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Wisconsin Medical Alumni

Quarterly

volume 18 • number four • fall 1978

University of Wisconsin
1305 Linden Dr., Madison, Wis. 53706

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MODERN ARCHITECTURE

BUILDINGS

CUT THE FLAT BLUE SKY

INTO GEOMETRIC SHAPES

RHOMBOID, TRAPEZOID,

TRIANGLES IRREGULAR AND RIGHT.

WRONG TO THINK OF VAULTS

AND ROUNDNESS OF THE SKY.

GEOMETRY

LEARNED AGAINST THE FLAT

OF PRINTED PAGE

EXTENDED NOW

THESE MILLION MOMENTS LATER

INTO ONE SWIFT VISTA-SWEEPING

GLANCE

TO THE SEARCHING MOVING SHADOWS

ON THE NORTH MCARDLE WALL,

SINGING!

WILLI BOLD



Wisconsin Medical Alumni Quarterly

volume 18 • number four • fall 1978

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TABLE OF CONTENTS

Medical Student Orientation	1
The Dean's Column	4
The President's Column	6
Needed: Medical Diplomats Mischa J. Lustok, M.D.	6
Board Room Notes	7
From the QUARTERLY Archives: 1958	8
Oatway's Column W.H. Oatway, Jr., M.D.	10
Wisconsin Doctors in Nicaragua	12
Alumni Capsules	14
Our Readers Write	22
Texas Reports Edward J. Lefebber, M.D.	24

COVER — Willi Bold is the pen name of a colleague and friend, who sent me this poem inspired by the play of sunlight and shadow on the angular surfaces of the 11-story McArdle building. It is interesting to note that poetic vision has recognized something that the artist-consultant to the architects promised when he presented the design based on the arrangement pre-cast wall sections. He said, "When the sun moves across the plane that parallels the wall the surface will sing with light and shadow". After the structure was completed some critics compared the random patterns on the surface to a skin disease. Others have mentioned the seemingly disordered pattern as suggesting "the restless spirit of research".

Careful inspection reveals that the pattern is not totally disordered and in fact reveals patterns growing upward as if to form a tree-of-life design. Finally, order is achieved in the formal design circling the highest point on the building. This ordered design is based on the Greek symbol for cancer (the Crab) converted from an oval and two small circles to a rectilinear form.

Professor Van R. Potter, Department of Oncology
McArdle Laboratory, U.W. Medical School

Cover photo by Tom Rust

HEALTH SCIENCES LIBRARY

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As co-chairs of this year's First Year Class Orientation program at the University of Wisconsin Medical School, we extend our most sincere thanks to you and the Alumni Association for your generous support. Being second year students, we can easily remember the excitement, high hopes and many changes that came with entrance to medical school. It was not only the start of a new career, but also the beginning of many personal and professional relationships with others in the field of medicine. The orientation program which we received last year (and helped plan this year) provided first year students with an opportunity to meet each other as well as upper class students and faculty in an environment of goodwill and camaraderie. The enthusiasm of the new students was matched by that of all the people who planned and participated in this program. We felt it was very important that the Alumni realized that orientation would not have been possible without their contributions. As a result, we have been able to develop a sense of community among the medical students as well as enrich faculty-student relationships. It is with the warmest feelings that we write this letter to you to express our gratitude for your support, and our thanks for the help and encouragement you gave us in planning this year's first year class orientation.

Sincerely,
Sari Gilman, Med. II
Bill Wood, Med. II



Photos by Tom Rust

Medical Student Orientation

Remember back to your first days in medical school — the worries about grades, fierce professors, finances and long hours of studying?

This year more than 60 Medical School faculty members turned out to welcome incoming freshmen at the two-day student orientation program August 29 and 30. The program was sponsored by the Medical Alumni Association and planned by a committee of upperclass students working with Assistant Dean of Student Affairs Dr. John Anderson.

Dean Arnold Brown opened the program on a reassuring note. "You're all going to make it," he told the 159 freshmen. "We're here to help you do it." Later in the program Dean Brown spoke to students about the "Challenge of Health Care in the 1980's."

Other faculty members gave students an overview of the curriculum, the personal and professional development of physicians and obligations to the profession.

The new students had a chance to ask questions and get to know faculty and upperclass students on a one-to-one basis during small group discussion sections. Each group of three to five students met with one upperclass student and one faculty member several times during orientation. Many groups will continue meeting throughout the semester.

Because the planning committee recognized the problems students face in maintaining relationships during the stressful years in school, they devoted an entire evening to the subject. In addition to small group discussions for students and their spouses or significant others, social worker Dorothea Torstenson presented a talk on relationships. One medical student and his wife added a humorous aspect to the evening by presenting a series of skits about medical students and relationships.

Workshops on money management, international medicine, student government, basic and clinical science research, and women in medicine were offered simultaneously, enabling students to attend the sessions they found most useful.

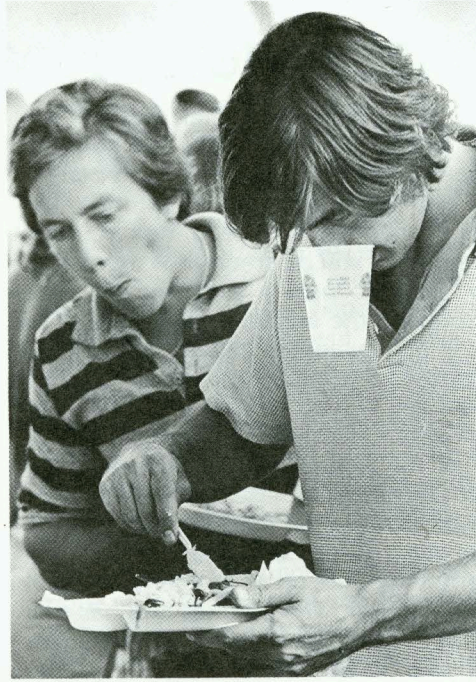
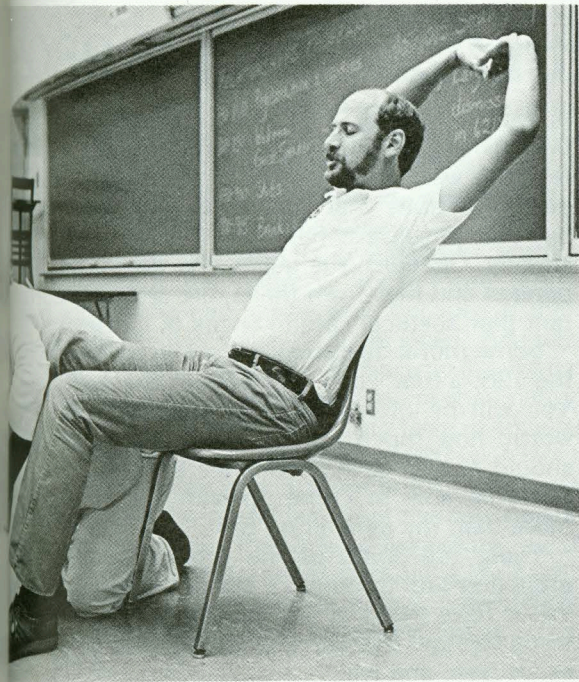
The picnic and dance at the end of the two-day program showed orientation's real success. In that short time friendships had developed and a sense of unity created. And, of course, beer, brats and corn on the cob, ensured a real Wisconsin welcome for everyone. **Q**





This row Left: Dr. Thomas Duff, assistant professor, Neurosurgery. **Right:** Dr. Warren Olson, psychiatrist, with students.

Middle row Left: Dr. Carl Whitaker, psychiatrist. **Middle:** Med student and his wife in a relationship skit. **Right:** The picnic.



Bottom row Left: Dorothea Tortenson, social worker, leading discussion on relationships. **Middle:** The picnic. **Above:** Dr. Betty Bamforth, assistant dean, Education, and Dr. James Petterson, associate professor, Anatomy.

the dean's column

Dean Arnold L. Brown's Speech
to Freshmen Medical Students

The Challenge of Health Care in the 1980's

First I'd like to mention the things that will not change in the decade ahead. There's still going to be a lot of disease. There will be a new one now and then, but, by and large, rheumatoid arthritis, the various kinds of cancer, all the things you are familiar with now, will still be around. We have little hope that by 1985, to pick a year, we will have significantly reduced the incidence of cancer. The people who will be developing cancer in 1985 will have been exposed to carcinogens before 1965. Infectious disease will still be around and, as the effectiveness of antibiotics wax and wane you will have plenty of opportunities to exercise your medical skills. Degenerative diseases and diseases of old age have been around for centuries and will be here in the years to come. Patient anxiety and patient noncompliance are other problems that will not change. The patient who smokes and has emphysema will not stop smoking; the obese patient will not take your advice concerning his proper caloric intake.

As a matter of fact, if we're concerned about longevity, we physicians are not as important as we might wish to think. The environment is probably the single most important item in terms of sickness and wellness. One's habits, one's lifestyle, are also important factors. Diet, as one ingrained habit is increasingly being recognized as a determinant of

disease processes. This should be obvious to patients who are developing arteriosclerosis at an early age as well as carcinomas of the colon. These are personal habits that somehow must be changed, but that physicians have been able to effect only slightly. Genetics, the genes you derive from your parents and they from theirs, are also more important than medical care in terms of longevity.

Some moral dilemmas are going to be around in the 1980's that won't be solved in the next decade. You will be discussing how much human life is worth, how much money the health care system should pay to save a patient's life. I suspect you won't be able to come up with the answers any more than my generation has.

These are some of the problems we've been grappling with throughout our professional careers. You'll have them in the 1980's. But there will be some changes which you will have to cope with, just as we have and will.

One is the evolving scientific base from which medicine is practiced. It is a changing body of knowledge. The half life of information in the biological sciences is measured in months, certainly not more than years. All the information that you have now will be obsolete before long. In medical school we are providing you with a base for continued learning for the rest of your lives.

There is new information from ongoing scientific research in the biomedical world that will provide



you with new and better ways of treating patients, of diagnosing illnesses and understanding disease. You will be able to offer your patients new techniques for coping with their infirmities. The artificial heart is one. I have no doubt that sometime during the 1980's the patients who develop their coronary arteriosclerosis early will be able to have such a device. There are several groups actively working on them now. The basic technology is already worked out. Of course, when we really have it worked out right, we will prevent the development of atherosclerosis in the first place. Until that time, which involves a quantum change in the way we approach our diet, the artificial heart will be a very important halfway technology.

Hip joints are put in place hundreds of times a day throughout the country. Soon those gimpy wheel jocks who can hardly walk because of their ravaged knees will have artificial ones. Artificial fingers will come about for those who no longer have the use of their hands because of rheumatoid arthritis. You are in for an exciting time as to what you can offer your patients in the 1980's.

There is evolving now a more holistic approach to health care. The physician is not the only person caring for the sick. Physician's assistants, nurse practitioners and pharmacists are joining the health care team in increasing numbers, making you more productive and the system more responsive to patient needs.

The cost of health care is high and it won't decline due to the growing superstructure of people involved in health care, such as planners and third party people. Although the cost won't come down, I think the dollars spent will yield better care.

There will be increased efficiencies on the part of hospitals, and there will be fewer hospitals. Beds and expensive equipment will be used more intensively. There will be increased accountability to the system — accountability which previously was something we did for ourselves, in the obsessive-compulsive nature of most physicians. This will add a great deal of paperwork and the other harassments of a burgeoning bureaucracy. For you this will be life as you have always known it, but I request that you have a sympathetic outlook for those of a previous generation who aren't yet used to those kinds of things.

Let me make a couple of general predictions for the 1980's that I'm sure you won't hold me to, even if you do remember them. One will be a more efficient use of resources, both human and technical. The government will force us to do this, force us to do something that we've been unable to do for

ourselves, simply because of the fierce individuality of physicians and hospital boards of directors. An increasing proportion of funds spent on the health care system will be diverted to the system's administration. Government intervention doesn't come free of charge. There will be more uniformity in health care. There will be an established way of treating acute pyelonephritis, for instance. I hold the belief that you and your patient, in the humanistic association that you develop with your patients, will be better able to design a treatment program, to devise a prognosis, than can a group of planners who, in the abstract, will be considering the question of acute pyelonephritis. As physicians your concern is for the single patient. You don't think about patients as some abstraction; you don't think about patients in terms of an average. The planner, on the other hand, thinks of patients in mass. He deals in numbers. As physicians there is a unique quality of association that you will develop, a fellowship, a kindred sort of relationship, a form of love, that is almost inexplicable to someone who has not been in that situation. There are bound to be misunderstandings between physicians and administrators despite the fact that the latter are dedicated, intelligent people.

The march of science will no doubt result in a more rational basis for the therapy that you'll be giving. But, I can guarantee you that in 1985 the life expectancy of men and women in the United States will not have changed by three months simply because the environment, the personal habits of your patients and their genetic load largely determines life expectancy quite beyond the efforts we make.

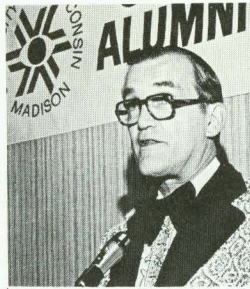
In a system that is increasingly dominated by economic considerations and government intervention, somehow we must maintain and nurture the quality that distinguishes physicians from technicians — which is simple and heartfelt compassion. That will be your challenge — a compassion that must somehow be associated with and accompanied by a deep knowledge of human biology, as well as the medical skills that derive from enduring and hard work. A skillful, intelligent, dedicated and compassionate physician is what your patient has every right to expect. And over the next four years we shall provide you with a measure of all four of these. You will be spending the rest of your lives perfecting it.

Let no one or no system, not even a preoccupation with your personal lives, get in the way of your development of these qualities. Thank you and good luck. **Q**

William E. Hein, M.D.

The President's Column

William E. Hein, M.D., '54
President



Painful Surgery

In July, the university administration and the medical school excised Dr. John Renner as chairman of the Department of Family Medicine and Practice. That they had the credentials to perform this surgery is without doubt. The surgical technique, however, has aroused a good deal of criticism as being too painful and disruptive.

The indications for this surgery have also been subject to criticism and, at best, have been poorly presented. The department had seemed to be enjoying a good degree of success as far as the state's family physicians were concerned and the residency program had a remarkably high number of its graduates that remained in the state in rural locations. Dr. Renner had been quite effective in his public relations and although his administrative style was a bit unorthodox, there was no general knowledge of the university's displeasure before his dismissal.

The postoperative care for the patient, the Department of Family Medicine and Practice, will be carefully watched. There are some that fear that this operation signals a downgrading of the department. If, as seems likely, the acting chairman is not a family physician, a permanent well qualified chairman will have to be obtained promptly to insure the vitality of the program and to avoid confirming the above suspicions.

Peer review on this operation has been and will continue to be supplied by the state's two largest medical organizations: the State Medical Society and the Academy of Family Physicians.

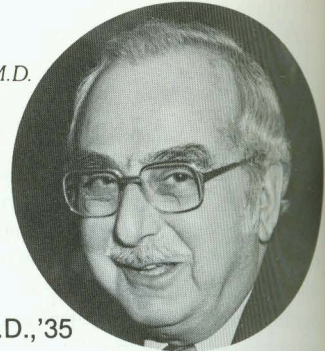
Both organizations met with university officials, including Dean Brown, in an effort to delay or prevent Dr. Renner's dismissal but without success. It is safe to assume that both organizations will continue to show interest in the affairs of the department and will not be hesitant to comment on its progress. It is essential that the matter progress in a manner satisfactory, not only to the alumni, but to the larger constituency of the physicians of the state.

It is unfortunate that the administration of our new dean must start with such controversy. Successful resolution of the matter will indeed be a challenge. **Q**

Mischa J. Lustok, M.D.

Needed: Medical Diplomats

Mischa J. Lustok, M.D., '35
Editor



Those of us who are deeply concerned with the delivery of quality medical care and the preservation of the traditional patient physician relationship are alarmed by the proliferation of governmental intrusion and impediment to our professional covenant. The propagation of bureaucratic regulations, the incursion into privileged privacy, the abrogation of personal freedoms, and the shattering of valid traditions is a calculated political act. Such a tempest on the political stage can only be contained within reasonable bounds by a positive exercise and its destructive force negated by an equally potent force of direct political action.

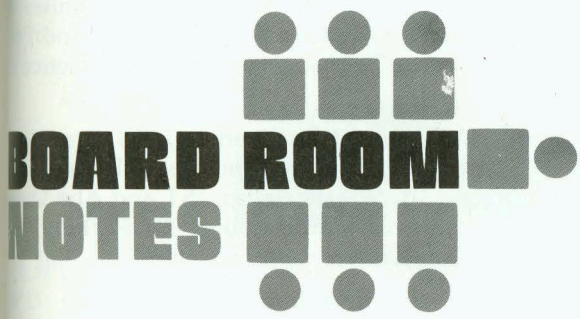
To this endeavor we cannot rely on amateurs. No matter how well intentioned or how strongly motivated, the physician who is actively engaged in medical practice has neither time, nor energy, nor the expertise essential to the combat in the political arena and is vulnerable to censure of self service.

We would do well not to place our prospects in the hands of negative career administrators. Not to deny the personal quality, competence, and intellectual integrity of many in this calling, even so, a large number is composed of frustrated physicians and the almost made medical school types who found a niche in the contiguous discipline. These health professionals, voyeurs of the medical scene, are often burdened with repressed hostility and obligatory resentment which inevitably, albeit subtly, surfaces in their expression.

What we need is a mime of the MD-PhD program; i.e. an MD and Political Science program. We need physicians with direct career orientation to politics, who are well trained both as doctors and politicians, who arrive to this discipline with empathy and understanding of the sensitive subtleties in delivery of medical care, the frank realities of human interplay in a socio-economic setting, the pragmatic skills of political combat, and a full time commitment to the task.

We have precious little time to develop and train such a cadre of medical politicians. The health industry is a profitable target for elected officials. The avalanche of legislation, directives, forms, codes, contracts, regulations, maxims and commands spewing out of multitiered governmental offices

threatens to alienate the doctor from those who seek his help. What we desperately need is a medical diplomatic corps dedicated to the sanctity of the historically intimate bond between the patient and his physician, a relationship which must remain inviolate and which is the proven keystone to excellence in the delivery of medical care. **Q**



DATE: June 16, 1978
PLACE: Milwaukee, WI

Confirmation of annual appointments, appointment of program chairmen and committees and, a welcome to new Board members were among the actions taken at the June Board of Director's Meeting in Milwaukee.

The Board welcomed new members Dr. Paul Frechette, Dr. Thomas Leicht and Dr. Will Wiviott to their initial meeting.

- The following appointments were confirmed:**
- Editor: Dr. Mischa Lustok
 - Secretary-Treasurer: Dr. Sigurd Sivertson
 - Director of Annual Giving Program: Dr. Bernard Kampschroer
 - Chairman of Representative's Council: Dr. Dorothy Betlach
 - Coordinator "Live In and Learn" Program: Dr. G. S. Custer

At a future date an assistant editor recommended by Dr. Lustok will be presented to the Board for approval. This individual will serve as an understudy to the Editor and will ultimately assume the role of Editor.

- Committee Chairmen and members are:**
- Nominating Committee:**
 - Dr. B. Kampschoer (Chmn)
 - Dr. H. Mayer
 - Dr. R. Bender
 - Awards Committee:**
 - Dr. R. Bender (Chmn)
 - Dr. A. Bardeen
 - Dr. J. Brown
 - M.A.S.H. Operating Committee:**
 - Dr. W. Russell (Chmn)
 - Dr. L. Bernhardt
 - Dr. F. Lamont
 - Dr. T. Leicht

- Dr. R. Schilling
- Dr. S. Sivertson
- Long Range Planning Committee:
- Dr. P.L. Eichman (Chmn)

- Program Chairmen are:**
- Homecoming meeting, November 11, 1978: Dr. L. Bernhardt
 - Janesville meeting, early fall: Drs. D. Betlach and P. Frechette
 - Stevens Point meeting, spring: Drs. Hein and Leicht, Dr. F. Reichardt will handle local arrangements.
 - Milwaukee meeting, February 16, 1979: Drs. Mayer and Wiviott

Alumni Day was critiqued and a committee of Drs. T. Leicht, H. Mayer and medical student, Mark Schroeder were appointed to make recommendations concerning participants for next year's morning scientific program. A major criterion will be speaking excellence.

After discussion, the Board endorsed the proposal that Past President, Dr. Herb Pohle lead the medical division of the U.W. Foundation to raise funds to endow the clinical arm of the Medical Library in honor of Dr. Frank Weston. The campaign is a separate University Project not a Medical Alumni project.

Following Dr. Wiviott's suggestion, the Board has endorsed the proposal that Dr. Frank Bernard receive the Emeritus Faculty Award for 1979. Dr. Bernard has retired and was granted emeritus status as of June 30, 1978.

The Medical Education Review Committee (MERC) has proposed that the Alumni Association cooperate with them in developing and maintaining a common data base. President Hein suggested additional background information be gathered concerning the desirability and feasibility of the project.

The M.A.S.H. Committee announced it has authorized an expenditure from the segregated M.A.S.H. funds for painting the house by a student.

Attending the meeting were President Hein, Drs. Bardeen, Betlach, Brown, Frechette, Kampschroer, Leicht, Mayer, Wiviott; Mark Schroeder; and Mr. Hawley. **Q**

*The summer issue of the **QUARTERLY** reported that Professor of Oncology, Van R. Potter, had delivered the 10th annual Walter Hubert Lecture at Oxford University in April. Unfortunately, the title of his lecture was garbled. The correct title is "Phenotypic Diversity in Experimental Hapatomas: The Concept of Partially Blocked Ontogeny". Sorry, Van.*



From the QUARTERLY Archives: 1958

Dean John Z. Bowers announces that freshman enrollment will be increased from 80 to 100. The increase is made possible by the availability of increased Anatomy and Physiological Chemistry Laboratory space in the new Bardeen Laboratory addition to S.M.I.

Bob Samp, '51, Program Chairman for Alumni Day has announced that the afternoon program will feature two significant guest lecturers — **Dr. John Louis Parks, '34**, Dean of George Washington Medical School, will present the John Wharton Harris Lecture at 2:30 p.m. Dr. Gunnar Gundersen, President-elect of the American Medical Association and LaCrosse Preceptor will report on the Medical World at 3:30 p.m.

The alumni body and Medical School community are saddened by the accidental death of **Dr. John A. Schindler** of Monroe, Wisconsin. Founder of the Monroe Clinic, long time Preceptor and member of the staff of the Department of Medical Microbiology, Dr. Schindler's major medical contribution was considered to be the group handling of "emotionally induced illness."

Dr. Francis M. Forster, formerly Professor of Neurology and Dean at Georgetown has been appointed Chairman of the Department of Neurology.

Ralph Dorn, '57, reports from Milwaukee on some of his classmates. Tom Redfield has completed an internship at Wayne County and is awaiting army service. "**Shag**" **Wagner** is starting an Internal Medicine residency at the V.A. Hospital in Chicago.

Leo V. Kempton, '50, announces that he will leave practice in Burlington, Wisconsin to enter the space research field.

Paul R. Gerhardt, '37, and his family visited Stockholm, Sweden and eight other countries in conjunction with attendance at the VII International Cancer Congress in London where he presented a paper.

Elizabeth Baldwin, '35, was appointed to the State Board of Health by Governor Vernon S. Thompson.

Andrew Crummy, former intern, has returned to the Department of Radiology as a resident.

Alfred Wallner, '44, of Kalispell, Montana is the Flathead County Health Officer and President of the County Medical Society. Fellow Wisconsinites in Montana include **Charles E. Trush, '49**, and **Forest Schroeder, '53**, who is in general practice in Eureka.

Alumni Officers are **Einar Daniels, '34**, President; **Sam Behr, '35**, Vice President; **Helen Dickie, '37**, **Rolf Poser, '38**, **Robert Samp, '51** and **Abe Quisling, '30**, Directors and **Robert C. Parkin, '43**, Secretary-Treasurer.


Conrad Arnold Elvehjem, Dean of the U.W. Graduate School and nationally acclaimed biochemist was named President of the University of Wisconsin effective July 1, 1958 succeeding **Edwin B. Fred**, the University's 12th President who has served since 1945. Dr. Fred will be the first President Emeritus of the University since **Dr. E.A. Birge** who was President from 1918 to 1925. Dr. Birge died in 1950 at the age of 93.

Lt. James D. Whiffen, '55, is the chief surgeon on the aircraft carrier Philippine Sea which led the search for victims of the Pan American plane that crashed into the Pacific.

World genetics experts will gather on the U.W. campus for a three day symposium on Genetics in Medical Research. The symposium is co-sponsored by the new Department of Medical Genetics.

Medical School Field Day will feature student research progress reports by **James Kimmey, Peter Rank, Jon Anderson, John Ramlo, Leslie P. McCarty** and **Harold Williamson**. Student demonstrations will be presented by **Murray Ables, Med. II; Sanford Mackman, Med. III; E.N. Mitchell, Med. III; Jack Perlman, Med. II; Fred Brewer and Dick Hughes, Med. II; Alan Ehrhardt, Med. III; David Moody, Med. I; Dennis Santilli, Med. II** and **Mitchell Rapkin, Med. II**. Guest lecturer, Dr. Leon O. Jacobson, University of Chicago Medical School will present a lecture on "The Control of Red Cell Formation". Field Day will be climaxed with student skits, **Medical Schmerz**, at 8:00 p.m. at the Union Theater.

New faculty members include **Dr. Robert Metzberg**, P-Chem; **Dr. David Langbartel**, Anatomy; **Dr. Charles Lobeck**, Pediatrics and **Dr. John Cameron**, Radiology (Physics).

Dr. Richard TeLinde, Professor and Chief Gynecologist, Johns Hopkins has been designated the first recipient of the Medical Alumni Citation. 



Dr. John Renner

Dr. John Renner Resigns

Dr. John Renner, the first chairman of the Department of Family Medicine and Practice in the Medical School, submitted his resignation as chairman effective September 8, 1978.

The stated reasons for the resignation voiced by Dr. Renner were "irreconcilable differences of opinion with the Medical School Administration concerning management philosophy and style". "Not goals and objectives but how best to achieve them has been the basis for our differences."

Acting Dean Bernard W. Nelson, who had requested Dr. Renner's resignation, in a formal statement said: "We are grateful to Dr. Renner for his dedication and striking accomplishments in developing Wisconsin's Family Medicine Program. I hope that he will stay with us as a Professor in the Department where his unique talents and skills are needed."

The Department of Family Medicine and Practice is currently training 86 residents at seven clinic sites throughout the state including: Milwaukee, Waukesha, Madison (2), Verona, Eau Claire and Wausau.

The retention in Wisconsin of approximately 90% of the more than 60 new residents trained speaks to the success of the program and its popularity with the medical profession, the public, and the Legislature.

Concern was voiced in many quarters that the removal of Dr. Renner as Chairman signaled a reduction of emphasis on Family Medicine and Practice by the Medical School. Newly appointed Dean Arnold L. Brown has given strong assurances that this is not the case.

As the **QUARTERLY** went to press, Dr. William Scheckler was appointed Acting Chairman of Family Medicine and Practice, and the appointment of a search committee for a permanent chairman and the appointment of a "Blue Ribbon Committee" to review the Family Medicine and Practice program were all imminent. **Q**

On Being A Patient

Richard Larson, M.D., '70

It was a hot July evening and my son and I were driving on our way to Northern Minnesota to attend a relative's wedding the next afternoon. My wife and daughters had gone on ahead a few days earlier because the daughters were members of the wedding party and we were bringing along the wedding dresses.

It was late when we got to Minneapolis — half way to our destination — and we were getting very tired, so decided to take a motel room and get some sleep and finish our journey early in the morning.

We had just gone to bed in a comfortable motel when it struck. . . . a rather sudden, sharp relentless pain in the left flank, not relieved by sitting, lying, standing, walking, moaning or anything else. And the pain seemed to travel down around my side into the lower abdomen. I decided that I was moving a kidney stone and it felt like a huge, jagged one.

I needed to go to a hospital emergency room, but first to call my wife and tell her that it seemed likely that the wedding dresses wouldn't arrive on schedule, as I was having this pain. My wife, a nurse, reminded me that doctors shouldn't diagnose their own ailments; it was probably just a little U.T.I. like she'd had a few times and a little antibiotic in the A.M. would help and to drink lots of water. In spite of that consultation, I thought an emergency room visit would be appropriate and told my favorite nurse that I'd call her back.

With hanging up the phone, the pain went away as abruptly as it had started. I poked around on myself and could elicit no tenderness, waited awhile and called my wife to tell her I was fine, and we'd be on schedule.

At about 4 A.M. the boulder started to tear its way down my side again and it seemed worse this time. I got some aspirin from the night clerk and took enough in the next hours so that my ears started to ring a little but no pain relief. By now it was time to be on the road to deliver those wedding dresses without delay.

The pain was relentless and the road endless. Slow, weekend traffic jammed the highways and my son too young to drive, but we finally arrived at our relatives' house. With getting out of the car, the pain again dissipated. We attended the wedding and reception, all pain free, for me. However, the next morning the rock was on the move again and I didn't waste any time getting to the local emergency room.

Continued on following page

On Being A Patient

Continued from preceding page

After a wait of a few minutes which seemed longer, I was interviewed, numbered, coded and examined by the physician on call that day. I knew which tests were being done and why, which questions would be asked and the answers, but how strange it all seemed. Someone else was in control of a situation in which I was accustomed to being in control. I found it very revealing to be the patient for a change, with someone else being **The Doctor** and I felt a little foolish and embarrassed about the whole thing.

Admit. Clinical impression: left ureterolithiasis. IVP in A.M.. Strain all urine. Analgesic. Clear liquids.

Nurse came in with nasty looking syringe.

"For your pain."

"What is it?"

"Meperidine 100."

"I really don't need it now — I just have a little flank pain and a headache. Could I have some aspirin?"

"No, not ordered."

And with that I discovered that the doctor-as-a-patient can no longer give orders! I did receive the meperidine which made me retch and did not help the headache.

The prep for the IVP kept me busy through the night and early in the morning an aide came with a wheelchair to haul me to Radiology. I suggested that I might just walk along with her, but no, not allowed, — hospital rules. I felt silly and shorter than everyone else in the hospital halls. Everyone else seemed to be upright and walking and looking down at me, riding in that wheelchair.

Another ominous looking needle — one really never does get used to those needles **as a patient** — and the IVP was completed with just a little itching and hives about the neck on my part which was relieved by another needle.

The diagnosis was confirmed and just after that the stone passed. I was rather disappointed at how tiny it was, but it was salvaged and sent to the laboratory for chemical analysis, but never got there, having been lost en route, somehow. So we never found out what mysterious molecules could produce such a painful grain of sand and I refuse to pass another, just to know!

The best lesson of all, however, were those insights into the role of being a patient. Every physician should have that opportunity once in a while — it is a real eye opener! **Q**

Oatway's Column



W. H. OATWAY, JR., M.D., '26

U. WIS. "MEDS" IN CALIFORNIA & HAWAII

A. IN CALIFORNIA

Dr. Elsa Edelman replied (by telephone) to a plea for news reports. She was the daughter of the well-known Meta Berger of Milwaukee; finished her first 2 years of medicine at Wisconsin in 1921; and her final 2 years at U. Penn. (as did 5 or 6 each year with the guidance of Dr. J.S. 'uncle Joe' Evans). She is retired from active practice; lives in Los Angeles; and writes occasional articles for U. Penn. 'Health Affairs', and the U. Wis. Med. **QUARTERLY**.

Amazing how **Chance** defies **Time** and **Distance**! We saw a notice in the Los Angeles County Medical Bulletin that **Kenneth Adashek** had joined **Eugene** and **William Adashek** in the practice of surgery in Beverly Hills. A note of congratulations to Gene brought out some of the following items, — (1.) **Gene** was a graduate of U. Wis. Med. in 1936, and had a surgical Residency there. (2.) He came to Los Angeles to practice surgery in 1943 and has done so ever since. (3.) He volunteered to help run the Red Cross Blood Service for 6 months, and remained its Director for **30 years**, until 1977! (4.) He says, "I am forever grateful for my good luck in having gone to school and trained with the wonderful faculty of U. of Wis.". (5.) Ken, his son, has just finished a surgical residence at UCLA. (6.) Gene has recently seen **Harvey Raszkowski**, a Wis. classmate, at the L.A. Surgical Society, and has seen **Bert Meyer**, the cardiac surgeon (and once a Surgical Resident at Wis. Gen'l Hosp.) at a committee meeting of the Amer. College of Surgeons. (7.) We haven't actually seen Gene since his days at Wisconsin General Hospital, but the Adashek and Oatway backyards touched each other in Waukesha, Wisconsin when he was in high school and I was in college!

There is a delayed report of **C. Richard (Dick) Smith**, whose loss in November, 1977 in Pasadena, CA., was not noted. He had been ill and retired for several years, after a great career as founder and

chief of one of the finest clinical Labs in Ca.... He was born in Wis. in 1902; educated at U. Wis., including 2 years of medicine; and graduated at U. Chi. in 1932.

The progress of a long-time Wis. researcher and teacher is noted in the U.S.C. 'Health Sciences Record', **Dr. Charles Heidelberger**. He was at the McArdle Lab. for Cancer Research as Assoc. Director from 1948 to 1976, after his years at Harvard and U. Cal. . . . He is now professor of biochemistry and pathology at U.S.C., and Director for Basic Research in the Cancer Center. The newest honor has been an election to the **National Academy of Sciences**, a second in the family following his father Michael's.

This is news of **Dr. and Mrs. Jackman Pyre**, Tucson, Arizona, as they are on a summer holiday in **Oceanside, California**. Jack relaxes, visits relatives, scuba dives and snorkels. Jack looks great, and was surprised and pleased to hear that he is to be visited by **Dr. and Mrs. Howie Lee** of Milwaukee, who will come west this year instead of Florida. Howie can photograph southwest birds, though Arizona may not have the geese (and lions!) which he does so well.

Recommended Reading, — For those who have a copy of the 1967 'The U. Wis. Med. School: A Chronicle, 1848-1948', by **Dr. Paul Clark**, — reread it. It is especially good for those who were at Wisconsin between 1920 and 1950. For those who don't have a copy, we have been told that there are a few copies available . . . The idea of the book was promoted by **Einar Daniels** and **Mischa Lustok**, and has an introduction by **Dr. Middleton**. It contains early history, development of various departments and their chiefs, residents, honors, old pals, progress, etc. Really great!

Apologia, — now and then an error is made, or a 'crash of errors'. Friends, stenographers, and even the columnists do it, — **Dr. Robin Smith**, who has a wife and grown children was referred to as 'her', sadly. He says that the kidding he has taken from friends means that the "QUARTERLY is well-read", a very kind comment. (He again offers to help any M.D. who wants to serve in Afghanistan) . . . The Blanchard son 'Bob' was listed as the new Navy Commander, instead of his friend **Bill Oatway** the actual CDR . . . So, **sorry** (and for the next ten issues!).

B. IN HAWAII

The **Hawaiian Alumni** have had **no one** to represent them in the **QUARTERLY** columns until this past spring. Two explanatory (and pleading) postcards were sent to all twenty-three, and we now have several news reports . . . Eighteen of the 23 live in Honolulu. Eight graduated from Wisconsin in the sixties, and nearly all the others are scattered from the early twenties through the fifties.

Dr. Douglas B. Bell (Sr.) has written and listed most of them, and their type of practice. **Dr. Bell** is a graduate of U. Wis. 1923, and Rush Medical 1926; is a founder of the Dickson-Bell Medical Center; and is in active practice. He was offered a 'path' fellowship by Dr. Bunting in 1924, but went on in medicine (and Gort Ritchie and Oatway took the job.) . . . **Robert Millard** was U. Wis. 1920 and U. Penn. 1922, and is in active practice . . . (It will be remembered that Wisconsin moved towards its 4-year course in 1925).

William H. (Bill) Stevens, class of 1943, writes from 'Paradise'. He has just retired after 30 years of practice of psychiatry in Honolulu. He has been Director of the Human Engineering Foundation, the Clinic for Counseling and Psychotherapy, and the Clinic for Marital and Sexual Counseling (and is a Certified Sex Therapist, and still writes on Human Sexuality in a Multiracial Society). He is married and has 3 grown sons. He sends Aloha to "those who remember his as a tall, skinny medic who departed the day before graduation to fly with the R.A.F. in W.W. II".

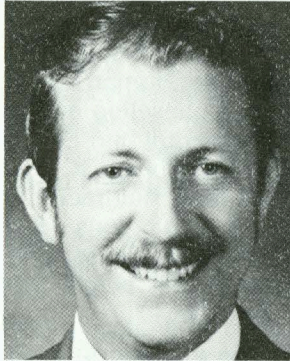
Dr. Lyle Phillips of Honolulu had 2 years at U. Wis. Medical, and finished at Rush College of Medicine, Chicago in 1924. He originated in Waupun, Wis., and married the lovely Christine in 1927. He practiced OB and GYN, 1925-62, and was chief of staff of the Kapiolani and GYN. Hosp. for 8 years. He served in the AEF, and then naval reserve, and has a long paragraph of Hawaiian presidencies and honors before his retirement from active practice.

Dr. Robert Bart, Jr., U. Wis. Med. graduate in 1973, has just opened his office to practice Child Neurology on Punahou St. in Honolulu, at the Kapiolani Children's Medical Center. He worked for 8 years in group and private practice. He is Associate Professor of Pediatrics at the Medical School; is Medical Director of the Muscular Dystrophy Chapter; and sails off Waikiki whenever he can, sometimes with **Chris Gulbrandsen**, also class of '63.

Homer R. Benson, U. Wis. Med. graduate in 1935, gave us a newsy report. He and his brother **Robert** (grad., class of '32) are located in the Alexander Young Bldg. in Honolulu. Both of them are cutting their practices to part-time. Homer travels quite a bit, and spends time golfing, and working his shop. He occasionally sees **Carl Johnson, Jr.**, who graduated in medicine 1943, and who is active in anesthesiology. **Dr. Robert Millard**, also in Honolulu and in the same building, was a U. Wis. 2-year man in 1920, and graduated from U. Penn in 1922 . . . The Bensons and Millards have been in general practice.

W. H. Oatway, Jr.
146 Monarch Bay
S. Laguna, Ca. 92677

FACULTY NEWS



Dr. William B. Scheckler



Dr. Paul P. Carbone



Dr. Philip P. Cohen



Dr. Otto A. M.

Dr. Stanley Inhorn has been named chairman of the Department of Pathology at the University of Wisconsin Medical School.

Inhorn is currently director of the State Hygiene Laboratory and has served on the Wisconsin faculty since 1959. He is in charge of training medical students in pathology, preventive medicine and laboratory medicine.

A former president of the American Society of Cytology, Inhorn has been active in numerous organizations, including the Wisconsin division of the American Cancer Society.

He received his B.S. in 1949 from Case Western Reserve University and his M.D. in 1953 from Columbia University. He took his residency in pathology and graduate training in cytology at Wisconsin.

Inhorn assumed duties as department chairman on July 1, 1978.

Q

University of Wisconsin Medical School Dean Arnold L. Brown, M.D., has appointed Dr. William B. Scheckler Acting Chairman of the University's Center for Health Sciences (CHS) Department of Family Medicine and Practice.

The 40-year old Scheckler, a native of Wisconsin, is a magna cum laude graduate of the University of Notre Dame. He received his M.D. degree from the University of Pennsylvania School of Medicine in 1964 and completed residency training at the University of Wisconsin.

Scheckler is board certified in internal medicine and served from 1968-1970 with the National Communicable Disease Center in Atlanta, Georgia. He joined the U.W. medical faculty in 1970.

From 1970-1974 he was Clinical Instructor in Medicine at U.W. Since 1974 he has been a member of the faculty of the Department of Family Medicine and Practice serving as Internal Medicine Coordinator. He is currently Associate Professor (CHS) of Family Medicine and Practice and Internal Medicine at the U.W. Center for Health Sciences.

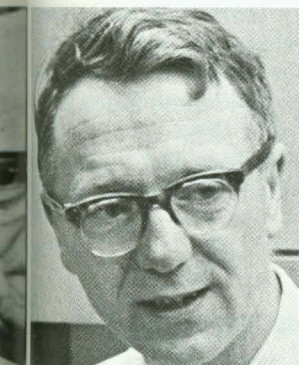
"It is gratifying that the Department has well qualified and dedicated faculty of the caliber of Dr. Scheckler to assume this leadership position," said Dean Brown.

At the first Faculty Meeting of the 1978-79 academic year, Dean Arnold Brown announced the appointment of a Family Medicine and Practice Search Committee chaired by Professor of Psychiatry Leigh Roberts.

Dr. Scheckler replaces Dr. John Renner who resigned.

Q

Dr. Dean O. Smith, Assistant Professor of Physiology, has been awarded an Alfred P. Sloan Foundation Research Fellowship. The award of \$19,800 will be used during the period of September 16, 1978 to September 15, 1980 to support Dr. Smith's work in the neurosciences — specifically to determine the functional significance of axon conduction blocks.



Oliver Smithies



Dr. David Graham

Paul P. Carbone, M.D., Chairman of the University of Wisconsin Department of Human Oncology, has been appointed Director of the Wisconsin Clinical Cancer Center by Dr. Bernard W. Nelson, Acting Vice Chancellor of the Center for Health Sciences.

Carbone came to Madison from the National Cancer Institute where he had been Associate Director of Medical Oncology, Division of Cancer Treatment, and Special Assistant to the Director of the Division of Cancer Biology and Diagnosis.

Carbone has been Chairman of the Eastern Cooperative Oncology Group since 1971. He received the prestigious Albert Lasker Award for clinical cancer chemotherapy in 1972 and was also elected President of the American Society of Clinical Oncology.

Carbone succeeds Harold P. Rusch, M.D., who directed the Center from 1973, when it was designated a comprehensive cancer center, until July, 1978.

Q

Philip P. Cohen, '38, Professor of Physiological Chemistry, former Acting Dean of the Medical School and Chairman of Physiological Chemistry was recently appointed to a National Commission that will examine the means by which the federal government supports academic research.

The commission will make recommendations designed to improve the process. Its findings could have a major impact on the future of academic research in the U.S.

Otto A. Mortensen, '29, U.W. Emeritus Professor of Anatomy, received a teaching award at the Stanford commencement ceremonies this year.

Since his retirement from the U.W. faculty, Otto has spent five years as Visiting Emeritus Professor teaching Anatomy to Stanford medical students. He reports that he is enjoying the best of all worlds doing what he enjoys — the teaching of medical students — without the distractions of committee assignments and administrative responsibilities. (Otto was long time Chairman of Anatomy, Associate Dean for Academic Affairs and responsible for Admissions at Wisconsin.)

While in Madison for the summer Otto and Lyda had an opportunity to spend time with their children and grandchildren and Otto initiated planning for the fiftieth reunion of the class of 1929.

Q

Oliver Smithies, Professor of Genetics has been named to membership in the American Academy of Arts and Sciences.

Smithies has researched the complex relationship between antibody proteins and heredity.

He was among 107 scholars, scientists, public figures and artists that became academy members during its 198th year.

Q

Dr. Michael J. MacDonald of the Department of Pediatrics has been awarded a \$10,000 research grant by the American Diabetes Association. MacDonald was selected in national competition conducted by the American Diabetes Association committee on research, which is comprised of renowned and accomplished diabetes researchers from all parts of the country.

Q

At the first Faculty Meeting of the 1978-79 academic year, Dean Arnold L. Brown announced the appointment of a search committee for a Medicine Chairman chaired by Henry Pitot, Professor of Oncology and Pathology.

Dr. David Graham has submitted his resignation from the Medicine chairmanship effective June 30, 1979. Q

ALUMNI CAPSULES

Alan S. Barry, '74 (formerly **Alan B. Slutsky**), has been appointed to the faculty of Harvard Medical School and to the staff of McLain Hospital. He will also be in private practice in Belmont, MA. Alan was married in September.

□

Patrick J. Fahey, '73, is continuing a Research Fellowship in Pulmonary Medicine at the University of Rochester School of Medicine and Dentistry.

□

Martin L. Janssen, '59, of the Roche-A-Cri Clinic in Friendship, Wisconsin has been appointed Assistant Clinical Professor of Nursing by the University of Wisconsin School of Nursing.

□

David M. Franey, '78, has started his residency in internal medicine at Good Samaritan Hospital, Phoenix, Arizona.

Martin Grabois, '66-'67 medical resident, has been promoted to Associate Professor, Department of Physical Medicine and Rehabilitation and Chairman of the Department of Physical Medicine Baylor College of Medicine.

□

Bernhardt E. Stein, '61, has accepted a teaching position with the Department of Family and Community Medicine at the Arizona Health Science Center in Tucson. He was formerly in private practice.

□

Dr. Terry Hankey, Waupaca, former family practice resident, has been appointed to Acting Governor Schreiber's Prevention and Wellness Commission.

□

Dr. Roland Liebenow, '48, Lake Mills has been promoted to Associate Medical Director of Northwestern Mutual Life Insurance Co., Milwaukee. He was formerly Chief-of-Staff of Watertown Memorial Hospital and Vice-Chief-of-Staff of Fort Atkinson Memorial Hospital.

□

Dr. Henry Rahr, '58, Luxemburg, Wisconsin has been elected speaker of the Wisconsin Academy of Family Physicians.

□

Kathleen Barkow, '75, has joined the Rice Clinic in Stevens Point, Wisconsin after finishing her pediatric residency at University Hospital, Iowa City, Iowa.

□

Peter C. Raich, '64, has left the University of Wisconsin to become Professor of Medicine and Chairman of the Division of Hematology/Oncology at West Virginia University in Morgantown, West Virginia.

Eugene L. Weston, '55, has been elected to the Board of Trustees of Johns Hopkins University for a six year term.

□

Robert D. Zipser, '72, has been appointed assistant professor of Medicine, Section of Endocrinology at U.S.C. School of Medicine after completing his internship, residency, fellowship and instructorship at U.S.C.. Bob is married and has two children, Dana Beth and Brian Daniel.

□

Anthony Atwell, '68, Clinical Assistant Professor in the Department of Psychiatry and Behavioral Sciences at Stanford University has recently been named Director of the Child Custody Center at the San Jose Hospital, San Jose, CA.

The Center, composed of Psychiatrists, psychologists, and psychiatric social workers specializes in family evaluations for the Domestic Court. Recommendations are made to meet the developmental and emotional needs of children of divorce in custody disputes.

□

Charlotte Burns, '62, Daughter of "Bobbie" Burns of U.W. orthopedic fame, is now practicing ophthalmology in Rice Lake, Wisconsin. She was on the faculty of the University of Iowa, did volunteer, missionary hospital work in Tanzania and northern Thailand and was in private practice in Tucson, Arizona before returning to Wisconsin.

□

William S. Brennom, '64, has been elected Chief of Staff at St. Paul Children's Hospital.

Dr. Eli Max Dessloch, '35, Prairie du Chien received the Council Award of the State Medical Society on June 3, 1978. He has practiced in Prairie du Chien since 1939.

Q

Dr. George Magnin, '46, Marshfield has been named to a four year term as a member of the Governing Council of the Wisconsin Society of Internal Medicine. He is outgoing Governor of the Wisconsin Chapter of the American College of Physicians.

Q

Dr. Mary Kubiak, '54, Oshkosh has become a staff physician with the Health Maintenance Program of the Kimberly Clark Corporation. She had been Medical Director of the Park View Health Center in Oshkosh.

Q

Dr. James C. H. Russell, '46, Fort Atkinson, Wisconsin recently received the "Outstanding Community Leader Award" from the Jefferson County Reserve Officer Association. He is Fort Atkinson High School and U.W. Whitewater team physician.

Q

Dr. David Heber, '72, has joined the medical staff of the Flyway Medical Clinic, Horicon. Following a residency at the Hahnemann Medical College and Hospital, Philadelphia.

Q

Dr. Robert Stader, '75, is now on the medical staff of the Grant County Community Clinic, Lancaster after completing a residency in Family Practice in Wichita, Kansas.

Dr. Paul B. Mason, of Sheboygan, long time Medical School Preceptor and recipient of the Max Fox Preceptor Award was named recipient of the Civic Leadership Award of the State Medical Society of Wisconsin on June 13, 1978. Dr. Mason has practiced medicine at the Sheboygan Clinic since 1936.

Q

Charles Hodulik, '76, has been appointed Chief Resident of North Carolina Memorial Hospital's Department of Psychiatry. He is also Chairman of the Resident Organization and a Fellow in Community Psychiatry.

Q

Jack J. Petajan, '59, Professor of Neurology, Utah Medical School, presented a lecture to the University of Wisconsin-Madison campus neuroscientists on the "Effect of Passive Movement on Neurogenic Atrophy".

Q

Bruce Douglass, '42, Chairman, Division of Preventive Medicine at the Mayo Clinic has been named a Delegate for Occupational Medicine to the American Medical Association House of Delegates and Chairman of the A.M.A. Section Council on Preventive Medicine.

Q

Arthur C. Hansen, '29, has published a collection of poetry dealing with the Civil War. The volume entitled "Civil War Poems" contains works entitled "Road of No Return", "Aftermath in Dialogue", "Conflict Defined", "Gettysburg", "Taps at Appomattox" and "Tragic Interlude".

Joel Giese, '74, has joined the Southern California Permanente Group in San Diego. He was formerly Instructor of Pediatrics at the Medical College of Wisconsin and Milwaukee Children's Hospital.

Q

Leonard V. Avedian, '70, has completed his plastic surgery residency at Ohio State University. He will serve his fellowship in Aesthetic Plastic Surgery in Newport Beach, California and plans to establish practice in the Southern California area.

Q

A.E. Culver, former Orthopedic Surgery resident, has retired from private practice in Grand Forks, North Dakota.

Q

Mary Spraker, '74, is beginning a dermatology residency at the University Hospital in Portland, Oregon.

Q

E.G. Kassner, '60, has been elected president of the Brooklyn Radiologic Society for 1978-79 and president of Kings County Hospital Center for 1978-79.

Q

Francis W. Parnell, former resident, has re-entered private practice after being in corporate administration medicine for two years.

Q

Robert D. Bart, '63, his new office is at Kapiolani Children's Medical Center, he is an Associate Professor of Pediatrics (Neurology) at the University of Hawaii School of Medicine. Within the past year he and his family have sailed to Maui, Molokai, Lanai and Kauai.

Continued on following page

Alumni Capsules

Continued from preceding page

Bryant Roisum, '45, has been appointed Chief of Staff at Veteran's Administration in Tascaloosa, Florida.

Q

James C. Dearth, '74, is a pediatric hematologist/oncologist at Shands Teaching Hospital at the University of Florida in Gainesville.

Q

Morrison Schroeder, '33, Professor of Surgery, recently received an award for distinguished service from the Medical College of Wisconsin.

Q

John Pederson, '72, has joined Associates in Laboratory Medicine, Ltd. at St. Francis Hospital in La Crosse, Wisconsin.

Q

Kenneth R. Johnson, '72, has passed the board exams for the American Board of Surgery and is a Diplomate of the American Board of Surgery. Ken and his wife, Cathy are expecting their first child.

Q

Harry Vander Kamp, '27, has retired from active practice in Kalamazoo, Michigan and has moved to Tampa, Florida.

Q

Necrology

Dr. Paul Krueger **Edwards, '29**, Iron River, Wis., June 23, 1978.

Dr. Elizabeth Clark **Halbert**, former house staff, '41-'45, Taipei, Taiwan, June 9, 1978.

Dr. Merlyn G. **Henry, '29**, Balboa Island, Cal., May 19, 1978

Dr. Gabriel Eric **Linden, '25**, Wilmette, Ill., June 1968.

Dr. Jay H. **McCormack, '14**, Seattle, Wash., November 21, 1976.

Dr. Owen **McDonald, '38**, Lake Forest, Ill., December 13, 1977.

Dr. Gilbert F.C. **Mueller, '20**, Milwaukee, Wis., February 18, 1978.

Dr. Bernard P. **Mullen, '19**, Seattle, Wash., February 28, 1978.

Dr. Richard Edward **Paulsen**, former house staff, '69-'70, Concordia, Kansas, June 23, 1978.

Dr. Henry L. **Schmitz, '26**, St. Petersburg, Fla., June 27, 1978.

Dr. C. Richard **Smith, '31**, Los Angeles, Cal.

Dr. Arch Christian **Sonntag**, former resident, '72-'75, Albuquerque, NM, January 31, 1978.

Dr. George L. **Thomas, '36**, Delavan, Wis., July 21, 1978.

Q

A Biography: Kendall A. Elsom

A great many friends of "Ken" Elsom mourn his passing in April 1978 at the age of 73 years, at Haverford, Pa.

He was a most versatile physician, teacher, administrator and one-time fine athlete. Most of his years were spent at the Universities of Wisconsin and Pennsylvania and in several other chores.

Ken was born in Madison into a well known family. His father was Dr. James Claude Elsom, Professor of Physical Culture and Director of the Men's Gymnasium as early as 1908. He was then the originator of the student health department and finally was Chief of Physical Therapy as it shifted from the Department of Surgery to Radiology in 1925.

Ken graduated from the University of Wisconsin in 1924. He had played varsity basketball with an excellent team which included two other medical students. He was sent to the University of Pennsylvania Medical School for his final 2 years by Dr. Joseph (Uncle Joe) Evans, along with Ritchie, Sander, Pratt, Oatway and Packard in 1925. He received his M.D. in 1927; interned at the graduate hospital; worked at U.P. in pharmacology and medicine, plus a year at Massachusetts General Hospital; and returned to the University Hospital to specialize in medicine and gastroenterology.

Another part of Dr. Elsom's career began in World War II. He became Chief of Gastroenterology in the 20th General Hospital unit in Assam, India and then became Chief of Medicine at the ASFH at Fort Benning, Georgia. He returned to the U.P. medical faculty and was appointed Professor of Clinical Medicine in 1952.

His next major change was to the medical department of Scott Paper Company, where he organized that service and continued as medical director for 13 years until he retired in 1974.

Dr. Elsom was a diplomat of the American Board of Internal Medicine, a Fellow of the American College of Physicians and the Philadelphia College of Physicians and a member of several clinical investigation and occupational medicine societies. He received the Distinguished Alumnus Award from the University of Pennsylvania in 1969.

Dr. Elsom is survived by his wife, Dr. Katherine (Kay) O'Shea Elsom, who had been a neighbor in Madison. She spent 2 years in U.W. Medical School before going to Pennsylvania and she later became a faculty member there. They had a son and daughter and 5 grandchildren.

William H. Oatway, Jr., M.D., '26

MEDICAL STUDENT NEWS

Mark Schroeder Senior Class President

Times change and few people, places and institutions stay the same. The U.W. Med School is no exception. We have a new Dean, a new Clinical Science Center to replace the old Wisconsin General, which itself is now referred to as the 1300 Complex, and the prospect of an increased class size of two hundred students in 1981.

There is one experience, however, that all Wisconsin fourth year students beginning with the first senior class over fifty years ago have shared — the preceptorship. The idea was a Wisconsin original though many other schools now have similar programs. The goal is to improve the medical student's proficiency in patient care by providing increasing responsibility for the care of patients in a community under the supervision of a highly skilled clinician." Unlike the third year rotations where patient care is directed by housestaff and the student "follows" the patient, the preceptorship ideally allows the senior student to evaluate patients and determine therapy under the watchful eye and with the counsel of the preceptor. The preceptorship often marks the transition point from the abstract study of disease and the initial clinical experience devoid of real decision making responsibility to the growing awareness of oneself as a physician. Clinical judgement, self confidence and a working apprecia-

tion of the art of Medicine all increase in proportion to the responsibility the preceptee is given and is willing to take.

In the present day no group of health care providers can avoid implications of the law to medical care. The preceptee is in a special limbo caught between his need for clinical experience and a legal status that gives him no more authority to practice medicine than a person off the street. In the past orders written by the preceptee have been carried out with little question, particularly if the orders were routine and the nursing staff was confident a physician would countersign within a reasonable time. The state statutes and administrative codes allow for no such reasonable approach. They state that only a licensed physician may give orders concerning a patient's care and that telephone orders are to be used sparingly. The state hospital inspection teams are threatening nurses with licensure revocation if they do not adhere to the letter of the law, that is, if they act on orders from a preceptee. Thus, the preceptee who brazenly orders lemon flavored oral glycerine swabs at two o'clock in the morning risks the ill humor of the preceptor when he is called for a telephone order for the same.

A second and equally serious ramification by the new legalism is the "leap frog effect." Any patient requiring a new order or a change of orders may prompt the nurse to leap frog the powerless preceptee and contact the physician directly. Even if the physician defers to the student, he can count on a return call to officially confirm the order.

The Preceptorship program has been time tested and proven to be useful. It is sad that this valuable experience is being lessened by laws which do not provide latitude for training physicians. What is needed is a

clarification of the responsibility a preceptee may be given to write orders for patient care. This would take the nurses from under the gun and allow the preceptor to review the patient care within a reasonable time rather than immediately. The most important advantage however would lie in granting the preceptee that initial measure of responsibility which is necessary to become a true physician. **Q**

BRIEFS

Thomas Raymond O'Brian, a first-year medical student at U.W. Medical School, has been awarded a \$3,000 Fellowship for Graduate study by the Honor Society of Phi Kappa Phi.

O'Brian was one of 33 students selected for the honor from a group of 117 of the nation's outstanding 1978 college graduates. He is a graduate of Washburn University and a native of Plainfield, New Jersey.

Phi Kappa Phi is a national scholastic organization with headquarters on the campus of Louisiana State University and chapters at 203 colleges and universities throughout the country.

Founded in 1897 to recognize academic excellence in all disciplines, Phi Kappa Phi established its Fellowship Program in 1932 and since then has honored over 500 scholars with awards.

Q

Kitty Jewell, Med. IV, has been named a participant in a women's leadership workshop for women in medical academia. The workshop is sponsored by the Research Center of the American Medical Women's Association and was held in Washington, D.C. during the month of August. **Q**

Public Health in Central America

Wisconsin Doctors in Nicaragua

Reprinted from UIR/Research Newsletter, Spring, 1978

William J. Broad

On a small island off the Caribbean coast of Nicaragua, a young American brings his motorbike to a standstill amid a village of palm huts, mud roads, and barking dogs.

He is a fourth year medical student from the University of Wisconsin-Madison. He is a researcher. And he is here, rounding out his medical education in a most unusual way.

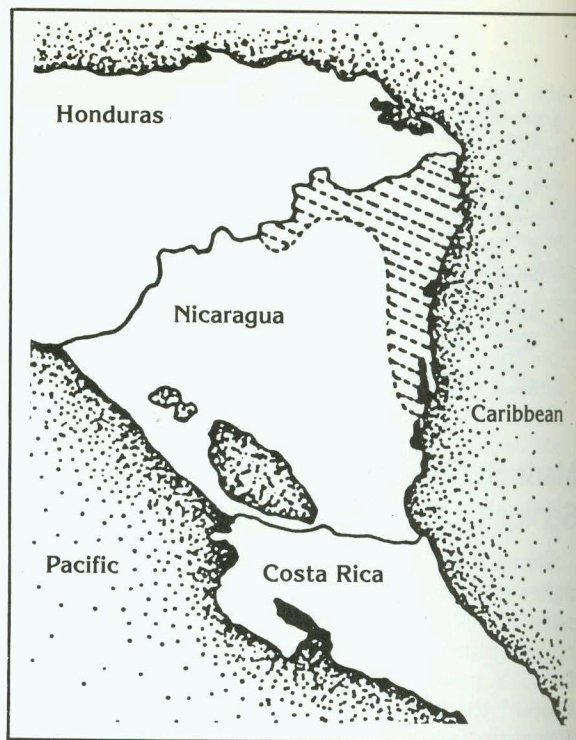
For two months, as part of his fourth year elective, this student has been measuring growth patterns in young children on Isla de Maiz (Corn Island). He is seeing how a diet of milk, coconuts, fruit, fish, turtle, rice, beans and bread affects them. In another week he will return to the United States with the data.

His stay on the Nicaraguan isle, however, means more than a neat analysis of how malnourished babies are affected by a variety of tropical diets. It is a first-hand encounter with total health care.

Moreover, according to Dr. Ned Wallace of the university's International Health Affairs Program — which coordinates the program — the experience has implications for his understanding of health care in Wisconsin as well.

"The contrast with medical care in a med school setting is often stark," says Wallace, who has helped usher over 100 medical students into overseas medical training.

"Kids will actually be dying of malnutrition or of measles or from the dehydration that comes with severe diarrhea. It stimulates a lot of hard thinking about the total health care picture — not just the in-



Medical students work in Nicaragua's eastern lowlands — the poorest part of the country. Shaded area shows the region.

dividual medical problems dealt with in the classroom.

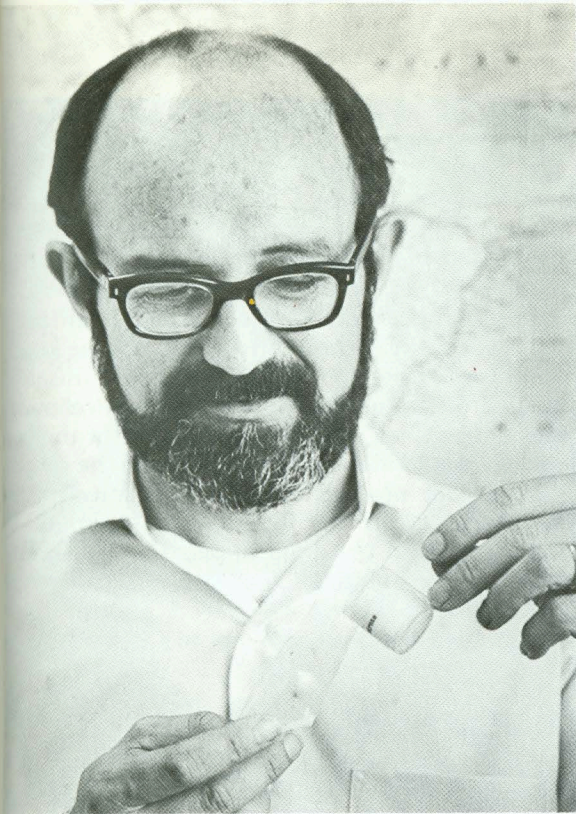
"The students begin to see how economic, cultural, and educational factors really influence health. These factors hold true in Nicaragua, in Africa, and in Wisconsin. And it really becomes clear when confronted out of the country."

This crash course in community medicine takes some preparation. Wallace's office provides the students with extensive reading material while still in the United States, preparing them, as much as possible, for new languages, customs, and health problems. When they return, Wallace also disseminates their research results.

The students study at approved sites all over the world, but Nicaragua draws the most attention with eight to ten students going every year. By focusing on one country, Wallace says that a university coordinator can provide on-site advice and guidance.

Most of the work is done in the eastern lowlands of Nicaragua — the poorest part of the country. With modest natural resources and isolated, rural settlements, many people live just a hair's breadth above bare subsistence. Traditional health care is all but nonexistent.

Students work in hospitals and clinics, on the back of burros, on motorbikes, in cabanas and crumbling shanties. Hospitals and clinics expose students to emergency situations that arise from gunshot wounds, accidents with knives, or, in one case, a cracked skull from walking under a breadfruit tree at an inopportune moment.



Edwin Wallace, Clinical Assistant Professor of Preventive Medicine, UW Medical School, demonstrates an inexpensive, lifesaving technique that Wisconsin medical students adapted for use in Nicaragua. Sugar, table salt, and other easily obtained ingredients are measured and put into a tiny packet. Mixed with water and fed to children, the solution prevents dehydration due to diarrhea — a killer that takes thousands of lives in underdeveloped countries every year. The students initiated this new measurement scheme to ensure that children received the correct dose.

Out of the way villages and backroads, however, offer a different challenge. Adults and barefoot babies alike have continuing problems with tuberculosis, malaria, intestinal parasites, malnutrition, and vitamin deficiencies.

Students often work in isolated communities and clinics, many miles from base hospitals. Shortwave radio becomes their link to the outside world.

Village health leaders are supervised and taught by the students. The teams bring health care to the people in the form of education, vaccination, and preventive self-help.

One group of Wisconsin medical students created a health clinic handbook that is used by local nurses and health volunteers in some of the larger villages of eastern Nicaragua. Compact and to-the-point, the guide uses pictures and flow charts to spell out the ABC's of how to cope with everything from anemia to prolonged diarrhea.

Other students make surveys to find the extent of these continuing problems. Besides the nutrition study on small children, there have been mass screenings for tuberculosis and hypertension, population counts and analysis, and the evaluation of different oral therapies for the treatment of diarrhea.

Treatments are typically administered by the local health workers who are selected by the villages and then trained to deal with particular local problems. Community midwives and nutritionists are also trained.

The real impact for the Wisconsin students

comes, Wallace notes, when they see the effects of the treatments — or the lack of them. By doing surveys, the students can assess the overall impact of the different programs on a given population. Is there a difference in infant mortality? Why? Why not? Are there fewer malnourished children?

Wallace, himself a physician with a degree in public health, directed a small hospital in Nicaragua for nine years, learning the often dismal facts of public health first hand.

"I arrived with the typical notion that a doctor takes care of sick people — and that's what I did," he says.

"But after weeks of treating 80 or 90 people a day, being on call 24 hours, having the same people show up over and over, and still not seeing a significant impact in the overall health of the people, I began to have my doubts.

"I slowly realized there was more to health than hospital care."

Like Wallace, some of the students go into public health. But all, no matter what they go on to do, come out with increased awareness of fundamentals which are, in fact, universal.

Wisconsin or Nicaragua, health care in the midst of hospitals or tropical jungles a community's overall health starts with and grows with a deep understanding of the basics — nutrition, sanitation, vaccinations, prenatal care — and for some University of Wisconsin-Madison medical students, that understanding is being nurtured in an out-of-the-country classroom. **Q**



On the right — Dr. William G. Clancy, head of U.W. Sports Medicine Section.

Research on Knee Injuries

Research that could lead to less damage from knee injuries is currently underway in the Medical School, funded under a grant from the National Easter Seal Research Foundation.

Dr. William G. Clancy, Jr., Assistant Professor of Surgery and head of the University's section of sports medicine, received the grant from the

research arm of the National Easter Seal Society for Crippled Children and Adults.

Dr. Clancy's research will involve reconstruction of torn knee ligaments in rhesus monkeys, with hopes of being able to restore the use of the knee. Specifically, he will be working with damage to the anterior cruciate ligament. According to Dr. Clancy, instability caused by a tear of this ligament "is the most common cause of disability of the knee in young people." Untreated, increasing disability results from injury to the ligament. Preliminary results show that 70% of the strength of the knee can be restored in six months following the surgery.

"There are obvious benefits from any method that would restore the function of the knee," Dr. Clancy stated in his grant application. Related effects from the injury, such as secondary degenerative arthritis, could be minimized, and full use of the damaged knee restored, he said, if results of his research prove effective. **Q**

McArdle Receives \$1,125,000 Facilities Grant

William P. Davis, Associate Vice Chancellor, UW Center for Health Sciences, has announced receipt of a \$1,125,000 grant from the National Cancer Institute.

The grant, coupled with \$375,000 in state matching funds, will construct a facility for housing laboratory animals used by researchers at the McArdle cancer lab.

The animal care facility will be located in two floors of what is now University Hospitals. The hospital will move into the new Clinical Science Center in March '79.

The animals housed in the unit will be used in studies on the environmental causes of cancer. The new facility will expand the limited animal care rooms available at McArdle. **Q**

Physician Appointed as U.W. Preceptor

Dr. Jeffrey Pearlman, a physician at the Menominee Tribal Clinic in Keshena, Wisconsin, has been appointed as a preceptor for the U.W. Physician Assistant Program.

The Menominee Tribal Clinic is the first Indian-owned and operated clinic in the United States.

As a preceptor, he will help train several student physician assistants during their senior year clinical experience.

The four year Physician Assistant Program at UW-Madison trains health care professionals who help physicians in doing physical exams and routine treatments. Since the program began in 1974, 41 physician assistants have graduated from the program. **Q**



Mrs. Ashe, wife of the late Dr. Henry Ashe, and her son with Dean Arnold Brown.

UW Medical School Preceptor Receives Award

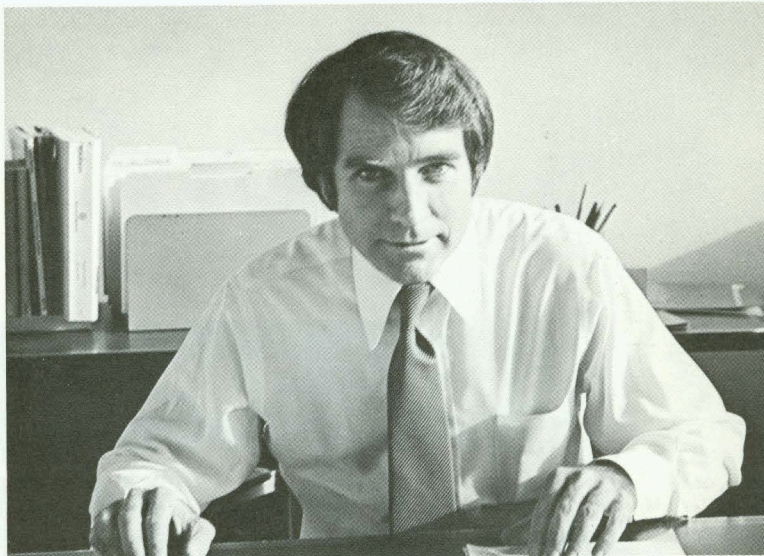
The late Dr. Henry Ashe has been posthumously awarded the Max Fox Preceptor Award in recognition of his excellence in teaching University of Wisconsin medical students. UW Medical School Dean Arnold Brown presented the award to Ashe's wife on September 23 at the sixth annual Day of Country Medicine sponsored by the Howard Young Medical Center in Woodruff.

Dr. Ashe, a general practitioner, graduated from the University of Pittsburgh School of Medicine in 1947. He founded the Lakeland Medical Associates clinic in Woodruff over ten years ago and has served as a University of Wisconsin preceptor for ten years.

UW preceptors are practicing physicians in 22 communities throughout Wisconsin who supervise senior medical students during eight-week clinical training periods. The UW Medical School started its preceptorship program in 1926. Since that time many other medical schools have initiated similar programs.

The Max Fox Preceptorship Award was established by the University of Wisconsin Medical Alumni Association to annually honor outstanding preceptors. Dr. Fox was widely known and beloved preceptor who practiced in Milwaukee.

Dr. Roy Larsen, '39, will be awarded the Max Fox Preceptor Award in Wausau in November. **Q**



Michael A. Byrnes

Public Affairs Director Appointed at U. W. Center for Health Sciences

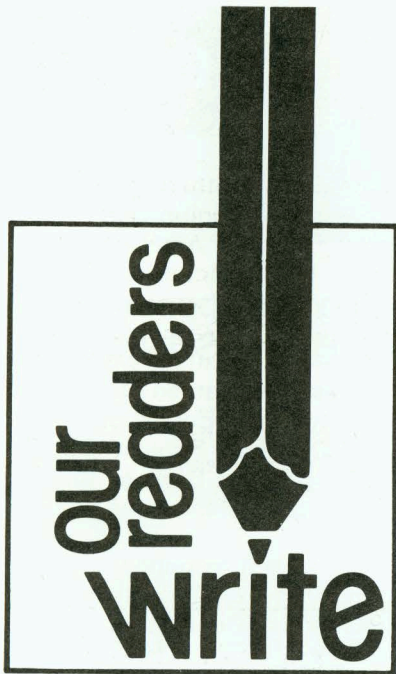
Michael A. Byrnes has been named Director of Public Affairs/Community Health Education for the University of Wisconsin Center for Health Sciences. The appointment, announced by Bernard W. Nelson, M.D., Acting Vice-Chancellor of the Center, was effective September 1.

Byrnes most recently served as public relations consultant at the University of Toronto and as Director of Public Relations at Georgetown University, Washington, D.C.

Before the Georgetown appointment, Byrnes served for 13 years in a number of public affairs positions at the U.S. Department of Health, Education and Welfare in Washington. At HEW he was editor of the agency's official monthly publication, **Human Needs**; public affairs director for the White House/HEW Commission on Medical Malpractice; and press officer for the agency-run U.S. Food and Drug Administration. Byrnes was also information officer for the U.S. Public Health Service's Kidney Disease Control Program, the HEW component responsible for establishing the first Federally-funded hemodialysis demonstration programs in the mid 1960's.

Born in Hamilton, Ontario in 1936, Byrnes was educated in the United States. He is a 1960 graduate of Georgetown University's School of Foreign Service with a B.S.F.S. He attended the American University School of Law in Washington from 1961 to 1963.

He lives with his two daughters, Elizabeth, 18, and Michele, 17. Byrnes succeeds Robert L. O'Rourke who resigned to become Vice-President of Academic Affairs at the Medical College of Pennsylvania. **Q**



To Whom It May Concern,

I recently had the opportunity to take advantage of the one-week rotations set up by the Medical Alumni Association. I would like to thank the MAA and St. Francis Hospital in LaCrosse for this opportunity. I found the employees at St. Francis very friendly and helpful. I think it is very beneficial for my classmates and myself to have the chance to observe various specialties. I believe it is also a great motivational boost to be able to have patient contact during the first two years when everything seems so far away. Again, thank you for organizing this program.

Sincerely,
Scott F. Gylling, Med. II

Thank you very much for arranging opportunities for students such as myself to participate in the "Live In and Learn" program this summer. My stay in Appleton, Wis. with John E. Mielke, M.D., was very interesting and enjoyable. I'm sure that the experience and insights that I gained while there will prove invaluable throughout my education and training and eventually in my practice also. Thanks again.

Sincerely,
Dale Miller, Med. II

Enclosed is a check to cover the cost of Class of 1933 picture taken at the last reunion (1978).

Through the courtesy of Tony Curreri, I have the original class picture plus one reunion picture since graduation. I enjoyed being at the 1978 reunion. It was a nostalgic pleasure for my wife and me to be back in Madison.

Stuart C. Cullen, M.D.
73 West Shore Road
Belvedere, California 94920

Editor's Note: Dr. Cullen received the Medical Alumni Citation in 1969.

After practicing general medicine and surgery for forty-one years in Elgin, Illinois, I retired to Florida in 1970. I'm so sorry that I couldn't make the 50th reunion — just not "up to it." I'm feeling quite good now and have just moved from Naples, Florida to a retirement

complex near Ft. Myers, My cerebral convolutions retain wonderful Wisconsin memories.

Regards,
Gordon W. Abbott, M.D., '28
3803 Turban Shell Point Village
Ft. Myers, Florida 33908

I have enjoyed and appreciated your continued interest in my existence and especially the **QUARTERLY** Medical Journal. Thank you very much.

Some vital statistics: B.S. Agriculture at Wisconsin, 1917. Basic Sciences in the Medical School, 1919. M.D. Rush Medical College, 1923. Internship, four year medical residency and chief, medical clinic specializing in blood vessel diseases at Henry Ford Hospital, Detroit, Michigan. Retired to Florida in October, 1958.

Sincerely,
William (Bill) E. Jahsman
501 Mandalay Avenue, G-18
Clearwater, Florida 33515

I am writing to express my thanks to the UW-Medical Alumni Association for my week stay with Dr. Handrich, OB GYN, of the Milwaukee Medical Clinic. I spent the week of August 11-18 living with Dr. Handrich and it was great. Not only did I gain a great deal of respect for Dr. Handrich as a physician, but I observed how one person met the demands of a family and a

private practice as well as many other commitments.

Dr. Handrich was on call almost every day I was there, and we were busy — surgery in the morning, office visits in the afternoon and deliveries at all times of the night and day. It was a fabulous learning experience not only concerning medicine but also about the daily (and nightly) life of a physician. I thank you again, and if you can put in a good word for Dr. Handrich, please, do so for me.

I enjoyed the week so much I think that I will be doing another one in Wausau in January.

Sincerely,
Bill Wood, Med II

I would appreciate the correction of my class year to 1927. I attended U. of Wisconsin from 1920 to 1923 as Pre med and 1923 to 1925 in Med School finishing in 1927 at the Univ. of Minnesota. I am now retired but remain active in community affairs.

Oscar W. Thoeny, M.D., '27
2323 North Central Avenue
Phoenix, Arizona 85004

Enjoyed recent correspondence with "Murph" Shapiro. Hadn't heard from him since our residency days in 1936-40.

Always read with great interest the little tid-bits of Bill Oatway. What a great California corresponding secretary!

Robert Woodhull, M.D.
(Former Intern & Resident 1936-40)
2025 Forest Ave.
San Jose, California 95128

ALUMNI MEETINGS

Orthopedic Alumni weekend and Herman Wirka Memorial Lecture. Dr. Charles A. Rockwood, Jr. will present the lecture on Friday morning, **November 10**. Reunion dinner on Friday evening. Saturday morning CME credit meeting. Afternoon football game Wisconsin vs. Purdue.

Annual Homecoming Meeting in Madison on Saturday, **November 11, 1978** — Brunch at Union South followed by football game — Wisconsin vs. Purdue. Participants in the **Arthritis symposium** in Madison also **November 10 & 11** will be able to attend the homecoming brunch.

A **Max Fox Preceptor Award** will be presented to Dr. Roy Larsen, '39, Wausau, at a meeting to be held on Monday, **November 27**, in Wausau.

There will be an alumni meeting in conjunction with the **Radio-logical Society Meeting** of North America — week of **November 27** — (possibly the 29th) — at McCormack Place in Chicago.

Annual Milwaukee Winter Meeting. — Friday evening, **February 16, 1979**. To be held in the Cafe Rouge of the Pfister Hotel, Milwaukee. Cocktails at 6:30 p.m. Dinner at 7:30. Milwaukee reception for Dean Arnold Brown.

Other alumni gatherings are anticipated in conjunction with meetings of the **American College of Physicians, March 26-29** in San Francisco, other national meetings and the **State Medical Society** in Milwaukee in **May, 1979**.

Outstate meeting — Stevens Point, Friday evening, **March or April of 1979**, Holiday Inn, Stevens Point.

DATELINE: Continuing Medical Education

November 10-11 — Arthritis Diagnosis and Treatment, St. Mary's Hospital Medical Center, Madison.

November 15-17 — Ampaque Myelography and New Techniques in Neuroradiology, The Wisconsin Center, Madison.

Annual Medical Alumni weekend — Thursday and Friday, **May 24 & 25, 1979**. Class reunions for classes of 1929, 1934, 1939, 1944, 1949, 1954, 1959, 1964, 1969 and 1974 on Thursday evening, Alumni Day festivities and banquet on Friday, May 25.



CORRESPONDENT
Edward J. Lefeber, M.D., '36

The Class of 1978 has metamorphosed into medical alumni these few short weeks since graduation. Like their predecessors, they have scattered from Madison throughout these United States. Five of them arrived in Texas. To start residency training in surgery at Dallas' Methodist Hospital are doctors **Dennis V. Barcy** and **Robert C. Blink**. In the beautiful old city of San Antonio at the University of Texas Health Science Center, **Dr. Lu Anne Taylor** will begin a residency in psychiatry, while the space center city of Houston was chosen by **Dr. Kevin T. Kelly** for internal medicine residency at Baylor College of Medicine Affiliated Hospitals, and by **Dr. Daryl K. Knox** for an obstetric-gynecologic residency at St. Joseph's Hospital. To you our new alumni, a big "HOWDY" followed by a most hearty "WELCOME" to the Lone Star State.

Wisconsin Madison Medical Alumni contributed to the success of the 111th Annual Meeting, Texas Medical Association, this past May in San Antonio. Among those participating in the scientific program were **William N. Donovan ('72)** and **Bernard T. Fein ('38)** of San Antonio, **S.A. Rosenberg (R-'73-77)** Dallas, **Duane Larson ('54)** Galveston and **Martin Grabois (R-'66-'67)** Houston. Dr. Grabois was recently promoted to rank of associate professor, Department of Physical Medicine and Rehabilitation and Chairman, Department of Physical Medicine, Baylor College of Medicine, Houston. Congratulations Dr. Grabois.

Al Leiser ('46) and wife Marge (she is a National Director of the Wisconsin Alumni Association) held a barbeque Texas Style at their home for the Wisconsin Singers when this group, on their first trip south, gave a splendid concert in Houston April 8th.

Medical Alumni Day 1978 found some of our Texas alumni nostalgizing in Madison. **Harold O'Brien ('28)** Dallas received one of the bronze Medical Alumni Medallions presented to members of the second 50th anniversary class. Dr. O'Brien is the oldest 4 year graduate alumnus who calls Texas home. Among the Texas members of the Class of 1938, only **Ralph Rose** and his wife Helen found

their way to Madison for the alumni Day festivities. Ralph is retired but maintains an interest in geriatrics. He and his wife spend the summer months in Wisconsin, away from the rather warm Texas sun At Boulder Junction where they have a cabin.

From the Class of 1953 newsletter comes this bit of news. **Dr. George H. Kakaska**, when not busy with general practice in Dallas, relaxes by either gardening, golfing, skin diving or travelling. The Kakaska's, who have four children, have recently moved to a new home.

Howard and Margaret Gutgesell, both members of the Class of 1968, are busy pediatricians practicing in Houston. Howard has just published a book entitled "Atlas of Pediatric Echocardiography". His wife is a MPH candidate, University of Texas School of Public Health. The Gutgesells have two children, Heidi, 8, and Kirsten, 3. They enjoyed the reunion of their Class, Medical Alumni Day 1978.

Duane L. Larson ('54) was the guest speaker at the 10th annual commencement of the School of Allied Health Sciences, University of Texas Medical Branch, Galveston, August 25th. **Marvin H. Olson ('44)**, Director of Radiation Therapy, at the University of Texas Medical Branch, visited Wisconsin earlier this year. **John F. Wittenberg ('76)**, a third year resident, Department of Internal Medicine, plans to remain in Texas when he completes his training next year. John, wife and child will vacation this summer in their hometown of Cedarburg, Wisconsin.

Faculty from The Madison Medical School who packed their brief cases to travel in Texas this past year include **Drs. Dan Wikler, Gerald C. Mueller** and **James C. Miller**. Drs. Mueller and Miller are members of the McArdle Laboratory for Cancer Research.

With sorrow, news of the unexpected death of **Herb Lee '35**, Richmond, Virginia, June 26, 1978 was received. He was the **QUARTERLY'S** first correspondent from the Southeast (1966-76), a very dear friend, and a loyal Medical Alumnus. He will be missed by all who knew him. **0**