Books In The Library:

Index Of Differential Diagnosis. Sixth Edition, 1945. Williams & Wilkins Company, Baltimore, Maryland. Herbert French, M.D., Editor.

Victory Over Pain. A History of Anesthesia. 1946. By Victor Robinson, M.D. Henry Schuman Company, New York, N. Y. A gift of Dr. Fred E. Woodson.

Transactions of the American Proctological Society. 1946. Frederick C. Smith, Editor. A gift of Dr. V. K. Allen.

Embryology. By Ayers. 1947. Williams & Wilkins Company, Baltimore, Maryland. A gift of Dr. Ian MacKenzie.

Bone and Joint Injuries. By Watson-Jones. 1947. Williams & Wilkins Company, Baltimore, Maryland. A gift of Dr. Ian MacKenzie.

SCIENTIFIC PAPERS FILE BEGUN

The Medical Library would like to have copies of all scientific papers written by members of the Tulsa County Medical Society for presentation before any scientific group or board. These papers will be placed in a special file after reference cataloging, and will be available for use of all Tulsa doctors. The papers may be typewritten, or carbon copies of the original. Any doctor who has such papers on file in his office is invited to contribute them to the Medical Library.

PROJECTION EQUIPMENT AVAILABLE

Several members of the Tulsa County Medical Society have prepared standard slides for use with scientific papers, but do not have the equipment for projecting such slides. All doctors are invited to use the projection equipment in the Medical Library at their leisure. A standard 3 x 4 slide projector and screen is available, and the Library has also a projector for 16 and 35 mm strip film. This equipment may be borrowed for outside use before scientific groups by application to the Executive Secretary of the Tulsa County Medical Society.

LIBRARY NOW OPEN DAILY TO 6:00 P.M.

Effective October 20, 1947, the Library of the Tulsa County Medical Society will observe the following hours: Open daily, Monday through Friday, 9:00 a.m. to 6:00 p.m. The Library will not be closed at any time during this period, including the Noon Hour. Saturday, open 9:00 a.m. to 1:00 p.m. The Librarian will not be on duty on Saturdays, but the Assistant Librarian will be present to handle any requests of physicians. These new hours were established in order to permit doctors to have the use of Medical Library over the greatest period of time. Lack of interest has prompted the Medical Library Committee to drop its previous plans to open the Library two or more nights each week.

LIBRARY ENDOWMENT TRUST PLANNED

Plans are now being made by the Medical Library Committee for the creation of a permanent endowment fund for the Library of the Tulsa County Medical Society. Recognizing that the Library will in the future require additional support because of its large size, the Committee hopes to accumulate a substantial sum of money to be set aside in a legal trust fund. Contributions of physicians made this year will probably be used to inaugurate the fund. A full report of the proposal will be made to the Board of Trustees of the Tulsa County Medical Society at an early date.

PRESIDENT'S PAGE

For more than ten years the Tulsa County Medical Society has been a persistent advocate of a consolidated public health unit for Tulsa, comprising the Tulsa City Health Department, the Tulsa County Health Department, the City Schools Health Unit, and the Tulsa County Medical Clinic. Some intensive efforts by the Tulsa County Medical Society in cooperation with many other civic and professional organizations have consistently failed. The last effort, conducted in 1945, was a signal defeat when an enabling act introduced into the Oklahoma State Legislature, died in committee. The failure of these efforts in no way lessens the desirability of such a combined unit. The increase in efficiency, elimination of duplicating services, and savings in financial operation are obvious.

The recent publicity given to the financial woes of the City Health Department again prompts the Tulsa County Medical Society to suggest the renewal of the consolidation project. The time is opportune with cooperative city and county administrations in office. I feel that the project could be accomplished if all parties concerned would work together. The diverse interests of some of these groups has been responsible for some of the previous failures. Now that some of these groups have a new personnel and a sincere desire to create an efficient public health unit, there is no reason why the project cannot succeed. I feel the matter deserves your concentrated attention and support.

Sincerely,



President.

PREVENTING DELINQUENT ACCOUNTS

The Medical Credit Bureau Lists Ten Causes For Delinquent Medical Accounts. Mutual Cooperation of Doctor and Patient May Reduce Losses Substantially.

In a special report issued last month, the Medical Credit Bureau, official credit and collection agency of the Tulsa County Medical Society, listed ten major reasons why patients permit medical bills to become delinquent. The report emphasized that careful attention to such causes by the doctor could often decrease the percentage of past due accounts.

The ten points as listed were:

1. Heavy indebtedness in addition to the account, usually non-medical in character, but in cases of prolonged illness may represent large amounts due hospitals, laboratories, and other physicians.

2. Unemployment and loss of earning power, due often to illness.

3. Dissatisfaction with the quality of service rendered, either real or imagined.

4. Dissatisfaction with the fees charged.

5. Differences as to the responsible person for accounts past due, a circumstance particularly prevalent in industrial cases and among married persons who subsequently divorce.

6. Assessment of fees for cases which should be recognized at the outset as being charity cases. If the doctor is unwilling to accept charity cases, the patient should be advised of this fact.

7. Failure of the doctor's clerical staff to send statements promptly and to the correct address.

8. Failure of the doctor's clerical staff to exert normal collection efforts when time payments become delinquent.

9. Patient's maintenance of an attitude reflecting the common premise of "pay the doctor last," but not necessarily indicating a deliberate attempt to avoid payment.

10. A deliberate intention of not paying the bill, usually held by the patient at the time the services are rendered. This attitude is not confined to irresponsible persons but may be found in individuals who are employed, possessors of a large savings account and property, and earning an excellent income.

To minimize the effects of these causes, the Medical Credit Bureau Committee suggested the following measures of remedy.

First, the doctor should give careful attention to his clerical facilities. Adequate financial records on each patient should be kept, stating the name of the patient in full, the name and address of the responsible person, correct address of the patient, place of employment, and telephone number. Monthly statements should be sent at regular intervals of 30 days. When patients are paying a specified sum each month, prompt personal letters should be sent when payments are missed. Too often, the doctor's negligence in calling attention to such lapses will encourage the patient to repeat the act. This, in turn, will prolong the time required to pay the bill or may result in a portion of it never being paid. While this advice may seem elementary common sense, the number of physicians who are careless in such matters tends to be unusually large. The employment of expert clerical help at a suitable wage may often pay dividends in increased monthly collections.

Secondly, definite arrangements for payment should be discussed at the time the services are rendered. This will serve to create a firm impression in the patient's mind that a business-like arrangement must be followed. It is a recognized fact that the patient's desire to pay tends to correspond with the degree of his sickness. While it is not advocated that financial discussions predicate the rendering of care, they should be held promptly, especially in cases involving a large charge. For single office calls efforts should be made to collect before the patient leaves the office. Most patients appreciate a definite arrangement for payment.

Dissatisfaction with the quality of service rendered or the fees charged poses a difficult problem for the doctor. Medical attention cannot be provided on a guar-

anty basis. Doctors may anticipate such claims and ward against them by advising the patient of his prognosis, providing such prognosis is made with the utmost care. Where a patient cannot obviously be cured but may be helped, the doctor should advise the patient of these facts and make it clear that a charge must be made for the service rendered during the period. Upon receiving complaints of dissatisfaction with either service or fee, the doctor should invite the patient to his office and discuss the matter with him in detail. An amicable adjustment of the matter can often be made.

In cases where the patient has a legitimate complaint, the doctor should make a proper adjustment of the matter. Failing to do this, he makes himself liable for a possible malpractice suit.

The doctor must recognize that many patients use alleged dissatisfaction with services as an excuse for avoiding payment of the account. The doctor should not be too hasty to cancel or adjust ac-

counts on such pretexts. Similarly, imagined injustices on the part of the patient are no excuse for penalizing the physician who has rendered a competent service.

The doctor should at all times encourage a policy of frankness among his patients in regard to medical accounts. Unemployment, or extended illness, may necessitate postponement of obligations, but the doctor should insist that the patient discuss such matters with him in detail. The Medical Credit Bureau has found through experience that few doctors will insist upon payment if a patient will go to the doctor, state his financial position, and give him a definite assurance of the probable date when the account will be paid.

Many problems arise through a question of responsibility for an account. Many patients report to the doctor that insurance companies or employers are responsible for accounts. Such may not be the case, and the inability of patient, doctor, and third party to agree upon responsibility usually penalizes the doctor as the end result. The doctor may firmly insist upon determination of responsibility and assess the charge against the proper party. Charges incurred by a married couple who subsequently divorce may also be shunted back and forth between husband and wife, each insisting the other is liable. Unless the divorce judgment is to the contrary, the husband remains the responsible person. Care should be taken to ascertain the exact status of such cases.

The doctor should determine in advance of rendering extensive services if the patient is actually a charity case. The doctor then may render services as such, making no charge on his records, or he may refer the patient to a charity clinic.

The problem of the chronic deadbeat is incapable of complete solution. It is not always possible to determine such cases from mere conversation or appearance. They are usually recognizable early by the manner in which they respond, or fail to respond, to demands for payment of charges. Some persons are of excellent financial condition yet do not make a habit of paying bills. In some persons this

(Continued on Page 20)

Cease Fire!

Oh boy! Did we start something in our September issue of *The Bulletin* with our editorial about the poor quality of most county medical society publications. It was gratifying to learn that most editors over the nation agreed with us, and many were kind enough to write about our suggestion, either in personal letters or in the columns of their own periodical. Our proposal of a contest to annually determine the best of such publications, conducted preferably by the American Medical Association, did not get a good reaction. Dr. Morris Fishbein, editor of the *AMA Journal*, doubted the value of such a contest and so did many other editors. Anyway, we still think it's a good idea, and we do hope our words will serve to jolt some of the county society publication editors out of their lethargy, encouraging some real honest-to-gosh local news, editorial comment, and typographic originality—and away from being a clipping bureau for national publications.

NOVEMBER MEDICAL CALENDAR

SATURDAY, November 1st:

Office Assistants Group, Blue Cross Hospital Insurance, quarterly premiums due and payable on this date. Final date for payment, November 10, 1947. All members of the Tulsa County Medical Society who have not paid their 1947 membership dues in full as of this date are suspended from membership privileges.

MONDAY, November 3rd:

Hillcrest Hospital Staff Meeting.

TUESDAY, November 4th:

Medical Broadcast, "Geriatrics," Radio Station KOME, 3:30 p.m. Speaker, Dr. Marvin D. Henley.

FRIDAY, November 7th:

Board of Trustees Meeting, Tulsa County Medical Society, 1202 Medical Arts Building, 1:00 p.m.

MONDAY, November 10th:

No Tulsa County Medical Society meeting on this date.

TUESDAY, November 11th:

Medical Broadcast, "Nutritional Value of Milk," Radio Station KOME, 3:30 p.m. Program under direction of the Dairy Council of Tulsa.

FRIDAY, November 14th:

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

MONDAY, November 17th:

Copy deadline for the December issue of The Bulletin.
St. John's Hospital Staff Meeting.

TUESDAY, November 18th:

Medical Broadcast, "Diseases of the Liver," Radio Station KOME, 3:30 p.m. Speaker, Dr. H. Lee Farris.

MONDAY, November 24th:

Tulsa County Medical Society, Scientific Meeting, The Mayo, 8:00 p.m. Program to be announced.

TUESDAY, November 25th:

Medical Broadcast, "Aviation Medicine," Radio Station KOME, 3:30 p.m. Speaker, Dr. W. D. Hoover.

THURSDAY, November 27th:

The Executive Offices of the Tulsa County Medical Society will be closed all day in observance of Thanksgiving Day.

SATURDAY, November 29th:

Physicians & Surgeons Group, Blue Cross Hospital Insurance, semi-annual premiums due and payable on this date. Final date for payment, December 10, 1947.

CONSTITUTION AMENDMENT TO BE VOTED UPON NOV. 24

A proposed amendment to the By-Laws of the Tulsa County Medical Society, authorizing three-year staggered terms for five members of the Medical Library Committee, will be voted upon at the Society's regular meeting of November 24, 1947.

The measure, formulated by the Medical Library Committee and approved by the Board of Trustees, will create continuous interest in the Library by members of the Committee and permit the development and prosecution of long-range projects. The Committee felt that it had been handicapped in the past by a continuously new personnel each year.

The appointment of all Committee members shall continue to be by the President, with the approval of the Board of Trustees, and he shall also have power to remove members who are negligent or incompetent in their duties. The measure will not take effect, if passed, until January 1, 1948, and therefore does not necessarily provide for the retention in office of the present members of the Committee. This feature was insisted upon by the present Committee, in order that no one should interpret the proposal as a means of unduly extending the term of office of the present members, all of whom shall go out of office on December 31, 1947.

As required by the Constitution and By-Laws, the complete text of the proposed amendment is published below.

Amendment VI. Chapter IX of the By-Laws shall be amended by the addition of the following paragraph, which shall be known as Section 2.

Chapter IV, Section 2. (a) The Medical Library Committee shall be composed of five members to be appointed by the president with the approval of the Board of Trustees. At the beginning of the first full calendar year immediately following the approval of this amendment, the President shall appoint two members of the Committee for a term of three years, two members for a term of two years, and one member for a term of one year. Thereafter, all members shall be appointed for a period of three years each, thus creating

permanently a staggering of the membership of the Committee. In the event a vacancy shall occur on the Committee by death, resignation, or other removal, the President with the approval of the Board of Trustees, shall appoint a member to complete the unexpired portion of the regular term of office.

(b) The Chairman shall be appointed by the President from the membership of the Committee at the beginning of each year, and shall serve a term of one year or until his successor has been qualified. No member of the Committee shall be permitted to serve in excess of three full terms in the capacity of Chairman.

(c) The president may, at his discretion, remove any member of the Committee for failure to properly and attentively discharge his duties, providing such action bears the approval of the Board of Trustees. The Committee, by majority vote, may recommend to the President the removal of any member of the Committee who shall fail in his duties.

(d) The Medical Library Committee in office for the calendar year in which this amendment is passed shall be discharged on the date of December 31 immediately following the approval of this amendment.

Approved by the Board of Trustees, October 10, 1947, by unanimous vote and referred to the membership for action.

NEW BROADCAST TIME

The Tulsa County Medical Society's series of health and medical broadcasts, "How's Your Health?" is now being heard over Radio Station KOME at the new time of 3:30 p.m. each Tuesday afternoon. Now in its eleventh year, the series features members of the Tulsa County Medical Society who contribute their time to the project. To date, 22 doctors have appeared in 1947. The series is prepared by the Executive Offices under the supervision of the Public Relations Committee.

The Tulsa County Medical Society wishes to thank Group Hospital Service of Oklahoma for the splendid buffet dinner and membership meeting of October 27, 1947. The kindness and consideration is extremely appreciated.



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The BULLETIN

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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.

Vol. 13 NOVEMBER, 1947 No. 11

A TIME FOR ACTION

The indignation of the American Medical profession at the charges contained in House Report 786 of the First Session of the Eightieth Congress has grown to nation-wide proportions in the last few weeks. This innocent-appearing document served to confirm what medical economists had known for several years—that at least six tax-supported agencies in the executive branch of the federal government were using federal funds in an improper manner for propaganda activities in behalf of a compulsory national health insurance system. To many other doctors, however, the information came as a surprise. Although aware of the efforts of certain United States senators and representatives to institute state medicine, few American doctors apparently realized that active aid to such projects were being given by federal employees utilizing federal tax funds.

As noted by the President of the Tulsa County Medical Society in the October issue of *The Bulletin*, any doctor may consider himself "... a purchaser for powder to fire the fatal shot of state medicine." As heavy taxpayers, physicians and surgeons have unwittingly contributed to the support of agencies whose object is to destroy the present freedom of the medical profession, to shackle it to the political wishes of these same ambitious

leaders and employees of the federal government. The infiltration of these socialistic ideas into our government has been recognized by a very few doctors. For that reason, the medical profession has been rather complacent about the propaganda activities of these agencies of the federal government in behalf of state medicine, a complacency which raises out of ignorance of the true state of affairs.

The time for complacency is now past and the time for action is at hand. The Tulsa County Medical Society strongly urges those national medical organizations which represents the American medical profession to make two concerted efforts: (1) to fully inform every doctor in the United States of this situation through the use of every media of information at hand, and (2) to make the strongest and most effective protest possible to the legislative and executive branches of the federal government. Each member of the Society is urged to carefully read House Report 786 and subsequently comment upon it to his senators and representatives in Congress, and to advise his friends and patients of these intrusion upon the democratic principles.

These columns as a rule are not concerned with national problems, it being the opinion of the editors that such matters are best left to national organizations. The importance of House Report 786 is such, however, as to necessitate the employment of every media to bring it to the attention of doctors.

Act now, doctor. It is later than you think.

SPOTLIGHT ON DOCTORS

The Tulsa unit of the Oklahoma National Guard has been severely handicapped in its recent efforts at reorganization by the lack of an adequate number of medical officers. One Tulsa physician, the chief medical officer of the unit, has been the only member of a medical department which should have five commissioned officers. As a result the National Guard has been unable to promptly examine and enlist hundreds of officers and men. This delay has led some applicants to withdraw, and the much-needed services of many men have been lost.

(Continued On Page 20)

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NEW APPLICANTS

The following physicians were elected to membership in the Tulsa County Medical Society at the regular meeting of Monday, October 27, 1947.

Charles L. Caldwell, M.D. General Surgery. Offices, 115 East 18th Street Tulsa. Medical Degree, Washington University Medical School, St. Louis, Missouri, 1928. Interned St. Louis City Hospital, one year. In private practice Carthage, Missouri, 1931; Chelsea, Oklahoma, 1932-47. Military: Lieutenant-Commander, Medical Corps, United States Naval Reserve (inactive). By transfer from Rogers County Medical Society. Recommended by Dr. W. A. Showman and Dr. Leon H. Stuart.

Averill Stowell, M.D. Neurosurgery. Offices, Springer Clinic, 604 S. Cincinnati, Tulsa. Medical Degree, Johns Hopkins University, 1938. Interned Johns Hopkins Hospital, one year. In private practice, New York City, 1939-41. Member faculty, University of Maryland, 1942. Military: Lieutenant-Colonel, United States Army Medical Corps, 1942-45. Member staff, Cleveland Clinic, Cleveland, Ohio, 1945-47. By transfer from Cuyahoga County Medical Society, Ohio. Recommended by Dr. E. G. Hyatt and Dr. Carl J. Hotz.

Hugh L. Boyd, M.D. General Practice. Offices, Hillcrest Memorial Hospital, Tulsa. Medical Degree, Tulane University School of Medicine, New Orleans, Louisiana, 1944. Interned Scott-White Hospital, Temple, Texas, one year. Military: two years, United States Navy. Resident, Hillcrest Memorial Hospital, 1946-47. Recommended by Dr. John C. Perry and Dr. Fred E. Woodson.

The biographies of Dr. Edward L. Moore and Dr. W. J. Campbell, also elected at the October 27 meeting, have been published in the September issue of *The Bulletin*.

The following applicants will be voted upon at the meeting of November 24, 1947.

Charles A. Hulse, M.D. Urology. Offices, Springer Clinic, 604 S. Cincinnati, Tulsa. Medical Degree, State University

of Iowa College of Medicine, 1939. Interned University Hospitals of Cleveland, Ohio, two years. Military: Medical officer, United States Army, 1941-45. Resident in Urology, University Hospitals, Iowa City, Iowa, 1946-47. Recommended by Dr. E. G. Hyatt and Dr. Carl J. Hotz.

Earl I. Mulmed, M.D. Internal Medicine. Offices, Braniff Building, Tulsa. Medical Degree, University of Oklahoma School of Medicine, 1937. Interned Cedars of Lebanon Hospital, Los Angeles, California, one year. Resident, University Hospitals, Oklahoma City, 1938-40. Fellow in Internal Medicine, Mayo Foundation, Rochester, Minnesota, 1940-41. Military: Lieutenant Colonel, United States Army Air Forces, Medical Corps, 1941-45. Fellow in Internal Medicine, Mayo Foundation, Rochester, Minnesota, 1945-47. Recommended by Dr. K. C. Reese and Dr. Charles G. Stuard.

CANCER SYMPOSIA WELL RECEIVED BY PROFESSION

A total attendance of 110 physicians at the Oklahoma Cancer Symposium in Tulsa last October 6 was the largest reported by the ten centers where the lectures were presented. A total of 243 attended in the five centers of the Eastern circuit (Tulsa, Muskogee, McAlester, Ada and Durant) with 229 in attendance in the Western circuit (Oklahoma City, Enid, Woodward, Clinton and Duncan). The lectures, sponsored by the Oklahoma Division of the American Cancer Society and other state and local medical groups, were extremely well received with most of the Tulsa doctors in attendance indicating a desire for a second Symposia next Spring.

Local arrangements for the Tulsa meeting were in charge of Dr. Emil E. Palik's Cancer Committee. Dr. Palik presided at the first session, and Dr. H. A. Ruprecht at the evening meeting. Sponsors for nationally known guest speakers included Dr. Palik, Dr. Ruprecht. Dr. Fred A. Glass, Dr. E. O. Johnson, Dr. Ralph A. McGill, and Dr. Walter E. Brown. Dental speakers were sponsored by Dr. Scott P. Bowyer and Dr. Max Armstrong.

Every Friday night at St. John's Hospital through November 28—Postgraduate Course in Gynecology.

EDITORIALS*(Continued from Page 16)*

The value of the National Guard as an instrument of peacetime defense and war-time protection is too well known to be repeated here. It is made up of men who recognize the necessity for preparedness, and in our next war these men must be counted upon to defend the nation until an army and navy can be reassembled. It will not be a credit to the medical profession of Tulsa to have the local unit disbanded for want of a medical department. That is a possibility, Guard officials indicated last month.

The Tulsa County Medical Society has repeatedly sought the cooperation of its members in enlisting in this arm of the national forces for defense. The appeal is made again at this time. Prospective officers are urged not to be too hasty in rejecting the appeal, but to take the opportunity to study the requirements and benefits of membership in the National Guard. The medical profession must expect to do its part in these vital projects of national defense.

DELINQUENT ACCOUNTS*(Continued From Page 12)*

habit is limited only to medical accounts. The best way of avoiding such losses is to (1) call the Medical Credit Bureau and inquire if the patient's record is among the thousands of case histories on file, and (2) refer the account to the Medical Credit Bureau at the earliest date with full authority for the employment of legal measures. Many persons have delinquent accounts with as many as ten or fifteen doctors at one time; if this information is on file with the Bureau, it is available without charge to members of the Tulsa County Medical Society.

The chronic deadbeat resorts to many tricks which are designed to swindle the doctor. One is to refuse letters from the postmaster from the doctor. This can be avoided by sending statements in simple, unidentified envelopes. The debtor will usually accept and open the letter before he is aware of its contents. Another device is to entirely deny having been in the doctor's office, or to assert the account belongs to another individual or same or

similar name. Some debtors make a practice of threatening a suit against the doctor to avoid payment, usually basing such action on mere threat.

When the doctor's efforts fail to produce results, the account should be promptly referred to the Medical Credit Bureau. Unless some definite arrangement is reached to the contrary, it is unwise to hold accounts beyond a period of six months in which no payments have been made.

The Medical Credit Bureau offers a dignified collection service, operated on a non-profit basis with collection fees on a cost and contingency basis. Experienced in all collection matters, the Bureau with its complete legal and out-of-town services is now serving 65 Tulsa physicians and dentists, as well as many doctors and agents in other cities.

Full information about the Medical Credit Bureau may be obtained from the Executive Secretary, Tulsa County Medical Society, 1202 Medical Arts Building, Tulsa, telephone 4-8161.

**FEDERAL FUNDS SPENT ON
SOCIALIZATION PROPAGANDA**

Six federal agencies have been named by a Congressional investigating committee as improperly using government funds for propaganda activities in planning and conducting "health workshops" in support of pending bills of state medicine. The House Subcommittee on Publicity & Propaganda, an investigating group under the House Committee on Expenditures in Executive Departments, in its report requested the attorney-general to initiate proceedings to halt the use of the federal funds in such manner.

Named in the statement as having been "known to have participated in this campaign" are the U. S. Public Health Service, Children's Bureau, Office of Education, U. S. Employment Service, Bureau of Research & Statistics of the Social Security Board, and the Department of Agriculture. The committee charged that key personnel in these agencies planned to set up in strategic areas health workshops to influence farm and labor leaders to build up a stimulated demand on Congress for enactment of the Wagner-Murray-Dingell bill of state

medicine. Workshops were said to have been held at St. Paul, Minnesota, and Jamestown, North Dakota.

The report, although issued last July 2, has only recently gained nation-wide attention in medical circles. (See Editorial Page 16, this issue).

The Tulsa County Medical Society extends its sympathy to DR. F. W. HENDERSON in the passing of his wife, Mrs. Julia Henderson, on October 13, 1947.

DR. M. V. STANLEY has returned from St. Louis, Missouri, where he has been attending postgraduate medical study clinics.

DR. JOHN G. MATT has been elected a fellow of the International College of Surgeons.

Speakers on the "How's Your Health?" series of radio broadcasts sponsored by the Tulsa County Medical Society included, for October DR. MARVIN D. HENLEY, DR. H. LEE FARRIS, and DR. MANUEL BROWN.

DR. V. K. ALLEN was guest speaker at the October 4 meeting of the Medical Service Society.

DR. WILLIAM J. CAMPBELL has taken new quarters at 3505 South Peoria, Tulsa, where he will practice the specialty of Ophthalmology.

DR. W. A. SHOWMAN has dedecorated his offices in an attractive color scheme.

DR. FRED E. WOODSON was a guest speaker at the dedication ceremonies of the Oklahoma Medical Research Foundation in Oklahoma City last October 3. Also present were DR. PAUL N. ATKINS, JR. and the Executive Secretary.

DR. E. O. JOHNSON was Chairman of the Doctors Division of the 1948 Community Chest Drive conducted last month.

In charge of arrangements for the Tulsa County Medical Society Annual Golf Tournament held at Indian Hills Country Club last October 23 was DR. CHARLES H. HARALSON, assisted by DR. WALTER E. BROWN, DR. R. Q. ATCHLEY, and DR. MARVIN D. HENLEY.

DR. W. B. BOONE has closed his office for a year's postgraduate study in California.

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