



THE BULLETIN

of the Tulsa County Medical Society

Build Tulsa



IN THIS ISSUE



**Blue Cross - Blue Shield
Plans Show Progress**



1952 Annual Meeting News



**Presidential Candidates
Report On State Medicine**



May Program Notes

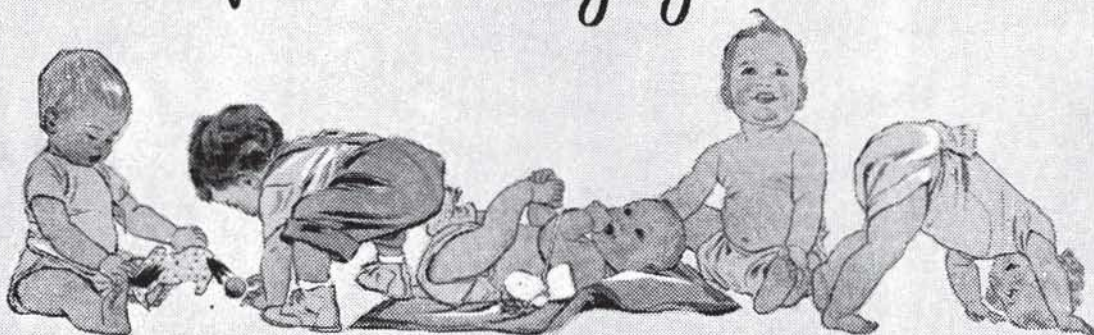
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*Oklahoma State
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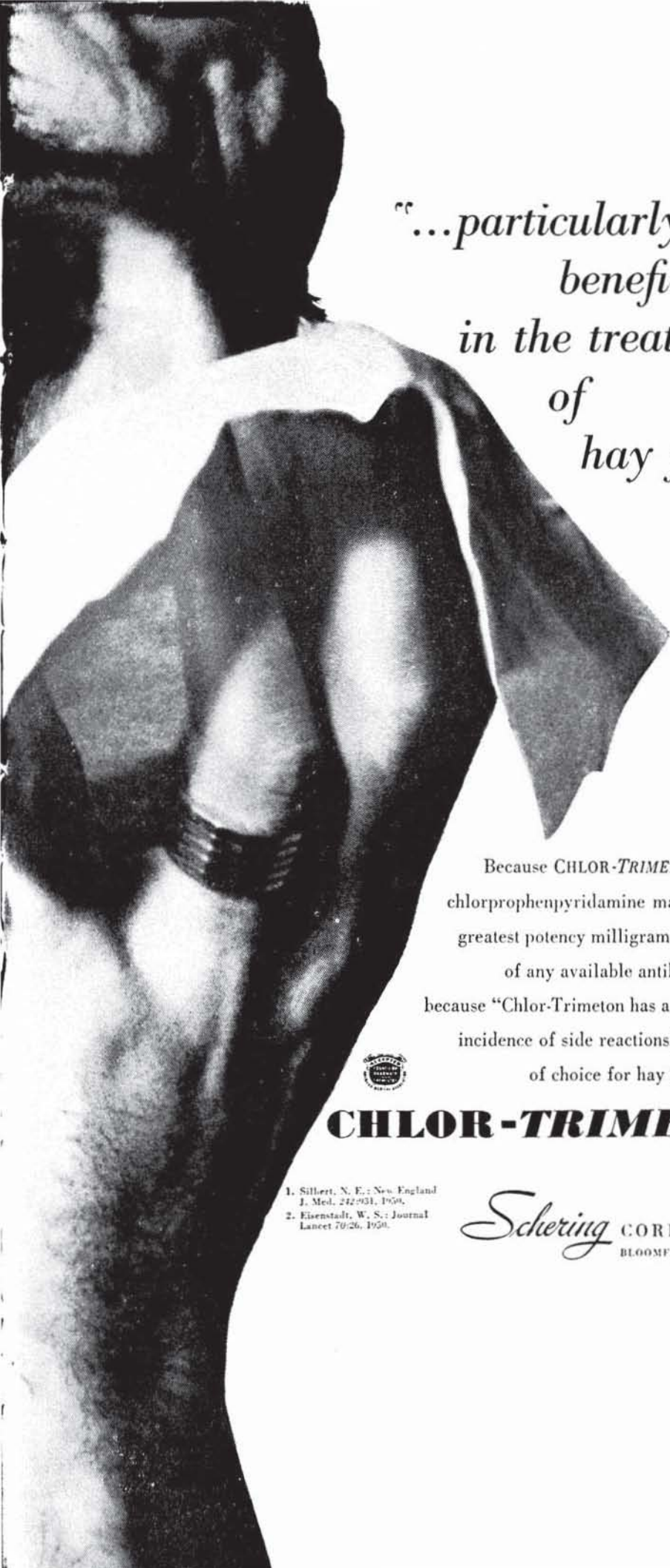
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1. Sillert, N. E.: *New England J. Med.* 242:931, 1959.
2. Eisenstadt, W. S.: *Journal Lancet* 70:26, 1950.

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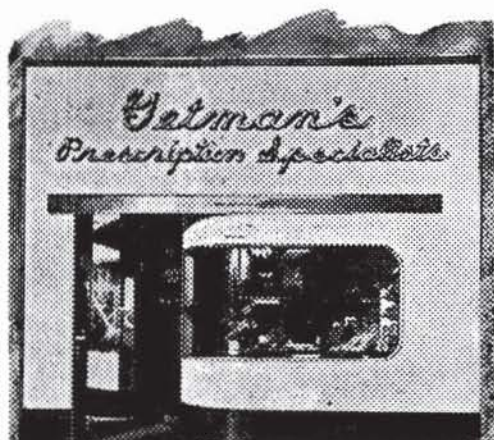
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THE BULLETIN

OF THE

TULSA COUNTY MEDICAL SOCIETY

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Vol. 18

TULSA, OKLAHOMA, MAY, 1952

No. 5

BLUE SHIELD PAYMENTS REACH NEW HIGH

Blue Cross Plan Now Has 45 Per Cent Of Tulsa County Enrolled. Utilization Rate Reaches Critical New High.

The Blue Shield Plan of Oklahoma reported last month that it paid Tulsa County doctors a record \$466,974.30 in fees during 1951, chiefly for surgical and obstetrical services rendered to beneficiaries. Payments to individual doctors were reported in excess of \$18,000.00 for the year.

The specific breakdown in Tulsa County indicated \$378,851.00 paid for surgical and obstetrical fees, \$56,574.30 for anesthesia and x-ray, and \$31,549.00 for the limited medical services of the Plan. For Oklahoma as a whole the Blue Shield Plan paid doctors of the State a total of \$1,569,921.53 in 1951 or 53.0 per cent of the total fees charged the patient for the services concerned. In Tulsa County payments by Blue Shield represented 46.2 per cent of the charges made by the doctor. In the classification of surgical and obstetrical fees, Blue Shield payments represented 51.2 per cent of the total charge; for anesthesia and x-ray, 52.9 per cent; and for medical care, 44.5 per cent.

The annual report of the Blue Shield Plan of Oklahoma for 1951, published in mid-April, indicated an enrollment of 266,515 members as of December 31, 1951. Of this number 84,131 were enrolled in Tulsa County or 33.8 per cent of the total population of the County. For the State of Oklahoma as a whole 12.0 per cent of the population were enrolled in the Plan, a slight increase over the 10.2 per cent recorded at the end of 1950. While the Plan actually took in 91,669 new members during the year, a heavy rate of cancellation (due to in-

creased premium rates and other economic factors) kept the net increase to 39,723 new enrollees. The Plan recorded 51,946 cancellations during the year or 56.7 per cent of total number of new contracts obtained.

Except for the comparatively poor showing in enrollment, the Blue Shield Plan presented a generally encouraging picture of its operations for 1951. The important reserve for contingencies figure reached its highest point since 1946 with a net increase of \$237,000.00 for the year. Operating expense dropped from 9.7 per cent in 1950 to 9.3 per cent of gross income in 1951. Income from subscribers increased over two million dollars in the year 1951, nearly a half-million dollars over income for the previous year. Utilization of income for payment of benefits to subscribers dropped to 79 per cent, the lowest figure in five years.

For the Blue Cross Plan of Oklahoma, companion plan of voluntary hospital insurance, the picture for 1951 was less bright. Most significant was a heavy utilization rate, despite the fact that the State had suffered no major epidemics or calamities, with 23 of the State's 77 counties recording a utilization rate in excess of 100 per cent of income. A corresponding loss in contingency reserve for 1951 was termed by Dr. Arthur S. Risser of Blackwell, President of the Board of Trustees of the Blue Cross Plan, a "cause for anxiety".

Dr. Risser further noted in the Blue Cross Plan's annual report for 1951 that he was "forced to conclude that our great

problem is over utilization. In this matter of utilization, in the end the doctor has the controlling power. It seems to me that somehow it must be brought home to the doctors that the success or failure of the Blue Cross Plan rests largely in their hands. Will they accept that responsibility? . . . "

The Blue Cross Plan reported a total enrollment of 383,679 members as of December 31, 1951, or 17.2 per cent of the population of the State. A cancellation rate of 73.2 per cent held the net gain to 26,754 for the year, the smallest net gain recorded by the Plan in seven years. In Tulsa County the Blue Cross enrollment stood at 113,196 or 45.52 per cent of the County population, a marked increase over 1950. Tulsa County continues to lead all other Oklahoma counties, both in actual number enrolled and the percentage of population enrolled.

The all-important utilization rate of the Blue Cross Plan jumped to a record 92.7 per cent in 1951, an increase of 4.1 per cent over the previous year. With operating expense at 9.3 per cent of income, this means the Plan operated at a loss for 1951. With this loss absorbed from funds previously accumulated for contingency reserves, the latter dropped to an average reserve per participant of only 55 cents, the lowest figure in ten years. At the same time average income

per participant was increased to \$11.35 (from \$9.77 in 1950) due to an increase in premiums in mid-year. While Blue Cross has substantial reserves to insure a presently sound financial condition, it is obvious that continuation of the present high utilization rate must eventually necessitate further increases in premium rates. Some observers saw in such increases an acceleration of the already high rate of cancellation and the possibility of Blue Cross being no longer able to compete with private hospital plan insurance companies.

In Tulsa County, the Blue Cross utilization rate for 1951 was 93.4 per cent of income, slightly higher than the average for the State as a whole. In one county (Jefferson) the rate ran as high as 145 per cent utilization of income.

The Blue Cross Plan serviced 57,079 cases in 1951 at an average per case cost of \$67.01. These cases represented 334,372 days of hospital care with an average length of stay of 5.9 days. The greatest number of cases admitted were those of injuries and poisonings followed in order by pregnancy with delivery, diseases of the respiratory system (not including tonsillitis with tonsillectomy), tonsillitis with tonsillectomy, and diseases of the genito-urinary tract. Pregnancy with delivery and diseases of the digestive system proved to have the longest average length of stay in days, closely followed by diseases of the respiratory system.

Adult females continue to be the greatest users of Blue Cross, accounting for 43.2 per cent of all patient days plus an additional 15.7 per cent represented by obstetrical cases. Adult males account for 22.6 per cent, minor females 10.2 per cent, and minor males 8.3 per cent.

The greatest utilization of Blue Cross occurs among members who have been in the Plan less than two years. Thereafter it drops off considerably. In evaluating this statistic it should be borne in mind that the bulk of the contracts have been in force only four years or less although some have been in force for eleven years. Members between the ages 1 to 20 have the greatest utilization with a gradual slacking off after age 21.

ANNUAL ROSTER COMING

The annual publication of the membership roster of the Tulsa County Medical Society will appear in the June issue of *The Bulletin*. Members who contemplate a change of office address or telephone number in the next sixty days are requested to communicate with the Executive Secretary, telephone 4-8161. Members who have entered upon the practice of a specialty in the last year are also requested to notify the offices. The copy deadline for this June issue only, due to mechanical requirements, will be May 13, 1952. Individual reprints of the roster will be available upon request after July 1, 1952.

CONVENTION ARRANGEMENTS COMPLETED

Kansas Editor To Speak At President's Annual Dinner Dance. Top Name Band Will Provide Music For Four Hours Of Dancing.

Edwin F. Abels, nationally known newspaperman and Editor of the Lawrence Outlook of Lawrence, Kansas, has been selected as the principal speaker for the President's Annual Dinner Dance, a feature of the 59th Annual Meeting of the Oklahoma State Medical Association in Oklahoma City, May 19-21. His subject will be "Sugar Pills and Quinine".

The dinner dance, marking inaugural ceremonies for Dr. Alfred R. Sugg of Ada as President, will be an event of Tuesday evening, May 20, in the beautiful Persian Room of the Skirvin Tower. Following the program there will be four hours of dancing to the South American rhythms of Henry King, one of America's top name bands and popular Decca recording artists. Now playing at Florida's famous Embassy Club of Miami Beach, he is widely known for such hits as "Siboney" and "The Peanut Vendor".

Admission to the dinner dance will be \$7.50 per person, this price including a social hour, dinner, the inaugural program, and the Henry King dance. Tickets may be purchased in advance by sending a check in the proper amount to the Oklahoma State Medical Association, 1227 Classen, Oklahoma City. The ticket sale will be limited to the capacity of the Persian Room.

Desirable accommodations continue to be available at all of Oklahoma City's modern and attractive hotels. Doctors

who have not written for reservations should write immediately to the Hotels Committee, Oklahoma State Medical Association, 1227 Classen, Oklahoma City, stating type of accommodations desired, dates of arrival and departure, and first, second and third choices of hotels. A

blank for this purpose may be found in the May issue of The Journal, which will also include the complete convention program.

In contrast to previous years the scientific program for the 1952 annual meeting will feature a single scientific session running from 9:00 A.M. to 5:00 P.M. each day in the Zebra Room of the Municipal Auditorium. The daily programs will commence with one hour of television presentations televised over private circuits from Uni-

versity Hospitals. The session will adjourn each day at 12:15 P.M. for a roundtable luncheon at the YWCA auditorium located just two blocks from the Municipal Auditorium. Afternoon sessions resume at 2:00 P.M. Immediately adjacent to the meeting room will be 68 commercial exhibits featuring products and services of firms catering to the medical profession and 20 scientific exhibits prepared by members of the Association.

Members of the Tulsa County Medical Society who will appear on the scientific program include Dr. Leonard L. Kishner, Dr. Maxwell A. Johnson, and Dr. W. Carl Lindstrom. Dr. John G. Matt of

(Continued On Page 24)



EDWIN F. ABELS

The PRESIDENT'S MESSAGE

THE BILL OF RIGHTS, 1791

Guarantees These Fundamentals

FREEDOM:

of religion — of speech and press — of home — person — property.
from excessive bail — excessive fines — cruel and unusual punishments.

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to vote — to pay taxes — to support law and order — to live peaceable — to meet financial obligations — to respect the flag — to respect public and private property — to serve on juries — to assist courts in giving evidence — to assist public agents in preventing crime and detecting criminals — to serve as needed in the armed forces and production effort — to respect the opinions of others — to help choose good leaders and representatives — to support the leaders elected — to abide by majorities — to preserve the rights of minorities — to be tolerant of religious beliefs." . . . Journal of the American Judiciary Society.

At least once each year the above should be read by every citizen, and I might add the Ten Commandments. Each day of the year, their practice will insure a healthy nation and free world.

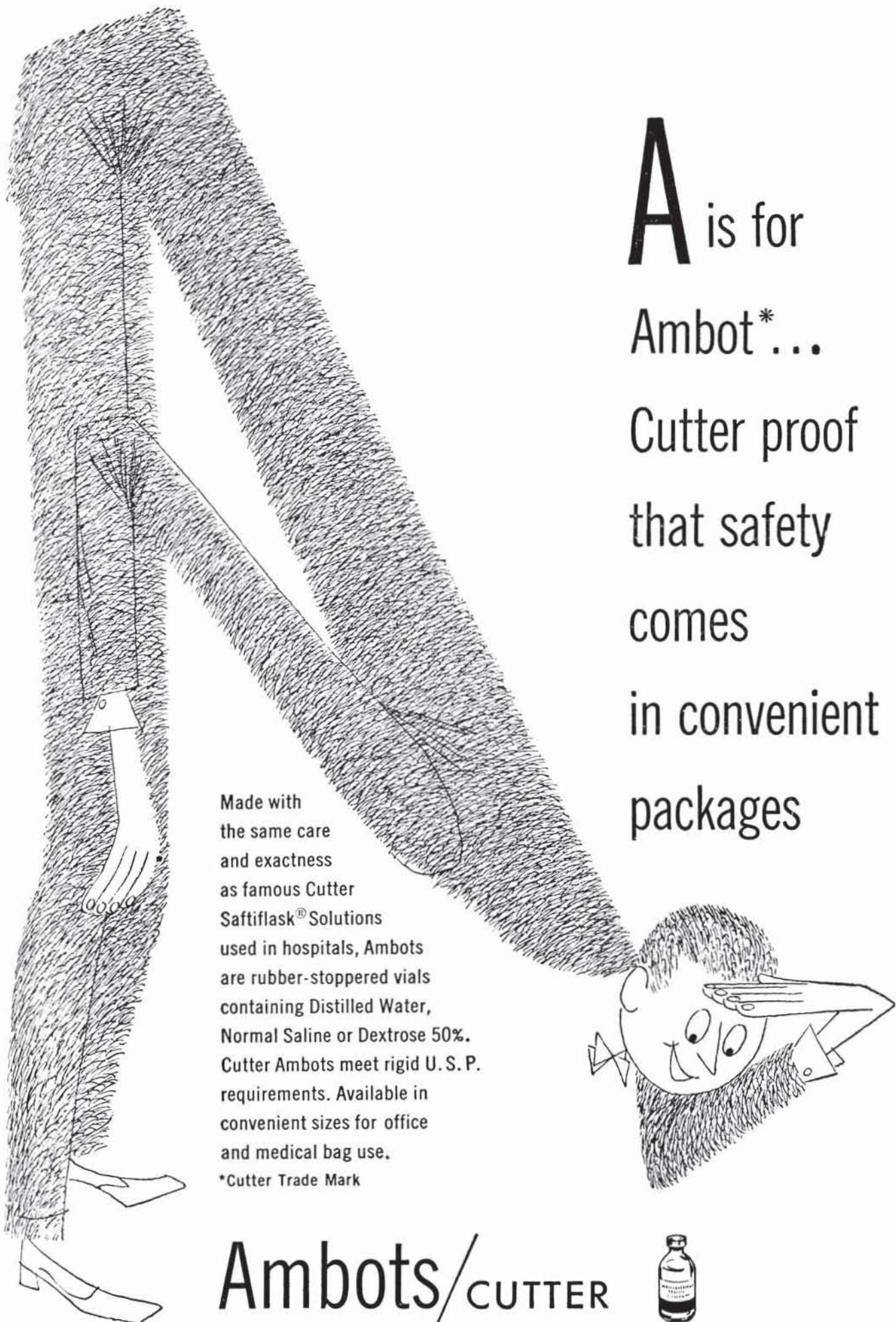
I am deeply concerned about the future of our Nation, our philosophy of government and the perpetuity of free enterprise. We seem to be adopting the practices which made the old world a "hell", and frustrates the hopes of the new.

Freedom of speech, the press and radio denied citizens; to mention religion as a remedy brings frowns, scowls and derision free from "cultured, forward looking world people." I do not believe any nation can become great and maintain greatness who abolishes freedom of religion.

I want to express thanks to many friends for showing approval of the "President's Message."

"The real test of our thinking is not so much the next election as it is the next generation."—Herbert Hoover, on his 75th birthday.

Marshall Q. Hart



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HOW DO THEY STAND ON STATE MEDICINE?

Presidential Candidates Are Divided On The Issue Of Federal Compulsory Health Insurance. Eisenhower Position Remains Uncertain.

How do the 1952 presidential candidates stand on socialized medicine?

Here's the story as reported by Leone Baxter, public relations counselor for the American Medical Association:

Senator Robert A. Taft, (Republican, Ohio), is termed "one of medicine's staunchest friends in the United States Senate". A vigorous campaigner against socialized medicine, Senator Taft opposes socialism in all forms. He voted against Reorganization Bill Number One, Federal Security Administrator Oscar Ewing's ill-fated plan to create a cabinet post for himself.

General Dwight D. Eisenhower, (Republican), as on many public issues has made no statement concerned federal compulsory health insurance. Although he has spoken out on some socialistic proposals, Ike's backers include many so-called "Fair Deal Republicans" of doubtful position on socialized medicine. It is hoped that Eisenhower will clarify his position in the coming weeks.

General Douglas A. MacArthur, (Republican), though disavowing any presidential aspiration, is still in the running. He's an outspoken opponent of socialized medicine, government controls, and all socialistic proposals.

Harold E. Stassen, (Republican), took a strong stand against socialized medicine in a series of articles published in Reader's Digest in 1950 following a study of the British system of national medicine.

Governor Earl Warren, (Republican, California), has long been an advocate of compulsory health insurance, causing miniature state medicine bills to be introduced into the California State Legislature in 1945, 1947, and 1949. A bitter critic of the medical profession, Warren is certain to sponsor national compulsory health insurance if elected. He favors virtually all of the New Deal legislation enacted in the last twenty

years, according to statements made in a recent speech, but feels he could administer it better. California doctors count him a dangerous foe and many have openly opined Truman to be superior to Warren as presidential timber.

Senator Estes Kefauver, (Democrat, Tennessee), wrote AMA officials that he did not "want anything to happen that may bring about Socialized Medicine." However, Kefauver voted for Reorganization Plan Number One and some of the other New Deal legislation.

Governor Adlai E. Stevenson, (Democrat, Illinois), failed to take a positive stand on socialized medicine in an interview in the April 14th issue of Newsweek. He expressed doubt that private and voluntary plans could do the job of lifting people over the costs of major illness, suggested further study by a government commission.

Senator Robert S. Kerr, (Democrat, Oklahoma), voted for Reorganization Bill Number One, has generally supported New Deal socialistic legislation, but has in the past disavowed favoring socialized medicine.

Of the other candidates, Senator R. B. Russell of Georgia and Senator Harry F. Byrd of Virginia, both Democrats, are vigorous opponents of socialized medicine, while Vice-President Alben Barkley remains publicly uncommitted.

DR. HOWARD M. COHENOUR has taken new professional quarters at 902 Medical Arts Building, Tulsa, for the practice of Urology.

Speakers for the University of Oklahoma School of Medicine's Postgraduate Study Course in X-Ray Diagnosis at Oklahoma City, May 2-3, include DR. WILLIAM M. BENZING, DR. WALTER E. BROWN, DR. ERNEST S. KERESKES, DR. DAVE B. LHEVINE, DR. SOL WILNER, DR. SIMON POLLACK, and DR. LUCIEN M. PASCUCCI.

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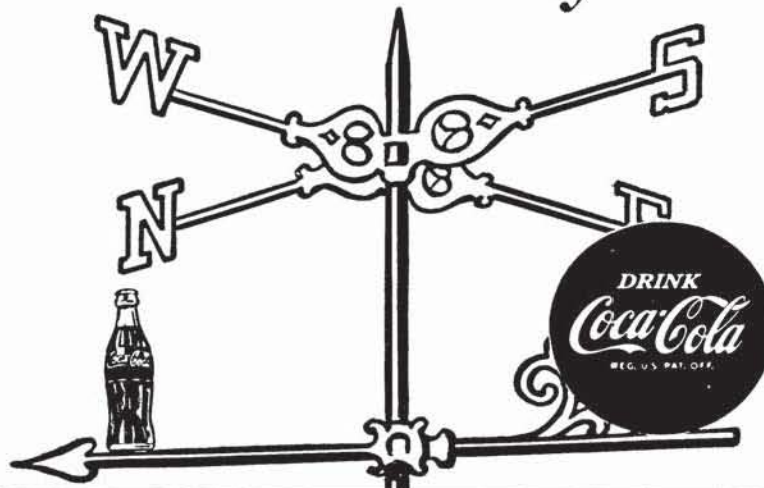
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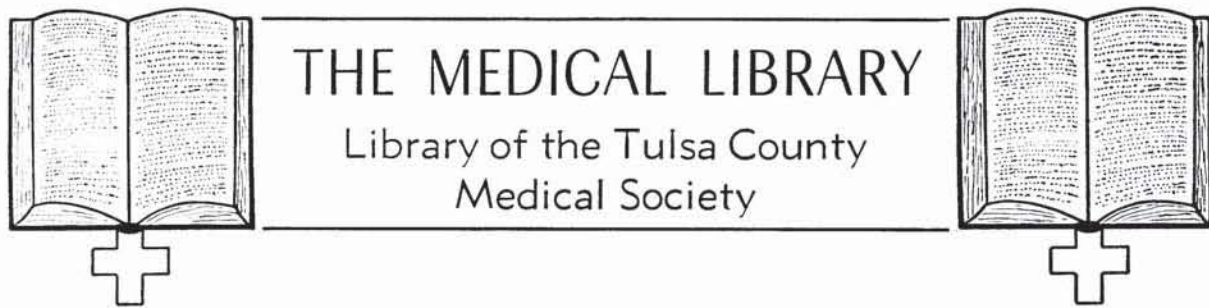
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GIFTS OF THE MONTH—:

Dr. Berget H. Blocksom. Miscellaneous issues of various journals.

Dr. James Stevenson. When Doctors Are Patients. Edited by Max Pinner, M.D. and Benjamin J. Miller, M.D., 364 pp., W. W. Norton and Company, New York, N. Y.

In the preface of this book Dr. Pinner explains that "the physician who has had no intimate subjective experience with disease is apt to underrate greatly the patient's overwhelming interest in symptoms, falsely assuming that the patient always shares with him his dominating interest in diagnosis." So he has assembled from thirty-three eminent physicians the first hand accounts of their own experiences with serious illness, describing their reactions and the ways in which they have come to terms with their disabilities.

RECENT PUBLICATIONS BY MEMBERS OF THE TULSA COUNTY MEDICAL SOCIETY—:

Dr. Maurice P. Capehart. Present Day Methods Concerned With The Relief Of Intractable Pain. Journal of the Oklahoma State Medical Association, 45:127-130 (April) 1952.

Dr. William S. Jacobs, et al. Some Therapeutic Dilemmas In Chronic Bright's Disease. Medical Clinics of North America, 36:411-417 (March) 1952.

The British Medical Journal, 1:1-80 (January 7) 1950, contains a review of "Fifty Years Of Medicine", a group of articles devoted to medical progress at the half-way mark of the twentieth century. A survey of various fields of medicine is made by a specialist in each field beginning with "Advance In Medical Therapeutics" by Sir Henry H. Dale. He writes that "in no department of knowledge and practice has (this) change, since 1900, been more conspicuous or more rapidly progressive than in the general field of medicine". One great change was the application of public funds, private endowments and organized public appeals to medical research.

A few of the other articles are "Fifty Years of Clinical Pathology", written by Sir Lionel Whitby; "Development of Psychological Medicine" by John Rickman; and "Fifty Years of Tropical Medicine" by J. S. K. Boyd.

Anyone who is interested in the great strides made in any or all fields of medicine during these fifty years will find the articles well worth reading.

The latest Revised Pages for the ten volumes of Tice's Practice of Medicine have been received recently. These revisions, together with those for Lewis' Practice of Surgery and Brennemann's Practice of Pediatrics, have been coming to the Library for many years as gifts from the Auxiliary to the Tulsa County Medical Society.

USE YOUR LIBRARY

MAY MEDICAL CALENDAR

THURSDAY, May 1st:

Blue Cross Hospital Insurance, Medical Assistants Group, quarterly premiums due and payable on this date at 1202 Medical Arts Building, Tulsa.

FRIDAY, May 2nd:

St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.

Postgraduate Study Course in X-Ray Diagnosis, Nurses Auditorium, University of Oklahoma, Oklahoma City, 9:00 A.M. Continuing through May 3rd.

MONDAY, May 5th:

Hillcrest Hospital Staff Meeting.

TUESDAY, May 6th:

St. John's Tumor Clinic, 8:00 A.M.

WEDNESDAY, May 7th:

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

FRIDAY, May 9th:

St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.

SATURDAY, May 10th:

Final date to pay quarterly premiums, Blue Cross Hospital Insurance, Medical Assistants Group.

Final date for doctors to apply for admission to Physicians and Surgeons Group, Blue Cross Hospital Insurance.

MONDAY, May 12th:

Scientific Program, Tulsa County Medical Society, The Mayo, 8:00 P.M. Program: Symposium On Peptic Ulcer. Speakers: Dr. William S. Jacobs, Dr. Dave B. Lhevine, Dr. Arthur E. Hale, and Dr. William C. Pratt.

TUESDAY, May 13th:

St. John's Tumor Clinic, 8:00 A.M.

Copy deadline for the June issue of The Bulletin.

WEDNESDAY, May 14th:

Byrne Memorial Hospital Staff Meeting.

FRIDAY, May 16th:

St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.

SUNDAY, May 18th:

House of Delegates Annual Meeting, Oklahoma State Medical Association, Municipal Auditorium, Oklahoma City, 2:00 P.M.

MONDAY, May 19th:

1952 Annual Meeting, Oklahoma State Medical Association, opens at Municipal Auditorium Oklahoma City, 9:00 A.M. Continues through Wednesday, May 21st.

TUESDAY, May 20th:

Medical Assistants Society, Michaelis Cafeteria, 6:30 P.M.

St. John's Tumor Clinic, 8:00 A.M.

THURSDAY, May 22nd:

Doctor's Day, Tulsa Chamber of Commerce Public Affairs Forum, 12:00 Noon. Speaker: Dr. F. J. L. Blasingame, Wharton, Texas.

FRIDAY, May 23rd:

St. John's Tumor Clinic, Clinical Conference, 8:30 A.M.

MONDAY, May 26th:

St. John's Hospital Staff Meeting. Due to the Oklahoma State Medical Association convention on May 19th, the meeting is postponed one week to May 26th.

TUESDAY, May 27th:

St. John's Tumor Clinic, 8:00 A.M.

FRIDAY, May 30th:

St. John's Tumor Clinic, 8:30 A.M.

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BLOOD CENTER NEWS

Tulsa County Red Cross Blood Center
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DISTRIBUTION & REPLACEMENT REPORT

Hospital	Bloods Used	Replac- ments	% Repl.
St. John's	699½	397	57%
Hillcrest	216½	166	77%
Osteopathic	63	48	76%
Byrne	42½	19	45%
Mercy	7	6	86%
Flower	12	15	125%
Moton	3	1	33%
Broken Arrow	11	0	0%
Other	3	6	200%
Totals	1,057½	658	61%

During the month of March, 1952, a total of 1,053 donor units of blood were drawn at the Tulsa County Red Cross Blood Center as contrasted with 775 for March, 1951. A total of 2,571 donor units have been drawn since the beginning of this year. During the same period in 1951 a total of 2,176 donor units were drawn. This marked increase is attributed in part to a relaxation in the donor diet restrictions (as detailed in the April issue of The Bulletin) and to a greater recruiting effort.

Mrs. Mamee Ford, 65, wife of Dr. H. W. Ford, died April 19th of a heart attack at the home of her son, Dr. H. C. Ford of Miami. President of the Auxiliary to the Tulsa County Medical Society in 1950-51, she had long been an active leader in Auxiliary affairs.

GOING TO THE AMA?

The 101st Annual Meeting of the American Medical Association will be held in Chicago, June 9-13, 1952. Complete details appear in the April 12th issue of the AMA Journal. Members of the Tulsa County Medical Society planning to attend should write for hotel reservations at once by addressing Dr. Fred H. Muller, Room 1707, 105 West Madison Avenue, Chicago, using the official form found in the Journal.

FOUR TULSA DOCTORS TO APPEAR ON MAY 12 PROGRAM

The Tulsa County Medical Society will conclude its Spring series of scientific programs on Monday, May 12, 1952, at The Mayo with a symposium on the diagnosis and treatment of peptic ulcer. Dr. Albert W. Wallace, Chairman of the Program Committee, will be moderator for a panel discussion.

Participants in the symposium will include:

Dr. Dave B. Lhevine, radiologist, who will discuss roentgen diagnosis of peptic ulcer.

Dr. William S. Jacobs, internist, who will discuss medical management.

Dr. Arthur E. Hale, internist, who will discuss symptomology.

Dr. William C. Pratt, surgeon, who will discuss surgical management.

A brief business meeting will follow the scientific programs. In accordance with established policy, the Society will suspend its monthly meetings throughout June, July, and August, resuming on Monday, September 8, when Dr. Philip Thorek, Chicago surgeon, will discuss "The Acute Abdomen".

DR. JAMES B. THOMPSON was guest speaker for the Rogers-Mayes County Medical Society on April 9th.

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EDITORIAL

A CHALLENGE TO MEET

American Medicine has pinned most of its hopes of avoiding socialized medicine upon voluntary prepaid forms of hospital and limited medical care insurance. It has been a major factor in fostering and developing the Blue Cross and Blue Shield plans over the nation and has freely lent its support to private insurance carriers offering comparable benefits to its policyholders. The phenomenal development of Blue Cross and Blue Shield in the last decade has undoubtedly been a major reason for the defeat of the various Wagner-Murray-Dingell types of legislation periodically proposed to the Congress. The ability of the profession to point to the extent of private medical and hospital care insurance, as a substitute for federal medicine, has been a telling argument in itself.

Blue Cross and Blue Shield have not been without their problems, however. To conscientious administrators of the various plans the headaches of organization have been replaced by new problems which are a product of growth and patient and doctor acceptance. Unfortunately, some of these problems, particularly in more recent years, have stemmed either directly or indirectly from the medical profession. The offenders are not numerically great; like the offending segments of all social groups they are in a small minority. Yet, their damage and failure to recognize the mutual responsibilities of each member of the group results in harm to all. And as with all offenders, they can be and must be disciplined by the group as a whole. So it is with our own Blue Cross and Blue Shield; the abuses perpetrated upon them by the few must be corrected by concerted action of the whole.

This is not the first time these columns have spoken of this problem. The subject has long been of concern to the Tulsa County Medical Society as it has to medical groups over the nation, each of whom

encounters much the same problem. In specific terms, the major complaints are:

(1) Failure of doctors to strictly limit the hospital stay of Blue Cross policyholders to a period of medical need; failure to perform this obligation leads to abuse of Blue Cross privileges which eventually increase on all premium rates, overcrowd hospital facilities, and impair the basic purpose of the plan.

(2) The increase of total fees charged Blue Shield patients because the patient has insurance coverage, thus reducing patient confidence in the plan.

(3) A tendency to encourage surgery of questionable value because hospital and surgical costs are not a major factor to a protected patient.

(4) A tendency to utilize in-hospital benefits as a favor to the patient or as a routine assist to diagnostic procedure.

(5) Falsification of diagnosis to enable patients to receive Blue Cross and Blue Shield benefits to which they were not otherwise entitled.

These are harsh charges applicable to only the smallest few, occurring at best in isolated instances. Yet, spread over a sizeable medical profession serving millions of persons the total effect is tremendous. It has been suggested that organized medicine, through its Grievances Committee, shine the spotlight upon such abuses, letting the chips fall where they may. The Tulsa County Medical Society has already invited the Blue Cross-Shield Plan to bring such cases to its attention, and this has been done now for a period of more than two years.

There is something fine and useful in Blue Cross-Blue Shield, something which has been of inestimable value to medicine and to the public. It has materially aided our economic life, it has given us a new weapon in the fight to preserve our basic concepts of freedom in the practice of medicine. Let this not be ruined by the abuses and the carelessness of the few. Rather, let us take positive steps to eliminate these gross injustices and permanently insure the successful operation of Blue Cross and Blue Shield. It is your challenge, doctor!

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NEW MEMBERS

The following physicians are applicants for membership in the Tulsa County Medical Society:

Samuel L. French, M.D. 412 Tri-State Building, Tulsa. Medical Degree, University of Maryland Medical School 1943. Interned University Hospital, Baltimore, Maryland. United States Army Medical Corps, 1944-47. Assistant Resident in Pathology, Kennedy Veterans Hospital, Memphis, Tennessee, 1947-48; Resident in Orthopedics, Kennedy Veterans Hospital, 1948-51; Resident in Orthopedics, Arkansas Children's Hospital, 1951-52. Specialty, Orthopedic Surgery. Recommended by Dr. John E. McDonald and Dr. John C. Dague.

Charles Bate, M.D. 352½ North Greenwood, Tulsa. Medical Degree, Meharry Medical College, 1938. Interned George Hubbard Hospital, 21

months. In private practice, Tulsa, Oklahoma, 1940 to date. Specialty, General Surgery. Recommended by Dr. F. L. Flack, Dr. Averill Stowell, and Dr. Emanuel N. Lubin.

James H. Neal, Jr., M.D. 1944 North Denver, Tulsa. Medical Degree, University of Oklahoma School of Medicine, 1943. Interned St. Luke's Hospital, Duluth, Minnesota, one year. United States Navy Medical Corps, 1944-46; Resident in Surgery, St. Joseph Hospital, Lancaster, Pennsylvania, 1946-50; Preceptorship in General Surgery. Diplomate of the American Board of Surgery. Recommended by Dr. H. D. Murdock and Dr. James H. Neal.

George R. Horton, M.D. 1151 South Peoria, Tulsa. Medical Degree, Indiana University School of Medicine, 1942. Interned St. Vincent Hospital, Indianapolis, Indiana, 16 months. Formerly in practice, Fort Wayne, Indiana. Specialty, Urology. Recommended by Dr. Joseph Fulcher and Dr. Ernest R. Kerekes.

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DR. PAUL C. BENTON was guest speaker for the Council of Jewish Women on April 9th.

DR. JAMES B. THOMPSON and DR. WALTER E. BROWN conducted a Mobile Cancer Detection Clinic at Jay on April 3rd.

Named as new delegates to the Tulsa Council of Social Agencies are DR. W. D. HOOVER, DR. MARSHALL O. HART, DR. ROBERT E. FUNK, and Jack Spears, Executive Secretary.

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ANNUAL MEETING

(Continued From Page 9)

Tulsa will be Chairman of the Roundtable Luncheon of May 21st.

The University of Oklahoma School of Medicine Alumni Association will hold its annual meeting on Sunday, May 18, at the Medical School Auditorium. Dr. Charles G. Stuard of Tulsa, President of the Alumni Association, will preside. The meeting is open to all visiting physicians and their wives and will last approximately one hour. Highlights of the program will include the administration of the Hippocratic oath to the graduating seniors and a report on the progress of the Oklahoma Medical Research Foundation. Following the program official reunions will be held for the classes of 1942, 1932, 1922, and 1912.

Other convention features will include:

House of Delegates meeting, Sunday, May 18, 1952, at 1:00 P.M., Hall of Mirrors, Municipal Auditorium. Representing the Tulsa County Medical Society as delegates will be Dr. Charles G. Stuard, Dr. J. D. Shipp, Dr. Walter E. Brown, Dr. John G. Matt, Dr. Marshall O. Hart, Dr. Walter S. Larrabee, Dr. W. D. Hoover, Dr. Robert E. Funk, Dr. Felix R. Park, Dr. Berget H. Blocksom, and Dr. James S. Chalmers.

Council meeting, Sunday, May 18, at 10:00 A.M., Municipal Auditorium.

Oklahoma Rheumatism Society annual meeting, Sunday, May 18, at the Biltmore Hotel.

Organizational meeting of the Oklahoma Chapter of the American Diabetes Association, Tuesday, May 20, 8:00 A.M., The Biltmore.

Past-President's Breakfast, Monday, May 19, Skirvin Hotel.

Women's Auxiliary to the Oklahoma State Medical Association, annual meeting, May 18-21.

Golfing for visiting doctors at leading Oklahoma City country clubs.

All doctors must present their 1952 membership card in the Oklahoma State Medical Association when registering. Visiting physicians from other states, interns, members of the armed forces, and residents will be accorded guest privileges.

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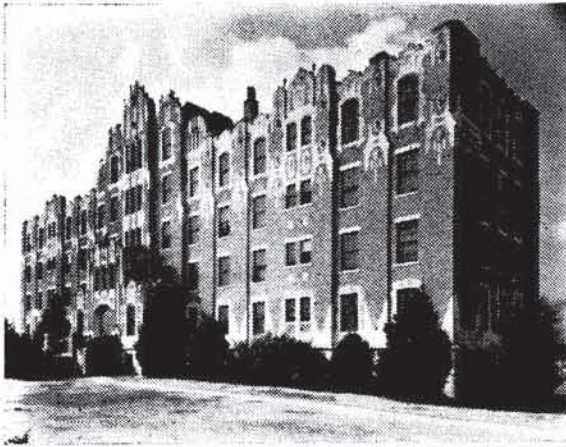
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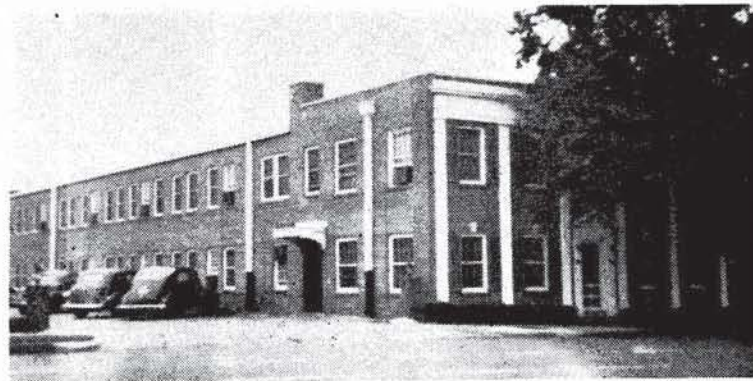
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