

August, 1953

THE BULLETIN

of the Tulsa County Medical Society

IN THIS ISSUE

Guest Editorial By Maj.-Gen. George E. Armstrong,
The Surgeon General, United States Army



Fall Schedule of Scientific Programs



Details of Twenty Point Public Relations Program
Announced By Public Policy Committee



The Medical Library

Vol. 19

No. 8



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Bibliography

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 4. Soifer, A.: Quart. Rev. Int. Med. & Dermat. 8:1, 1951.
 5. Johnson, S. M., and Bringe, J. W.: Arch. Dermat. & Syph. 63:768, 1951.
- *U.S. Pat. #2,505,681.

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With The Editor . . .

The Tulsa Academy of General Practice is to be highly complimented for its first Public Forum conducted June 25th in cooperation with the Tulsa World . . . Over 700 Tulsans crowded into Central High School's non-air conditioned auditorium to hear 80 minutes of useful information on poliomyelitis prevention and treatment . . . The event was a solid success, thanks in large measure to the five panelists—Drs. Paul C. Benton, Ian MacKenzie, Logan A. Spann, George R. Russell, and Marshall O. Hart—whose informal, sincere, informed, and humor-spiced presentations were excellent . . . The results clearly indicate the value of public education projects by organized medicine . . . Of similar value are the interesting telecasts of the Tulsa County Heart Association and the Tulsa County Red Cross Blood Center . . . These projects do much to demonstrate the progress and capabilities of American Medicine. . . The Board of County Commissioners last month recommended approval of an enlarged operating budget for the Tulsa County Medical Clinic for the fiscal year beginning July 1st . . . If approved by the County Excise Board the budget will permit purchase of a new x-ray unit, additional laboratory and office equipment, and long overdue pay increases for the nursing personnel . . . Request was based on studies of Clinic needs by Dr. Robert E. Funk's Clinic Committee . . . County Commissioners Caffey, Bailey, and Hardesty have a genuine interest in maintaining high standards of medical care at the Clinic, and are ever-ready to meet with Society officials to discuss Clinic problems . . . The revised Doctor Draft law will probably release only one Tulsan from service . . . The Military Affairs Committee estimates, on the basis of present information, that at least four and possibly more Tulsa doctors in Priority Three will be called to active duty by the end of 1953 . . . Dr. Carl F. Simpson will be missed . . . He was one of that happy breed of men who find life's greatest pleasures in friendship and kindness to his fellow man.

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THE BULLETIN

OF THE

TULSA COUNTY MEDICAL SOCIETY

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Vol. 19

TULSA, OKLAHOMA, AUGUST, 1953

No. 8

EXPANDED PUBLIC POLICY PROGRAM SET

Twenty-Point Public Relations Program of Tulsa County Medical Society Will Emphasize Capabilities of Tulsa Medical Profession. Plans Drawn for Television Series.

In a report to the Board of Trustees, the Public Policy Committee last month outlined a twenty-point program of continuing medical public relations for the Tulsa County Medical Society.

Dr. Hugh Perry, Chairman, said most of the projects already are under way and would require several months to complete. Portions of the program are part of the Committee's permanent program of public relations begun in previous years and are to be continued as long as the need exists. Other desirable projects may be added from time to time, Dr. Perry stated.

The program encompasses a wide range of public relations activities. Emphasis will be placed upon projects which demonstrate the capabilities of Tulsa Medicine to the general public. As in the past, the program will utilize press, radio, television, public speaking, civic affairs participation, and printed literature as principal media.

The twenty points are outlined below:

1. *Develop and present to the Society plans for an Emergency Call System.* Following a study of plans whereby the public may obtain a doctor under emergency conditions as are now in operation in other American cities, a sub-committee will formulate a specific plan tailored to local needs. It is expected this recommendation will be made late in the Fall of 1953. Dr. Edward J. McCormick, President of the American Medical Association, in his recent inaugural address called such services a "Number One

Must" of every county medical society in America. Although a proposal for such a system was defeated in the Society three years ago, interest in the project has been stimulated more recently by their widespread success elsewhere.

2. *Tulsa "Progress Week" Exhibit.* As part of a project of the Tulsa Chamber of Commerce illustrating the progress of Tulsa in the past fifty years, an exhibit showing progress in medicine will be constructed for exhibition in a downtown store window. Presently set for September 19-26, "Tulsa Progress Week" expects to utilize several hundred exhibits of industry and the professions throughout the City.

3. *Tulsa County Health Survey.* In cooperation with the Health Division of the Tulsa Council of Social Agencies, a proposed health survey for Tulsa County will be carried through to completion. Purpose of this project is obtain useful information as to the general public's attitude on various health and medical problems. This survey has been underway for several weeks under the direction of a steering committee headed by Dr. John G. Matt, President of the Tulsa County Medical Society. A tentative questionnaire has been completed and submitted to statistical advisors for study. It will be made later this year and results tabulated shortly thereafter. The Public Policy Committee foresees that much of the information obtained in this survey will be of value to the Society in planning its future public relations program.

4. *Annual Press Dinner.* The Society will be hosts to principal news editors and reporters of Tulsa newspapers, press services, radio and television stations similar to the press dinner held last year and is for the purpose of expressing appreciation to the press for its past cooperation.

5. *Review the effectiveness of the Press Code developed last year and now in operation.* The Public Policy Committee will continue its periodic meetings with the Press Liaison Committee (a group representing the news staffs of each daily newspaper, Television Station KOTV, and the Tulsa Association of Radio Newscasters) to determine the effectiveness of the Press Code. The latter is a working agreement now in effect between the Medical Society and the major hospitals whereby specific news contacts are set up for each hour of the day. The Committee will act to correct any deficiencies in the operation of the plan.

6. *Develop and supply to the press a series of monthly feature articles on various phases of the medical profession and medical care in Tulsa.* Information suitable as the basis of a feature article will be supplied to staff writers of each newspaper. The Committee will also assist the newspaper in obtaining suitable photographs to accompany the story. Each story will be institutional in type. The first will deal with the excellent record of Tulsa hospitals, obstetricians, and pediatricians in the delivery and care of the newborn.

7. *Expand the Society's Speakers Bureau.* A minimum of twenty-five physicians are being sought to fill speaking engagements before various civic, professional, church, and social groups in Tulsa. A prospectus listing available speakers and their subjects will be sent to major groups in the City and efforts made to secure speaking engagements. The Committee hopes to have one medical program before each civic club assembly.

8. *Develop a liaison program with Tulsa Labor.* Acting on instructions of the Board of Trustees, the Public Policy Committee will meet with Tulsa labor officials to study medico-labor problems.

A special sub-committee yet to be appointed will be assigned this task. Largely exploratory in nature, the program seeks to improve public relations between medicine and labor and to develop solutions to mutual problems.

9. *Make available to new residents of Tulsa information about the medical and hospital facilities of Tulsa.* This will be accomplished through informative literature mailed directly to new residents. The literature will suggest the selection of a family doctor prior to sickness and will also give information about how to select a reliable physician. The Committee is now studying samples of similar brochures in use in other major cities.

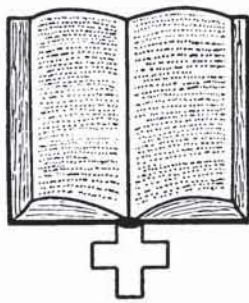
10. *Develop a pilot series of ten television programs.* The Committee will arrange specific details of a series of ten proposed television programs, utilizing available films and television production packets provided by the American Medical Association. The programs will be varied in character and include some of the public forum type with panel discussants. The completed details will be presented to Television Station KOTV for consideration as a sustaining program.

11. *Spot American Medical Association transcribed medical broadcasts on Tulsa radio stations as possible.* Complete information about the AMA's many series of programs are being made available to station directors. These programs are scientific, educational, and musical in character, and do not deal with medical politics or controversial issues. Most were originally aired on national radio networks.

12. *Create a high school and college "Pre-Med Club" program.* Each Pre-Med Club at Tulsa high schools and the University of Tulsa will be offered speakers on requested subjects and to answer questions about the medical profession. An effort will be made to acquaint these prospective doctors with accurate information about medical schools, postgraduate training requirements, conditions of practice, etc.

13. *Inaugurate an indoctrination program for new members of the Society.* Each new applicant of the Society will

(Continued on Page 22)



THE MEDICAL LIBRARY

Library of the Tulsa County
Medical Society



Miss Irma A. Beehler, *Librarian*

GIFTS OF THE MONTH—:

- Arthritis and Rheumatism Foundation, Tulsa Chapter.** Lewin, Philip: *The Knee and Related Structures*. 914 pp., illustrated (part colored), Lea & Febiger, Philadelphia, Pennsylvania, 1952.
- Dr. Henry S. Browne.** A contribution to the Medical Library Endowment Fund in memory of Dr. Carl F. Simpson.
- National Foundation For Infantile Paralysis.** Collected Reprints of the Grantees. Volume 13, Parts 1 and 2, 1952.

RECENT ACQUISITIONS—:

- Armed Forces Medical Library Catalog, 1952.** (Part One: Authors; Part Two: Subjects). Library of Congress, Washington, D. C., 1953.
- Gross, Robert E.:** *The Surgery of Infancy and Childhood*. 1,000 pp., illustrations by Etta Piotti. W. B. Saunders Company, Philadelphia, Pennsylvania, 1953.

PUBLICATIONS BY MEMBERS OF THE TULSA COUNTY MEDICAL SOCIETY—:

- Dr. William M. Benzing, Jr.** Wilms' Tumor of Infancy and Childhood. *Journal of the Oklahoma State Medical Association*, 46:173-177 (July) 1953.
- Dr. Eugene S. Cohen, et al.** Effects of Pregnancy on Ulcerative Colitis. *Journal of the International College of Surgeons*, 19:763-768 (June) 1953.
- Dr. Leo Lowbeer.** A review of Bone Tumors by Louis Lichtenstein, M. D., C. V. Mosby Company, St. Louis, Missouri, 1952. *Journal of the Oklahoma State Medical Association*, 46:202 (July) 1953.
- Dr. Marque O. Nelson.** A review of the Scalp in Health and Disease by Howard T. Behrman, M. D., C. V. Mosby Company, St. Louis, Missouri, 1952. *Journal of the Oklahoma State Medical Association*, 46:202 (July) 1953.

The Librarian recently returned from the annual meeting of the Medical Library Association in Salt Lake City, Utah, in June. The medical libraries of the West alternate with those of the East in entertaining these meetings. The attendance was excellent at Salt Lake City although those in the East attract more registrants due to the greater number of libraries in that section of the country. An interesting and useful program was highlighted by a special presentation of the history of the Mormon libraries, especially the amazing Geneological Library where a very large percentage of family names throughout the world can be traced in a short time. Several delightful trips were arranged for the group, adding to the enjoyment of the convention. The most interesting of these was to an open copper pit mine. This trip continued up a canyon to Brighton where a picnic ground dotted with snow banks looked especially wonderful to a drought-parched Oklahoman.

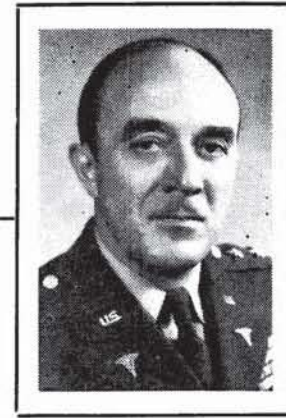
The Medical Library Association is doing some fine work in developing medical libraries over the nation, particularly through its mutual exchange program which permits members to fill gaps in journal files. The medical libraries are not only increasing in size but in number as well. The 1954 meeting is to be held at Washington, D. C., in the early part of June. Hotel Statler will be headquarters. The Library of the Tulsa County Medical Society has been placed on the nominating committee of the county group. It was a tiny post to fill but gave the Library some national recognition.

USE YOUR LIBRARY

Guest Editorial

A Special Message

*By Major General George E. Armstrong,
Surgeon-General, United States Army*



The assignment and utilization of medical officers by the Army Medical Service has been of great interest to many physicians who have served on active duty in the past and will be of interest to many who will be called to active service in the future. For this reason, I should like to avail myself of this opportunity to discuss this problem.

In 1948 the Army published its personnel policy, which stated, among other things, that the individual is the most important single asset in the Army. Objective of the policy is to improve daily working relationships by recognizing the dignity and importance of the individual. The Army Medical Service implements this policy by efficiently utilizing every officer's abilities, providing opportunities for him to reach his highest proficiency.

In the Army, however, the greatest demand is for the general practitioner. Our need for the general medical officer is much greater in proportion to those qualified in the various specialties than is the case in the average community. At present, we have well over 500 officers on duty who have been certified by one of the American specialty boards. A similarly high number are Board qualified, and additional thousands are well on their way toward Board status. Obviously, then, many of those with specialized skills must be assigned to general medical officer duties. Perhaps one of the best explanations of this continuing problem comes from one of my civilian consultants, a professor in one of the foremost medical colleges in the nation, who has written one of his colleagues:

"I can only assure you that the Army is making every effort to place physicians in assignments to which they are best adapted. This may sometimes not be wholly in the exact specialty in which the individual has been trained, but the duty will be almost entirely professional in nature and with far less administrative work than you or I have to do. In the case of our younger men here, who are being called to active duty, I make it clear to them that there are certain jobs which can be done more effectively by people under thirty-five, and that the Army is hard put to find such people at the present time. In the case of one of our men, who is under thirty, and has had two years of specialty training, I told him frankly that I thought that his best job would be with the troops, because he probably could do more real good there than in any other place, and he is young enough to stand the gaff physically.

"Specialty medical care is, of course, important, but less so when we are in active combat. I have the greatest sympathy for these young men who are going on active duty and want to continue their specialty professional career, but it is simply not always possible."

Recently, in order to replace physicians being released from active duty upon completion of their tours, physical standards for medical officers have been lowered so that now some physicians who have previously been rejected for military service may be called to active duty. Obviously, physicians in this category are not qualified for strenuous field duty in a combat area. Hence, they will be assigned to general and post hospitals in this country where they will be able to render valuable service to the Army. For the most part, these men will be assigned according to their specialties. On the other hand, such assignment will detract from the number of such assignments available to younger and more physically qualified men.

During recent years the utilization of medical officers has hewed more to the professional line than ever before. During World War II medical officers were often called upon to devote the greater part of their time to administrative duties despite the existence of the old Medical Administrative Corps. Since 1947, however, when the present Medical Service Corps was organized, medical officers have been relieved, almost without exception, of duties dealing with administration, training and the procurement of supplies. During World War II there were three physicians on duty for each administrative officer. Today there is approximately one Medical Service Corps officer on duty for each medical officer, permitting the latter to devote his undivided time to professional duties.

Contrary to World War II practice the medical officer will no longer find himself in a replacement pool without professional duties to perform. No longer does the medical officer have thrust upon him such activities as "courtesy patrols" or the taking of inventories in a post exchange.

During World War II upon the activation of a combat unit for training the full complement of professional officers was assigned immediately. This practice has been abandoned. The professional complement of a unit is not now assigned until the unit has been trained and is prepared to move overseas or go into combat.

It is quite obvious that great strides have been made in the utilization of medical officers during recent years. With this continued support, understanding and cooperation of the medical profession, I am confident that we will continue to maintain a most healthy and well cared for Army to the satisfaction of all concerned.

Sincerely,

A handwritten signature in black ink that reads "George E. Armstrong". The signature is written in a cursive, flowing style with a large initial "G" and a prominent "A".

George E. Armstrong
Major General
The Surgeon General

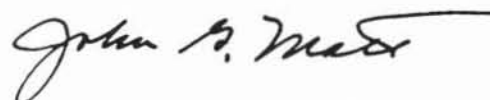
PRESIDENT'S PAGE

I am most concerned over a number of important trends which have recently developed in connection with malpractice suits against physicians. Of primary significance is the tremendous increase in the number of such suits (four times as many today as ten years ago), not only in Oklahoma but in all states as well. Of equal concern is the growing tendency of lay juries to award substantial and frequently staggering amounts of damages. A third trend is in the legal thinking of our courts wherein the professional judgment of the physician appears to have less and less importance; some recent legal decisions would indicate that our judges and juries consider the patient more competent to make medical decisions than the highly trained doctor. Finally, despite all efforts of organized medicine to educate its members against careless commentary on the work of other physicians, the motivations of malpractice suits seem to lie in increasing number with doctors themselves.

The results of these trends are already becoming serious. The necessity of paying heavy damages plus the costs of legal investigation and defense has already led to marked increases in malpractice insurance premiums; further increases are not unlikely. Professionally, we are placed more and more in a position of using those techniques and procedures which offer us the smallest legal danger rather than those which offer the patient the best chances of successful treatment. It is a contradiction to the time-established confidence of the doctor-patient relationship.

The most serious aspect of the problem is the lack of interest which the average doctor has in the matter. We continue to make the same errors over and over and seldom profit by experience. I must seriously urge that every one of you make a serious study of the problems of malpractice, its personal potentialities and its overall importance to the Medical Profession. Only in that way can we begin to equip ourselves to work towards a solution.

Sincerely,



President



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FALL SCHEDULE OF PROGRAMS ANNOUNCED FOR SOCIETY

Four nationally known medical personalities will headline the fall schedule of scientific medical programs for the Tulsa County Medical Society, Dr. S. C. Shepard, Chairman of the Program Committee, has announced.

The series will open on Monday, September 14, when members will be guests of the Junior League Childrens Hospital to inspect its recently completed new wing. The guest speaker for the evening will be Dr. George G. Deaver, Clinical Professor of Rehabilitation and Physical Medicine, New York University, New York, N.Y. One of the worlds best known authorities in the field of rehabilitation and physical medicine, Dr. Deaver will speak on a subject to be announced later.

On Monday, October 12, the Society will hold its first Annual Founders Day Clinic with a program devoted to the management of hypertension. This special program, prepared under the direction of the Postgraduate Study Committee, will be the first of an annual series honoring the founders of the Society. While this year's Clinic will be in the evening only, future Clinics may be one or more days in length. Following a buffet dinner, members will hear two guest speakers this year. Dr. Henry A. Schroeder, Associate Professor of Medicine, Washington University School of Medicine, St. Louis, Missouri, will discuss the medimal management of hypertension. A second guest speaker, yet to be selected, will follow with a discussion of the surgical aspects.

An unusual program is planned for Monday, November 9, when Dr. George J. Thomas, Professor of Anesthesiology, University of Pittsburgh School of Medicine, Pittsburgh, Pennsylvania, will give a clinical demonstration of the safeguards against explosion of anesthetic agents in operating and delivery rooms. Dr. Thomas has given this demonstration in all parts of the United States using actual operating room equipment. He illustrates methods by which operating room explosions of anesthesia materials do occur and demonstrates how they can be effectively prevented.



CARL F. SIMPSON, M.D.
1900-1953

Dr Carl F. Simpson, 53, prominent Tulsa obstetrician and former Secretary-Treasurer of the Tulsa County Medical Society, died June 22, 1953, following a heart attack at his home.

Born in Marietta, Ohio, Dr. Simpson came to Tulsa with his parents in 1911. He graduated from Central High School of Tulsa, attended the University of Pennsylvania, and in 1926 received his medical degree from the University of Louisville. He entered practice in Tulsa shortly thereafter and specialized in obstetrics and gynecology.

Dr Simpson served five terms, 1930-34, as Secretary-Treasurer of the Tulsa County Medical Society. He was formerly Chief of Staff at St. John's Hospital of Tulsa and was a member of Beta Theta Phi and Alpha Kappa fraternities.

Services were held June 25th at the First Presbyterian Church. Survivors include the widow and two daughters.

NEW APPLICANTS

The following physicians have been recently elected to membership in the Tulsa County Medical Society:

Ernest W. Reynolds, Jr., M.D. Springer Clinic, 604 South Cincinnati, Tulsa. Medical degree, University of Oklahoma School of Medicine, 1946. Interned Boston City Hospital, 1946-47. Captain, United States Army Medical Corps, 1947-49. Resident in Internal Medicine, Grady Memorial Hospital, Atlanta, Georgia, 1949-50. Research Fellow, University of Oklahoma School of Medicine, 1950-52. Resident in Internal Medicine, University of Michigan Hospitals, Ann Arbor, Michigan, 1952-53. Specialty, Internal Medicine. Recommended by Dr. E. W. Reynolds and Dr. Hugh L. Boyd.

Paul K. Heerwagen, Jr. M.D. Collinsville, Oklahoma. Medical Degree, University of Arkansas School of Medicine, 1952. Interned Hillcrest Memorial Hospital, Tulsa, 1952-53. General Practice. Recommended by Dr. John G. Matt and Dr. William R. Turnbow.

Robert Lee Imler, Jr., M.D. 502 Medical Arts Building, Tulsa. Medical Degree, Jefferson Medical College, Philadelphia, 1945. Interned Jefferson Hospital, 1945-46. Captain, United States Army Medical Corps, 1946-48. Resident in General Surgery, Hillcrest Memorial Hospital, Tulsa, 1949. Resident in Neurosurgery, University Hospitals, Iowa City, Iowa, 1950-53. Specialty, Neurosurgery. Recommended by Dr. Maurice J. Searle and Dr. F. L. Flack.

Robert G. Perryman, M.D. Glass-Nelson Clinic, 2020 South Xanthus, Tulsa. Medical Degree, University of Oklahoma School of Medicine, 1946. Interned University Hospitals, Oklahoma City, 1946-47. Captain, United States Army Medical Corps, 1947-49. Resident in Surgery, St. Vincent's Hospital, Toledo, Ohio, 1949-50. Resident in Surgery, Cleveland Clinic, Cleveland, Ohio, 1950-53. Specialty, General Surgery. Recommended by Dr. Fred A. Glass and Dr. Hays R. Yandell.

The following physicians are applicants

for membership in the Tulsa County Medical Society:

Thomas H. Fair, M.D. Springer Clinic, 604 South Cincinnati, Tulsa. Medical Degree, University of Oklahoma School of Medicine, 1947. Interned St. Vincent's Hospital, Indianapolis, Indiana, 1947-48. Resident in Internal Medicine, St. John's Hospital, Tulsa, 1948-50. Lt. (J.G.), United States Navy Medical Corps, 1950-52. Resident in Internal Medicine, Cleveland Clinic, Cleveland, Ohio, 1952-53. Specialty, Internal Medicine. Recommended by Dr. Donald L. Mishler and Dr. Vincel Sundgren.

Raymond W. Bryant, M.D. 507 Medical Arts Building, Tulsa. Medical Degree, University of Arkansas School of Medicine, 1952. Interned Baltimore City Hospital, Baltimore, Maryland, 1952-53. General Practice. Recommended by Dr. Paul N. Atkins, Jr. and Dr. Roger Q. Atchley.

Participants in the physical examination program for the Tulsa Area Boy Scout Camp at Locust Grove, Oklahoma last month were DR. EDWARD M. SCHNEIDER and DR. MARION K. LEDBETTER.

DR. SAMUEL A. CAPEHART has taken new professional offices at 1918 North Oxford, Tulsa, for general practice.

DR. JOE L. SPANN is now serving with the United States Navy Medical Corps at Elgin Field, Florida.

DR. WILLIAM J. OSHER has taken new professional offices at 912 Medical Arts Building, Tulsa, for the practice of Internal Medicine.

DR. KENNETH LLOYD WRIGHT has been released from military service after two years with the United States Army Medical Corps, including an assignment in West Germany, and is now completing a two-year residency in Anesthesiology at the Ochsner Clinic Foundation and Hospitals, New Orleans, La.

DR. JOHN D. CAPEHART has moved into an attractive new clinic building at 543 East Apache.

DR. S. C. SHEPARD has returned from a fishing expedition in Northern Canada.



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AUGUST MEDICAL CALENDAR

SATURDAY, August 1st:

Blue Cross Hospital Insurance, Medical Assistants Group, quarterly premiums due and payable at B-9 Medical Arts Building, Tulsa. Final date for payment, August 10, 1953.

MONDAY, August 3rd:

Hillcrest Hospital Staff Meeting, 8:00 P. M.

TUESDAY, August 4th:

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

FRIDAY, August 7th:

Speakers Bureau Sub-Committee Meeting, Tulsa County Medical Society, B-9 Medical Arts Building, 1:00 P.M.

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

MONDAY, August 10th:

Board of Censors Meeting, Tulsa County Medical Society, B-9 Medical Arts Building, 1:00 P.M.

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

No Tulsa County Medical Society meeting on this date. Next regular meeting, Monday, September 14, 1953, Junior League Hospital.

TUESDAY, August 11th:

Press Relations Sub-Committee Meeting, Tulsa County Medical Society, B-9 Medical Arts Building, 1:00 P.M.

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

WEDNESDAY, August 12th:

Board of Trustees Meeting, Tulsa County Medical Society, B-9 Medical Arts Building, 1:00 P.M.

FRIDAY, August 14th:

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

MONDAY, August 17th:

St. John's Hospital, Staff Meeting: Clinical Pathological Meeting, 7:15 P.M.; Staff, 8:00 P.M.

TUESDAY, August 18th:

Copy deadline for the September issue of The Bulletin.

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

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

WEDNESDAY, August 19th:

Constitution & By-Laws Committee Meeting, Tulsa County Medical Society, B-9 Medical Arts Building, 1:00 P.M.

FRIDAY, August 21st:

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

MONDAY, August 24th:

No Tulsa Academy of General Practice Meeting this month. Next meeting, September 28, 1953.

TUESDAY, August 25th:

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

FRIDAY, August 28th:

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

Dates for Tulsa County Medical Society committee meetings are tentative and subject to change. Organizations and hospitals wishing to list their meetings or events in this calendar are invited to call the Executive Secretary, Telephone 4-8161, by the copy deadline date.

Activities Of The Board Of Trustees

The Board of Trustees of the Tulsa County Medical Society took the following action at its July meetings:

Discussed details of a community enrollment of the Blue Cross-Blue Shield Plans in Tulsa County, presently scheduled for September 20-27, and formally endorsed the project.

Met with Mr. Jay L. Jones, Commissioner of Fire and Police, City of Tulsa, to discuss conditions of medical care at the City Jail, and subsequently prepared a series of recommendations to improve such conditions.

Approved provisions of a revised contract for Tulsa County hospitals served by the Tulsa County Red Cross Blood Center as recently rewritten by the Blood Center Committee.

Authorized investment of funds created by the current special assessment for a permanent building fund in gov-

ernment insured bank saving certificates.

Approved participation of the Tulsa County Medical Society in a new Blue Cross hospital insurance group to be handled on a statewide basis by the Oklahoma State Medical Association; present policyholders will be transferred to the new group, which will be on an annual premium basis.

Approved participation of the Society in a health survey to be conducted by the Health Division of the Tulsa Council of Social Agencies.

Elected eight applicants to membership in the Society under terms of the constitutional amendment approved in May permitting the Board to elect by unanimous vote during the summer interim.

Approved continuation of liaison program with the Tulsa Chamber of Commerce, as developed by a special committee last year, for another year.

Directed the Insurance Committee to develop a standard health and accident insurance report form to be submitted to the Council of the Oklahoma State Medical Association for consideration.

Approved a report of the Public Policy Committee outlining a twenty-point program of work for the next twelve months. (See Page 7).

Received a report of the Medical Credit Bureau Committee indicating an all-time collection record had been set by the Bureau during the first six months of 1953 and passed a resolution encouraging greater support of the Bureau by members.

DR. ROBERT E. FUNK was guest speaker for the Tri-County Medical Association at Poteau, Oklahoma, on July 8th.

DR. WALTER H. CALHOUN is constructing an attractive new clinic building at 5323 S. Lewis, Tulsa, for occupancy in the near future.

In attendance at the Postgraduate Medical Assembly of South Texas at Houston, July 20-22, were DR. LOGAN A. SPANN and DR. R. M. SHEPARD.

DR. ROBERT F. McCRARY entered upon a year's residency in Obstetrics and Gynecology at St. Louis City Hospital on July 1st.



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PUBLIC POLICY PROGRAM

(Continued from Page 8)

be given a specially prepared packet of information about Tulsa Medicine and Tulsa medical services and facilities. Later, it is planned to have periodic luncheons for new members at which time they may be more fully acquainted with existing standards of medical practice in Tulsa and at which they may ask pertinent questions. This project is similar to those instituted by many of the larger county medical societies over the United States.

14. *Study the "Guaranteed Medical Care" type of public relations programs.* The Committee will investigate public policy programs in certain areas where the local county medical societies guarantee that no person shall go without medical care for lack of funds. These projects have been extensively developed in other areas with a resulting high degree of public respect for the profession. Such programs must be built upon a sound foundation of basic public relations, and it is intended that such a project be considered for Tulsa in a program of long range public relations planning.

15. *Arrange showings of AMA public relations motion pictures to interested groups.* The American Medical Association makes available many splendid motion pictures, all professionally produced, for showings to lay audiences. Many of these have been theatrically exhibited. In conjunction with a speaker or commentator supplied by the Medical Society, they offer an interesting program to lay groups.

16. *Distribute AMA public relations literature where effective benefits can be obtained.* Numerous attractive publications are offered by the American Medical Association for distribution to the laity. It is planned to place as many of these informative pieces in doctors' offices as possible. A more extensive distribution will be possible in connection with other phases of the overall program.

17. *Continue the present legislative program now in operation.* This will include the investigation of candidates for public office, securing their views on pertinent health and medical problems, and circularizing such information to the



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*Perloff, W. H.: Am. J. Obst. & Gynec. 58:684 (Oct.) 1949.

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membership. The Sub-Committee will continue to review all state and national legislative proposals and acquaint the membership with the contents of such measures. Periodic resumes of legislative activity will be presented at Society meetings, in The Bulletin, and in a special legislative bulletin to be issued during sessions of the Oklahoma State Legislature and at other times as necessary. The custom of entertaining state and national legislators at a luncheon, dinner, or breakfast will be continued. This legislative service shall be informative only and the Society will make no official recommendations concerning legislation or candidates for office.

18. *Continue the current program encouraging physicians to take a greater part in civic affairs.* Tulsa doctors will be urged to participate actively in both medical and non-medical projects of civic clubs, the Tulsa Chamber of Commerce, and health and welfare organizations.

19. *Continue to recognize the Grievances Committee of the Tulsa County Medical Society as an official mediation body to receive and adjudicate differences between doctor and patient.*

20. *Encourage attendance by officials of the Tulsa County Medical Society and by members of the Public Policy Committee at the periodic public relations workshops conducted by the American Medical Association.*

STATE G. P. ACADEMY TO MEET HERE FEBRUARY 15-17

The Oklahoma Academy of General Practice will hold its 1954 Annual Meeting in Tulsa next February 15-17 at Hotel Tulsa, it was announced last month by Dr. Allen Gibbs, Oklahoma City, President.

The Convention will feature a daily scientific program with visiting distinguished guest speakers, medical motion pictures, commercial exhibits, social events, and a Public Forum. The arrangements committee is headed by Dr. Logan A. Spann, Dr. W. B. Boone, Dr. William R. Turnbow, Dr. Marshall O. Hart, Dr. W. D. Hoover, and Dr. Charles E. Wilbanks.



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June, 1953

Hospital:	Bloods Used:	Replac- ments:	% Repl.
St. John's	431	234	56.6%
Hillcrest	272	108	39.7%
Osteopathic	71	22	30.9%
Mercy	31	13	41.9%
Byrne	10	9	90.0%
Broken Arrow	8	8	100.0%
Moton	3	1	33.3%
Other	33	34	103.1%
Totals	841	429	51.1%

As a means of evaluating the standards of selecting donors and methods of collecting, storing, transporting, and administering blood, the Tulsa County Red Cross Blood Center last month established a new system of recipient reaction reports to be used by all hospitals participating in the blood program. Prepared at the direction of the Blood Center Committee of the Tulsa County Medical Society, a special form for noting reactions of any patient receiving blood is now available at each nursing chart desk, surgery, and emergency room of participating hospitals. If any untoward reaction occurs, it should be noted on the official form by the floor nurse or attending physician.

At St. Johns and Hillcrest hospitals, the forms should be sent to the Blood Bank in the Hospital, from where it will be collected periodically by Blood Center

officials. Smaller hospitals are requested to mail in recipient reaction reports at frequent intervals, preferably each day.

A strengthening in the reporting of recipient reactions was directed by the Blood Center Committee as a means of obtaining useful statistics. These will be compiled at intervals of four months and a careful study made of the results. Dr. Betty Conrad, Medical Director of the Center, will report her findings to the Society early next year.

All physicians are being requested to fully cooperate in the program.

A second revision of charges for ordered but unused bloods has been made by the Blood Center Committee. Recipients will now pay \$5.00 per pint to cover the cost of laboratory work performed on the blood which was ordered by the physician but not utilized. This rate replaces the sliding scale rates previously adopted, as reported in the July issue of the Bulletin.

DR. IAN MacKENZIE has returned to his office after minor surgery.

DR. PAUL K. HEERWAGEN has taken professional offices in the Rexall Building at Collinsville, Oklahoma, for general practice.

DR. PAUL O. SHACKELFORD, now stationed with United States Navy units at Corpus Christi, Texas, suffered a broken ankle last month while moving furniture at his Tulsa home.

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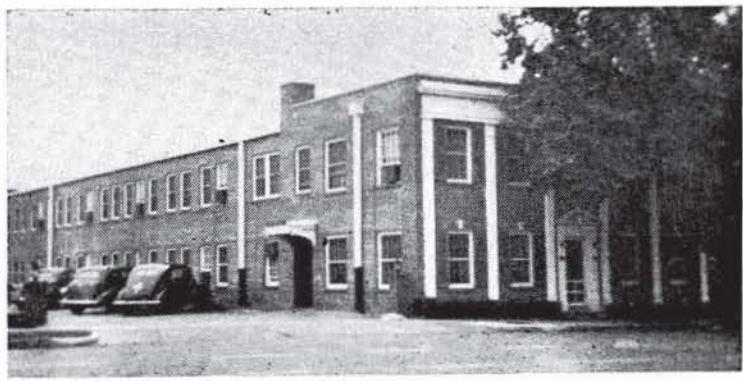
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