

**BEST**

**COPY**

**AVAILABLE**

MEDICAL SCHOOL LIBRARY

University of Wisconsin

1300 Linden Dr., Madison, Wis. 53706

wisconsin medical alumni

# Quarterly

*Volume twelve, number one · Winter, 1972*



## WISCONSIN MEDICAL ALUMNI

Quarterly

Vol. XII January 15, 1972 No. 1

Published quarterly on January 15, April 15, July 15 and October 15 by the Wisconsin Medical Alumni Association, Inc., 333 N. Randall Ave., Madison, Wis. 53706.

### EDITORIAL BOARD

Mischa J. Lustok, '35, Editor  
Garrett Cooper, '35  
Einar Daniels, '34  
Robert Schilling, '43  
Donald Schuster, '51

Kurt H. Krahn  
Associate Editor

William H. Oatway, Jr., '26  
Contributing Editor

### CORRESPONDENTS

Garrett A. Cooper, '35, At Large  
James H. Dahlen, '61, Northwest  
Edward P. Ehlinger, Senior Class  
Herbert C. Lee, '35, Southeast  
Edward J. Lefeber, '36, Texas  
Jackman Pyre, '37, Southwest

### ALUMNI OFFICERS

John R. Petersen, '54, President  
Louis C. Bernhardt, '63, President-elect  
Dean B. Becker, '44, Director  
Roger I. Bender, '43, Director  
Helen A. Dickie, '37, Director  
Herman H. Shapiro, '32, Director  
Loron F. Thurwachter, '45, Director  
Robert F. Schilling, '43, Past Pres.  
C. Benkendorf, Res. '55-58, Past Pres.  
Henry C. Pitot, Actg. Dean, Ex Officio  
Ralph A. Hawley, Executive Director

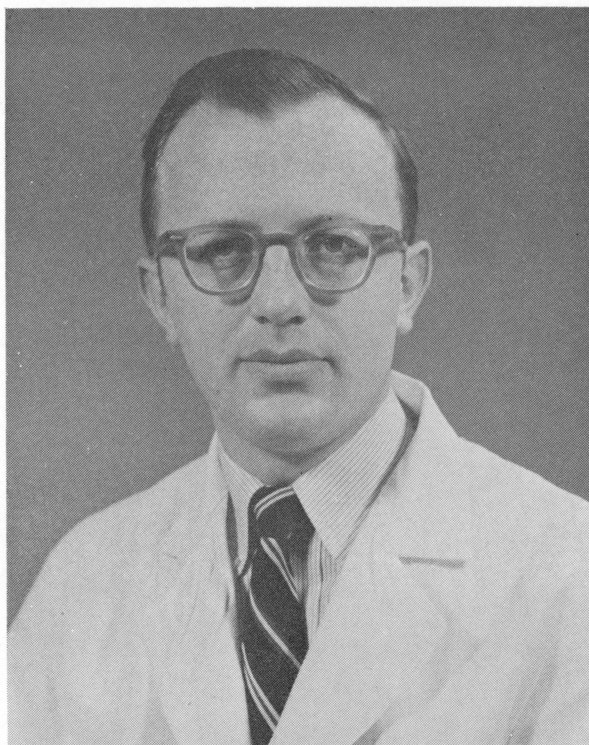
## In this issue

- 1 Dr. Pitot is named acting dean  
2 Summer externship: primary care taste  
6 Alumni news  
Dr. Bernhardt is president-elect  
Classes of '67, '46 top givers  
'Benefits forgot': Shakespeare  
Prof. Crawford portrait presented  
Fall meeting photo highlights  
Dr. Middleton's fall remarks  
'An egocentric occasion'  
Alumni board activities  
LaCrosse meeting gemütlichkeit  
Alumni assn. financial report  
Duluth names two alumni  
'Doctor, flyer, dragway chief'  
An Israeli symposium  
Memorial honors late Dr. Hardtke  
16 Alumni capsules, necrology  
19 Alumni/faculty retreat opportunity  
20 Medical school news  
Dr. William Stovall dead at 84  
Two 'named' scholarships presented  
Dr. Hong named associate dean  
11 Alumni promoted at UW  
UWH expands patient dial access  
Alumni gifts, trusts accepted  
UWH minicomputer aids in cancer  
State hospital's ECGs read at UWH  
Waisman fund to aid child health  
Royal college fellowship to Meyer  
25 Columns and editorials  
Texas reports — Lefeber  
Southwestern recollections — Pyre  
Not always as they seem — Lustok  
Northwest news notes — Dahlen  
Southeastern news, views — Lee  
W. S. Miller's legacy — Cooper  
President's open letter — Petersen  
A puzzle without pieces — Ehlinger

## About the cover

For this winter issue artist Betsy Wentz took our lead story about the summer externship program and came up with a cover that features the lamp of knowledge . . . specifically a medical lamp of knowledge when one looks where the flame should be. Several of her "drop-ins" that help spark up the inside also have to do with the externship program as well as with seasonal snowflakes.

# Dr. Pitot Is Named Acting Dean



*Henry C. Pitot, M.D., Ph.D.*

Henry C. Pitot, M.D., Ph.D., chairman of the pathology department since 1965, was appointed acting dean of the Medical School on Oct. 12 by UW-Madison Chancellor Edwin Young.

The appointment followed UW regent action the previous Friday when former dean, Dr. Peter L. Eichman, resigned and was named to a new assignment as coordinator of health affairs, a part-time position in the University's central administration, while resuming his professorship in neurology and medicine. Dr. Eichman had been dean of the Medical School and director of the Center for Health Sciences since May 1965.

Dr. Pitot, who has served as chairman of a search and screen committee to recommend candidates for the new position of vice chancellor for the Center for Health Sciences, assumed the acting deanship on Oct. 15.

Dr. Pitot received his M.D. in 1955 and Ph.D. in biochemistry in 1959, both from Tulane University. After a year as a postdoctoral fellow at UW's McArdle Laboratory for Cancer Research, he was appointed assistant professor of oncology and pathology in 1960. He was named associate professor in 1963 and full professor in 1965.

A diplomate of the American College of Pathology, Dr. Pitot received the Lederle Medical Faculty

Award in 1962 and the 1965 Career Development Award from the National Cancer Institute. In 1968 he received the award in experimental pathology from the American Society for Experimental Pathology for his research in endoplasmic reticulum and phenotypic variability in normal and neoplastic liver.

Acting Dean Pitot is a member of several professional societies, has published over 40 research papers and serves on national committees for cancer and pathology research and training programs. His B.S. was earned at Virginia Military Institute and his residency was served in pathologic anatomy at Tulane University's Charity Hospital, New Orleans.

Four days after assuming office Dr. Pitot told the Medical School faculty that a great deal of mutual respect and cooperation was needed to overcome the school's problems. He listed as major problems an inadequate budget, historically poor relations with the University's central administration, a critical space shortage and some administrative problems.

"Unless we try to break down the barriers between ourselves, between us and the rest of the health sciences center, and between us and the rest of the university," Dr. Pitot was reported as saying, "we will find that great opportunities within our grasp will be lost forever." The acting dean received a standing ovation from about 175 faculty and staff.

# Summer Externship: An Experience In Primary Care

By

Howard L. Stone, Ph.D.\*, Kenneth Reeb, M.D. '63\*\*,  
Richard W. Shropshire, M.D.†, Rick J. Schuch, B.S.††

Externship is a 10-week summer experience in primary care for students who have just completed their first year of medical school. This program is in its third year of existence and is sponsored by the Family Medicine Club, an organization of students at the UW Medical school. The club is administered by a four-member student committee, two sophomore and two junior students who participated in the Summer Externship Program, aided by two faculty advisors.

Externship was developed by the Family Medicine Club with a major purpose of exposing students to the primary care general practitioner in smaller Wisconsin communities. It enables the student to be exposed to an overall view of general practice medical care: social, personal and medical aspects. Orientation of the program is through the practicing physician's eyes, not an educational institution.

The student interacts on a one-to-one basis with a physician and reacts to medical problems with him. The program also enables the student to develop a "framework" of medicine into which experiences of the first two years of formal medical education can

be synthesized. It is designed so that experience can be personalized to meet both the student's and physician's desires.

## The Student and The Physician

The actual program is a 10-week experience during which the student "lives in" a community. The physician assumes responsibility for the student's education and board and where possible, many students actually live with him and his family. All students participating in the program have completed the first year of medical school and are eager for the type of exposure the program offers.

All physicians in the program are general practitioners or family physicians and members of the Wisconsin Academy of Family Physicians. More than 80% are in group practice of 2-7 physicians. About 50% have participated in the program for at least two years. Each student is associated with a particular physician during the 10-week program. Enthusiasm for working with a student is the

\*Director, Office of Educational Planning, Development and Evaluation, University of Wisconsin Center for Health Sciences.

\*\*Assistant Professor-Pediatrics, University of Wisconsin Medical School and Faculty Advisor to Family Medicine Club.

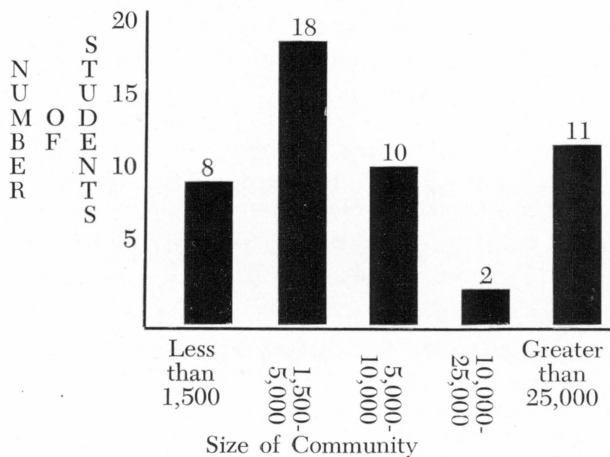
†Associate Clinical Professor-Family Medicine, University of Wisconsin Medical School, President-elect, Wisconsin Academy of Family Physicians, and Faculty Advisor to Family Medicine Club.

††Junior Medical Student and Family Medicine Club Case Report Member.



opinionnaire. This past summer the program accommodated 36 students.

**FIGURE 1**  
Location of Externships, 1970 and 1971  
Size of Community



As noted in Figure 1, most externships were located in communities with 10,000 or less population. In keeping with the major purposes of the program, the experiences accomplished the purpose of exposing students to primary care in smaller sized Wisconsin communities.

**Students Re-evaluate Their Interest In Becoming a Practicing Physician**

The Medical School curriculum provides only limited student exposure to patients before the third

important asset of the physician for participation in the program.

**Matching Physicians and Students**

The program is presented to freshmen in the fall preceding the summer of eligibility. The Family Medicine Club maintains a list of physicians throughout the state who have participated in the program or are willing to for the first time. A student is matched with a physician primarily by geographic preference. Upon acceptance of a position, the student considers he has an obligation to the physician, barring any major unforeseen difficulties. After assignments are made it is up to the student to contact the physician and organize the fine points of the externship. In the event of an inoperative poor working relationship, it is the responsibility of the student or physician to terminate the arrangement and notify the Family Medicine Club.

**Funding**

Each student receives a \$750 educational grant that enables him to participate in an educational experience without a financial burden. Three hundred dollars of this amount is paid by the physician to whom the student is assigned. The remaining \$450 is contributed by groups interested in the program. All funds are administered through the C.E.S. Foundation of the State Medical Society of Wisconsin.

**An Evaluative Report:**

This past summer both students and physicians who participated in the externship program during the past two years were requested to provide evaluative information on their experiences. A total of 50 out of a possible 53 students and 32 out of a possible total of 38 physicians responded to an evaluation

year, followed by an 8-week preceptorship in the fourth year. The externship program gives students an opportunity to observe first hand what a practicing physician in primary care does and to self-assess their interest in this area.

In response to the following question: How did your summer externship experience affect your interest to become a physician? Students responded as follows:

Reinforced my desire: 47  
Did not affect my interest level: 3

### Student Reactions in Terms of Expected And Experienced Involvement

On a nine-point rating scale students indicated the degree to which expected types of involvement in the program compared with the actual involvement they did experience.

**FIGURE 2**  
**Student Reactions to Expected and Experienced Involvement — Mean Score Comparisons**

Rating Scale: Greatly Involved 1 2 3    Involved 4 5 6    Not Involved 7 8 9

Number of Responses—N = 50

Degree of Involvement	Degree of Expectation	Actual Involvement	Significance of Difference
1. Patient Contacts	2.48	2.88	N.S.
2. Learning Mechanical Skills	4.40	3.88	N.S.
3. Interaction with Paramedical Personnel	3.70	3.02	P > .05
4. Therapeutics	5.32	4.82	N.S.
5. Viewing Social-Community Interaction of Physician	3.66	3.46	N.S.
6. Student-Physician Contact	1.92	1.96	N.S.

Rank order correlation of areas of involvement between expected and actual degree of involvement:  
Correlation = .94 P > .01

The data reported in Figure 2 are significant since it indicates the program is accomplishing its stated

objectives. The externship experiences did, in fact, provide students with the opportunity for involvement in the areas they had expected to be involved in.

### Opportunity to Develop a Working Relationship With Health Care Professionals

**FIGURE 3**  
**The Development of a Satisfactory Working Relationship with Health Care Professionals**

Strongly Disagree	Agree	Strongly Agree
9 8 7	6 5 4	3 2
Assigned Physician		
Other Physicians in Group or Clinic		
Lab Techs, X-ray Techs, etc.		
Hospital Nursing Staff		
Clinic or Office Nursing Staff		
Office Clerical Staff		

In response to a nine-point scale students indicated the degree to which they agreed they were provided an opportunity to develop a satisfactory relationship with various health care professionals. The data in Figure 3 indicate that students did develop a satisfactory relationship with the designated individuals.

### Does Externship Influence the Student's Perspective of Primary Medical Care?

In response to this question, students indicated "I did develop a different perspective of primary medical care" — 34 responses  
"I did not" — 16 responses  
X<sup>2</sup> = 6.48    P > .05

### Reactions of Participating Physicians

Thirty-two out of a total 38 participating physicians took time to complete and return a reaction opinionnaire at the end of the summer. This response is evidence in itself that physicians have a high degree of interest in the externship program. In addition, 30 of the 32 respondents indicated they plan to continue as a participant in 1972. The other two were undecided.

The physicians also indicated they strongly agreed that:

1. The student's *academic preparation, mechanical skills, and capacity to accept responsibility* compared favorably with their expectations.
2. The obligation of having a student present did not create difficult problems to handle.
3. They developed a better understanding of the problem facing medical students.

Specific advantages of the externship for the practicing physician were indicated as follows:

1. The opportunity to participate in medical education, i.e., practice a latent desire to teach.
2. The opportunity to provide a meaningful exposure to family practice.
3. The opportunity to meet students. Restored faith in today's students.
4. Sharpened attention given to academic medicine.
5. Fresh ideas and stimulating questions caused the physician to reevaluate customary procedures.

Many of the physicians indicated that a brief resume of courses the student had taken would have been helpful to them in assuming their role as "teacher." The physicians also were asked to indicate whether the externship provided opportunity for the student to contribute as a worker. Their response to this question best describes the physicians' positive attitudes toward the externship. They indicated "no" to this question, but more significantly indicated they did not view the student as a laborer, but rather as a person there to observe and learn. Physicians saw themselves not as an employer, but as a teacher.

(NOTE: Copies of a complete summary of the student and physicians' evaluations of the externship program are available upon request from: Howard L. Stone, University of Wisconsin, Center for Health Sciences, 1402 University Avenue, Madison, Wisconsin 53706.)

The 34 students who did indicate externship changed their perspective indicated the following specific changes:

1. Primary medical care can best be provided through a group practice—it is very difficult in solo practice.
2. The primary care practitioner is primarily a diagnostician.
3. Competent general practitioners must be extremely knowledgeable.
4. This is a more personal way to practice medicine.
5. Realized the tremendous importance of relating to patients.
6. The primary care physician is the most valuable doctor in the eyes of the patient in a small community.
7. There is a tremendous amount of paperwork involved in the administration of primary care.
8. Realized the dependence of the patient on his health care team.

### Activities the Students Perceived

#### As Being Most Helpful

In response to this inquiry, students indicated the following:

1. Observing surgery
2. Emphasis on the importance of anatomy
3. Emergency room experience
4. Work with x-ray and lab technologists
5. Interviewing patients
6. Observing how the doctor deals with patients
7. O.B. experience
8. Observing the health care team work as a unit
9. Observing inter-physician relationships
10. Getting involved in taking histories and doing physicals

### Activities Students Perceived

#### As Being Least Helpful

In response to this inquiry, students indicated the following:

1. Waiting around for something to "happen." The physician should have activities scheduled to provide for active participation of the student.
2. Getting overly involved in office routine.

Students overwhelmingly rated their externship as an excellent learning experience. Student responses to an overall evaluation of the externship were as follows:

Excellent: 42  
Good: 7  
Average: 1  
Poor: 0

---

## ALUMNI NEWS

---

### L. C. Bernhardt, '63, is President-elect

Dr. Louis C. Bernhardt, '63, Madison, will be the 16th president of the Wisconsin Medical Alumni Association. Announcement of his being named president-elect after a mail ballot was made at the Nov. 5 board of directors meeting.

His unanimous election by the directors filled the president-elect vacancy caused last May when Dr. Roger Laubenheimer, '50, Shorewood, decided he could not serve after being elected by the membership.

The new president-elect at age 34 is the youngest alumnus to hold the post. A surgeon at the Dean Clinic in Madison, Dr. Bernhardt specializes in thoracic and cardiovascular surgery. Prior to joining the clinic this past fall he was director of emergency room services at University Hospitals and also assistant dean for clinical affairs at the UW Medical School.

A native of Milwaukee, Dr. Bernhardt received his B.A. degree from Oberlin College in Ohio before entering the UW Medical School. After being awarded his M.D. with the Class of 1963, he interned at Mt. Sinai Hospital in Milwaukee. He returned to Madison for a residency in general surgery at University Hospitals, including service as chief resident and also chief surgical resident, and stayed on for an additional residency in thoracic and cardiovascular surgery.

The new president-elect was with the 13th Evacuation Hospital Unit of the Wisconsin Army National Guard for six years and for two of them served as chief of the surgical service.

In 1968 the Medical School's junior class chose Dr. Bernhardt as the outstanding teaching resident and the following year named him to its "Regular Fellow" Award. A member of AOA, he became a diplomate of the American Board of Surgery in 1969. He is the author of 11 scientific papers.

Dr. Bernhardt was elected a director of the Wisconsin Medical Alumni Association in May 1970 and is the class representative for the general surgery specialty. He resides on Madison's east side with his wife and three children.



*President-elect Louis C. Bernhardt, M.D., '63*

### Classes of '67, '46 Top Alumni Giving

The Classes of 1967 and 1946 had the best record of participation in the 1970-71 Alumni Giving Program, according to the annual report distributed last month. A total of \$66,456.71 was contributed by 1,000 alumni, faculty members and friends of the UW Medical School during the July 1, 1970, to June 30, 1971, giving period.

Two top awards will go to the 1967 class representative Dr. Bernard Kampschroer of Milwaukee at this year's Alumni Day. He led '67 to the top percentage of giving (51%) and the largest number of contributors (48). The Class of 1946, led by Giving Program Chairman Dr. Richard Wasserburger of Madison, contributed the largest amount of money, \$3,396. Second and third places in the three categories went to the classes of 1932, 1939, 1951 and 1958.

Contributions were \$3,200 less than 1969-70. The average contribution dropped \$8.02 to \$68.30, though the number of contributors increased by 10% to the 973 total.

## 'Benefits Forgotten'

It is always with some trepidation that we mail out the annual honor roll of Medical Alumni Giving as we did last month. Inevitably, some errors, omissions and misunderstandings always come to light.

We were abashed to note, for example, the omission from the current 1970-71 report of the name of one of our most loyal and generous contributors, former 1928 class representative Dr. Robert Turell of New York City. Try as we may for accuracy, there may be others and if the error involves you, please let us know.

The honor roll includes contributions made to the A.M.A.-E.R.F., to the Medical Alumni Association or to the Medical School. If you do not designate your A.M.A.-E.R.F. contribution for the UW Medical School, we are not informed of your gift. The report includes contributions received during the period of July 1, 1970, through June 30, 1971. We realize that this may create some confusion when you examine your calendar year financial records and discover that a contribution made between January 1 - June 30 of 1970 is not included in the 1970-71 honor roll. Please be assured that it was included in the 1969-70 report.

Medical alumni association dues are not included in the honor roll — a further cause for confusion. We shall be recommending to the Board of Directors that future reports include a section that identifies all dues paying members.

And remember, your support in any form or any amount is deeply appreciated.

## Helen Crawford Honored at Fall Meeting

Over 26 years of devoted service was honored Nov. 6 when your alumni association presented an oil portrait of Miss Helen Crawford, former head of the Middleton Medical Library, to the UW Medical School. The occasion was the association's annual fall meeting that coincided with UW homecoming.

Other meeting highlights included an address by the school's new acting dean, Dr. Henry C. Pitot,

and scientific presentations by faculty members Dr. Matthew Davis and Dr. Donald Kahn. A steak sandwich before the Wisconsin-Purdue football game followed for the 175 alumni and their guests.

Emeritus Dean William S. Middleton officiated at the portrait presentation and the portrait was presented by him to Acting Dean Pitot. Miss Crawford, who retired last summer as associate professor and librarian, made a brief response. She came from Lubbock, Texas, where she is serving as consultant in development of the medical library at the new Texas Tech University Medical School, to participate in the ceremonies.

The portrait by Christian Abrahamsen, a distinguished Madison artist who has painted numerous Wisconsin governors and UW presidents, will be hung in the medical library.

Acting Dean Pitot welcomed the alumni and guests with a review of happenings at the Center for Health Sciences and ended with the following exhortation: "Certainly no one would undertake the position of acting dean without the optimism that I have expressed to you. In the same sense, optimism is not sufficient.

"'God helps those who help themselves.' Never has this adage been more appropriate than at the present time, and it is true in the broadest sense, for no school can long exist without the strong support of its alumni. The financial support is important, but it is not of this that I speak. I am referring to your support in believing in your Alma Mater, its greatness, its efforts for the future and in transferring your beliefs to those with whom you work and socialize so that they, too, may share your faith in this school," Dr. Pitot added.

"Three weeks ago I spoke to our faculty about the importance of working as a team for our future progress. I would invite you all, each and every alumnus, to be a member of this team, for without your support for our efforts, we can accomplish very little. Together we can enhance ever further the greatness of this university and give to our state the benefits of one of the leading health sciences centers in this nation," Acting Dean Pitot concluded.

Dr. Kahn, chairman of UW's division of thoracic and cardiovascular surgery, spoke about research in his field and Dr. Matthew D. Davis, Int.-Res. '50-55, chairman of ophthalmology, discussed his work in diabetic retinopathy and use of the laser.

# Fall Meeting Photographic Highlights



(Upper left) Former Middleton Medical Librarian Prof. Helen Crawford prepares to make a few marks upon presentation of her portrait. Acting Dean Henry C. Pitot (r.) has just handed her the microphone. (Left) Always popular are the get together during registration. Here Green Bay and Wauna alumni converse in the form of Drs. Nellen, Lamm and Stahmer.

(Lower left) A larger group that enjoyed conversation, coffee and rolls included several spouses. (Below) An alumnus talks with Dr. Donald Kahn after his presentation on cardiovascular surgery.





*(Above) Emeritus Dean William S. Middleton (in foreground) received a standing ovation from the audience as he opened the Helen Crawford portrait presentation ceremonies. (Left) Alumni meetings in Madison always present the chance for personal or professional discussion like this with clinicians at University Hospitals.*

*(Bottom left) Formally posing with the new portrait for the medical library are (l to r) President John R. Petersen, Miss Crawford and Emeritus Dean William S. Middleton. (Below) President John R. Petersen and President-elect Louis C. Bernhardt chat after the morning session where the latter's election was announced.*



## 'She Brought Us Conspicuous Qualities'

Emeritus Dean William S. Middleton made the following remarks as he presented the portrait of former librarian Helen Crawford to the Medical School: "In another relation I have stated, 'Books are the lifestream of the Medical school. The Library is its heart.' In extending this figure it becomes apparent that the contraction of the heart is effected through certain neuromuscular structures and biochemical reactions.

"The Purkinje system is the vital link in this pattern of the transmission of the impulses. In the present relation the communication and the promulgation of knowledge is accomplished through Helen Crawfords, our Purkinje systems of trained librarians.

"Helen Crawford, although born in North Dakota, is the direct gift of Iowa. (And so closely on the heels of the Iowa defeat of Wisconsin in football we are apt to consider gratuities from Iowa most unusual.) She brought to us certain conspicuous qualities.

"Coupled with her brilliant intellect there was a tenacity of purpose and a perspicuity of unusual dimensions. Without demeaning her sex, her personal dealings are always characterized by forthrightness. She follows no devious nor circuitous path in her arguments or ends. It has been an unmitigated privilege to work with her, a judgment in which all of her associates would concur.

"The University of Wisconsin Medical Alumni Association has distinguished itself by its conspicuous accomplishments. Notable, of course, is (The University of Wisconsin Medical School: A Chronicle 1848-1948) by Paul F. Clark, a landmark from which all subsequent historians will take their bearings. The Library Project, architecturally and functionally distinctive, reflects the wisdom and practicality of the Medical Alumni Association.

"Appropriately, the portrait of Helen Crawford was commissioned by the Medical Alumni Association for her outstanding contributions in the operation of this essential element and in the evolution of the plans for the new Library building.

"The artist, Christian Abrahamsen, was selected after a careful search. His portraiture of public figures in this country and especially in Wisconsin made him the logical choice. Perhaps his warm appreciation of the personality and character of his subjects influenced the committee more than any other detail in its choice.

"With the advantage of a preview of his portrait of Helen Crawford, I believe you will agree with that Mr. Abrahamsen has given warmth, strength, intelligence, purposefulness and humanity in the lines, lights, and shadows transferred to the canvas. In a word, the artist has captured for future generations the Helen Crawford we esteem and love.

"On behalf of the University of Wisconsin Medical Alumni Association, Dean Pitot, I transfer to you this superb portrait of our beloved librarian."

## 'An Egocentric Occasion' - Crawford

"I would like to say to all of you that I would be before you today if all of you and the library staff and the faculty had not been behind me for all of my 26 years here. I have discovered since last September that I have joined the generation of Drs. Middleton, Reese, Clark and others who have retired before me. I have found that it is a very good generation to be in.

"An occasion of this sort is a singularly egocentric one. I can assure you that I am here partly out of respect for the opinion of those who suggested the portrait and partly out of sheer curiosity. Just as everyone turned out to be curious about book acquisitions, the idea of a portrait strikes a spark from a surprising variety of people. There is, I admit, some hesitancy for fear that the probing eye of the artist will find the Dorian Gray underneath.

"Although Mr. Abrahamsen was generous in sharing with me his philosophy of art, I know just a little today about how the seeing eye and the cunning hand of the artist transfer a likeness onto canvas as I did when we began. He paints with light and pigment, I with words. Our common ground turned out to be music.

"From the point of view of esthetics, it is unfortunate that, by the time a portrait is appropriate, years of decision and frustration have taken their toll on the subject. However, this artist is fortunately more

interested in faces that have been lived in than in the smoothness of youth.

"I feel somewhat apologetic about posing a problem for my colleagues. I belong to a profession that has reason to be suspicious of offers of objects that may or may not have some medical associations—outsized furniture, paintings, busts, obstetrical forceps, scalpels and other impedimenta that heirs cannot house and do not like to throw away.

"The Middleton Library has very little wall space for this type of contribution and I am very glad that others will have to decide where—in the menacing term some inquirers have used—I am to hang.

"I do not regret my retirement when I see the frustrations and uncertainties that my successor is facing, but I assure you of my happiness in being here today and my gratitude to all of you for making it possible."

## Election OK Highlights Board Meeting

A new president-elect was selected, a favorable financial report was given, thanks was expressed to former Dean Peter L. Eichman and future meeting plans were given. These were some of the Association's Board of Directors meeting highlights as it met in Madison on Nov. 6.

Dr. Louis C. Bernhardt, '63, Madison, was elected by a mail ballot and it was moved, seconded and unanimously voted that he be elected (see separate story). Secretary Hawley reported that Association dues received through Nov. 5 totaled \$17,976, which already is \$2,300 more than the entire past fiscal year. He expected this year's dues receipts to exceed \$20,000 which will be able to wipe clean our current deficit. Income from \$35,000 in Life Memberships invested with the UW Foundation will be available this year and there will be another dues statement mailing in January.

President Petersen urged that unrestricted giving be fostered and other Board members endorsed this

view. Dr. Bernhardt was requested to develop a policy statement on restricted gift funds for consideration at the next meeting. Dr. Petersen also announced that Dr. Richard Wasserburger, '46, has agreed to again serve as chairman of the Annual Giving Program.

The Board voted to allow Dr. Sivertson to publish in revised form the Fall 1971 QUARTERLY article on alumni attitudes towards preceptorships. J.A.M.A. will publish the paper.

President Petersen said he had written to Dr. Henry C. Pitot, the Medical School's new acting dean, pledging the support of the Alumni Association and its Board in furthering the school's development and progress. Dr. Petersen further reported he had written a personal letter to Dr. Eichman expressing gratitude for his significant contributions to the Medical School and our Association. It was voted that Dr. Petersen write a similar letter on behalf of the Board.

The Dec. 8 La Crosse and Feb. 4 Milwaukee meetings were discussed, with Dr. Thurwachter describing possible plans for the latter. The cost of holding a function at the University Club may be prohibitive so he will explore alternate locations such as the Athletic and Yacht clubs. Board meetings will be held at each.

Publication of Dr. William S. Middleton's papers on medical education and philosophy by the University of Wisconsin Press under conditions similar to Dr. Paul F. Clark's history was discussed. The Medical Alumni Association would subsidize production costs for some 1,500 copies and would sell the books, realizing a profit after costs were covered. The Board voted to subsidize printing costs at an estimated level of \$7,500.

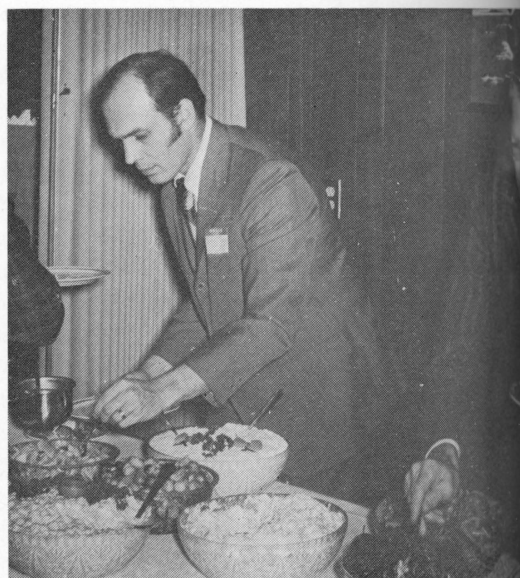
Dr. Petersen reviewed the rationale of his proposal that the Association undertake a major commitment to continuing medical education and appointed President-elect Bernhardt chairman of a committee to explore the feasibility. Board members Roger Bender and Loron Thurwachter will also serve and Dr. Sivertsen will assist as a continuing education staff member.

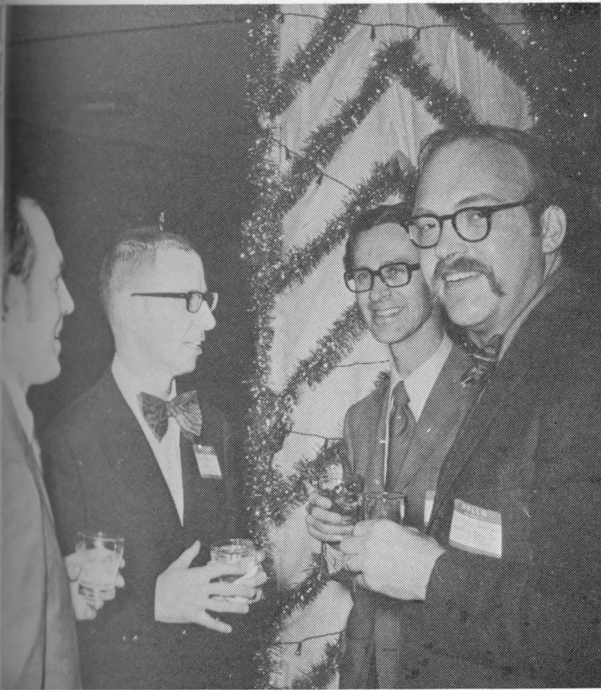
Attending the meeting were President Petersen; President-elect Bernhardt; Directors Becker, Bender, Dickie, Shapiro and Thurwachter; Dr. Richard Hong, new associate dean representing Dr. Pitot; and Messrs. Hawley and Krahn.

# La Crosse says...



Over 70 medical alumni, their spouses and guests from western and central Wisconsin got together for an evening Upstate Meeting at La Crosse's Holiday Inn on December 8. An early winter snowstorm didn't bother the hardy Wisconsinites, some who drove over 200 miles. Top of the evening was possible effects of the Governor's Health Planning and Policy Task Force. Dr. Robert W. Ramlow, '43 (left), of La Crosse served as emcee for the fine evening of eating, discussion, reminiscence and gemütlichkeit.





## *Upstate Meeting Gemütlichkeit*



# Alumni Association Financial Report

*University of Wisconsin Medical Alumni Association, Inc.*

*333 N. Randall Avenue, Madison, Wis. 53706*

The Association's financial records recently were audited for the year ending June 30, 1971, by the Madison accounting firm of Ronald Mattox and Associates. Its Oct. 12 report states in part:

"In our opinion, the accompanying statements present fairly the assets and liabilities of the University of Wisconsin Medical Alumni Association, Inc.,

at June 30, 1971, resulting from the cash transactions and the recorded cash revenues collected and disbursements made during the year then ended, on a basis consistent with that of the preceding year."

A more recent financial assessment appears in the Nov. 5 Board of Directors meeting highlights.

## STATEMENT OF RECORDED CASH REVENUES AND DISBURSEMENTS

	Year ended June 30 1971	1970
<b>Revenues — Unrestricted Funds</b>		
Dues Received .....	\$15,665	\$16,325
Sale of Chronicle .....	111	138
Sale of Middleton History Essay .....	131	84
Sale of Bohrod Paintings .....	825	1,535
Interest Income .....	751	425
Miscellaneous .....	627	120
<b>Total Revenues — Unrestricted Funds.....</b>	<b>\$18,110</b>	<b>\$18,630</b>
<b>Disbursements — Unrestricted Funds</b>		
Salary — Executive Director .....	\$ 2,350	\$ 2,388
Stipend — Associate Editor .....	600	600
Alumni Quarterly Magazine — printing .....	9,460	8,500
Alumni Quarterly Magazine — artwork .....	200	120
Other printing and stationery costs .....	2,801	2,071
Publication costs — Chronicle .....	64	16
Alumni Day — net cost .....	1,766	2,170
Audit fee .....	300	235
Board meetings — net cost .....	137	137
Other membership meetings — net cost (income) .....	5,301	(6,976)
Royalty — Bohrod Paintings .....	162	364
Teaching awards .....	1,500	1,500
Postage .....	1,686	1,480
Miscellaneous .....	101	131
Honoraria .....	450	0
Reception for graduates .....	271	0
<b>Total Disbursements — Unrestricted Funds.....</b>	<b>\$27,149</b>	<b>\$12,741</b>
<b>Excess Revenues Over Disbursements — (Disbursements Over Revenues) — Unrestricted Funds.....</b>	<b>\$(9,039)</b>	<b>\$ 5,889</b>

## Name 2 Alumni at Duluth Med School

Two alumni were among the first eight local physicians to be named to the clinical faculty at the new University of Minnesota-Duluth Medical School. Dr. Samuel H. Boyer, '32, was approved by the Regents as clinical professor of internal medicine. He currently also is chairman of the Northern Minnesota Council for Medical Education.

Dr. Gordon S. Strewler, '43, was appointed clinical associate professor of surgery and head of the surgical specialties committee. The physicians will help direct planning and eventually will lecture in their specialty fields as part of the clinical teaching program, according to Dean Robert C. Carter.

The school will enroll its first 24 students in a 2-year basic sciences medical program beginning this coming September.



*Two alumni, Dr. Edgar S. Gordon, '32, Madison, and Dr. Sanford R. Mallin, '57, Milwaukee, participated in a symposium celebrating the 50th anniversary of the discovery of insulin, held last November in Jerusalem, Israel. Dr. Gordon (right), who moderated a panel on obesity, and Dr. Mallin (second from left), who was a panel participant, are shown with their spouses during a break.*

## M-'43: 'Doctor, Flyer, Dragway Chief'

Hobbies as diverse as the geographical locations of its class members are recorded in a recently published newsletter by Dr. William E. Gilmore, Parkersburg, W. Va., for the Class of March 1943. Here are nine examples:

Alumni Association Director Roger I. Bender, Beaver Dam, Wis., GP and surgeon, is also a swimming coach at the local "Y" and a Wisconsin Interscholastic Athletic Association official. Ophthalmologist David C. Boyce, Grand Rapids, Mich., does power flying and soaring. Vernon J. Burch, Racine, Wis., GP and surgeon, is president of the International Carnival Glass Association and collects antique glass.

Radiologist Ralph C. Frank in Eau Claire has conservation as a hobby but also enjoys drag racing. He owns the Amber Green Dragways, which a son operates for him. Anesthesiologist Carl E. Johnsen, Jr., Honolulu, plays both a classical and steel guitar. Another anesthesiologist musician is Donald W. Maas, Carmichael, Calif., who plays the trombone in the Sacramento Municipal Band, the Ben Ali Shrine Band and several dance orchestras.

James C. McCullogh, Fond du Lac, Wis., GP, is a golden gloves boxing physician and orthopaedic

surgeon Eugene J. Nordby in Madison does watch repairing and cabinet making. Another M'43 alumnus in Honolulu, psychiatrist William H. Stevens, enjoys . . . you guessed it . . . skin diving.

## Memorial Honors Dr. Hardtke, '46

Friends and associates of the late Dr. Eldred F. Hardtke, '46, have established a memorial to honor the former clinical psychiatrist and professor of psychology at Indiana University. Contributions to the fund will create a living endowment in connection with the Monroe County Mental Health Center at Bloomington, Ind.

Dr. Hardtke, who was 57, died on July 30, 1971, while attending the International Congress of Applied Psychology at Leige, Belgium. An editorial in a Bloomington paper credited him with fostering numerous benefits for psychiatric patients and the field of mental health in the community since he moved there in 1950. Contributions may be sent to the Monroe County Health Association, 219 E. 4th St., Bloomington, Ind. 47401.

## ALUMNI CAPSULES

The small town of Shell Rock (pop. 1,159) in north central Iowa is trying to raise 50 million pennies to provide community advantages that will help make it more attractive as a place to live. Very active in the effort is its physician, **Dr. Dale M. Everson, '56**, who heads the local music association and its "big band sound" orchestra that puts on money-raising shows and dances.

New chief of the medical staff at Sacred Heart Hospital, Eau Claire, Wis., is **William T. Mautz, M.D., '40**.

**Dr. Norman M. Hankin, '43**, has been appointed assistant professor of clinical pediatrics at the Washington University School of Medicine, St. Louis.

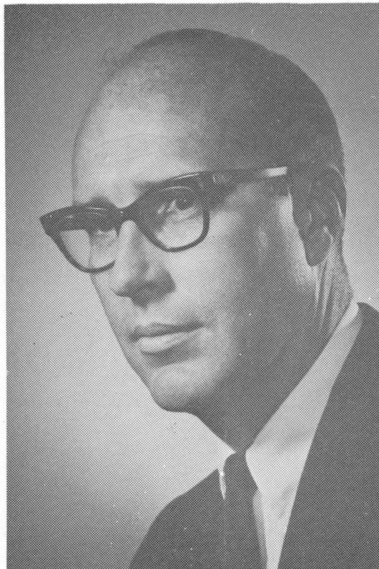
Among the new additions to the staff at Winnebago State Hospital near Oshkosh is **Dr. Glen Shaurette, Res. '68-71**, a psychiatrist.

Another psychiatrist, **Dr. Thomas N. Roberts, '68**, recently joined the Gundersen Clinic and La Crosse Lutheran Hospital. Dr. Roberts interned there and recently completed his residency at University Hospitals, Madison.

**Dr. Arlan L. Rosenbloom, '58**, returned to the U.S. in 1968 after two years as a U.S. Public Health Service epidemiologist advisor in the smallpox eradication program in West Africa. He presently is associate professor of pediatrics at the University of Florida in Gainesville.

A second edition of the book, "Diseases of the Colon and Anorectum," by **Dr. Robert Turell, '28**, New York City, recently was published.

Representing his Fort Lauderdale area since 1967 and serving as minority floor leader in the Florida State Senate is **Dr. David C. Lane, Int. '52 and Res. '52-'57**, a neurosurgeon. He also sits on



*David C. Lane, M.D.*

the President's National Advisory Health Council with **Dr. Marc J. Musser, '34**, and was a delegate to the December White House Conference on Aging.

Also joining the Gundersen Clinic in La Crosse was **John D. Swingle, M.D., '56**. After internship at Montreal General Hospital, Canada, military service and general practice in Port Washington, Dr. Swingle fulfilled his radiology residency at University Hospitals, Madison, and

after six years left the University as an associate professor.

**Dr. Leonard J. Ganser, '44**, Madison, administrator of the Wisconsin Department of Health and Social Service's division of mental hygiene, in November was appointed to the national council for the developmentally disabled by the Secretary of HEW.

Salisbury, N. C., is the new address of **Dr. Bryant H. Roisman, '45**, who left the private practice of psychiatry in Madison during August to become chief of the psychiatric services at the Salisbury VA Hospital.

The Badger Boys State recently honored **Dr. William H. Schuler, '40**, Ripon, Wis., for being a camp physician for the past 20 years. He also has served as physician for Ripon College.

Among the physicians inducted as Fellows in the American College of Surgeons last October were two alumni who reside in Wisconsin: **Dr. Richard S. Oster, '54**, Eau Claire, and **Dr. Uri R. Limjoco, Res. '62-67**, Menomonie Falls.

**Dr. Charles B. Larkin, '49**, San Bernardino, Calif., has been appointed assistant clinical professor of neurology at USC. He is assistant program director at the Pacific State Hospital, Pomona.

Two new physicians in Wausau, Wis., are **Dr. Gerald Schroeder, '65**, an internist, and **Dr. Donald H. Kranendonk, '64**, an orthopedic surgeon.

**Dr. John H. Wishart, '38**, presented the distinguished service

ice certificate by the Wisconsin Heart Association last May. The Eau Claire physician recently retired as a WHA director.

□

Dr. David L. Cram, '59, has been appointed assistant professor and chief of the dermatology



(L to r.) Drs. David L. Cram, '59; Charles A. Faber, '32; and Fred C. Prehn, '26.

clinics at the University of California Medical School, San Francisco.

□

Dr. Loren E. Rosenthal, '71, now interning at the Bronx (N.Y.) Municipal Hospital Center, has been given a first year neurosurgery position at the Albert Einstein College of Medicine of Yeshiva University beginning in July.

□

Joining the Grantsburg (Wis.) Hospital and Clinic staff recently was Dr. Alan J. Hay, '70, who was with the U.S. Public Health Service in New Orleans for the past year.

□

Dr. Perry L. Schoenecker, '68, and his family are living in Lakewood, Calif., during a two-year U.S. Navy stint. They will move to St. Louis in July and Perry will complete a residency in orthopedic surgery at Washington University.

□

Dr. Charles A. Faber, '32, Mil-

waukee, and his wife spent the first four months of 1971 on a self-conducted around-the-world trip. Their travels took them to many ancient and modern cultural and medical centers. On field trips they visited the Temple of Asclepius ruins in Greece and muse-

ums and institutions in Cairo, Israel, India and Japan.

□

Chief of staff for 1972 at Mercy Medical Center, Oshkosh, is Dr. John B. Hughes, '55, a pediatrician. Two of the department heads there are Dr. William E. Clark, '31, surgery; and Dr. Richard C. Wolfgram, '55, OB-Gyn.

□

Dr. Richard J. Blank, Res. '67-70, has been appointed to head the new nuclear medicine department at Sacred Heart Hospital, Eau Claire. For the past year he has been an assistant professor at UW.

□

Two 1945 classmates, Drs. John M. Irvin, Monroe, and Robert C. Puestow, Manitowoc, are president and secretary-treasurer, respectively, of the Wisconsin section of the American College of Physicians.

□

Dr. Philip A. Hoffman, '57, Madison, was elected president of the Wisconsin Society of Anes-

thesiologists in September. President-elect was Dr. Frederick J. Carpenter, '53, Wauwatosa.

□

Dr. Fred C. Prehn, '26, Wausau, Wis., was honored by some 800 patients at a surprise party on the day of his retirement last October. Dr. Prehn served the community as a physician and surgeon for 47 years.

□

Two alumni on the UW faculty were among 38 physicians elected as Fellows of the New York Academy of Sciences on Dec. 1. They are Edgar S. Gordon, M.D., '32, professor of medicine and UW Hospitals chief of staff, and Gloria E. Sarto, M.D., '58, associate professor of OB-Gyn.

□

Dr. James P. Kuplic, '67, after serving his internship and residency at St. Luke Hospital, Cleveland, last summer, joined the staff at Sheboygan's Medical Arts Building.

□

Director of UW's McArdle Cancer Laboratory, Dr. Harold P. Rusch, '33, is chairman of a National Cancer Institute committee which is planning the basic direction of cancer research in the United States.

□

Dr. Everett Lyle Gage, '26, resigned as chief of staff and chief of surgery at the Bluefield (W. Va.) Sanitarium last March and retired from the practice of neurosurgery last October. A son, Lyle, Jr., an M.D. and neurosurgeon, carries on the family name in the department.

□

Three alumni were elected to high offices in the Wisconsin Radiological Society in September. Andrew Crummy, M.D., Res. '58-61, of the UW faculty in Madi-

son, is president-elect. **Robert Douglas, M.D., '55**, Neenah, is vice president; **Marvin Hinke, M.D., '55**, of Marshfield, is secretary-treasurer.

□  
The new chief medical resident at the University of Rochester's (N. Y.) Strong Memorial Hospital is **Dr. Kenneth W. Piper, '69**. His plans include a cardiology fellowship and then clinical practice in the Midwest.

□  
**Dr. Kathryn S. Budzak, '69**, is practicing at the St. Mary's Hospital emergency room in Madison after having recently joined the group, Emergency Physicians of Madison, S. C.

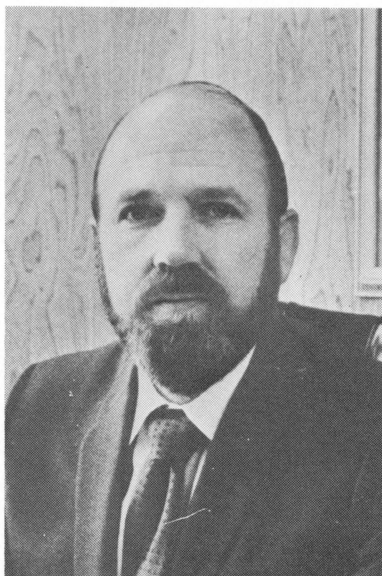
□  
**Dr. John M. Clark, '46**, recently became assistant professor of radiology at the Medical College of Wisconsin in Milwaukee. He was assistant clinical professor at the USC Medical School, Los Angeles, and had also practiced in San Gabriel and Arcadia, Calif.

□  
Chief of staff of Cottage Hospital in Santa Barbara, Calif., is **Dr. John R. Rydell, N'43**, a general surgeon who is a past president of the county medical society.

□  
A 1970 alumnus, **Dr. Ronald P. Shaw**, is stationed with the airborne troops at Ft. Bragg, N. C. After five parachute jumps he says it's quite an experience and after the fright leaves a real thrill. He's also begun flying lessons to keep up with a brother, brother-in-law and father-in-law.

□  
**Dr. Gary S. Clarke, '64**, has completed his radiology residency at the University of Minnesota

and this month moved to Spokane, Wash.



*Irving Moskowitz, M.D.*

**Dr. Irving Moskowitz, '52**, Long Beach, Calif., in September was named as the 25th recipient of the "Brotherhood Man of the Year." The honor is bestowed by the California Jewish Voice and is recognized by the National Conference of Christians and Jews. Dr. Moskowitz heads a Southern California medical care complex.

□  
**Dr. Richard B. Foe, '48**, and Res., Greeley, Colo., is a practicing cardiologist who sets an example in an exercise program. He is the Colorado State Medical Society's tennis champion.

□  
In a recent letter, **Dr. Richard Christensen, '69**, wrote from Japan that he was on a 3-month Coast Guard tour as physician or consultant to his own or nearby

ships. He returned in January to Indian Health Service duty at Phoenix, Ariz. Dr. Christensen has had contact with classmates **Mike Mikkelson** and **Bob Kaupia** who are at Whiteriver on the Apache Reservation northeast of Phoenix.

## Necrology

We report with regret the following alumni and faculty deaths.

**Dr. Frank R. Menne, '14**, Pebles, Wis., Aug. 25, 1971.

**Dr. Mynie G. Peterman, '22**, in Milwaukee, Oct. 14, 1971.

**Dr. William D. Stovall**, emeritus professor of preventive medicine and State Hygiene Laboratory director for 44 years, in Madison, Nov. 18, 1971.

**Dr. John W. Lowe, '23**, Oct. 1971, in Mesa, Ariz.

**Dr. Alvah L. Newcomb, '20**, in Wilmette, Ill., Oct. 10, 1971.

**Dr. Cyrus G. Reznichuk, '33**, Madison, Sept. 7, 1971.

**Dr. Theodore J. Kroyer, '34**, Walworth, Wis., Sept. 28, 1971.

**Dr. Robert J. Dancy, '37**, M. Vernon, Ill., Oct. 6, 1971.

**Dr. Herv Dietrich, '39**, in E. Paso, Tex., Dec. 6, 1971.

**Dr. Edward T. Sheehan, '44**, in Milwaukee, Oct. 11, 1971.

**Dr. Sam B. Chapman, '46**, Shawnee Mission, Kans., May 1971.

**Dr. Bernard R. Bannen, '63-'64**, Madison, in June 1971.

## A Number of Spaces Remain On Feb. 19-26 Alumni Retreat

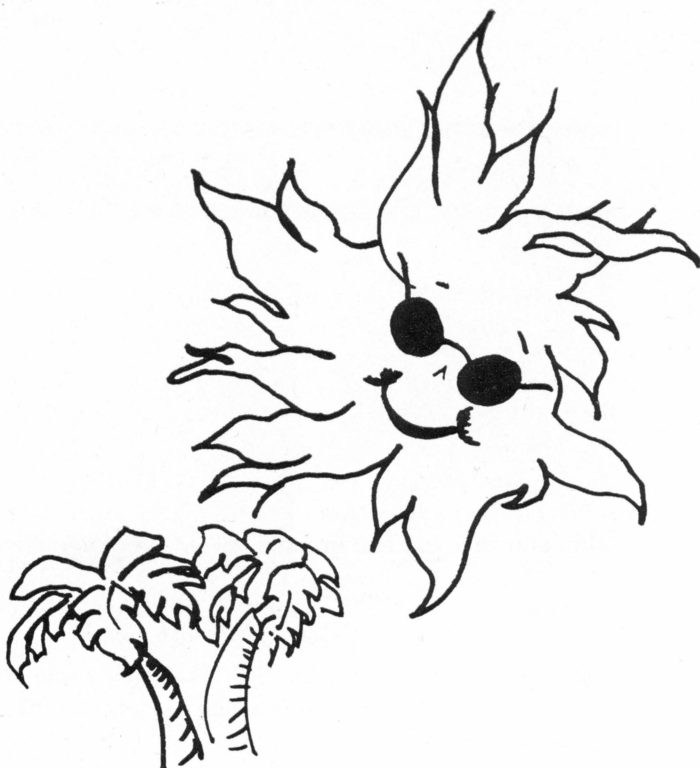
A number of places are still available for the 6th annual Alumni/Faculty Retreat to Fort de France on the Caribbean island of Martinique. "Problems in Human Sexuality," a topic with increasing impact on clinical practice, will be the subject of the Feb. 19-26 retreat.

The retreat will provide a leisurely setting in which the problems caused by our new moralities can be discussed in depth with appropriate time in both large and small groups. An attempt will be made to clarify the roles and responsibilities of the physician in the field of human sexuality. An innovation this year is that spouses are invited to register at a reduced additional fee of \$50 and participate fully in the conference.

Faculty members and their topics include: Dr. Ben Glover, psychiatry—"Psychological Problems of Menopause and Their Treatment" and "The Adolescent and the Adult Sexual Revolution"; Dr. Calvin Kunin, medicine—"Venereal Disease—Problems and Therapy" and "Therapy of Urinary Tract Infection"; Dr. Gloria Sarto, Gyn-OB—"Office Gynecology" and "Current Therapies in Female Endocrinology"; and Dr. David Uehling, surgery—"Office Urology Vasectomy Clinic Studies" and other presentations.

There will be group discussions on "Sexual Re-Education" and "Overview of Population Control."

Cost of the 1972 Alumni/Faculty Retreat will be \$1,190 for couples, \$1,249 per couple if the spouse



participates in the education sessions, and \$799 for individuals.

Participants will fly from Chicago to Martinique, enjoy seven nights of hotel accommodations including two meals per day, the use of all hotel facilities including tennis and a nine-hole golf course, have a welcome and a farewell cocktail party and go on a sightseeing trip of Fort de France. Transfers at the airport, hotel and return and tips and hotel service charges will be included in the fee.

There'll be plenty of time to relax, soak up the sun and shop in Fort de France (pop. 95,000), the capital of the islands. Use the coupon below.

## Register Now—6th Alumni/Faculty Retreat

Name \_\_\_\_\_ Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

For registration or further information return this form to: Wisconsin Medical Alumni Association, % Mr. Ralph Hawley, 333 N. Randall Ave., Madison, Wisconsin 53706.

\_\_\_\_\_ Registration

\_\_\_\_\_ Further Information

Enclosed is a check for \$ \_\_\_\_\_ to cover:

\_\_\_\_\_ Couples Registration Fee (\$1,190)

\_\_\_\_\_ Individual Registration (\$799)

\_\_\_\_\_ Couples Registration Including Spouse's Education Fee (\$1,249)

## MEDICAL SCHOOL NEWS

### Dr. William D. Stovall is Dead at 84

The slight, soft-spoken Mississippian to whom unknown thousands of Wisconsin women can owe their lives is dead. Emeritus Professor William D. Stovall died in Madison Nov. 18, at the age of 84.

When the Papanicolaou test for cancer came into use in the late 1940's, Dr. Stovall was director of the State Hygiene Laboratory. He saw in the Paps test an important tool in preventive medicine. There were no laboratory personnel in Wisconsin who could perform the test so Dr. Stovall started a school to train cyto-technicians who would be sent out into the state. The school of cancer cytology is still operating at the hygiene lab.

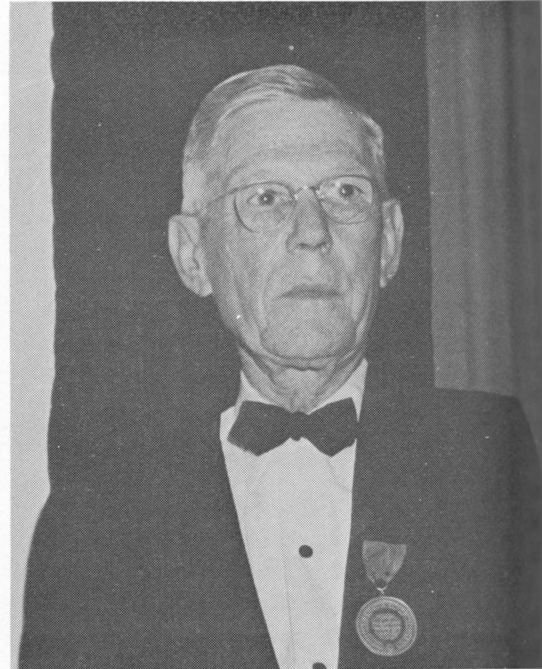
Cancer prevention was just one of William D. Stovall's many interests. He was a potent force in every movement for the health and welfare of Wisconsin citizens since he arrived in Madison in 1913 after his residency in New Orleans.

Dr. Stovall headed the State Hygiene Lab for over 44 years, was chairman of preventive medicine and a professor of hygiene, served as acting superintendent of University Hospitals for two years, was chairman of the State Board of Public Welfare, was co-founder of the Wisconsin Division of the American Cancer Society and also served as president of the State Medical Society of Wisconsin.

The fourth generation member of a medical family, William Davison Stovall was born in Longtown, Miss., in 1887. As a child he accompanied his father and grandfather in the buggy as they made house calls. Young Stovall received his B.S. degree from Mississippi College in 1908.

"I never made a real decision to be a doctor," Dr. Stovall is quoted as saying in a 1961 Wisconsin Medical Journal rare "Festschrift" edition that honored him. "It just seemed my own foregone conclusion to enter medicine. I wanted the opportunity to do something useful to fulfill a role in life."

After receiving his M.D. from Tulane in 1912, interning and doing postgraduate work, young Stovall did not follow in his father's general practitioner footsteps. "I was of a new school and different from my dad—I was fascinated by all the new wonders of chemistry, bacteriology, immunology and the like.



*William D. Stovall, M.D.*

I wanted to be where I could use all scientific and teaching knowledge which medicine had available so I could help make people happy," he said.

Wisconsin's hygiene lab and new medical school gave Dr. Stovall that chance. At the same time he helped Wisconsin fulfill its obligations of better public health.

The State Medical Society of Wisconsin cited Dr. Stovall's contributions when it named the commemorative entrance at its Madison Headquarters after him in 1958, and the Stovall Hall of Health at the Old Fort Crawford Medical Museum in Prairie du Chien in 1962. The medical center at Mendota State Hospital also was named after him in 1967. Dr. Stovall was recipient of the Society's highest honor, the Council Award, in 1940.

Dr. Stovall's enthusiasm, initiative and energy extended into many fields. A distinguished bacteriologist and pathologist, he also was a UW Medical School teacher whose example has been an inspiration to several generations of physicians. Our Medical Alumni Association recognized the influence of his teaching on Wisconsin physicians in 1964 when it honored him with its fifth Emeritus Faculty Award.

After Dr. Stovall retired in 1958 as director of the hygiene lab and professor of hygiene and clinical pathology, he stayed on at the Medical School and University Hospitals as a special assistant to the dean. "This idea of decorating retirement, making it something it isn't, is foolish," he told a writer for this magazine in 1969. "I have always done what I wanted to do and retiring hasn't changed that."

So in addition to traveling the state as a University Hospitals representative to Wisconsin physicians, Dr. Stovall at age 81 that year headed the 1969 Dane County Cancer Crusade.

State Medical Society President Dr. George A. Behnke, '42, said, "no other single physician has been more responsible for elevating the standards of all phases of medical care and education than Doctor Stovall, who served his profession and the citizens of Wisconsin with dedication for well over 50 years."

Untold thousands of Wisconsin women alive today may be unaware of William Stovall and his deeds. But those of us who knew him and studied under him will not forget his influence.

He is survived by a sister, a brother, two granddaughters and a daughter-in-law. Burial was in Madison. The family requested that any memorials might be sent to the Wisconsin State Medical Society's Charitable and Education Foundation which Dr. Stovall helped found in 1958 and which he headed until 1970.



*Oliver Smithies, Ph. D. (l.), and  
Howard M. Temin, Ph.D.*

From 1951 to 1953 he was a postdoctoral fellow in physical chemistry at UW-Madison. He then spent seven years as research assistant and associate at Connaught Medical Research Laboratory in Toronto.

Dr. Smithies returned to Wisconsin as assistant professor of genetics and medical genetics in 1960, became associate professor in 1961 and professor in 1963. In 1961 he was named Markle Scholar, in 1964 he won the Allen Award of the American Society of Human Genetics, and in 1971 he was elected to the National Academy of Sciences.

For almost two decades Dr. Smithies has investigated the structure and evolution of certain blood proteins, chromosomal rearrangements, and gene action. His "gel electrophoresis" is now the standard method of separating protein molecules and is one of the most widely used techniques in biology.

Dr. Temin is credited with launching new research around the world because of his discovery that the rules for transmittal of genetic information within the cell can be reversed by cancer viruses. This discovery may lead to an understanding of the exact mechanism by which viruses produce cancer. A native of Philadelphia, Dr. Temin was educated at Swarthmore College and the California Institute of Technology, where he earned the Ph.D. in 1959. The following year he joined the UW-Madison faculty as assistant professor of oncology to work in the McArdle Laboratory for Cancer Research. He has been full professor since 1969.

In 1968 he was named the "New Horizons for Radiologists" lecturer of the Radiological Society of North America.

## Researchers Get 'Named' Professorships

Two famed scientists on the faculty of the University of Wisconsin-Madison were elevated to "named" professorships by the Board of Regents October 8. For Oliver Smithies, voted the Leon J. Cole Professorship of Genetics and Medical Genetics, and Howard M. Temin, named WARF Professor of Cancer Research, the new titles are the latest in a long series of honors and awards.

Dr. Smithies, who will occupy the chair named for the man who founded the UW genetics department in 1910, was born in Halifax, England, in 1925. He earned his first degree at Balliol College, Oxford, where he held the Brackenbury Scholarship in Science. After graduating with first class honors in physiology in 1946, he remained at Oxford to earn the M.A. and Ph.D. degrees in biochemistry.

## **D**r. Hong is Appointed Associate Dean

Appointment of Richard Hong, M.D., as associate dean for clinical sciences was announced in October by Acting Dean Henry C. Pitot. Dr. Hong, a professor of pediatrics and medical microbiology, assumed the post Oct. 25, replacing Ben Peckham, M.D., who held the position for five years before he recently asked to be relieved.

The job, which includes the coordination of clinical teaching for medical students at University Hospitals and other facilities, became Dr. Hong's major activity. He still will continue to practice and research in his specialty, however. A native of Danville, Ill., Dr. Hong received all of his education at the University of Illinois. He interned at Cook County Hospital, Chicago, served as an Air Force physician, completed a residency and was a research associate at Cincinnati Children's Hospital before joining the pediatrics department at the University of Minnesota in 1965. He was a professor of pediatrics at Minnesota when he joined the UW-Madison Medical School faculty in 1969. A story about his successful thymus transplants appeared in our last issue.

## **A**lumni Receive UW Professorships

Eleven alumni were among 30 Medical School faculty members who were promoted to full professor or associate professor by the UW Board of Regents at its October meeting. In addition, two medical professors were voted emeritus status.

Promoted to professor were Leigh M. Roberts, M.D., Res. '53-56, psychiatry; Donald R. Korst, M.D., '48, medicine and assistant dean; John F. Morrissey, M.D., Res. '55-56, medicine; and John B. Wear, Jr., M.D., '54, James D. Whiffen, M.D., '55, and William H. Wolberg, M.D., '56, all surgery.

Advanced to associate professor was Joyce C. Puletti, M.D., '54, radiology. Those promoted to clinical associate professor were Sigurd E. Sivertson, M.D., '47, medicine and UW Extension; and Steven W. Babcock, M.D., Res. '59-63; Frances H. Grimstad, M.D., '37, and Giuseppe Perna, M.D., Res. '60-63, all of medicine.

Ovid O. Meyer, M.D., '26, professor of medicine, and Charles V. Seastone, M.D., professor of medical

microbiology, were advanced to emeritus professor status by the Regents at their last meeting before the UW-WSU System merger took effect.

## **H**ospital Expands Patient Dial Access

"Help for Home Care," "X-ray and Your Children," "News for Mastectomy Patients," "Brain Scans," "Your Hysterectomy" — these are just a few of the new 5-7 minute tape recordings University Hospital patients in Madison can hear through its Patient Dial Access Library.

By dialing a certain internal telephone number, UWH patients can learn about 77 different topics ranging from hospital orientation and how to get financial and billing assistance to explanations of medical and surgical procedures they will be undergoing. Patients, upon entering University Hospital, receive at their bedsides a list of the recordings, a list that has grown from the original 30 over the past year.

The Patient Dial Access program was pioneered at University Hospitals and assistance has been given other Wisconsin hospitals in starting similar services. Another affiliated institution, Madison General Hospital, has started its version of the program recently.

## **R**egents Accept Alumni Gifts, Trusts

Alumni support to the Medical School totaling \$40,000 was accepted by the University's Regents at a recent meeting. The total includes \$24,247 in unrestricted support from last year's Alumni Giving Program plus funds earmarked for various loan and trust funds. These include:

Friends of the Medical Library, \$2,590; the Class of 1947 Award, \$1,088; the O. O. Meyer Clinical Teaching Fund, \$7,240; the Lester W. Paul Visiting Professorship in Radiology, \$2,745; the Ralph M. Waters Scholarship, \$360; the Robert E. Burns Memorial Medical Student Loan Fund, \$675; the Dr. Stacy Simon Memorial Loan Fund, \$710; the Dr. Sidney Orth Memorial Fund, \$55; and Scholarship for Disadvantaged Students, \$290.

## UW First to Use Minicomputer Control

University of Wisconsin Hospitals' patients are now receiving computer-controlled radiotherapy treatments from the first equipment of its type ever installed in a hospital. The new system consists of a mini-computer called CART (Computer-Assisted Radiation Therapy) attached to a CLINAC 4, a cancer treatment machine which uses electrons to produce x-ray radiation.

Basic features of the system include: A 20-30% reduction in setup time for radiotherapy treatments increasing the patient load each day; Increased precision of treatments; Faster and more efficient handling of patients' medical data; and Important safety features built into the system for patient protection.

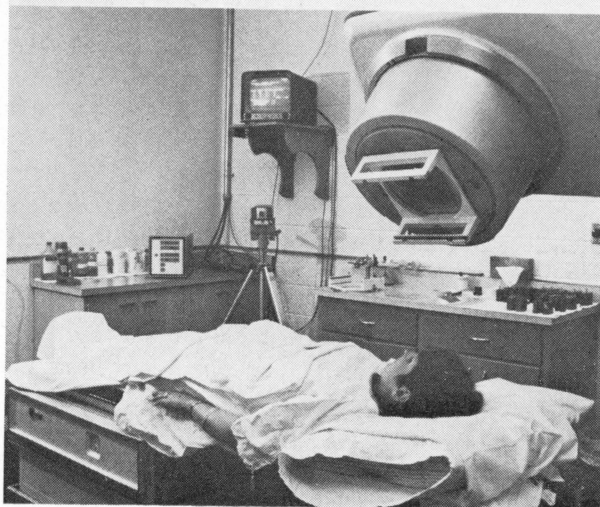
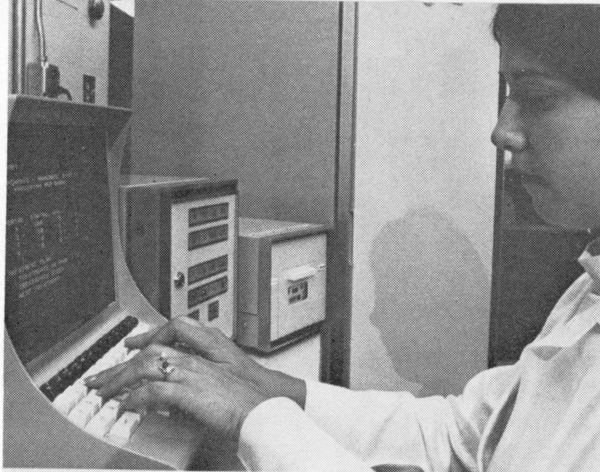
With the CART system, all medical information concerning a patient's treatment is stored on a single 5 inch tape cassette. When a technician prepares for a radiotherapy treatment, he places the patient's personalized tape in CART's cassette reader. The information then feeds into the computer which positions the CLINAC 4 and the patient for treatment. Beam size and direction, radiation dosage level and duration, focusing and the patient's position are set up automatically.

Once the technician turns on the equipment, the computer directs the radiation therapy treatment according to the taped information. Double checks throughout the treatment process by the technician are built into the CART system to eliminate any possible treatment error.

When a treatment is completed, that information is added to the cassette and an automatic printout of the treatment information is made on a teletype machine. This printout is included in the patient's record.

CART was developed by Varian Associates, a California instrument firm. The first one made was sent to University of Wisconsin Hospitals in March. The system was "debugged" under the direction of Medical Physicist Dr. Donald D. Tolbert.

Dr. Tolbert feels that CART has proven very successful for radiotherapy treatments. "CART helps to give unprecedented precision in administering radiation therapy treatments," he says. "It can position a patient with consistent precision required for radiation therapy treatment procedures. This substantially reduces the possibility of unnecessary exposure to healthy organs in close proximity to infected tissue. CART's precision also minimizes the possibility



*The first minicomputer-controlled radiotherapy system is now treating patients on a day-to-day basis at University of Wisconsin Hospitals. A tape cassette containing the patient's history and treatment plan is inserted into the system by Radiologic Technician Kay Bergner verifies patient identification (top photo) and actuates the system. From this point on the minicomputer controls the giant Clinac 4 (lower photo), including dosage, beam direction, focus and other factors.*

that a cancerous area will receive more or less radiation than that specified by the physician," Dr. Tolbert explains.

UW Hospitals Radiotherapy Center administered 219,865 treatments last year.

## Remember Our 1972 Meeting Dates

Be sure to place the following Wisconsin Medical Alumni Association meeting dates on your calendar:

**February 4, 1972** — The Milwaukee Mid-Winter Meeting to be held downtown at a suitable location. Dr. Loron Thurwachter, '45, is program chairman.

**Alumni Day, May 26, 1972** — A Friday meeting in Madison.

## Device Transmits ECGs to UW Hospitals

In a matter of minutes, heart specialists at University Hospitals can now receive and read electrocardiogram (ECG) tracings sent from community hospitals in Wisconsin. The machine used is a telecopier, a small instrument capable of sending copies of printed matter long distances by telephone signal.

A physician in a hospital 250 miles from UW Hospitals, for example, can take an ECG on a patient, mount 12 leads from it on a standard size sheet of paper, insert the paper in telecopier and then dial University Hospitals ECG Center.

When the ECG Center's telephone rings, the technician picks up the receiver, obtains the caller's identification and then both parties put their telephone receivers in the cradle of their telecopiers.

In 2½ minutes the ECG Center has an exact duplicate of the ECG on a patient 250 miles away.

If the tracing was sent on an emergency basis, one of University Hospitals' cardiologists reads it immediately and phones his diagnosis to the physician. Otherwise each day's ECG tracings are accumulated until afternoon for reading by a cardiologist. Each hospital is then phoned with the cardiologist's report and a written copy is sent by evening mail.

The ECG Center, a service available to all hospitals in Wisconsin, was begun by Dr. Richard Wasserburger, '46, professor of medicine, and William Mueller, medical physicist.

"All hospitals have the equipment to take an ECG," says Dr. Wasserburger. "However, they are all not staffed by physicians certified to interpret ECG tracings. Our program provides the state's physicians an

opportunity to have a patient's ECG read immediately or by the end of the day."

In addition, one of the cardiologists from UW Hospitals takes a telecopier home nights and weekends, making the service available at all times. "There is no charge to transmit an ECG to UW Hospitals," says Dr. Wasserburger. "The physicians in Wisconsin also have an opportunity to consult with us at any time at no cost."

"The hospitals using the ECG Center seem delighted with it," comments Mr. Mueller. "We began on June 1 reading tracings for four hospitals and by year's end, we hope to provide the ECG Center service to 26 hospitals."

## Waisman Fund to Aid Child Health

The University's Board of Regents in December accepted a \$2,529 gift from the friends of the late Dr. Harry A. Waisman, '47, to establish the Harry Waisman Memorial Fund. Income from the fund will be made available to a graduating medical student who has shown the greatest talent in the study of children's health problems.

Selection of recipients will be made by an appropriate Medical School committee and the award will be made only when a particularly deserving candidate is available.

Dr. Waisman, a world renowned leader in the fight against mental retardation, died last March at the age of 58. He was professor of pediatrics at UW and headed the Joseph P. Kennedy, Jr., Memorial Laboratories for retardation research there.

## Dr. T. C. Meyer is Royal College Fellow

Associate Dean Thomas C. Meyer has recently been elected a Fellow of the Royal College of Physicians in England. The College is an organization of physician-scientists and through it physicians may attain a higher degree in a specialty area than the general medical degree, which otherwise is the highest an English physician may attain.

Dr. Meyer, a professor of pediatrics and director of the school's program for post-graduate medicine, has been a member of the Royal College of Physicians since 1954. He is a native of South Africa.

**Have**  
**you paid your 1971-72**  
**Medical Alumni dues?**  
**Alumni dues bring this**  
**magazine to you.**

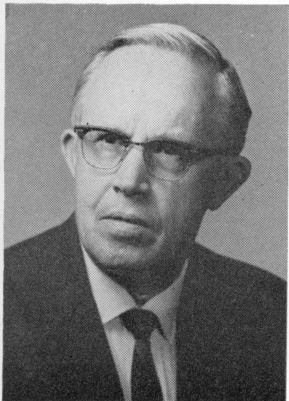
## COLUMNS AND EDITORIALS

### Texas Reports on '71 Alums, Others

BY EDWARD J. LEFEBER, M.D., '36  
TEXAS CORRESPONDENT

GALVESTON—From the UW Medical School's Class of 1971, four came to serve internship assignments in Texas. Our San Antonio correspondent, that allergist with a propensity for tennis, Bernie Fein, '38, writes that David M. Kashnig has an internship at the Bexar County Hospital in Internal Medicine, University of Texas School of Medicine in San Antonio. Kashnig is single, hails from Sheboygan, likes Texas but hopes to return to Wisconsin to practice.

In Galveston Michael J. Ansfield is a straight medical intern in the department of medicine, University of Texas Medical Branch Hospitals. Although he claims Shorewood, Wisconsin, as the home town, he is a native son of Texas — not Wisconsin. While his parents were temporarily residing in the Lone Star State during World War II he chose to make his entrance. He is now married and history will soon repeat itself for into the Ansfield family will be the addition of another Texan. After his internship Ansfield plans to fulfill his military obligation. Serving internships at Dallas' Baylor University Medical Center are Robert H. Jacqmin and John J. Rank, both of whom I know have been welcomed by Wisconsin medical alumni in that city.



Dr. Edgar C. Gordon, '32, professor of medicine at UW Hospitals, was a guest participant at the 16th Annual Clinical Conference, Texas Medical Center in Houston, Nov. 11 and 12. The subject of the conference was "Endocrine and Non-endocrine Hormone-producing Tumors." Dr. Gordon discussed "Hypoglycemia in Extrapaneatic Tumors."

Dr. Marvin H. Olson, '44, joined the faculty of the University of Texas Medical Branch on Sept. 1 as

director of radiotherapy and associate professor of radiology. He comes to Galveston from Madison where he was assistant professor of radiotherapy at the University Hospitals Radiotherapy Center. Dr. Olson was honorary consultant in radiotherapy at Hammersmith Hospital in London, England, for four months prior to his arrival in Galveston. After graduation from medical school in 1944 and upon completion of internships at Norwegian American Hospital in Chicago and at Crile General Hospital in Cleveland, he served with the United States Army for two years, assigned to the Surgery Service at Camp McCoy, Wis., and Mayo General Hospital, Galesburg, Ill.

He then did general practice at Wausau, Wis., for two years followed by specialty training in general surgery at St. Luke's Hospital, St. Louis. Two years later he returned to Wausau where, for the next 17 years, he did general practice and general surgery. From 1950 to 1965 he was a member, Board of Directors of the World Medical Association's U.S. Committee. In April 1968 he gave up his practice and returned to Madison to become a fellow in radiotherapy at UW's Radiotherapy Center. He is a member of many specialty societies and published several scientific papers related to his specialty. Dr. Olson is married and has one child. The Olsons reside at 30 Adler Circle, Galveston.

From the pages of the November 1971 issue of **Texas Medicine** I read that two Wisconsin alumni, Glenn A. Meyer, '60, neurosurgeon at UTMB Galveston, and Joseph S. Weycer, '61, Houston, were among 66 Texas physicians named fellows of the American College of Surgeons at a recent meeting of the College.

In the mail bag this past August there was a friendly note from Chauncey D. Leake, Ph.D., '23, who now resides in that "cool and foggy but the sun shines through" city of San Francisco. From 1942 to 1955 Dr. Leake served as vice-president and dean of the University of Texas Medical Branch, Galveston. He has returned several times during subsequent years, the most recent in 1970, to lecture on the history and philosophy of medicine and public health.

The UTMB History of Medicine Society was renamed the Chauncey D. Leake History of Medicine

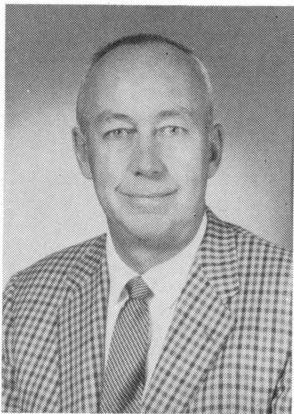
Society in 1965. During their Galveston years Dr. and Mrs. Leake were known for the warmth and graciousness of their hospitality and for their energetic, enthusiastic interest in affairs—not only of the medical school but of the community and state. This past Oct. 1, 1971, Dr. and Mrs. Leake celebrated their golden wedding anniversary. This correspondent wishes Dr. and Mrs. Leake many more happy anniversaries, good health and “Oleanders.” Dr. and Mrs. Leake reside at 1213 Clayton St., San Francisco, Calif.

## Southwestern UW Recollections

BY JACKMAN PYRE, M.D., '37  
SOUTHWESTERN CORRESPONDENT

**TUCSON**—My wife, Wyndham, our two youngest daughters and I finished a month-long August vacation which had included two weeks visiting Wyndy's mother in Lincoln, Va., and two glorious weeks in the West Indies with a short but sweet Labor Day weekend in Madison. We helped marry off Willie and Mary Ellen Stafford's Cathy at the old Pyre home in the Highlands, which Willie bought from my mother.

We stayed, self invited, with Sally and George Johnson in Maple Bluff and had dinner with Ruth



and Hoodie Weston and friends. Ruth had rounded up a group of 44th General Hospital nurses and doctors and it was just great. Doctors and spouses included the LeRoy Sims, Si Rogers, Eddie Burges, Eddie Gordons, Herbert Pohles, Murph Shapiros, and Mrs. Kay Lemmer, without Ken. Carl Weston was also there. Some of

them were looking their ages—many were definitely not.

I'm sure that I looked older than God with my month-old full beard, untrimmed. They will be glad to hear that it is gone. It was too soon over, but after 25 years in far off Tucson I have learned not to regret

the shortness of the visit but to cherish the moment with old friends. I missed John Bentley who, I suppose, was the oldest of us all. I got a chance to fight the war a little more with Herbie Pohle, my old roommate, and before that intern-resident buddy.

This fall I got to see Si and Ginny Rogers again and was amazed to find that he had turned into an ardent, sophisticated fly fisherman. They were cruising around the Southwest looking for greener pastures when last seen.

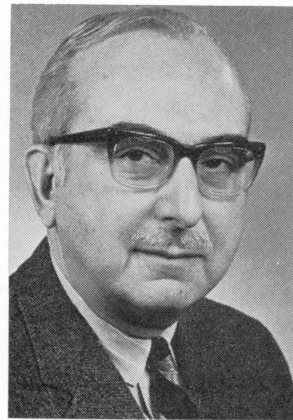
Sad news. On Dec. 6, Herb Dietrich's (39) was called from El Paso with the news that he had succumbed to his lung cancer.

(Southwestern correspondent Pyre welcomes alumni news at his office, Suite #107, 601 N. Wilmot Rd., Tucson 85711.)

## Things are not Always as They Seem

BY MISCHA J. LUSTOK, M.D., '35  
EDITOR

**MILWAUKEE**—Did you ever feel a river speak? With one stroke of the paddle we put our canoe in midstream and left the docking area. The floss of twigs and branches joined our craft as we let ourselves drift with the languid current. It was a gentle day, the arrogance of the morning sun tamed to a modest blush by vapor clouds, and the intrusion



of the wind denied by swaying trees on either shore. We followed the river's path dipping our paddles only to guide our craft past the challenge of protruding rocks and deceiving shallows. Beyond a bend we ran some swift water and came to a broad span of the river where the widened shores formed a pool just below the rapids.

Here the water was almost still, and the tree-lined shores were adorned with a trim of reeds and water lilies. We chose this spot to pause and fish.

Almost at once we were captured by a peculiar mood, an inward feeling that it would be sacrilegious to disturb the serenity of this quiescent pond by casting upon its waters. We did not wax our flies, but let our rods lay at rest and sat in reverent contemplation of the scene. It was a time for sensuous thought. How clever the river must be to know when to run fast through the narrow crowding shores, past the angry boulders, and to gently slow its pace at the prospect of a calmer vista and less turbulent waters.

Calmed in our sanctuary with the water meekly stroking the sides of our canoe, we felt the timid river speak: "Things are not always what they seem to be," said the river.

"Don't you know that it is not I who is flowing by, but it is you. I have been here for many centuries, and here I will remain while you, not I, flow on. Don't be misled by the illusion. Some things only seem to move, but in truth do not, for they are indeed most obstinately permanent."

So spoke the river, albeit we did not hear, we felt its message. We took no fish that day.

It is well to remember the wisdom of the river even in the mundane course of human events. We sensed this truism when we learned that Dr. Peter Eichman moved out of the Office of the Dean. Did he really move out? We doubt that.

Bardeen's organizational expertise is still there, so is Middleton's academic teaching excellence, and Bowers' energetic drive, and Crow's searching mind, and Cohen's uncompromising integrity, and so must be Eichman's human warmth and understanding, his poetic vision of growth, and his humble courage. They are all still there, firmly implanted in the Office of the Dean while the school moves on. Things are not always what they seem to be.

## Northwest News Notes

BY JAMES H. DAHLEN, M.D., '61  
NORTHWEST CORRESPONDENT

SEATTLE—Our landscape is blanketed with four inches of snow (which is unusual for our area) as I hammer this out. Maybe the Japanese Current is on strike due to the import surcharge.

It's the time of year to bring you up to date on the recent Wisconsin graduates in the area and their activities.

Colin Drury, '70, is a first-year surgical resident at Swedish Hospital, but is looking forward to a return to northern Wisconsin in the future. He constitutes the senior member of a trio at Swedish this year, as Beverly Wittkopp, '71, and James Hanson, '71, are both interning there. Jim has been accepted as a surgical resident at Swedish for next year, and Bev has applied to Children's Hospital here for a pediatric residency.



She had been thinking along these lines since graduation, and is pulling six months of pediatrics and five months of medicine as an intern. Her husband, George, '70, was beckoned by Uncle Sam in November, leaving a temporary post as physician at the Seattle City Jail. He is currently at San Antonio in Army green, and Bev spent her holiday vacation with him there. He hopes to arrange transfer to Madigan Army Hospital in Tacoma after the first of the year.

Ken Feldmann, '70, is taking some time off from a pediatric residency to work at the Odessa Brown Clinic here in Seattle—a pilot program ghetto clinic. Paul Sandstrom, '70, is a first-year medical resident at Virginia Mason Hospital here.

John Erbstoesz, '71, is an intern at Harborview (King County) Hospital and has been accepted as a family practice resident for next year in the new program at the University of Washington. A new physical plant for the department is abuilding and scheduled for completion in June of 1972. This will include a family practice clinic and space for the departmental staff. We hope the floor is well-shielded, since the area below will house the new quarters for the Department of Therapeutic Radiology, under Bob Parker, '48.

Should any of you be in need of craniotomy while surfing in Hawaii, my spy system reports Dar Ferry, '61, to be well-entrenched at Tripler Army Hospital in neurosurgery.

A 1936 alumnus in Spokane, O. Charles Olson, recently had a book, "Prevention of Football In-

juries," published by Lea and Febiger. It's written primarily for high school and small college football coaches, trainers and team physicians in the hope that it will accomplish just what the title says.

Gordon McComb, '58, in Portland continues to be busy in general practice and has recently moved into a new home there. We were sorry to have missed Ed Gordon at the Oregon State Medical Association meeting in September, but hope the Oregon alums made him welcome.

(Doctor Dahlen may be reached at the Northwest Professional Center, 1570 N. 115th St., Seattle 98133.)

## Southeastern Alumni News and Views

BY HERBERT C. LEE, M.D., '35  
SOUTHEASTERN CORRESPONDENT

**RICHMOND** — After an early November with temperatures in the 80's, so warm that I could sit out on the terrace to bask and read in the sun, it has finally turned cold and seasonable here in mid-November as I write this column. The leaves will now turn color and start to fall. I'm still at home recovering from my illness of last summer but hope to get back to work in January if my present progress continues.

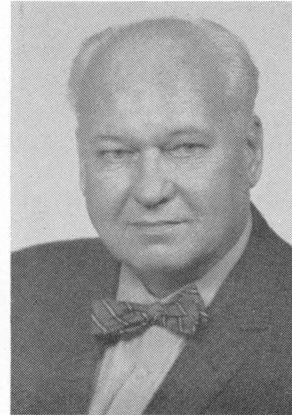
### Remember the Medical School in your will . . . . .

Thoughtful bequests have done much to enrich the Middleton Medical Library and the History of Medicine Department; provide student financial aid, further research and establish name professorships.

Helpful advice concerning estate planning, the advantages of "deferred gift" options and opportunities to perpetuate the name of a loved one through a lasting memorial gift or bequest is available from:

**The University of Wisconsin Foundation  
P.O. Box 5025, Madison 53705**

I am somewhat disturbed by the efforts of house staffs to reunite. Even though there is a movement on foot to organize all doctors I can't see what the house officers have to gain. Thirty years ago we



finally got \$50 a month in our fifth year of training. Now they make about \$12,000 a year more at the same level. Even with inflation this is a good living wage. Residents often are married, have 2-5 children and many of their wives work. I don't begrudge them their income.

It is voluntary with the hospitals. Hence, there

are variations in the amounts but the paying patient has to assume this added financial burden. Is it fair to them? The state never gives you all the money you ask for, but the bills must be paid.

A survey taken last summer stated that while house officers were organized in 70% of the non-governmental hospitals, their chief interest rested in improving their own income. The union states that members also want to improve the health care system, yet only 5% of those queried had done anything about this aspect of their stated plans. More than 75% of the officers admitted that higher stipends for themselves was their chief gain. There is to be a February meeting of house officers in Atlanta to plan a national organization. We should all be watching results of this meeting with interest.

I have two items of interest concerning alumni. Edward H. Holland, '62, got out of the service last May and planned to practice ophthalmology in Greensboro, N. C. His address is 111 W. Wendover Ave., Greensboro 27401.

A nice letter arrived from D. G. Seymour, '48, 7119 Rockingham Dr., Knoxville, Tenn. 37919. He is practicing anesthesiology in Knoxville in an eight-man partnership. He took his training at St. Luke's in Chicago. He is now a member of the executive committee of the Knoxville Academy of Medicine and has been appointed by Governor Dunn to the Tennessee Historical Commission. He and his wife Lois, worked for a secret group of 12 for the election of Senator Brock against President Nixon's No. 1 target, Senator Gore. They worked for 18 months before the election and Lois was the chief organizer

for her county and raised a staff of volunteers. They worked for the same organization that was retained by Nixon to head his new Youth Movement. More power to them both!

I was sorry to hear about the deaths of Drs. Sullivan and Mabel Masten. Doctor Sullivan was the favorite of students for many years and I am sure that he had a full and rewarding life. We also were glad to see the results of the poll on preceptorships. I spent mine at the Gundersen Clinic in La Crosse and it was three of the most enjoyable months of my medical training. I know few of the present preceptors, but am glad the program is continuing.

Peace.

(Doctor Lee may be reached at MCV Station, Box 876, Richmond, Va. 23219.)

## William Snow Miller's Legacy

BY GARRETT A. COOPER, M.D., '35  
MEMBER, EDITORIAL BOARD

MADISON—Two articles in the Fall 1971 Wisconsin Medical Alumni QUARTERLY bring to mind another use of the Middleton Medical Library which you alumni so generously gave the UW Medical School.

Miss Helen Crawford, who has recently retired as director of the medical library and the present Middleton Medical Library, used as one of the library nuclei the William Snow Miller collection of history books. This extensive collection in Dr. Miller's library was purchased by the Regents for \$15,000 after his death in 1940. Dr. Miller favored textbooks in the history of medicine and the collection included 1543 and 1545 Basel editions of the *Fabrica* by Vesalius.

This collection is now housed in the History of Medicine room together with other acquisitions, especially those most recently obtained by Miss Crawford at a rare book auction in London. These



were books sold by the Royal Medical Society of Edinburgh Library which had been founded in 1734 (see article in the Spring 1970 QUARTERLY).

The History of Medicine division of the library was given impetus by William Snow Miller as he started a seminar on the subject. According to Dr. Paul F. Clark, writing in the University of Wisconsin Medical School Chronicles, "Dr. William Snow Miller in 1909 invited a group of students to join him informally in his rooms at the University Club to consider some of the great names and achievements in anatomy.

"Later these meetings took place in his welcoming home. Beginning with medical students and later shifting to the faculty, these meetings have continued through the years, for a period with Dr. Meek as the leader and then under the stimulus of Dr. Ackerknecht, the first professor of the History of Medicine."

Dr. Ackerknecht was brought to the University in 1947 through the generosity of Mr. Thomas Brittingham who provided funds to establish a medical school professorship, not supported by the regular University budget.

The seminar has continued since its inception under various leaders and is presently under the leadership of Dr. Guenter Risse recently appointed associate professor and chairman of the Department of History of Medicine. (See the Fall 1971 QUARTERLY for his curriculum vitae and an article on the role of contemporary medical history.)

The William Snow Miller seminar met once a month during the winter, and a paper was presented by some member or an outside speaker. As the group enlarged to include members from all departments of the Medical School, the papers also covered leaders and subjects from all branches of medicine.

Presently the membership and attendance is open to all those interested in the history of medicine. Since the advent of the history of science department at the University the ranks of the seminar have swelled considerably.

Many of the papers which have been presented at these meetings have been published in the appropriate History of Medicine or other journals. Presently there are 39 leather bound volumes containing 202 typed essays which have been delivered by over 80 authors at these seminar meetings between 1913 and 1956.

Dr. Middleton has been a most devoted member of the seminar since he came to Wisconsin and he

continues to be an active member, producing papers for the seminar. Dr. Paul Clark, likewise, is a faithful member and has gathered in his book on the Wisconsin Medical School Chronicles much of the information which I am presenting.

Dr. Hans Reese is also a member and contributor and through his generosity has given the medical historical library a number of volumes pertaining to this subject. Dr. Otto Mortenson is a long-time member of the seminar. Dr. William Oatway was a contributing member as long as he lived in Madison.

Drs. Henry Bunting, Irwin Schmidt, Edgar Witze- mann and John Harris were members of the seminar when I was privileged to join. And Dr. Theodore Bast was another member who was most zealous in producing papers for the seminar.

This seminar, which is open to anyone, has been a stimulus to many of us, forming a hobby both instructive and to a certain extent a form of relaxation from present-day problems.

Study of the history of medicine is an excellent opportunity for the collection of books devoted to men of medicine in the past. Today with the impetus provided by the broader aspect of the history of science, the field of medical history becomes much more important. It also becomes a special subject which will be carried on by our new Chairman Risse in the Department of History of Medicine.

Dr. Risse deserves our support, both in the form of interest and seminar attendance and also through financial contributions that his department needs to carry on its work.

## An Open Letter — Winter Installment

BY JOHN R. PETERSEN, M.D., '54  
PRESIDENT

**WAUWATOSA**—Recently, and in relation to Dr. Peter Eichman's resignation as dean of the University of Wisconsin Medical School, several alumni have expressed serious concern for their Medical School, recognizing in their remarks the important leadership role the Medical School must play and the requirement that there be strong administration for this to occur. A few views change, in this instance and administrative change, as symptomatic of or even synonymous with turmoil and weakness.

During the past decade, most medical schools in the United States have experienced a turnover of deans every 3-4 years. This represents a striking change from the preceding decade's relative stability and merits thoughtful examination.

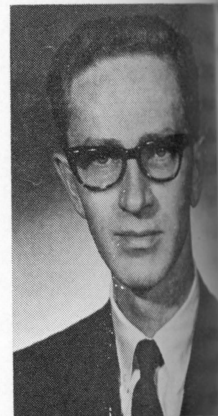
As our society examines its purposes and present directions reaffirming some, revising some, and rejecting others, change has become a part of our daily lives. Many find this rapid process of change uncomfortable and even painful. Institutional capability to participate in change and also to adjust would seem to be strengthened if there was assurance of reasonable continuity in administrative leadership.

Consequently, your understanding of at least some major pressures and forces acting on medical schools and their deans is needed. These pressures caused Robert J. Glaser, M.D., then dean and vice-president of the Stanford University School of Medicine, to state in 1969 that "deaning" had become "less and less an attractive post" as it was characterized by "too high a degree of frustration and too low a yield of satisfaction."

Before considering some of these problems, it is important that we recognize that our current need to change and adjust is the direct result of advancements in scientific knowledge and technology over the past several decades. When this is recalled, we may view our present challenges in a constructive way and perhaps consider "crisis" to denote "dangerous opportunity," the Chinese translation for the word.

Rejection of institutional forms as an expedient means to solve problems and resolve conflicts has preoccupied many during recent years. Accordingly, the organizational patterns for health delivery and especially the medical profession have been the target of frequent and sometimes bitter attacks.

Interestingly, medical schools, unlike other professional schools, seem to have been singled out for attention and in the minds of many are considered to be the "culprits." Students and faculty members as well as members of the lay public and legislative bodies are included among those holding this view.



In this setting medical school administrations and faculties are criticized for conducting too much research or not the "right kind," for educating too few physicians and again, not the "right kind," for engaging in too much delivery of service (often by doctors), or too little delivery of service (the public and legislative bodies), etc. Deans of medical schools find themselves in the middle of this storm with burgeoning responsibilities, frequently uncertain authority and almost always surrounded by part-time assistants.

Not so long ago medical schools were rather uncomplicated institutions "administered" effectively by a solitary dean, often on a part-time basis. During the past several decades medical schools have become the hub of a very major enterprise frequently called an "academic medical center." This is largely the result of massive federal funding of biomedical research leading to startling advances in medical



knowledge and technology relevant to health care. Such centers, comprised of hospitals, ambulatory care centers, research laboratories and often research institutes, colleges for nurses, pharmacists, and a host of allied health personnel constitute an exceedingly complex form of organization demanding for effective operation management skills in depth. Capital investments substantially exceeding \$150 million are common in these settings and annual budgets in excess of \$50 million are the rule.

Responsibility for the effective operation of this academic behemoth has generally fallen to the medical school dean, presumably because of its central role in the enterprise. New and often impressive titles have been conferred upon deans such as "vice-president for health affairs," "medical center director," perhaps in part to persuade him to accept the burden.

In this new role with its enlarged responsibilities the dean must function effectively as an administra-

tor, educator, financial officer and arbiter. In the latter role he must reconcile, somehow, the objectives, sometimes conflicting, of various major components of the center as well as medical school departments so that institutional objectives and commitments are realized. In this role the dean is always faced with insufficient funds to accomplish all that is of merit. Recent years have been characterized by on and off funding, more often than not the latter.

But responsibilities of the center go on and the dean puts on yet another cap—that of the dedicated fund raiser. Here he faces another problem, since the easy availability, at least until recently, of extramural funds (NIH) has, in some instances, led to the development of faculty member loyalty to the funding agency. This is detrimental to the parent school and university for it compromises the capacity to set broad institutional goals and priorities and erodes the dean's authority to lead the faculty.

It appears that this unsatisfactory state of affairs may, in part, be resolved through changes in medical education funding mechanisms which give emphasis to institutional grants and which give specific recognition to the cost of education for the first time.

Many of these generalizations (and others could be made) may be applied to the University of Wisconsin Medical School, but not uniquely, for similar problems to varying degrees face medical schools throughout the country. Doctor Eichman was acutely aware of these problems when he first announced his intention to resign well over a year ago.

In emphasizing the need for administrative reorganization and also for strengthening the Medical Center administration, he prompted formation of a Medical Center Task Force referred to as the "Shain Committee." The report of that committee states without equivocation the University's commitment to the "University Center for Health Sciences" and speaks directly to the urgent need for administrative reorganization and for strengthening of the administration to assure "effective management for the Center's resources and facilities."

Appointment of a "vice chancellor for health sciences" is an essential first step in the implementation of the administrative reorganization and strengthening as outlined in the "Shain Committee Report." It is disappointing that this search is not yet completed. However, the time that has passed is not unusual when making an appointment at this high level.

Recently, as president of the Alumni Association and in your behalf, letters were written to Chancellor

Edwin Young, Acting Dean Henry C. Pitot, and to Peter L. Eichman, M.D., expressing the Association's interest in and desire to support the Medical School.

The letter to Doctor Eichman concludes: "During your tenure as dean, you made a mark upon the School and it was a good one and it will have a lasting effect on the Medical School's development. We know that you did not accomplish all that you desired but we also understand that no dean can expect to achieve all of his goals and objectives. The issue is to have goals, to strive to attain them, and to set, thereby, a direction that will lead to their achievement when the time is right."

Doctor Eichman did set goals and labored unstintingly to work for their achievement. Progress which has been made continues the development of the Medical School and in a direction appropriate to the demands and needs of our time.

We, of the Alumni Association, have an opportunity to assist our Medical School during its transition through assurance of our support. This in turn requires that we have faith in its history, its present, and its future. The convictions of students, faculty, and alumni that the future of the Medical School is bright can and will make it so.

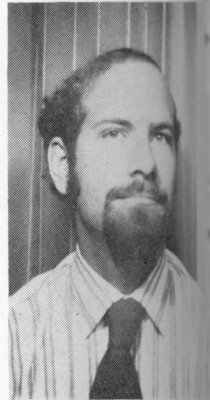
Dr. Henry C. Pitot, acting dean, and Dr. Richard Hong, associate dean for clinical affairs, have accepted the challenge and responsibility of providing administrative leadership and strength. They need, deserve, and have requested the support of the Alumni Association. That assurance has been given on your behalf.

## A Puzzle Without Pieces

BY EDWARD F. EHLINGER  
SENIOR CLASS PRESIDENT

**MADISON**—Prior to 1957 the well-rounded man was the ideal of American life and the educational system was geared to produce this type of individual. Languages, art plus social and physical sciences were neatly combined in all educational programs, regardless of individual goals, on the premise that a broad range of knowledge was necessary to function adequately in any area.

This long-standing approach came to an abrupt end with the Russian space feat, Sputnik I, and was quickly replaced by a system designated solely to surpass the U.S.S.R. in science and technology. Physical sciences became the favored nephew of Uncle Sam and received most of his money while humanities were de-emphasized because they had nothing to contribute to the national goal. The apparent success of this new policy was manifested by the first successful moon flight.



In trying to achieve space superiority the scientific specialist replaced the "total" man as America's ideal. Because of this, however, man gradually lost his individuality and became a specialized cog in the machinery of progress, designed to do one job well but with no sense of identification with the final product. Self-reliance disappeared and man became dependent on technological advances to solve all his problems. Human values were supplanted by scientific goals and as a result the USA experienced its most tumultuous decade in its history.

That medicine has been paralleling this general trend in education is evident from the rapid shift in recent years to specialty-oriented medicine. However, if recent recommendations are implemented, the greatest changes in medical education are yet to come.

Until now the medical schools have maintained an educational program designed to produce a broad framework of knowledge on which to base any post-graduate training. But the pressing need to produce more physicians has threatened this system. With the obvious answer of medical school size increases blocked by monetary and political pressures, the only alternative is to shorten training programs.

This is presently being done with many medical schools developing three-year programs, phasing out internships, starting specialty training during senior year, and shortening pre-med programs to as little as two years. If continued these programs could radically change the physician's role as we know it today.

The advantage of increasing the number of physicians by shortening training by as much as four years

is obvious; however, the trend toward earlier specialization and concentrated training has some severe disadvantages.

One such disadvantage would be a conversion of the pre-med programs into two-year scientific prep schools. This might create great scientists but be disastrous to the training of a physician. Being trained only in science would be like trying to put together a jig-saw puzzle with all but one of the pieces missing.

A physician doesn't live in a vacuum; rather he interacts with people of diversified personalities. To be effective as a person and physician he must possess many qualities of the well-rounded man of years past. He must be aware of what's happening in many fields and coordinate this knowledge to solve complex problems. An understanding of the individual thoughts and circumstances is necessary to deal with the psychological, sociological, and physical elements present in every patient.

One of the best ways to achieve this understanding is through a well balanced liberal arts education. We have labored under the myth that science is the sole prerequisite for a medical career. What we need instead is a broader undergraduate education that includes more humanities.

Shortening medical school to three years has been the major thrust in medical education "reform" but such a course prompts some rather important objec-

# C.A.P.T.

tions. With the tremendous volume of information that must be assimilated during medical school condensed into three years, only major points could be touched and students would be forced to learn an X amount of knowledge in a set time. This would afford them little opportunity to explore other fields or delve deeper into areas of interest.

Medical schools would then, like giant assembly lines, turn out a monotonous finished product similar in almost every aspect of medical expertise. Even the goal of saving time would not be achieved as many students would later spend an indefinite period examining alternatives not available in medical school.

Combined with the three-year medical school idea is the trend toward committing oneself to specialty

training at the end of the junior year. How can one rationally make this decision with such a limited exposure to medicine? Admittedly, a few can, but the majority would feel quite insecure. An improper decision could lead to much dissatisfaction and additional time spent should one decide to change areas.

The combination of a shortened pre-med, shortened medical school, and early specialization would yield a climate of super specialization with almost no knowledge of any area other than one's own specialty. Overall patient care would suffer as the patient becomes a soccer ball to be kicked from specialist to specialist for treatment of even minor problems.

In contrast to others, one year that could be discarded without much harm to a physician's training is the internship. At present, it's a grand pubertal rite of limited educational value necessary for induction into the medical profession. Its only redeeming points are that it does broaden the young doctor's clinical experience and increases confidence in his own ability. Recognition of the internship as the first year of residency in many specialties has helped greatly to improve this year.

The best answer, however, would be to revise the fourth year of medical school to encompass the best of both years. More responsibility could be placed on the student with more emphasis on practical aspects of medicine. He could function similar to the present intern but with emphasis on learning rather than on service to the hospital and staff.

That medical education is on the verge of making some dramatic changes is evident; however, a critical examination of the alternatives must be made before anything drastic is done. Although all the suggested changes have the admirable goal of producing more physicians, they run the risk of seriously lowering the quality of medicine in this country. One must not take these changes lightly because any change will have long-term effects.

The new proposals should be tried experimentally by a few schools and the results scrutinized closely before any national policy is formulated. If the last 15 years of U.S. history are any indication, however, the possibility exists that they will be rejected. During this time it became evident that specialization and rapid progress can't solve most of our pressing problems. Because of this we are slowly reemphasizing the human values that had been discarded.

The likelihood exists that medicine, too, will realize that a physician with a well-rounded background may be the only man with enough pieces to hopefully solve the many medical puzzles.

**Wisconsin Medical Alumni Assn.**

University of Wisconsin Medical School  
333 North Randall Avenue  
Madison, Wisconsin 53706

U. S. POSTAGE  
Non-profit Org.  
**PAID**  
Madison, Wis.  
Permit No. 1046

Dr. Sture A.M. Johnson  
109 C Hospital  
Campus

FL

## ANY NEWS OR MOVES?

They say that 25% of us Americans move each year. This may or may not be true of UW Medical School alumni, but your association still wants to keep its records up to date. Therefore, if you've moved in the past few weeks or months, please let us know. And while you're at it... or even if you haven't moved... is there anything new and interesting in your life that you'd like to share with fellow alums? The form below is for your convenience. If you don't want to cut up your copy of the *Quarterly*, just send a letter. The address is: Wisconsin Medical Alumni Association, 333 N. Randall Avenue, Madison, Wisconsin 53706.

NAME \_\_\_\_\_ CLASS \_\_\_\_\_

NEW ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

OLD ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

DATE OF MOVE \_\_\_\_\_ ANY NEWS? \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---