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WISCONSIN MEDICAL ALUMNI

# Quarterly

*Volume seven, number two · spring 1967*



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WISCONSIN MEDICAL ALUMNI

QUARTERLY

Vol. VII — April 15, 1967 — No. 2

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In this issue

- 1 From the Mailbox
- 3 Columns and Editorials
  - How About You, *Lustok*
  - The Twelfth Year, *Freeman*
  - Dean's Corner, *Eichman*
  - California Wisconsinites, *Oatway*
  - Southwest Correspondent, *Pyre*
  - Northwest Correspondent, *Dahlen*
  - Southern Correspondent, *Lefeber*
  - The Internship, *Kampschroer*
- 10 Alumni Capsules
- 12 Alumni News
  - Alumni Day Plans
  - Medical Alumni Citation
  - Emeritus Faculty Award
  - Upcoming Meetings
  - Alumni Fund Grows
  - Winter Meeting Report
  - Learning and Slaloming
  - Reunions Scheduled
- 18 Medical School News
  - University Hospital Ranks High
  - Internship Assignments
  - Stiehm is Markle Scholar
  - Surgery Schedules Course
  - Foreign Preceptorship
  - Cryosurgery at Wisconsin
  - For More Healthy Animals
  - Biogen Grows Bacteria
  - Computers Aid Research
  - Curriculum — Faculty Action
- 22 The Medical School History
  - Foreword, *Middleton* (p. 24)
  - Excerpts, *Clark* (p. 26)
  - Dr. Clark: *Rara Avis, Madden* (p. 31)
- 33 Order Blank for History

About the cover

The cover this month represents the Medical School's history with its buildings, beginning at the bottom with the School's earliest buildings and ending at the top with the newest. Artist is Miss Anne Benkendorf, a University junior from Green Bay, and daughter of Board member Charles Benkendorf. Other art in this issue is also the work of Anne Benkendorf. This is her third QUARTERLY cover.

## FROM THE MAILBOX

To the Editor:

I have just completed reading the Wisconsin Medical Alumni QUARTERLY, Volume 7, Number 1, Winter, 1967. I thought it was an excellent number, especially the article by Bernard H. Kampschroer.

Karl Menninger, M.D., '15, '65  
1439 S. Michigan Ave.  
Chicago, Ill., 60605

Dear Bill (and all others, not forgetting the Helens):

This will be the last of my "Dear Bill" letters, reports on my stewardship that began with the Spring number of the QUARTERLY shortly after I received the fateful letter of January 6, 1964, from Mischa Lustok. You will recall that through that letter, the officers of the Wisconsin Medical Alumni Association urged me to "record the history of the Medical School, not necessarily from the statistical viewpoint of the archivist but from the vantage point of personal experience and human relationship." For more than three years, I have been striving persistently to accomplish this task that I had the temerity to undertake.

And now the finished book with many photographs and the whole bound in Wisconsin cardinal, will, we expect, be ready for distribution to subscribers at about the date when the Spring QUARTERLY for 1967 will be in the mail for each of you. Despite the baffling problems and frustrations, this has been an extraordinary chance for one in his middle eighties. I have enjoyed living again with my former colleagues, appreciating their achievements, their difficulties, their gaieties and their foibles. Reading innumerable papers, letters and records has given me a clearer picture than I ever had during the actual passage of the decades. By convention the shadows that come into every life are suggested only lightly rather than with the strength of Rembrandt's drawings. Especially difficult has been the task of writing the vignettes about men who were young at the terminal date of the chronicle, 1948-1950, but who, by the date of publication, Alumni Day, May 26, 1967, have become mature, competent, productive leaders, the very backbone of our school.

Medicine and the changing practice thereof are timeless. The incredible changes, not only in medi-

cine but in our whole world during this century, have almost overwhelmed us. Fission of the atom, Hiroshima, Sputnik, explosions in scientific knowledge and in human populations! We are left gasping!

And what next? Shall we have a grossly overpopulated underfed world with famine and pestilence in terrifying control and a possible nuclear war with its irreversible destruction? Or shall we become reasonably sane, with necessary compromises and partially satisfactory adjustments?

May I call to your mind the advice of the Red Queen to Alice as they dashed breathlessly through the garden of talking flowers? "Now here," said the Queen, "you see it takes all the running you can do to keep in the same place. If you want to get somewhere else, you must run at least twice as fast."

Let us then, learn to run twice as fast towards the difficult peaceful solution of conflicts.

Reverting now to our own "chronicle" I have become deeply impressed in my more than half a century here in the Medical School and my three years of intensive study, with the vision, sanity, and persistence of our triumvirate of leaders. Each one of these men has been very different from the other two in his mode of life, his thinking and the handling of his professional opportunities, yet with dedication to the same objectives the achievements have been outstanding.

Although Dr. Bardeen held an M.D. degree from Johns Hopkins Medical School, he never had a hospital internship; he never had a patient. Our medical school was his patient and despite a prolonged period of gestation and difficult delivery, his splendid treatment gave successful results.

Dr. Bardeen's devotion to research did not hide his continued interest in public medical service, in the broader aspects of public weal and in individuals. His calm attitude before legislative committees, his well reasoned letters in response to attack by members of the medical profession and his inauguration of the preceptor system with Medical School control, demonstrated his excellence (see chapters 1, 2, 3, 5, 6, and 7).

Dr. Joseph Spragg Evans, second member of the trio, was immaculate in dress and manner in contrast to Dr. Bardeen's negligence in both matters. He was a clinician with unusually broad training, with an abiding concern for the welfare of each patient. He made his contribution to medicine and the University not through research papers but through his understanding of the needs of each per-

son, whether high or low in the social scale. He aroused confidence and trust, a gift that was important in bringing three prominent physicians from Milwaukee on weekly visits to Madison to establish clinical services in their specialties. Later the confidence of Governor Philipp in Dr. Evans as the emissary of President Birge was invaluable in obtaining the legislation that provided funds for the Wisconsin General Hospital. Dr. Evans both as the priest-physician and as influential in the larger political spheres merits our warm appreciation (see chapters 3, 5, 6, 8 and 11).

The third triumvir, Dr. William S. Middleton, was definitely the teacher-clinician and as such had the strongest influence on our students. Following Dr. Bardeen's death in 1935, Dr. Middleton was promptly chosen by President Frank to be the second dean of our school, a position he filled with distinction, for two decades, 1935-1955. With an early morning start, he remained active on the wards as keen analytical physician and teacher until noon. He loved these relations with patients and with students. After a brief luncheon period, he took up the various tasks and decisions of the dean, alert and with a grasp of the present and a vision of the future. By budgeting his time he handled admirably both his duties as professor of medicine and those of the deanship. An omnivorous reader and a lover of books, he wrote widely and well providing many stimuli to his associates (see chapters 5, 6, 9, 11, and 20).

As I ruminate over Dr. Middleton's many papers, especially the biographical sketches of eminent physicians, his characterization of Dr. Evans as "physician-statesman" comes to mind. In this period of world crisis we have, it seems to me, dire need for such men not merely as advisors on the side lines but as active members of our legislatures. In June, 1930, in Oxford, England, I was fortunate to hear Winston Churchill deliver the Romanes lecture on the importance of electing or appointing men of science to the government. He said: "Governmental functions are today so involved in science that the advice of such men is insufficient; they must take part actively in the government and the fundamental decisions." Churchill was at that time not a member of the government. He gave the address with his characteristic well-coined phrases. He stressed what he considered the deep need for such a change in practice. His words have clung to my mind, so you may see that actually I am merely echoing the advice of a great world leader.

I am grateful to each of you and to all of you. "What I aspired to be and was not, comforts me."

"Ave atque Vale."

Paul F. Clark

Emeritus Professor

of Medical Microbiology

P.S. Some thousand names have been cited in the history; despite repeated efforts, some misspellings will be found. I apologize.

P. F. C.

## MOVING SOON?

If you plan to move to a new address in the near future, please let the Medical Alumni Association know where you are going. The Association is undertaking some exciting projects, and significant things are happening at the Medical School. If we have your new address, we can keep you informed as developments occur.

Happily, we are one of the few publications that does not require three weeks or a month of notice. We promise to change your address in one day (it doesn't matter much anyway — we publish only quarterly). The form below is for your convenience. If you lose it, just send a letter. The address is: **Wisconsin Medical Alumni Association, 333 N. Randall Ave., Madison, Wisconsin 53706.**

NAME \_\_\_\_\_ NEW ADDRESS \_\_\_\_\_

OLD ADDRESS \_\_\_\_\_ DATE OF MOVE \_\_\_\_\_

ANY NEWS? \_\_\_\_\_ CLASS \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# COLUMNS AND EDITORIALS

## How about you

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

MILWAUKEE — One of the richest rewards for the Editor is a letter from an alumnus, and we have our share. Some are complimentary, some critical, and some tell us of events and people who live them. Occasionally we hear in depth of ideas. All have the hallmark — our common professional heritage from Wisconsin, a heritage of medicine viewed not as a profession but as a way of life. We delight in hearing from you. Those letters which reflect general reader interest are printed in Letters to the Editor. Others, no less welcome, are read by us and help us shape ideas and develop attitudes. None go unanswered. We need to feel that those to whom we speak have heard and care enough to respond. The QUARTERLY is a dialogue. How about you? What have you to say to the Editor?

\*

Early in our evolution of the *Alumni Newsletter*, later to become the *Alumni Bulletin* and finally the QUARTERLY, your Board of Directors decided to send the publication to *all* alumni, whether dues were paid or not. This was a generous and, we believe, wise act — not customary to comparable organizations. It was prompted by the concept that *all* alumni are deserving of the opportunity to maintain ties with their parent body. It was hoped that such exposure would rekindle the waning light of alumni loyalty in those who were lax in paying their dues and letting others carry the responsibility of supporting the Alumni Association. In the beginning it was a light burden. With an ever increasing mailing list, now circa 5,000 and with the rising costs of the improved format the financial balances are assuming significant consideration. We do not want to compromise the quality of the QUARTERLY nor do we want to limit the distribution to only dues paying alumni. We agree with your Board of Directors that *all* alumni are deserving of the opportunity to read the QUARTERLY. The answer is obvious. *We need your support.*

\*

About eight years ago we began sending the predecessors of the QUARTERLY to friends of the University of Wisconsin Medical School who were not physicians, but who were sympathetic benefactors of our school and major contributors to the William S. Middleton Medical Library. We have maintained this mailing list. The individual and corporate gifts

from these sources rendered significant and most valuable support to the evolving projects of the school and the alumni association. We wanted these gracious men and women to know what they were giving their moneys and talents for, and we knew of no better way to display the product of the University of Wisconsin Medical School than by acquainting them with the alumni and alumni activities through the medium of the QUARTERLY. We often wondered what their reaction was to our publication. Recently we heard. We are read with empathy and understanding of the physician's way of life and our dialogue is strengthened by the understanding.

Thank you, Mrs. Dorothy Inbusch.

\*

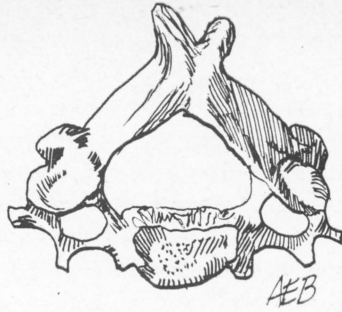
With this issue, Dr. Herbert C. Lee, '35, joins our erudite group of area correspondents. Dr. Lee is professor of surgery at the Medical College of Virginia in Richmond and will report to us from the southeast. There are many alumni in this section who would like to re-establish their old ties with the school and renew old friendships with their classmates. Drop a note to Herb Lee, he will be pleased to hear from you.

Our coverage is growing in pace with the dispersion of our alumni. Bill Oatway in California, Jim Dahlen in the Northwest, Jack Pyre in the Southwest, Ed Lefebber in the South, Bob Parkin in his travels at large, and now Herb Lee in the Southeast. Our sights are on the eastern coast and the deep midwest — then overseas. WHEREVER YOU ARE, YOU ARE STILL A WISCONSIN MEDICAL SCHOOL ALUMNUS AND OUR AIM IS NOT TO LET YOU FORGET IT FOR A MOMENT.

## The twelfth year

By D. J. FREEMAN, M.D., '52  
PRESIDENT

WAUSAU — Each year of our Wisconsin Medical Alumni Association's short life has been a year of accomplishment. Inaugurated by a handful of loyal alumni 12 years ago, it has grown to more than 2,000 members. Each year testifies to a sustained alumni interest in the progress of our Medical School, witnesses the completion of some fine alumni projects and the pleasure of renewed experiences among old classmates. The progressive strengthening of our alumni association has been and will con-



tinue to be an important factor in maintaining our Medical School's health and potency.

Unfortunately, even after 12 years, the number of alumni who demonstrate an appreciation of this important factor are still far too few. Although the effort and dollars of the majority of us have given reality to the Middleton Medical Library, by far the majority of us now seem to feel our job is over. At least this is what the response to date to the annual giving program for our Wisconsin Medical Alumni Fund suggests. Less than eight per cent (174) of us have contributed \$5,700. With shame are these percentages and amounts compared to those manifested by other alumni for their schools.

Imagine the effect if, instead of eight per cent, 80-100 per cent of us demonstrated each year a similar repetitive contributing interest! The impact of a mere \$40-50 annually by each alumnus would be tremendous. The library project was great, but we should not rest with this attainment. Our school needs unrestricted dollars now and will probably always need them.

For those of us unmoved by an appeal to annually contribute toward unanticipated, unbudgeted and un-"tax-supported" needs, there are several anticipated, but unbudgetable and un-"tax-supportable" ones available for specific designation by contacting the alumni office. For those of us thinking really big, how about \$500,000 to fully endow a chair in some specific area of interest; or \$100,000 to support annual visiting professors with varying interests; or \$25-50,000 to provide an annual teaching or research excellence award? (Or a few million for an accelerator or some such?).

For those of us concerned that our heirs will lose 30 per cent of our estate, here is some consolation: why not give some of those losses to our alumni association? It can be done without our heirs losing a penny. The details of our Bequest Program are being worked out, will be kept current, and will also be available by contacting our alumni office.

Your alumni association is not only concerned with raising money. This year we have entered the publishing business in an even more resounding

way (Clark's "History of the University of Wisconsin Medical School"), and have benefitted from John Grinde's "Riding the Tide"; instituted educational-recreational retreat seminars (first trial skiing at Vail, Colo.); initiated a Medical Center painting by a nationally-known artist (unfortunately not available for the May meeting); and made the usual judgments on awards, citations, programs, reports, projects, etc.

Among the more pleasurable tasks are the various alumni meetings throughout the country. Attending these or hearing about them from one of the correspondents makes one realize that the cement of our association is fellowship, renewing old friendships, and reliving old experiences.

Through these, our mutual genuine attachment for the hopefully never "old" alma mater is nurtured. The annual meeting is May 26; don't miss it. You'll be amazed at how new your "old" alma mater has become. See you there?

## Dean's corner

BY PETER L. EICHMAN M.D.  
DEAN

MADISON — All of us are looking forward to Alumni Day, which has a special meaning this year because the Middleton Medical Library will be dedicated. This is a truly extraordinary gift from the alumni — unparalleled in our history and a fine example of loyalty and devotion to a professional school. The library building has been described by some as a "jewel." Its setting, lines and color fit into the Medical Center most appropriately. It has been in full operation since Fall and has been a boon to students and faculty.

Reaction to Dr. Clark's history of our school from those who have reviewed the manuscript or proofs has been highly favorable. The publication should come off the presses soon, and I hope that all alumni will find it of interest and add it to their libraries. To understand the history of a school is to understand the school itself. Dr. Clark deserves our highest praise for a splendid job.

Our building program is still held in abeyance. Many factors are being considered in a major decision for long range planning. I hope that this will be clarified in time for me to report to you on Alumni Day.

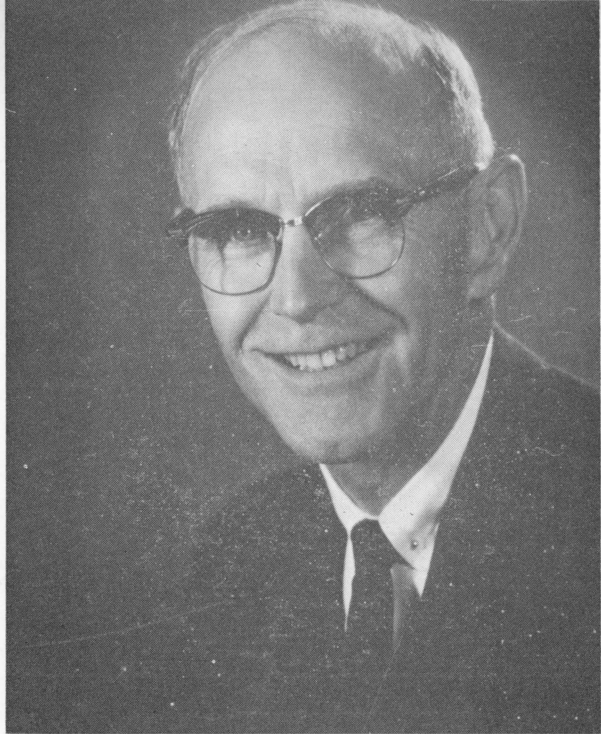
## California Wisconsinites

By WILLIAM H. OATWAY JR., M.D. '28  
CONTRIBUTING EDITOR

ALTADENA — A brief biography may be hard to assemble, especially when it describes a modest and retiring person.

C. (for Carl) Richard Smith has both of those qualities, plus a quiet success in his field, a local and national renown, dedication, teaching and writing ability, etc. . . . He also has a Wisconsin origin, and got a part of his education there, with current memories still bright of the "good old days" and the fine faculty at old Science Hall and the Red Brick Clinic in the early twenties.

Dick Smith was born in 1902 in Superior, Wis. He went to grade school and high school there, plus two years at Superior Normal School. He followed this with two years (for an A.B. degree) at the University of Wisconsin, and took his first two years of medicine (1923-24) at Wisconsin. . . . The memories include Drs. Meek, Eyster, Middleton, Bunting "and all the rest," and his dissecting room group included



*C. R. Smith, in 1965*

*C. R. Smith, in 1925*



Mark Nesbit, Bill Oatway, Gort Richie, Howell Randolph, and Holden Robbins. He also remembers Drs. Bradley, Severinghaus, Bardeen, Sullivan, Leake, Clark, Bast ("intercellular britches"), William Snow Miller, and the Jacksons (at Methodist Hospital).

Medical school work was completed at Rush Medical (University of Chicago), and his internship began at Los Angeles County Hospital, was interrupted by TB, and finished at Barlow Sanatorium. The M.D. degree was not awarded (as was the custom at Rush) until the intern years were completed (1932). He then took a residency in pathology at Denver General Hospital, was licensed to practice in California in 1932, and was certified later by the American Board of Microbiology.

The results of this education began with a directorship of the Barlow Laboratory, 1933 to the present; a private practice of clinical pathology (with two laboratories in Los Angeles) since 1953; an instructorship and assistant clinical professorship in medicine at USC, 1940-53; and a climb up the ladder to director of the mycobacteriology laboratories, Los Angeles County General Hospital (1946 to now) and clinical professorship of pathology, USC (by 1965).

Along the way he has been a member of the usual medical and thoracic societies, and president of the

Los Angeles Trudeau and Los Angeles Society of Pathologists. He is also a member of six national medical, TB, pathology microbiology and cytology societies; a consultant for VA and local hospitals; chairman of many committees of the Los Angeles TB and health association, and sponsor or co-worker in dozens of research projects.

Dr. Smith has been author or co-author of 41 articles, mostly in national journals. He became a fine authority in diagnostic methods, case-finding (the huge 1950 survey), culture media, disinfectants, analysis of tubercle bacilli, etc. If you are jealous or covetous of the results, think of the sweat and mid-night oil.

Dick is married (Ida Louise); has a child (Stephanie Deborah, 17 years of age); and lives in Pasadena, a 12-minute drive down the freeway to his nearest office. . . . He is proud of his Wisconsin years and, to those who know his kindly helpfulness and good judgment (or even to those who scan through this superficial listing), Wisconsin people can be very proud of him.

## Southwestern correspondence

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

TUCSON—I ran across an interesting two-year-old letter from Edward E. Tennant in my files. He is practicing radiology in Sterling, Colorado, a town of 13,000 people in northeast Colorado. He has two associates who do most of the diagnostic work. Eddy primarily works in radiotherapy and nuclear medicine. This seems out of the ordinary in a rural community which boasts 23 M.D.'s, eight of them specialists.

His route from Wisconsin after graduating from the Medical School in 1948 was interesting, too. He interned at Christ Hospital in Cincinnati, was chief of surgery as a Navy physician attached to Davis Monthan Air Force Base through July of 1950, was a G.P. in South Dakota for a short stretch, took a radiology residency in Cleveland City Hospital, spent a year, then, as chief of radiology at Camp Lejeune Naval Hospital, got his boards in 1953, practiced a year in Denver and settled in Sterling in 1954. In addition to the practice of medicine he is a rancher and thereby enjoys the outdoors with his four adopted boys and four adopted girls, ranging in age from 17 months to 14 years. I can believe it



when he says that there is little time for social engagements.

In 1962 his wife was elected North Eastern Colorado "mother of the year." In 1964 he was cited as "outstanding citizen of 1964."

In March of 1965 Dr. Tennant was summarizing his 10 plus years of radiology practice in a rural community through a series of papers and expected that the first would be appearing in the American Journal of Roentgenology and Radium Therapy.

## Northwestern correspondence

By JAMES H. DAHLEN, M.D., '61  
NORTHWESTERN CORRESPONDENT

SEATTLE — We have enjoyed recent visits with Timm Zimmermann, '63, of Westby, Wis., who was here for a week of skiing at Crystal Mountain with his wife Sue; and with Dr. John Rankin, of the Medical School faculty, who was a speaker at the Tacoma Academy of Internal Medicine March 11.

Our Greater Seattle U. of Wis. alums had their Founder's Day meeting March 6 at one of the local TV stations. We toured their physical plant and then heard Prof. Dreyfus from Madison discuss the role of educational TV in the U. of Wis. program. Attending was Dr. Daniel Torphy, '62, who is now in a pediatric residency at Children's Hospital here — Air Force sponsored.

I've asked Dr. Allan C. Kind, '60, to give a short review of the training program in medicine at the

University of Washington School of Medicine here. His report follows:

"My vantage point is that of a fellow in infectious diseases now 8½ months into a 24-month program after completing three years of medical residency at the University of Wisconsin Hospitals last summer.

"This program includes the University Hospital, King County Hospital and the Seattle VAH, altogether about 225 medical beds. The house staff rotates through all hospitals. Medical residents seem inclined and are encouraged to take two years of residency and then a year or two of subspecialty training. About 12 months of the residency is ward duty and the remaining 12 months is spent on two-month subspecialty rotations. The caliber of the house staff is excellent and the spirit is high; needless to say the attending staff and conferences are equally as good. There are 43 medical residents and 46 interns (straight medicine and rotating).

"What really overwhelmed me was the size and scope of the subspecialty fellowship program. There are 80 fellows in the department of medicine. Doctors are rarely in the minority on the medical wards. In the infectious disease programs at the University and King County Hospital there are five fellows and five full-time staff members all engaged actively in clinical infectious disease and investigation. There is much individual freedom together with close 'preceptorship' type relationships.

"It is easy to recommend all levels of this program. It was with real apprehension that we left Madison for Seattle — sort of like leaving the womb after eight years of medical gestation there and at Marshfield. The first day I arrived I found that a former roommate (wombmate?) at Phi Chi, Bill McKee, was also a fellow in infectious diseases and will soon be going into private practice in Wenatchee, Wash.

"Another classmate, Bob Blomquist, heads the medical extension service for King County. Saul Rosenstreich, who was a medical resident at Wisconsin last year, is now a GI fellow here. Had hardly been here a month when Pete Porter (medical resident and intern at Wisconsin 1960-64) showed up after an army tour in Korea and Washington, D.C., for a GI fellowship. He remains single but drives the flashiest car on campus in the form of a Corvette. David Jaecks is a second year medical resident and will be a renal fellow next year, Al Boeker is a radiology resident. Tom Davee and Dave Larson are interning at King County.

"I suspect I would have noticed others if I had

concentrated more on the hospital and less on the mountains, lakes and ocean."

## Southern correspondence

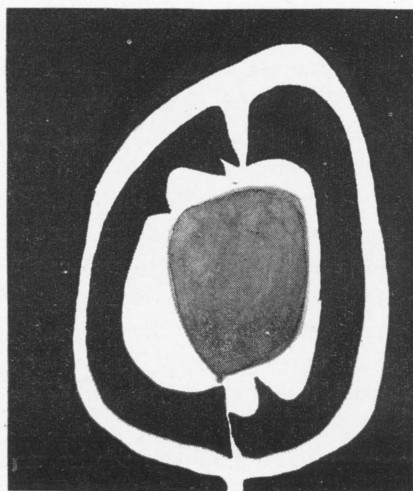
By EDWARD J. LEFEBER, M.D.

TEXAS CORRESPONDENT

GALVESTON — The suggestion that the Wisconsin medical alumni living in Texas organize has evoked, so far, a negative response. Perhaps more interest might be generated if such a gathering be projected for a future meeting of the Southern Medical Association. In the states from which membership of the SMA is recruited, namely the states of Alabama, Arkansas, District of Columbia, Florida, Georgia, Kentucky, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia live and practice some 490 graduates from the Wisconsin Medical School. How about such a project? Is anyone interested? If so, make yourselves known.

The 61st Annual Meeting of the SMA will be held in Miami, Fla., November 13-16, 1967.

During the Regional Meeting of the American College of Physicians held at Galveston in December, Richard M. Fenno, '49, introduced himself and made known that he was from my old home town of Wauwatosa. After many years in the Air Force, he now practices Internal Medicine at Houston, Tex. Allan S. Plotkin, '65, and his family have resided in Galveston since July, 1966. He is a Senior Surgeon in the USPHS and is stationed at the USPHS Hos-



pital, Galveston. Dr. John C. Meadows, intern 1946, appeared on a panel session entitled "Stimulating and Evaluating County Medical Society Activities" given at the Texas Medical Association's 1967 Conference on Legislation held in conjunction with a Symposium for County Medical Society Officers held in Austin January 21, 1967. Dr. Meadows is the President-elect of Bexar County Medical Society.

## The internship

BY BERNARD H. KAMPSCHROER  
SENIOR CLASS PRESIDENT

MADISON — The results of the National Internship Matching Program have been announced, and we senior students feel relieved. Relieved is a good description because it carries no connotation of pleasure or displeasure. Most of the students who subscribed to the program are satisfied with the pairings as they were handed down by the un-erring computer, but some are disappointed. Nonetheless, we are all relieved! This business of searching for, evaluating, maneuvering for and finally securing a good internship is an anxiety-producing situation.

Grades frequently play a large part in determining whether a student will be accepted by various institutions. While grades are about the only concrete, subjective evidence of a student's performance and ability, they are by no means a perfect indicator, and are frequently even misleading. For example, a student who consistently does "A" and "B" work during the two basic science years is likely to carry his high rating throughout the entire four years even though he may perform in a mediocre (or less) manner during the two clinical years. There is no good yardstick for measuring clinical performance, and the evaluations are entirely subjective. All students are not exposed to the same staff physicians, some of whom are a good deal more critical than others. On some services the student is forced into a minor role and if he keeps his nose clean, will come away with a good grade. On other services one must really "shine" and impress a hard driving staff man or resident to come away with a passing grade. The system, as it is set up, does not lend itself to complete and comparable evaluations. It follows, then, that the opposite must be true. Some students do poorly during the basic sciences, only to find that clinical medicine and patient care are right "up their alley." Such students are probably relegated to a spot in the lower one-third of the class, and will be unable to extricate them-

selves for many of the same reasons listed above. If this student seeks one of the so called prestige internships or a good university internship, he is at a disadvantage from the moment his transcripts arrive at the hospital in contention.

Personality and self confidence are closely enough related to be considered together. Interests are probably an integral part of personality, and will certainly direct the man's thinking. The student who likes working with people, who handles patients well and who is interested in general practice will probably not seek an appointment to Massachusetts General. Conversely, the quiet student who is ill at ease with patients, who likes to putter in a laboratory, and leans toward a career in academic medicine would not rank Fort Fungus County General as his first choice.

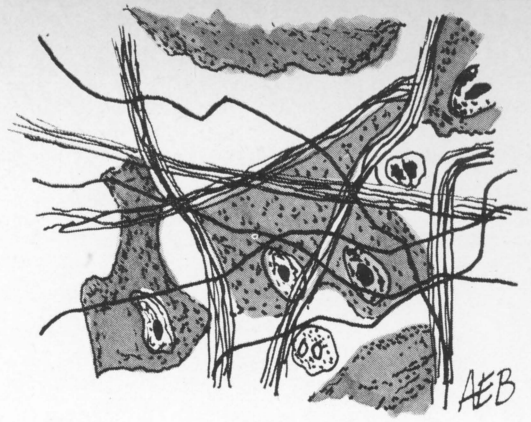
Admittedly, the salary offering should be a minimal significance in the choosing of an internship. It is becoming more apparent that most hospitals are willing to pay a "living wage" to house officers. The point is, however, that a married student with children is bound to have quite a different concept of what a "living wage" is than a single, non-dating student. When one emerges from medical school with a debt of \$5,000 to \$10,000, and possibly plans to enter a residency after his internship, it is difficult to face a year of \$250 monthly checks. For not only is the interest building up on the loans, but one is likely to have to borrow more during the internship year. Again, this is less a problem for the single physician than for the intern with a hard working wife and children who grow out of their shoes faster than you can learn how to read electrocardiograms.

An advisory system is an obvious necessity, but is laden with many not so obvious drawbacks. Upper most among these is the advisor bias. A student rarely knows what to look for in a good internship, so he turns to his advisors. These may be solicited or unsolicited. The advice he receives is necessarily influenced by the advisor's own experiences and prejudices. Occasionally, the staff man's unfulfilled aspirations may be a moving factor. In the case of advisors who serve on the university faculty, institutional pride may play a part in the counselling he gives, e.g. it would give any school official no small measure of pride to be able to say that his school placed 95 students in well thought of university settings or in the so called prestige internships. Even though his institutional pride would be justifiable, it would be a grave mistake for him to advise the student on this basis without considering all or some of the points I am writing about here.

During our third year of medical school we had an internship meeting. Following the meeting we had a social hour with several faculty members circulating about, all open to questions and giving advice freely. Most of us left the meeting considerably more confused than when we entered. A professor of medicine bluntly stated that the only place to intern is in a university setting. A professor of surgery suggested that anyone interested in surgery should take a straight medicine internship. One staff man sipped his beer and said that straight internships were "in" and rotating and mixed internships were "out." The physician on his left chomped a potato chip and said that a rotating plan was the only one to take. Dr. Chris Milquetoast on the other side of the room said that he interned at a private hospital where the house staff was well supervised and there were thrice daily teaching conferences. An adversary was quick to point out that he did not want a 5th year of medical school. He went to a large city hospital where there was unlimited responsibility and little supervision. Another M.D. was quick to point out that he wanted some responsibility, but with adequate supervision. He said this combination might be found at any type of hospital, and all one had to do was look. Someone said that anyone who went to a county hospital was a clod and would never get into academic medicine. A fellow who looked like a real swinger said that the only place to go was Hawaii because the surfing is great and they have some good internships over there. Someone said that Wisconsin graduates "sell themselves short" by not shooting high enough. Too many students head for the county hospitals, the good pay and the warm climate. The last man I talked with before I left said that the internship year doesn't really determine "that" much of the course of your career as a physician. He pointed out that a student who wants to become a good doctor can work hard in any approved internship and take away more than a moderately interested student in the best internship in the country. With that, I left.

During the last part of that third year, I was more mixed up than most of my classmates about choosing an internship. This, however, stimulated me to think about it a great deal. Here is the way I approached the problem before I went on a hospital-visiting tour.

1. I put grades completely out of the picture. I decided that if I set my heart on the best program in the country, I'd shoot for it.
2. I neither lacked self-confidence nor reeked of



it. The one entity I felt I need more of was responsibility. I would be very careful to seek a place where the decisions would be mine and the treatment would be up to me. However, I wanted bedside teaching rounds, so someone could tell me if I was doing things properly, or if the treatment I had instituted would surely kill the patient. I looked for a variety of conferences, but did not want to be burdened by too many. I had no plans to enter academic medicine.

3. I knew I would probably return to the mid-west to practice, so I decided to go west for a year.

4. I definitely needed a stipend which would not require that I borrow more money. I was already in debt and my three sons were already out-eating me.

After the tour was completed, I filed applications at the hospitals I liked, and at the appointed time I filed my order of preference. Now, the results of the matching program are out. I matched with a large county hospital in California where I will enjoy responsibility with adequate supervision. My children will eat, and my wife may even get her first new dress in four years.

Now it is just like it was at the internship meeting social gathering way back in the junior year. When I reveal my place of internship I am faced with similar responses. I have been ridiculed by some who say that a university hospital is the ONLY place to go for good training and proper intellectual stimulation. Some tell me that I have chosen well because they too served their internship at a county hospital and, well, look at them now! The striking thing is that NO ONE said said to me: (a) I cannot comment because I am biased in one way or another, (b) I cannot comment because I do not know your financial status or (c) I know nothing about your future plans or interests.

My goal is to become a good physician. Right now the internship year looks extremely important. How much it will influence my future capabilities I cannot say. Whether it is because of, or in spite of my internship, I will someday be a good physician.

# ALUMNI CAPSULES

Dr. Carol Eifler Craig, '52, director of the health service and college physician at Mount Holyoke College in Massachusetts, left in March to go to Vietnam under the AMA volunteer physicians for Vietnam program. She was the second woman selected by the AMA, and is one of a growing number of Wisconsin alumni participating in the program.

Dr. Craig first applied about six months before she left. Her application was at first rejected because the program was not accepting women, but she persisted until she received the affirmative decision in January, shortly after the decision was made to accept women.

Before she left, she did not know where she would be sent or the size of the hospital staff. Her only misgiving is about the climate, but she is optimistic about her adaptability.

When her two-month tour of duty is over, she plans to volunteer for an additional 30 days, returning to the United States sometime in June.

Dr. Craig's interest in South Vietnam is primarily humanitarian, she said. "I did not choose this area because of a war or for adventure. I chose it to help people." She would have gone to Africa, she said, if there had been a similar program coinciding with her sabbatical leave of absence.

She has served as college physician at Mount Holyoke College since 1958, and has been director of the health service since 1961. Dr. Craig took her internship and three-year residency in internal medicine at Youngstown Hospital, Youngstown, Ohio.

Another Wisconsin alumna, Dr. Elizabeth Grimm, '43, is director the Smith College Health Service, Northampton, Mass., and provided the information about Dr. Craig.

Dr. Robert W. Fuelleman, '60, now certified in radiology, is practicing at 2961 Main Way Drive, Los Alamitos, Calif., 90720.

Dr. Clinton N. Woolsey, director of the Medical School's laboratory of neurophysiology, received the 1966 honorary lectureship award of Albany Medical College of Union University, Albany, N.Y. It is the college's highest professional citation. Dr. Woolsey received his degree there in 1928.

A 1959 graduate, Dr. David E. Goodnough, recently joined the staffs of the Gundersen Clinic and Lutheran Hospital, La Crosse, Wis. He is an anesthesiologist. After his graduation he interned in California and served residencies at University of Wisconsin Hospitals and the University of Washington Hospitals, Seattle.

He has practiced for a year in Plattsburgh, N.Y.

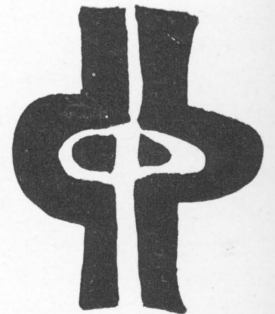
Dr. Carlton S. Bolles, '32, who has practiced dermatology in Green Bay since 1945, retired in September and was scheduled to move with his wife to Florida.

The new chief surgeon of Shriner's Burn Institute, Galveston, Tex., is Dr. Duane L. Larson, '54. He also is assistant professor of surgery in the division of plastic surgery at the University of Texas Medical Branch, and has served as head of the clinical services at

the Burn Center since it opened a year ago.

Dr. Richard Johnson, '46, chief of the pulmonary disease section of the Madison V.A. Hospital until September 1, is now with the pulmonary disease service of the Minneapolis V.A. Hospital. He had been clinical associate professor of medicine at the Medical School while with the V.A. in Madison, and now is also associate professor of medicine at the University of Minnesota.

Dr. Gordon E. Kronquist, '59, of Janesville, Wis., recently received certification from the American Board of Pediatrics. He is associated with the Pember-Nuzum Clinic in Janesville.



A 1944 graduate, Dr. James Theisen, is a new member of the Oconto Falls Community Memorial Hospital. He had practiced in Green Bay for 10 years. He is a board certified surgeon.

Dr. Garrett A. Cooper, '35, a member of the QUARTERLY editorial board and clinical professor of medicine at the Medical School, has been appointed by the Wisconsin Governor to serve on the State Board of Health. He succeeds another alumnus, Dr. Jacob E. Kaufman, '33, of DePere.

Another alumnus, Dr. Leo G. Joseph, '54, is health officer for the

city of LaCrosse. He also is medical director of the Hillview Home, LaCrosse.

□

Three Milwaukee alumni recently received medical staff appointments to positions of responsibility at Mt. Sinai Hospital there. Dr. David J. Ansfield, '29, was named chief of staff; Dr. Barney B. Becker, '43, became head of surgery; and Dr. Burton M. Zimmerman, '43, chief of general practice.

□

Regretfully, we have the following deaths to report:

Dr. Paul C. Gatterdam, '24, on November 29, in LaCrosse.

Dr. Eugene M. Juster, '24, in Madison, December 15.

Dr. Meric V. Overman, '35, in Neillsville, Wis., December 17.

Dr. Martin K. Rosenbaum, '28, in Milwaukee, October 21.

Dr. Robert O. Brunkhorst, '19, in Milwaukee, November 19.

Dr. Irving I. Muskat, '21, in Milwaukee, in January.

Dr. Emil Bunta, '14, in Chicago, February 1.

Dr. Everette L. Campbell, '25, in Orange, N.J., October 28.

Dr. Charles F. Burke, '28, in Madison, February 16.

Dr. John Francis Miller, '34, in New Rochelle, N.Y., in February.

Dr. William M. Faber, '38, in Pottstown, Pa., recently.

Dr. Ernest Donald, '23, in Los Angeles, recently.

Dr. Harry S. McGaughey Jr., '46, in Chapel Hill, N.C., in February.

□

Dr. Abraham Quisling, '30, past president of the Wisconsin Medical Alumni Association and a partner in Madison's Quisling Clinic, has been elected vice president of the civil-industry division of the Madison Chamber of Commerce.

□

Dr. James E. Albrecht, '47,

Jackson, recently was awarded a certificate for one of the "best articles by a physician" submitted to Medical Economics magazine.

□

A 1931 graduate, Dr. H. J. Hansen of Sheboygan Falls, Wis., recently was named recipient of the Distinguished Service Award by the Sheboygan Falls Junior Chamber of Commerce. He has practiced 33 years in the community, and estimates that he has delivered more than 3,000 babies.

□

Dr. Francis J. Scully, '15, of Hot Springs, Ark., has recently published a book, "Hot Springs and Hot Springs Medical Park," and has forwarded a copy for the Middleton Medical Library.

Dr. Scully retired from active practice last fall after nearly 47 years as an internist in Hot Springs. His book, a non-medical accomplishment, is the story of the city and the nation's health resort. Its preparation required 30 years of research and nine years of writing.

Dr. George P. Steinmetz Jr., '56, has joined the general surgery staff at the Dean Clinic in Madison. For the past three years he has been a member of the Medical School surgery department faculty as an assistant professor.

□

A new member of the orthopedic surgery department of the Quisling Clinic in Madison is Dr. Milfred A. Cunningham, '61.

□

Dr. Henry A. Anderson, '37, is celebrating his 25th year with the River Pines Sanatorium in Whitening, Wis. He is the medical director.

□

An alumnus in Reedsburg, Wis., Dr. Gerald C. Gant, '58, has been certified by the American Board of Surgery. He completed his surgical training at the University of Wisconsin Hospitals.

□

Dr. Robert O. Johnson, '48, has been named a full-time assistant regional coordinator of the Wisconsin Regional Medical Program.



# ALUMNI NEWS

## Alumni day plans

The formal dedication of the Middleton Medical Library and a tribute to the alumni who made the building possible will be the principal features of Alumni Day, May 26, 1967.

Alumni, through private and industrial gifts, collected about \$800,000 of the \$1.1 million cost of the first phase of the library. Plaques, memorializing this achievement and recognizing individual donors will be placed in the building.

The University of Wisconsin Board of Regents, in a rare action, has formally named the building in honor of Dr. William S. Middleton, dean emeritus, with the provision that the action not set a precedent. The University has a policy against naming buildings after living persons. An active alumnus,

Dr. James Nellen, '39, Green Bay, is a member of the Board of Regents.

Making plans for the dedication is a committee under the chairmanship of Dr. Van R. Potter, professor of oncology and chairman of the faculty library committee.

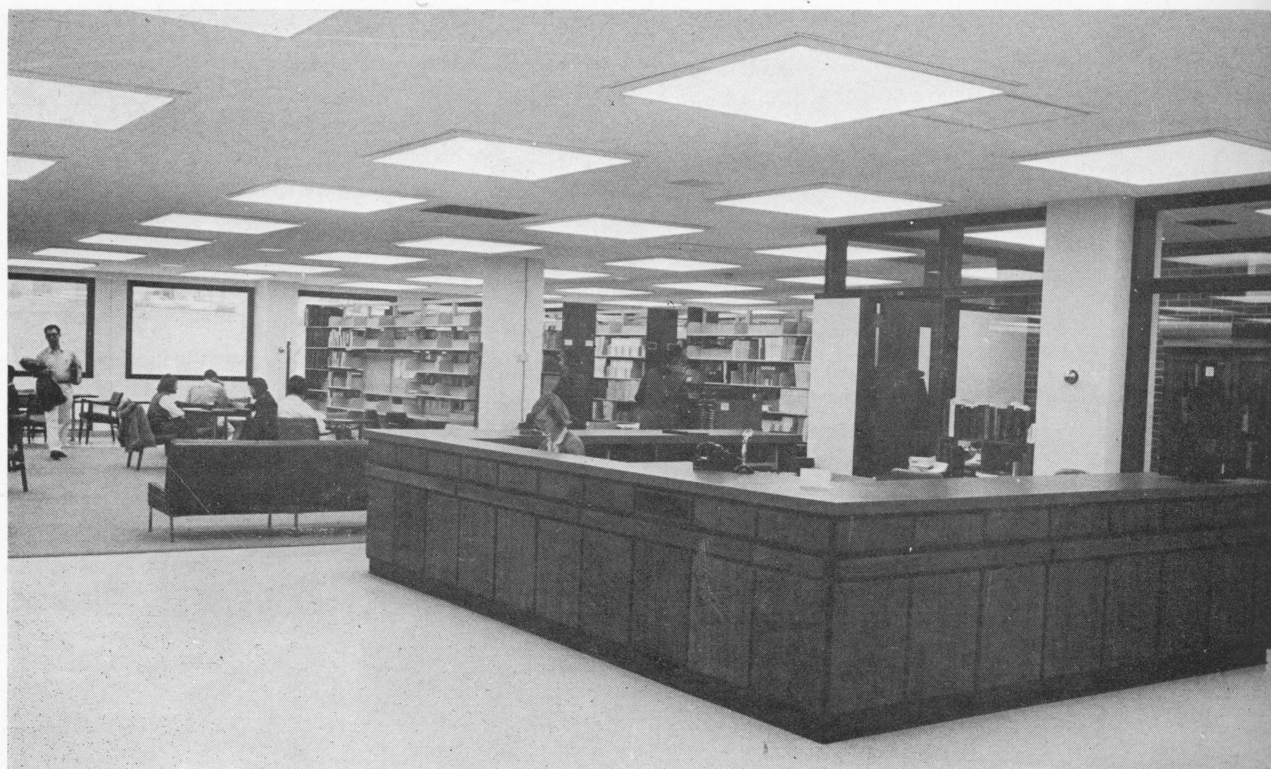
The dedication ceremony is the only event scheduled in the afternoon program of alumni day. The morning program will include a progress report on the Association by Dr. David J. Freeman, '52, president, and the traditional State of the Union message by the Dean, Peter L. Eichman, M.D.

A Symposium on Organ Transplantation is scheduled as the major feature of the morning program. It will be presented by a panel of medical scientists yet to be selected.

In addition, speakers will represent both the 40th and 25th anniversary classes in brief presentations on the program, which will end with the business meeting and election of officers.

The evening banquet, scheduled again this year

*The Middleton Library main desk — the building will be dedicated Alumni Day.*



for the Park Motor Inn, where most returning alumni will stay, will have special tables for the ten classes holding reunions and a tables for the past presidents.

Recipients of the Association's two major honors, the Medical Alumni Citation and the Emeritus Faculty Award, will accept the awards and respond briefly. The banquet program also includes the presentation of Association membership cards and the "Gold Medal" Award to the senior class president, and a report by Association President D. J. Freeman, '52, on his stewardship. In addition, the newly elected officers will assume office.

Among the honored guests at the banquet will be University Chancellor Robben W. Fleming and Mrs. Fleming.

Other events connected with Alumni Day include a meeting of the Council of Class Representatives, scheduled for lunch Thursday, May 25, and the reunions. Following articles provide information about these and other individual Alumni Day events.

## Medical alumni citation

Dr. Elmer L. Severinghaus, '21, who for years was an important faculty member at the Medical School in the departments of physiological chemistry and medicine and whose subsequent professional career has been exceptionally diverse and exciting, will receive the Association's Medical Alumni Citation Alumni Day.

Dr. Severinghaus is the ninth recipient of this award, which is given each year by the Association in cooperation with the medical faculty. The citation goes to an alumnus who has made outstanding contributions in some area of medicine.

According to Dr. Paul F. Clark, Dr. Severinghaus has enjoyed many different phases in his long and active career. He received his A.B. in 1916 and his A.M. in 1918 from Wisconsin.

"Characteristic of that war period," Dr. Clark said, "he was carrying on under S.A.T.C. status, teaching physiological chemistry, and studying medicine all at the same time."

Dr. Severinghaus received his M.D. from Harvard in 1921 and then returned to Wisconsin to continue teaching and research in physiological chemistry for about six years. For the next 19 years, he carried on his studies and teaching in the depart-



ment of medicine. He became a full professor in 1938.

After his years at Wisconsin, he spent 12 years as director of research at the American Hoffman-La-Roche laboratories, and was head of several nutrition clinics, including that at Columbia University, where he has been professor of public health nutrition.

Dr. Clark points out that "in Dr. Severinghaus' complete bibliography of about 140 titles extending over many areas of physiological chemistry and medicine, we find numerous penetrating articles on diabetes and other diseases of the glands of internal secretion, a field that was his major interest for years. Steroid hormones, vitamins, and broad studies in nutrition also drew his keen attention. Eight monographs and books have come from his mind and pen, including a highly commended *Guide for Diabetes* (11 editions) and a "best seller," *Endocrine Therapy in General Practice*."

In recent years, Dr. Severinghaus' international leanings and delight in travel in foreign lands have been successfully combined with his knowledge of nutrition. He has given advisory aid to several undernourished peoples.

Dr. Severinghaus, who is 73, lives at Junction Road, Brookfield Center, Conn., and has an office at 562 W. 168th St. in New York City.

Recipients of the Medical Alumni Citation are chosen by a joint faculty-medical alumni committee, and are approved by the medical faculty and the University of Wisconsin Board of Regents.

Other recipients of the Citation are Dr. Frederick W. Madison, '24, in 1966; Dr. Robin C. Buerke, '17, in 1965; Dr. Roy Hertz, '39, in 1964; Dr. John L.



*Dr. Reese accepting his honorary degree in 1966.*

Parks, '34, in 1963; Dr. Henry W. Brosin, '33, in 1962; Dr. Milton J. Senn, '27, in 1961; Dr. Richard W. TeLinde, '20, in 1960; and Dr. Leland S. McKittrick, '18, in 1959.

## Emeritus faculty award

Dr. Hans H. Reese, emeritus professor of neurology, will be the eighth recipient of the Association's Emeritus Faculty Award when it is presented Alumni Day.

The award to Dr. Reese will be in recognition of more than 40 years of "stimulating teaching; for devoted attention to patients afflicted with neuropsychiatric disease; for dedication to the fostering of research."

Following his medical education and postgraduate work in Germany, Dr. Reese came to Wisconsin in 1924 as a research assistant for the Wisconsin Psychiatric Institute. A year later, he joined the Medical School faculty as assistant professor of neuropsychiatry. He became a full professor in 1929.

He played a major role in founding the neuropsychiatry department and served as chairman in

1940, 1946, and 1954-56. When the separate department of neurology was formed in 1956, he became chairman until 1958.

Dr. Reese has earned many international awards and honors. In 1961 he was invited to lecture at the University of Alexandria, Egypt, on a Fulbright professorship. In 1962, the government of his native Germany voted him the Cross of Merit for his scientific achievements and his promotion of German-American relations.

One of his most important awards was presented in early 1966, when Kyushu University of Japan awarded him the first honorary degree ever given to a foreigner by that University. When Dr. Reese was unable to travel to Japan to accept the award, the University sent Professor Shibanosuke Katsuke, director of the Kyushu department of internal medicine to Wisconsin to present the degree on behalf of the university's rector and trustees.

The citation read: "Kyushu University confers upon Hans H. Reese of the United States of America the degree of honorary doctor of Kyushu University in recognition of his great contributions toward advancement of learning and culture and his outstanding academic and educational activities in Kyushu University."

In 1959, Dr. Reese helped establish the first department of neurology at Kyushu and did research there on multiple sclerosis. As a result of his work there and of his efforts to initiate a research and training program in the United States for Japanese medical scholars, he was named an honorary member of the Japanese Society of Neurology.

In his career he has served as director and president of the American Board of Psychiatry and Neurology; president of the American Neurological Association; president and director of the Medical Board of the National Multiple Sclerosis Association.

Others who have received the Emeritus Faculty Award are Dr. Frederick D. Geist, in 1966; Dr. H. Kent Tenney Jr., 1965; Dr. William D. Stovall, 1964; Dr. Harold Bradley, 1963; Dr. W. S. Middleton, 1962; Dr. Paul F. Clark, 1961; and Dr. Walter E. Sullivan, 1960.

surgery department, including former residents and graduates, is welcome.

Cost of the dinner meeting will be 10 dollars a person and wives are invited. Reservations and checks may be sent to Dr. Robert C. Hickey, professor and chairman of surgery at the Medical School. The checks should be made payable to the Surgery Department Special Fund, Dr. Hickey said.

Members of the surgical alumni have been meeting informally for years, but the first formal gathering of the group was in 1965 during the American College of Surgeons in Chicago. Last year the group met in San Francisco.

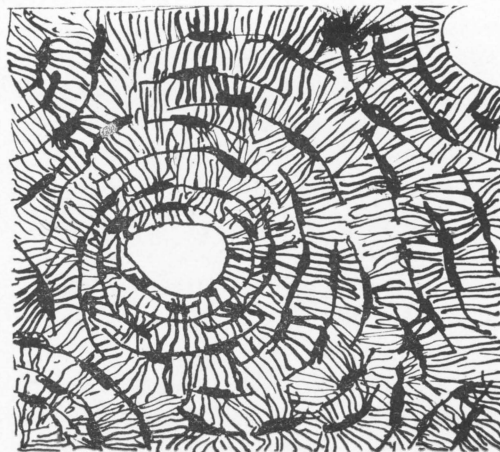
The group at first included former residents of the late Dr. Erwin Schmidt, long-time chairman of surgery, and now has been expanded to include all who have had some connection with the surgery department.

## Alumni fund grows

Since the interim report on the University of Wisconsin Medical Alumni Fund was released in February, 38 more donors have contributed an additional \$1,331.50 to the Fund.

The Fund total, with the additional contributions, was \$5,700.50 as of March 7. A total of 174 alumni and former faculty members had contributed.

The final report on the Fund will be made Alumni Day, May 26. Contributions to the Dean's unrestricted fund, the AMA-ERF, special class gifts,



## Upcoming meetings

Planning is going forward on three Association meetings in various parts of the country: the annual meeting in conjunction with the Wisconsin State Medical Society convention, the annual meeting with the AMA, and the annual meeting of surgical alumni.

Dr. Silas Evans, '36, of Milwaukee, is program chairman for the May 9 meeting in Milwaukee with the State Medical Society. Though plans are not final, the meeting will be for dinner and wives will be invited. Dr. Evans reports that the program will be informal and that details of the meeting will be mailed to Wisconsin alumni.

The meeting with the AMA will be in June in Atlantic City, N.J., according to Dr. Thomas Gocke, '47, the program chairman. This meeting will be at dinner and will feature a speaker, he said. Wives are invited. Details will be mailed to alumni several weeks before the meeting.

The surgical alumni, who will not meet until October 3, already have made most of the plans for the meeting. Dr. John L. Keeley, who was a resident in surgery at Wisconsin from 1933-36, is handling the local arrangements.

He reports that the meeting will be held at the Pick-Congress Hotel in Chicago during the American College of Surgeons meeting there. Activities will begin at 6 p.m., Tuesday, October 3. Everyone who has been connected with the Medical School's

and donations for individual projects will be included in the Fund report.

Funds from the 1965 annual giving campaign have been used for many projects, most recently to send two senior medical students to Cartagena, Columbia, where they boarded the U.S.S. Hope. The students, Leigh Iverson and William Klish, are spending March, April and May on the ship in lieu of a preceptorship in the state.

Among those contributing to the fund are several alumni who have made generous annual contributions for at least 10 years. They include Dr. William Horowitz, '39, of Scarsdale, N.Y.; Dr. Robert F. Schilling, '43, of Madison; Dr. William Merkow, '43, of Waukesha; Dr. Norman O. Becker, '43, of Fond du Lac; and Dr. William E. Gilmore, '43, of Vienna, W. Va.

Contributions to the Fund may be made by sending a check or pledge to the Wisconsin Medical Alumni Fund, 333 N. Randall Ave., Madison, Wis. 53706. Checks may be made payable to the Fund.

All contributions are tax-deductible. The Fund is administered by the Dean with advice from the Association Board of Directors. An annual accounting of expenditures will be made.

## Winter meeting report

About 50 alumni of the Milwaukee area gathered in the University Club there February 10 to hear a panel of Medical School faculty discuss the proposed changes in the School's curriculum.

Dr. Robert D. Coye, chairman of the faculty's curriculum committee, and Dr. Robert F. Schilling, professor and chairman of medicine, explained the proposal and its meaning for students and faculty.

Following the discussion was a lively question-answer session. Many of the alumni attending the meeting had obviously read the articles on the curriculum in the winter issue of the *QUARTERLY* and had come prepared to question the speakers.

In addition to the speakers, other faculty at the meeting were Dr. Peter L. Eichman, dean, and Dr. Otto Mortensen, professor and chairman of anatomy.

One of the few alumni who traveled to the meeting from beyond the greater Milwaukee area was Dr. James W. Nellen, '39, who was in town for a meeting of the University of Wisconsin Board of Regents, of which he is a member.

Others at the meeting included Drs. Douglas



Baily, '55; Barney Becker, '43; Edward A. Birge, resident from 1936-42; Lawrence Garner, '31; Erwin Grossmann, '35; Hanno Mayer, '46; Carroll Osgood, '27; and John R. Petersen, '54.

Members of the Association Board of Directors attending included D. J. Freeman, '52, Wausau, president; Herbert Giller, '47, program chairman for the meeting; Herbert Pohle, '38; Joseph R. Stone, '35; and Frank L. Weston, '21.

## Learning and slaloming

Nearly 30 faculty members, alumni, and wives had registered in mid-March for the Association-sponsored Medical Alumni-Faculty retreat at Vail, Colo., scheduled for April 2-9.

Alumni in the group received five days of medical instruction, including presentations in medicine, pediatrics, orthopedics and surgery. They also took advantage of six days at the newly constructed ski facilities at Vail.

Faculty for the retreat-seminar included two alumni: Dr. Edgar S. Gordon, '32, and Dr. Sion Rogers, '37.

Among alumni who went to Vail were Dr. Harold F. Bishop, '33, of Valhalla, N.Y.; Dr. Martin Rammer, '58, of Sheboygan; Dr. Walter Clement, '34, and Mrs. Clement, of Punta Gorda, Fla.; Dr. George Hess, '36, and Mrs. Hess, of Tacoma, Wash.; Dr.



*The winter meeting speakers: Far left, Dr. Robert F. Schilling, and center, Dr. Robert D. Coyle. Dr. Herbert Giller, above, listens to one of the talks. He was program chairman for the meeting.*

A. W. Hoessel, '43, of Wausau; Dr. Conrad Andringa, '63, of the Air Force, Tex.; Dr. W. W. Meyer, intern in 1947-48, of Medford; Dr. Malcolm Scott, '62, and Mrs. Scott, of Superior; Dr. Raymond Harkavy, '53, and Mrs. Harkavy, of Milwaukee; and Dr. Louis Weisbrod, '53, and Mrs. Weisbrod, of New Richmond, Wis.

## Reunions scheduled

Of the eight classes scheduled to hold reunions this year, most have completed preliminary arrangements, and a review of their plans follows. The classes which will hold reunions are 1927, 1932, 1937, 1942, 1947, 1952, 1957 and 1962.

### Class of 1927

Dr. Chester Long of 208 E. Wisconsin Ave., Milwaukee, reports that his class — first to celebrate its 40th anniversary — will meet at the Loraine Hotel May 25 at 6 p.m. for social hour and dinner. Dr. Carroll Osgood is assisting with arrangements.

### Class of 1937

Dr. Helen Dickie of Madison reports that her class will meet at a special table at the Alumni Banquet. There will be no special dinner unless it is done spontaneously.

### Class of 1942

Dr. George Custer has arranged a social hour and dinner at the Park Motor Inn May for the Silver Anniversary Class. Several members of the 1942-era faculty have been invited. The class hopes to reactivate an old quartet.

### Class of 1947

Dr. Solomon Kann of Miami has planned a reunion for May 27 at 7 p.m. at the Park Motor Inn. Dr. Harry Waisman of Madison is handling local arrangements. About 25-30 are expected.

### Class of 1957

Drs. Ted Fox and John McKenna of Antigo, Wis., have planned a reunion for May 25 beginning at 6 p.m. at Hoffman House West. They expect about 40 class members to attend. Dick Stiehm is helping with local arrangements.

### Class of 1962

Dr. Charles Miller of Minneapolis expects about 50 class members and their spouses, to attend a smorgasbord and dance at Holiday Inn #2, beginning about 6 p.m., May 27. The class will also gather during and after the Alumni Banquet May 26, and will golf Saturday morning.

## Board nominees

Three alumni have been nominated for election May 26 to positions on the Association's Board of Directors. Other nominations may be made from the floor Alumni Day.

The nominees are Dr. Richard Wasserburger, '46, for president-elect; and Drs. Florian Santini, '39, and John R. Petersen, '54, for directors.

Drs. Santini and Petersen are nominated for positions now held by Drs. Joseph Stone, '35, and Robert Starr, '50, whose terms are expiring.

## University hospital ranks high

The University of Wisconsin Hospitals have been ranked among the top 25 hospitals in the United States by a jury of hospital experts. The jury's ranking was published in the February issue of *Ladies Home Journal* magazine.

Choosing from among the country's 7,123 hospitals, the jury placed University Hospitals in a tie for 20th place with Cleveland Clinic Hospital, and University Hospital, Birmingham, Ala.

*Journal* editors asked the judges: "If you or your family required major hospital services — diagnosis or treatment — which 25 hospitals in the United States would you select as representative of the best?"

The 10 judges, from all parts of the country, were unanimous in asserting that the best hospitals are

teaching hospitals. The article also commented that "the selections demonstrated that to be great, a hospital must be excellent in all departments."

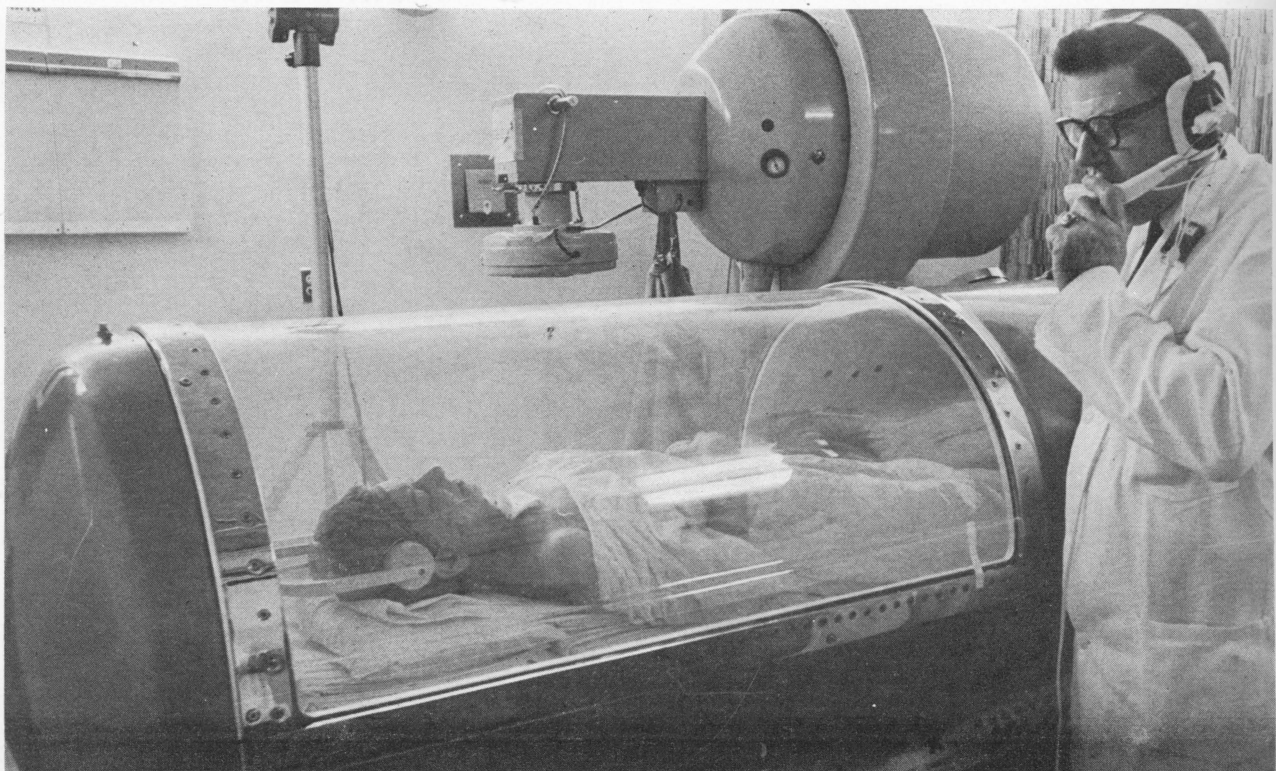
One of the experts, Dr. Russell Nelson, president of the Johns Hopkins Hospital, Baltimore, was quoted as saying that "the difference between a good hospital and a mediocre one is that the former has the full scope of services to respond instantly to any situation."

Among the nine experts on the jury were Dr. Lester Breslow, director of public health for the state of California; Dr. John Knowles, general director of Massachusetts General Hospital, Boston; Ray Brown of Duke University, Durham, N.C.; and Dr. Charles Letourneau, editor and hospital consultant.

## Internship assignments

When the dust settled after announcement in March of intern-hospital matchings, 65 of the 92 graduating seniors of the Medical School had

*The Hospital's hyperbaric oxygen chamber is one of its pieces of specialized equipment. The Hospital has been ranked among the country's best hospitals.*



matched with their first choice hospital, 14 with their second choice, and 8 with their third, 2 with their fourth, 1 with his fifth choice and 1 with his sixth choice. One senior was unmatched.

The complete listing of the interns and their hospitals will be carried in the summer issue. (See Bernard Kampschroer's column in this issue for a discussion of the hospital selection process.)

## Stiehm is Markle scholar

Dr. E. Richard Stiehm, '57, assistant professor of pediatrics, has received an appointment as a Markle Scholar in Academic Medicine, effective July 1.

The \$30,000 grant from the John and Mary R. Markle Foundation of New York will be paid to the Medical School at the rate of \$6,000 a year "to assist in Dr. Stiehm's development as teacher, investigator and administrator."

Before joining the Medical School faculty in 1965, Dr. Stiehm was a special fellow in pediatric hematology and immunology at the University of California Medical Center, San Francisco.

After receiving his medical degree in 1957, he spent a year at Philadelphia General Hospital as a rotating intern, and then returned to Wisconsin for a year to work as a postdoctoral research fellow with Dr. H. F. Deutsch, in the department of physiological chemistry.

Then, following a two-year military tour of duty, he took his pediatric residency at Babies Hospital, Columbia Presbyterian Medical Center, New York.

Dr. Stiehm was certified by the American Board of Pediatrics in 1964. He is a member of Phi Beta Kappa, Alpha Omega Alpha, the American Association for the Advancement of Science, and the Medical Society for Pediatric Research.

He and his wife have two daughters. The Stiehms live at 7C University Houses, Madison, Wis., 53706.

## Surgery schedules course

The department of surgery is making active preparations for a postgraduate course, "Current Concepts in Surgery — 1967," to be held at the Wisconsin Center in Madison August 24-26.

According to Dr. Robert C. Hickey, professor and chairman of surgery, registrants for the meetings will be housed in Carroll Hall, a luxury dormitory



*E. Richard Stiehm, '57*

with dining room, swimming pool, and rooms and facilities for families.

Stressing contemporary surgical thought, the conference will feature nationally prominent speakers as well as faculty members of the Medical School.

More information may be obtained from Dr. Thomas C. Meyer, department of postgraduate medical education, 333 N. Randall Ave., Madison, Wis.

## Foreign preceptorship

Richard A. Ellingstad, a third-year medical student from Hudson, Wis., has been awarded a Smith Kline & French Foreign Fellowship for a three-month medical preceptorship in Tanzania, East Africa, this summer. Ellingstad received the pharmaceutical house's \$2,880 award through the Association of American Medical Colleges' division of international medical education.

The fellowship will finance a three-month stay at Kiomboi Lutheran Hospital in Tanzania for Ellingstad and his wife, Maryellen. Both will work in the hospital, Ellingstad as a preceptor assisting doctors in general medical and surgical duties, and his wife

as a nurse.

The African preceptorship will count as the first quarter of Ellingstad's senior year.

The Ellingstads will depart for Africa about June 15 and will return to the United States early in December. Kiomboji is a 100-bed hospital serving an area with a population of about 100,000 people.

Ellingstad is a graduate of Wisconsin State College, River Falls. His wife received her nursing degree from the University of Wisconsin.



*The Ellingstads*

## Student Health Evaluation

The American College Health Association (ACHA), at the invitation of the University Health Service, evaluated the service facilities in February for possible accreditation by the ACHA.

The ACHA is an organization representing college health services throughout the country. Its purpose is to promote good health facilities for students and others in the college communities.

The accreditation program of the ACHA was established last year. To date about 10 college health services have been accredited.

The three-member ACHA team, composed of individuals from other health services, used evaluation criteria established by the ACHA.

The team for three days reviewed health service and University facilities pertaining to health. They interviewed Robben W. Fleming, chancellor of the Madison campus; Joseph F. Kauffman, dean of student affairs; Earl V. Rupp, University safety director; Ralph E. Hanson, director of protection and security; and health service administrators and physicians, and residence hall directors.

The health service requested the visit of the ACHA accreditation team because the administration felt it wise to participate in the evaluation program of the ACHA and would value an objective assessment of the services and facilities available.

## For more healthy animals

The Medical School's animal care unit has added new quarters for the housing and care of small laboratory animals used in Medical School research and teaching.

The new facility, located on the top floor of Bardeen Medical Laboratories, was financed by a \$75,000 grant from the National Institutes of Health and

a matching award of \$175,000 grant from the state of Wisconsin.

Planning for the new unit was initiated in 1964 by the Medical School's animal care committee. The grants were awarded in 1965 and construction began in 1966.

According to Dr. Luther T. Albert, animal care unit director, the new quarters continue a long-standing animal care policy: "a healthy animal is to the researcher's advantage."

Rabbits, guinea pigs, rats, mice, hamsters and other small laboratory animals are housed in the new quarters. The facility includes 14 housing rooms, each individually temperature- and light-conditioned; an isolation and holding area; a cage sterilization room; and a kitchen where food is prepared for animals who require special diets.

## Biogen grows bacteria

A machine which can "grow" large quantities of bacteria from a flask-started culture has been added to the facilities of the department of pharmacology.

The new machine — called a biogen — surpasses the traditional flask process because it can conveniently provide investigators with large amounts of bacteria for a variety of research projects.

Comprising an involved system of tanks, pipes, centrifuges and a central chamber where bacteria production takes place, the biogen can "manufacture" up to 100 grams of bacteria per hour. The system, which can be run continuously for 24 hours or longer, can grow both harmless or pathogenic bacteria.

The biogen operates on the principle that a bacteria sample will multiply continuously as long as nutrient and temperature conditions are satisfactory. Accordingly, the process involves a continuous flow

of nutrient medium, at a constant temperature, through a bacteria sample previously started in a flask.

Actual bacterial growth occurs in the biogen chamber itself, where the incoming medium is mixed with bacteria. The bacteria-impregnated medium is then pumped out of the chamber into a holding tank, from where it is pumped to centrifuges.

The medium can be pumped through the chamber at various speeds or temperatures, depending on the type of bacteria and at what stage they are to be harvested.

The biogen, which went into operation in December, was financed in part by a grant of \$30,000 from the U.S. Public Health Service.

## Computers aid research

The relatively new science of the electronic computer has come to the aid of its venerable cousin, medical science, in some 18 research projects being conducted at the Medical School. Under the auspices of the Biomedical Computing Division (BCD) of the U.W. Computing Center, Medical School researchers are utilizing computers in a variety of projects — ranging from a study of the brain's auditory centers to an investigation of the computer's role in the compilation of a patient's medical history.

In each case, the computer's facility for rapid, accurate collection of data and its capacity for data analysis make it a significant tool for investigators.

Medical School scientists have at their disposal six Laboratory Instrument Computers (LINC), used primarily for the collection of data, plus a larger, more sophisticated CDC 3600 computer which can perform complex data analysis. In addition to providing two of the LINC's, BCD also furnishes FM analog tape system for the recording of data.

A project supervised by Dr. A. A. Alexander of the department of psychiatry and the Wisconsin Psychiatric Institute illustrates, in general terms, how the computer helps the investigator:

Dr. Alexander and his colleagues are studying human adaptation from both the psychological and physiological points of view. Analog tape recordings of each subject's physiological responses to certain stimuli, and to the absence of stimulation, are digitized (translated into computer form) by the LINC.

These variables, such as blood pressure, heart rate

and muscle potentials, are then subjected to a variety of psychological parameters.

The activities of BCD are financed in large part by a grant from the National Institutes of Health. Grant support during the past year has totaled about \$250,000.

## Peckham is associate dean

Dr. Ben M. Peckham, professor and chairman of gynecology and obstetrics at the Medical School, has been appointed associate dean for clinical affairs.

Dr. Peckham, who began studying at the University of Wisconsin, transferred to Northwestern University in 1939 and received there his medical degree in 1942 and his Ph.D. in 1949.

He left Northwestern in 1956 to become chairman of gynecology and obstetrics at Wisconsin.

## Curriculum—faculty action

The Medical School faculty, at its meeting March 27, approved a new Medical School curriculum, which will go into effect in the fall of 1967.

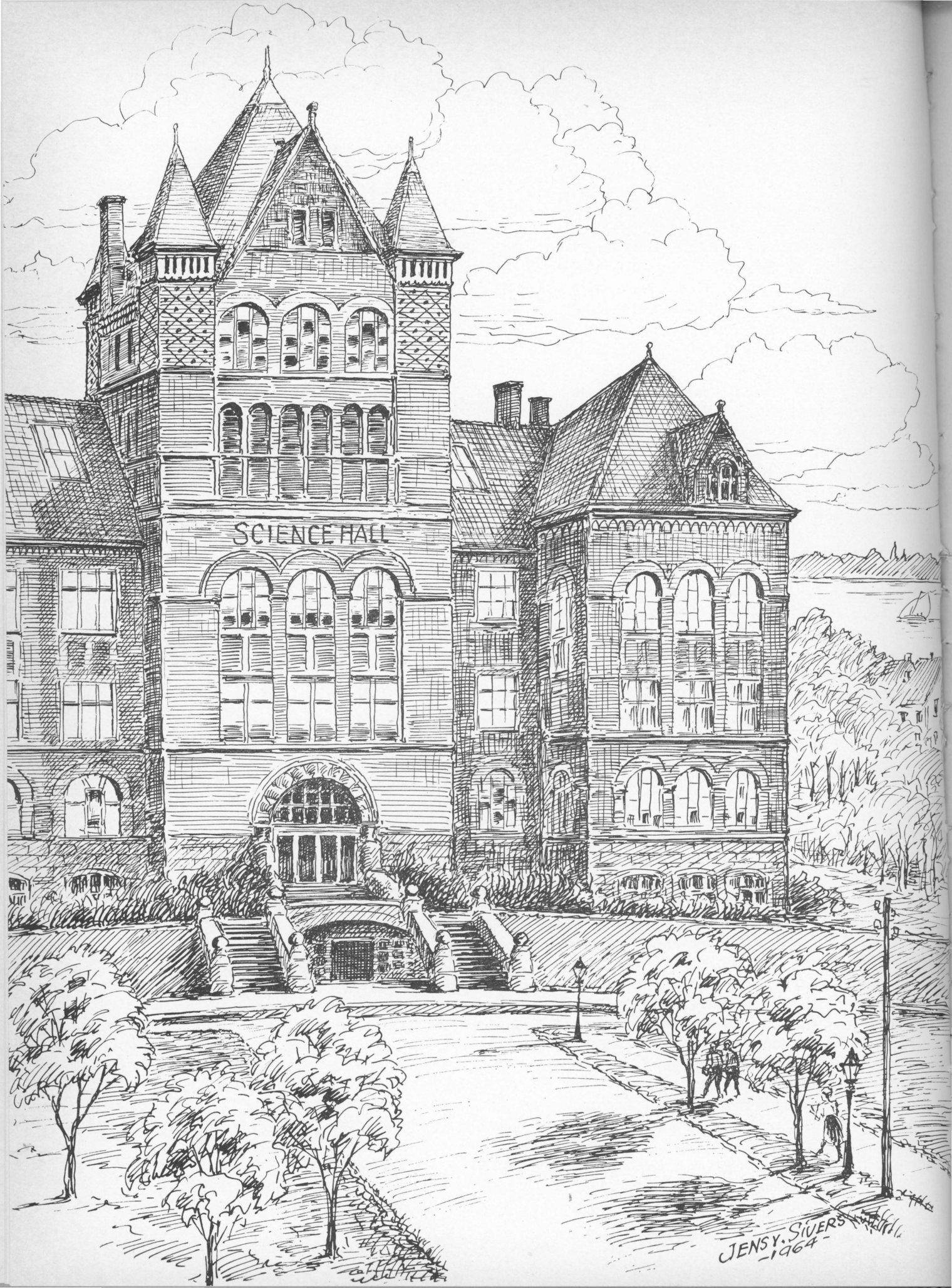
The new curriculum is expected to allow the student greatly increased opportunities for selecting his own program of education in accord with his overall educational goals.

The second year course in pathophysiology is expected to make the student see more clearly the relationship between what he is learning and the clinical problems he will need to solve in the future.

The new curriculum will eliminate duplication and overlapping of material; it will introduce students earlier to working with patients and patient problems; and it will provide six months of elective time in the senior year so that students can follow individual interests. It should also provide greater opportunities for staff contact at all levels.

Members of the curriculum committee which proposed the changes are Dr. Robert D. Coye, chairman; Dr. Marc F. Hansen, pediatrics; Dr. William C. Lewis, psychiatry; Dr. David Slautterback, anatomy; Drs. John R. Benfield and James D. Whiffen, surgery; Dr. Arvin B. Weinstein, medicine; and Dr. Warren H. Dennis, physiology.

See the Winter, 1967, issue of the *QUARTERLY* for a complete discussion of the new curriculum.



SCIENCE HALL

JENSY. SIVERS  
-1964-

Since early 1964, when Dr. Paul F. Clark began work on the history, he has devoted most of his considerable energy to its completion. Even in mid-March, with the book in the final stages of printing, and he and Mrs. Clark about to depart on a jetliner for a California holiday, he was making adjustments in the promotion schedule of the book. His three-year travail has brought forth a history "that catches the very atmosphere of the past." It is a book that, for the reader, evokes a variety of reactions: awe at the achievements of the School's "giants," amusement as Dr. Clark reveals the human qualities of these same "giants," and even chills of emotion at a great climax, such as in 1927 when the first class marched forward to receive the first degrees. Though the best of his history remains for those who read the book, the *QUARTERLY* is providing alumni the opportunity to preview portions of the book. On the following pages are the Foreward, by Dr. William S. Middleton; several representative excerpts, beginning with parts of the Preface, by Dr. Paul Clark, the author; and an article about the author.

## The University of Wisconsin Medical School: A Chronicle, 1848-1948

# FOREWORD

By

WILLIAM S. MIDDLETON

DEAN EMERITUS

*t*he Medical School is a comparatively youthful member of the academic family. Although the act of incorporation of the University, signed by Governor Nelson Dewey, July 26, 1848, listed medicine among its four authorized departments, nearly 60 years elapsed before its inception. The long delay in fulfilling the mandate of the legislature while all neighboring states met this educational need in itself would invite careful study. However, in a constructive sense, attention to the undaunted courage of men of vision should prevail over the temptation to explore the trials and frustrations of the protracted gestational period of the Medical School.

After the abortive gesture of the "paper faculty" of the 1950's, the first movement toward the initiation of a medical curriculum on the University campus was the Special Course Antecedent to Medicine (1887). The quality of this course and its successor, the Premedical Course (1890), laid a firm foundation for the establishment, first, of the pre-clinical two-year course (1907) and, then, the complete four-year course (1925). Before evolution of clinical facilities in the University, Wisconsin men and women completing their undergraduate medical education and hospital training in the great medical centers of the country frequently remained in these areas. Many of these transplanted Badgers attained scientific and professional eminence in their respective fields. In effect, these "intellectual hostages" vastly strengthened their adopted medical communities; but, by the same token, they abstracted their potential contributions from their native state.

Regardless of this circumstance, the native sons

*The Medical School's Triumvirate: top, Dr. Charles Bardeen, center, Dr. Joseph Spragg Evans, and bottom, Dr. William S. Middleton.*



and daughters of Wisconsin are conspicuously loyal. When the Wisconsin Medical Alumni Association took its present organized form, it immediately sought channels to express its deep interest in the Medical School. Among the first deficiencies encountered was the lack of a history of their Alma Mater. With the passage of time the faces and forms of their teachers were becoming less distinct. The ringing voices of the classroom and the laboratory were less clear. Could the rapport with the faculty have been as intimate as they recalled, or was it a vagary of memory? The old familiar haunts had disappeared. And were the laboratories in the attics and basements of Science Hall and the old Chemical Engineering Building quite as makeshift as they seemed in an earlier day? Appreciating the magnitude of the task and at the same time realizing that time would increase rather than diminish its arduousness, the Committee recommended that the Association undertake the preparation of the history of the Medical School. The Association enthusiastically voted to supply clerical and stenographic support for this project.

The selection of Professor Emeritus Paul F. (for Fish Kettle to generations of disrespectful medical students!) Clark as historian was a particularly happy one. Highly regarded as a teacher and scientist, his position in the academic world is impeccable. A strict disciplinarian in the classroom and laboratory, his easy friendship and warmth of personality open many avenues of communication. Arriving on the Wisconsin scene in 1914, Doctor Clark lived through the lean years that tried the mettle of men. Yet he would be the first to grant that it is an unusual privilege to attend and participate in the birth and rearing of a medical school. No faculty member can be more proud of the Wisconsin product. Were the Committee to have scrutinized Dr. Clark's literary qualifications, several attributes would have arrested their attention. Certainly his whimsical turn in *Alice in Virusland* (1939) would have attracted their notice. Meticulous care in detail marked *Memorable Days in Medicine: A Calendar of Biology and Medicine* (1942), written with Mrs. Clark. His *Pioneer Microbiologists of America* (1961) is a classic account of the lives and contributions of our scientists in this field. By personal and literary allusions and with fine artistry, Doctor Clark has made his subjects live and breathe on the written page.

Having assumed this assignment, for more than two years Doctor Clark has lent his fine talents and great energy to the task of collecting data from in-



*The Cornelius House — first Student Clinic (1910).*

numerable sources. Letters from alumni and friends of the Medical School have greatly enriched his pool of information. "Like the parson's attic, he refuses nothing." Such material was then welded into workable form for ultimate refinement and organization for writing. With the privilege of a preview of the manuscript, I would constitute it a remarkably faithful account of the development of our Medical School. Such problems as arose are dealt with dispassionately and without acerbity or rancor. The vignettes of his fellow faculty members are drawn with a facile pen. Almost they speak for themselves. If there were a single miniscule of reservation in his characterizations, it may be paraphrased from Matthew Prior:

*Be to (their) virtues very kind;  
Be to (their) faults a little blind.*

Doctor Clark has wrought a splendid lasting documentary account of the University of Wisconsin Medical School. Assuredly, it will take its proper place in the archives of our great Medical School and University as a milestone of reference. Laboring without remuneration, the author's dedication and sense of responsibility are reflected in this major Arbeit. Only a New Englander — "Mainiac," he terms himself — could have achieved his objective. Generations of Wisconsin men and women will be grateful to the Wisconsin Medical Alumni Association for its promulgation and support of this project and to Dr. Clark for his prodigious efforts in its surpassing execution.

# EXCERPTS

BY

PAUL F. CLARK

EMERITUS PROFESSOR

*f*or about three years, I have been striving to follow the wishes of the alumni as expressed in a letter of January 6, 1964, from Dr. Mischa Lustok, then president of the University of Wisconsin Medical Alumni Association. They urged me to write the "history of the Medical School from the vantage point of personal experience and human relationship," a family history rather than one of statistics.

Their letter necessarily set the broad standards; I have had to establish certain others. I have used the Regents' seven-year period for "tenure" as my criterion for the minimum number of years of faculty service necessary for inclusion in the history. Commonly, I have omitted consideration of the families of the faculty, a practice usual in histories of medical schools and universities. Lists of honors so readily available in scientific and public directories have been excluded. They make for dreary reading and I am not competing with *Who's Who*.

Names of the residents in the several departments of the hospital are given in the appropriate chapters about the Medical School. This type of instruction and practice has high importance in affecting the quality of medical practice throughout the state and the country, and our residents bear the stamp of this Medical School even though they have earned their medical degrees from other institutions. Records are incomplete but, despite errors, I have tried to give the terminal date of the service of each man as a resident.

For me this has been a labor of love and, as such, it has been a mixture of pain and pleasure. Collecting the material, thinking of you all, and remembering my early colleagues, warm friends, most of them gone, has been great joy and a rare privilege for one in his middle eighties. The many decisions essential in the writing have at times been painful.

After reading scores of accounts of conflicts, both within and without the University, and considering

these in the light of my own experience, I have concluded that it is really remarkable that our Medical School was ever born and even more remarkable that it has continued to grow through two terrible world wars and a disastrous period of depression to a medical center of distinction. The whole history has been one of democracy in action and, as such, is a most encouraging story.

Were there "giants in those days" or is that notion the happy perspective of years? Yes, I think there were one or two "giants in those days," such as Charles Russell Bardeen and Joseph Spragg Evans. There were also a number of other men of splendid character, enthusiasms, and achievement. I hope you will enjoy the necessarily too brief and possibly not too highly objective vignettes of these men that I have, with the help of others, been able to paint. I beg your forgiveness for my errors of omission and commission.

"I am part of all that I have met"; I am, therefore, a part of you and you are a part of me.

*Dr. Clark provides glimpses of the men he describes as the Medical School's "Triumvirate": Charles Russell Bardeen, Joseph Spragg Evans and William Shainline Middleton.*

*Charles Henry Bunting  
Pathology, 1908-1945*



**O**n CHARLES RUSSELL BARDEEN: The first glimpse we have is that of the young Bardeen so competent while he was still working for his medical degree that Dr. Mall recommended his appointment as an assistant in anatomy; despite some opposition in the faculty, Mall had his way. Bardeen continued his teaching and research at Hopkins until 1904 when President Van Hise persuaded him, at the age of thirty-three, to become professor and chairman of the new department of anatomy at a salary of \$3,000.

This appointment changed his life from one that had been largely devoted to research with some teaching to one that also included increasing administrative duties and complex public relations. Another vital change was his marriage in 1905 to the artistic Althea Harmer who presided so graciously over his home until her untimely death in 1920. Her talent for generous hospitality made their home a welcome center for acquaintances and friends.

A series of her letters to her father — some eighty of them, but all undated — extending through most of her life here in Madison give welcome, homely glimpses of Charles as a father, of his pleasure in entertaining guests in the home, and of his interest in carpentry and golf; they also reveal a man, who although devoted to his family to a high degree, generally kept his own counsel. Since letters give so much that more formal comments obscure, I am quoting directly from a few of these letters:

"William and John are both entering the University High School. John is three years under age but he is what the boys call a "cracker jack" in his studies as well as in his games.

"Charles asked William why John did better in football. William replied, 'John just hangs on and won't let go.' He does the same thing in his studies. When he comes across anything difficult he puts up a big fight."

Much later, in 1956, John was awarded the Nobel Prize.

Dr. Bardeen was a prodigious worker, a patient, tolerant man, simple in his tastes, keenly intellectual, with continuing aspirations for a strong productive department of anatomy and similarly for a medical center that would influence favorably every section of the state. He was a reserved man and persevering almost to stubbornness. Although there were, quite naturally, differences among the faculty and Bardeen, the faculty and the dean worked well together for the common purposes of the Medical School and the University. As Walter Sullivan has



*John Augustine English Eyster  
Physiology, 1910-1952*

said of Bardeen, "Recognizing no particular creed, he antagonized none." Bardeen enjoyed people and the pleasure of entertaining them in his home. His conversation and queries showed the wide range of his interests. In the anatomy department, also, the relationships between Dr. Bardeen and his associates were relaxed and friendly.

As one reviews the development of the Medical School and the serious opposition that Bardeen sometimes had to face, one is impressed with the calm way in which he met the difficulties and with his persistence in achieving desired ends, with emotions under excellent control. He may have been boiling inside, but outwardly he remained calm, marshalling his facts and gathering advocates for his cause from far and near.

Bardeen's philosophy of faculty appointments was, "Do not buy big names, but choose young men of promise." With a few exceptions, subsequent history showed that his judgment as to these growth possibilities was sound.

His teaching methods can best be recalled by citing letters from students and faculty. From Richard TeLinde, long-time professor of gynecology at Johns Hopkins Medical School, came the following illuminating letter:



Walter J. Meek  
*Physiology, 1910-1952*

"Five of us came from Wisconsin to Hopkins during World War I at the time of the great flu epidemic. I remember so well that the Wisconsin contingent (with the exception of the writer) always stood out very prominently when a question of anatomy was asked. I must confess that the Hopkins boys were not too strong in that subject. Often the question would go around the class and finally be answered by one of the Wisconsin contingent. It got to be so that whenever one of the Wisconsin crowd would answer a question in anatomy correctly the usual remark was, 'Oh, well, of course, he studied anatomy at Wisconsin'."

**O**N JOSEPH SPRAGG EVANS: We shall now visit a while with Dr. Evans, chiefly through a number of his friends. Dr. Middleton has written:

"In the broadest sense of the term, Dr. Evans was a medical statesman. Possessed of a charming personality, he dominated every gathering to which he lent his presence by his easy grace and gentility. Kindly and gentle by nature, his indomitable courage and steadfastness to high medical ideals vigorously resisted and overcame apparently insuperable obstacles to medical development in the Middle West. His inherent kindness, which pervaded every sickroom upon which he was attendant, brought untold comfort to the afflicted. His wise counsel was sought by people in all strata in society and his sympathetic ear was open to the humble as well as to the mighty."

A story of Dr. Evans under fire shows another side of the man. The workers at the city laundries went on strike, and the conference with the officials and the labor groups included Dr. Buerki, Dr. Evans, Dr. Stovall, and Dr. Middleton. As one would expect, Dr. Buerki led off and talked a great deal. Finally, the chief, Dr. Evans, made a strong plea with regard to the necessity of clean and sterile linen for patients and for women in labor. He declared to the conference, "I shall crucify you if a single woman dies or some serious accident occurs because of your failure to provide us with clean linen." He carried the day with strong language, and the laundry said that they would see to it that the hospital was not injured by the strike.

Jackman Pyre (M.D., Wisconsin, 1937) was an admiring younger friend of Dr. Evans during the years "Uncle Joe" lived with the Pyre family. The sidelights Jack Pyre provides us gives a vivid picture of Dr. Evans at home:

"Visiting faculty from Milwaukee came to Madison regularly and lectured to us at the Medical School. Uncle Joe and I lived in an apartment on Lathrop Drive, and Otto Foerster came each Friday for his lecture and stayed with us. I served them breakfast of shirred eggs. We had a problem with Uncle Joe's expensive hand-towels, since Otto insisted on wiping his razor blade on a hand-towel instead of on tissue. Mother, who took care of the linen, finally gave Otto the same slashed towel each time, but it never occurred to Otto that the cuts were those that he had administered.

"Uncle Joe was most particular in his dress — his suits were dark blue, always with a pin stripe. His ties had to be blue with polka dots, and the polka dots had to be one size only. We all made efforts at buying him a different pattern, but they never got worn."

This is such a sharp contrast with Dr. Bardeen's complete ignoring of the matter of dress!

A remark by President Birge, a grateful patient and devoted friend of Dr. Evans over many years, suggests what Birge considered a conspicuous difference between Evans and other excellent physicians: "Dr. Evans was able to put himself inside the patient."

As a sample of Evans' continuing interest in his former students, Miss Birge writes:

"He kept a map during World War II on which he placed the substance of the frequent reports of the movements of the 44th General Hospital. I got my news of their shipwreck and Edward's (Birge's grandson) wound from Dr. Evans because he was

thoughtful enough to call me to his office and read me Dr. Frank Weston's letter. His comforting remark was 'Don't forget there are more good surgeons out there than at home now'."

**O**n WILLIAM SHAINLINE MIDDLETON: And gladly wolde he lerne and gladly teche: *Chaucer*. This fourteenth-century description of the Clerk of Oxenford gives us a splendid picture of Dr. Middleton as professor of medicine. Your author's family knows from direct experience the deep interest and skill with which as a physician he meets the personal and medical problems of his patients. In the broader demands of the teaching hospital, Dr. Middleton's capacity for keen analysis, accurate diagnosis, and human appreciation have been a wonderful stimulus to students and colleagues. To his intimates, Middleton frequently ascribes these qualities to the example and teaching of his medical godfather, Dr. David Reisman, with whom he was house officer years ago at Blockley Hospital, Philadelphia; but to bring forth such excellent fruit, we are all aware that the seed must fall on fertile ground. Furthermore, these descriptions omit a highly important asset — the vigor, zeal, and forthright optimism with which Dr. Middleton has attacked each problem, whether

*Arthur S. Loevenhart*  
*Pharmacology, 1908-1929*



*Arthur L. Tatum*  
*Pharmacology, 1928-1955*

it was competing in his favorite sport, handball, investigating a difficult case, or resolving conflicting opinions in the faculty or among physicians of the state after he became dean of our medical school.

A story that Dr. Middleton tells on himself stems from a fine third-year student from Argentina, several decades ago. Each student was given a patient and two hours in which to do a complete history and physical examination. As Dr. Middleton was coming back down the hall after half an hour, C.V. stepped out of the patient's room, indicating that he had finished. Dr. Middleton then stated severely that after years of medical practice it took him at least one and a half hours to complete such a task. C.V. looked at Dr. Middleton, bowed formally from the waist, and said, "I must be good, no?" Whereupon Dr. Middleton also bowed formally and continued down the corridor. The incident was closed.

One of Dr. Middleton's talents that continues to amaze us all is the ability to deliver a long discourse on an involved medical subject before well-informed audiences, citing chapter, verse, and dates without a single note. These speeches are always well-organized, indicating careful preparation, and a remarkable memory.

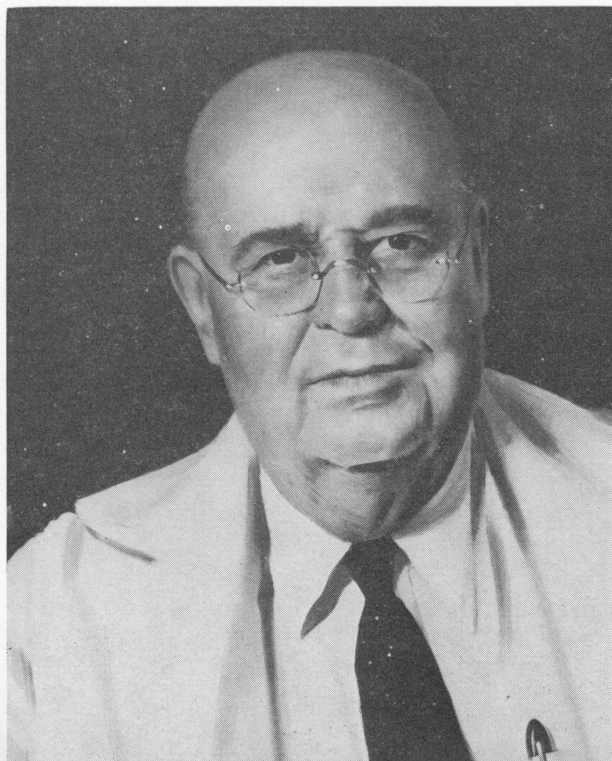
Dr. William Shainline Middleton received an ex-

ceptional number of well-merited honors. Although commonly I am not including such lists that are readily available in directories, the Festschrift to Dr. Middleton, published in 1964 by the Wisconsin State Medical Society, must be included even though it appeared more than a decade after our terminal date. This beautiful tribute includes appreciative letters and papers from his students and friends, a statement of many honors, his remarkably broad bibliography, glimpses of his assured optimism, and a pungent warning article from his own heart and mind, "Let's give the hospital back to the patients."

This article is typical of Dr. Middleton's strong interest in each patient and his needs and also of the satisfaction he has derived from his duties as teacher and clinician. After Dr. Middleton's years (1955-63) as Chief Medical Director of the Veterans Administration, a highly involved task, he was appointed acting professor of medicine at the Oklahoma Medical School with responsibility for patients and teaching on the wards. He told me, "It was wonderful — like getting back into heaven!"

*In addition to his sketches of the men who developed our Medical School, Dr. Clark traces the*

*John W. Harris  
Ob-Gyn, 1928-1955*



*events which led to the important developments in the Medical School history. Following is an excerpt from the author's account of the events which led to the formation of a four-year school.*

*t*he paramount problem for Bardeen and his family was legislative approval of the four-year medical school and a large teaching hospital to make this possible. These were giant steps. Dean Bardeen declared that the Medical School had reached a "critical stage." With 100 students in the second-year class and 150 in the first and with the increasing difficulty of placing two-year class graduates in good schools because of restrictions on the number of students in these schools, Bardeen argued that the university had only three alternatives. It could restrict enrollment, give up the medical school entirely, or establish the complete four-year course.

The all-important bill removing the previous two-year restriction and approving a four-year medical course was passed by both houses and approved by Governor Philipp on April 25, 1919.

Our professor of medicine and director of the student health clinic, Dr. Joseph S. Evans, close friend and intimate adviser of President Birge, was sent as unofficial emissary to talk over the problems of the University with Governor Philipp. Almost immediately, Dr. Evans won the Governor's confidence and esteem. Although initially the Governor had taken positions thought to be adverse to the University, he had by this time become aware of its difficulties and sympathetic to its needs. He strongly approved of a single board to control all the the state-supported institutions of higher learning, although he was not able to put this plan into effect. Governor Philipp had already called one special session of the legislature to provide the soldiers' bonus. Now Dr. Evans asked him to call another special session to provide a million dollars for the University.

The Governor was finally persuaded to call this session in May, 1920. Adroitly he asked the legislature to consider legislation under which some of the unused balance remaining in the soldiers' bonus fund would be returned to the general fund and then appropriated for the construction of a Wisconsin General Hospital as a memorial to those who served the country in the war. This was a suggestion worthy of a Daniel. With such a proposal before them, the legislators would hardly dare to adjourn. By this means the University would obtain a hospital, and the four-year course that had been approved earlier could be developed.

# DR. CLARK: RARA AVIS

By  
THOMAS R. MADDEN  
OF THE MEDICAL SCHOOL STAFF

**d**r. Paul Franklin Clark, who crowned his long scientific career with some 6,000 hours of devoted labor on his history of Wisconsin's Medical School, is a *rara avis*: one of a handful of professional scientists in America blessed by a long and close friendship with the humanities.

For many a scientist or medical practitioner these days, acquaintance with the humanities is something one narrowly escaped in youth, or something one pursues casually, if at all. But for Dr. Clark and his contemporaries, possibly because their early education took place in a period when the "knowledge explosion" had not progressed so far, or in so many directions — there was often a working familiarity with the humanities before they left college.

Indeed, since any coin has two sides, Dr. Clark would point out that there are too many humanists who have shunned any association with science. But Dr. Clark's career testifies that he had avoided both extremes in a creative manner, that he is, in effect, a liberally-educated man: conversant in both science and humanities to the advantage of both.

In any case, partly because he received the bachelor's degree in the humanities from Brown University — and partly because of his life-long friendship with these disciplines — the references Dr. Clark makes in his history to such humanists as Chaucer, Shakespeare, Pascal, Samuel Johnson and Maxim Gorki are not accidental. No more so than are the quotations from Herbert Spencer, Karl Pearson, Osler or Pasteur.

Dr. Clark feels, as he says in his history, that he has been "too diffuse in his interests" — that he let his interests in the cello, the paintbrush and literature lure him away from the microscope more than he should have. But Dr. Clark's scientific output, represented by nearly 60 professional papers, and his habits of work, indicated by his writing the early drafts of his 300-page history in longhand, cast doubt on that.

His devotion to discipline and his ability for relaxation were both evident during several mornings late last winter when he was putting the final touches on the history's manuscript. Working in his white coat in a simple office in Service Memorial Institutes in the Medical Center, Dr. Clark was always ready to lean back, face the morning sun, and talk.

In his "Downeast" accent, which has never been neutralized entirely in his 60 years away from Maine, Dr. Clark spoke on a long time about his youth, his early days at Wisconsin, and his career as teacher, scientist and writer.

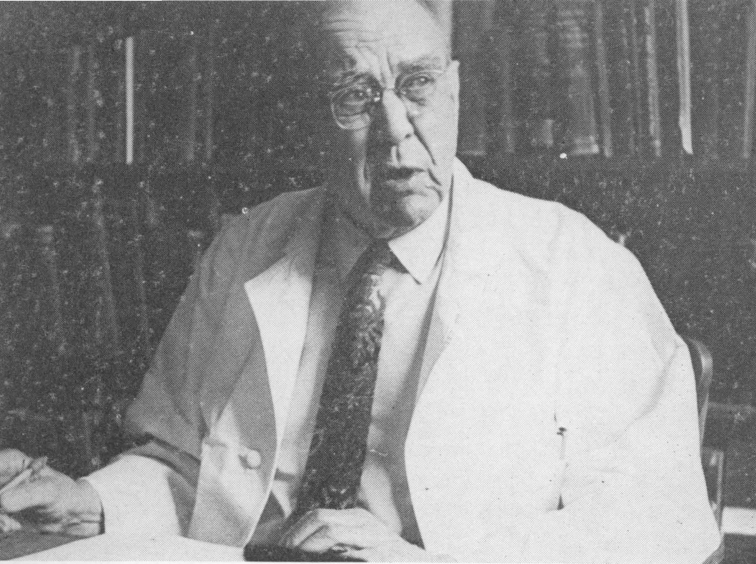
**h**e was born on May 9, 1882, in Portland Maine, and completed elementary and secondary school there. In 1900, he enrolled at Brown University in Providence, R.I., for what turned out to be a nine-year stay — "too long at one school," he says. While at Brown, he earned the Ph.B., the M.S. and the Ph.D. degrees.

Armed with his doctorate, he got his first job in 1909 with the Rockefeller Institute in New York City, where he fulfilled the desire of working with the noted bacteriologist, Dr. Simon Flexner. While at Rockefeller, he met and married his wife, Alice Schiedt Clark, who was the Institute's librarian. She was later to collaborate with him on several writing projects.

His work at Rockefeller involved investigations of bacillary dysentery but more especially poliomyelitis — the latter disease at that time had just been reproduced in monkeys, providing the opportunity for many detailed studies. During his tenure at Rockefeller, he spent a one-semester leave of absence at Johns Hopkins for work in pathology.

Dr. Clark came to Madison in the fall of 1914 as an associate professor of medical bacteriology in Wisconsin's young Medical School. Bacteriology had just been transferred to the Medical School from the College of Letters and Science. At that time and for some years after, the subject was taught as a subdivision of the pathology department.

Dr. Clark headed the medical bacteriology program in the pathology department until 1935, when, under the new dean, Dr. William S. Middleton, medical bacteriology became a separate department. Dr. Clark, who had been appointed a full professor in 1918, was made the new department's first chairman. In 1946, medical bacteriology became medical microbiology — a more exact title — and Dr. Clark



Dr. Paul F. Clark  
Medical Microbiology, 1914-1952

remained as chairman until his retirement in 1952.

Between 1910 and 1953 — a period encompassing his career as an academic scientist and a year or two on either side — Dr. Clark authored or co-authored 59 professional papers and two books. His first article, "The Relation of the Pseudodiphtheria and the Diphtheria Bacillus," appeared in the *Journal of Infectious Diseases* in 1910. It was followed in 1911 by an article (in collaboration with Dr. Simon Flexner) on experimental poliomyelitis in monkeys. This article, published in the *Journal of the American Medical Association*, marked the beginning of a long period of professional interest in polio for Dr. Clark.

Many of the entries in his bibliography during the ensuing years are involved in one way or another with polio. One of his latest professional papers appeared in 1938 in the *Proceedings of the Society for Experimental Biology*. This article, Dr. Clark says in his history, described how he and his assistants "concentrated poliomyelitis virus filtrates by continuous *in vacuo* distillation and similarly fecal filtrates from monkeys fed with virus. But they missed the importance of the intestinal route in the human disease that was demonstrated a decade later. Their failure was due in part to the fact that they were using chiefly *Macacus rhesus* monkeys instead of the Java monkey; *Macacus nemestrinus*, later found to be more susceptible by the oral route, but probably also because they forgot that Robert Koch's dictum, 'mice are not men,' applies similarly to monkeys."

Dr. Clark notes two other papers of interest: "The Bacteriology of the Bubble Fountain," which appeared in the *Journal of Bacteriology* in 1916, and another, in collaboration with his wife, "A Bacteriophage Active Against a Virulent Hemolytic Streptococcus," published in *Proced. Soc. Exper. Biol. Med.* in 1927. The bubble fountain study concluded that the bacteria hazard could be reduced by tilting the bubbler column about 55 degrees from the vertical — a design now incorporated in contemporary drinking fountains. The bacteriophage investigation described a phage which was isolated from Madison sewage.

Dr. Clark's first published work in book form was a presidential address he delivered to the American Society for Microbiology in 1938. This was *Alice in Virusland*, a fantasy with certain similarities to the work of Lewis Carroll. Alice visits the land of the microbes and ends up being placed on trial before the Microbe Parliament for the crimes of the human race. But the microbes decide that humans have no corner on war, stupidity and selfishness, and they conclude not to eliminate the race. Historical characters, including Shakespeare, Erasmus, Pavlov and Theobald Smith, appear in the narrative.

(In 1966, Dr. Clarke received a Steuben glass bowl from the microbiological society as one of its past presidents.)

He and Mrs. Clark collaborated on the second book, *Memorable Days in Medicine*, published by the University of Wisconsin Press in 1942. This work presents, in calendar form, descriptions of important men and events in the history of medicine and biology.

Somehow, during the intensely active years of teaching, research, and work on University committees, Dr. Clark found (or took) the time to travel. In his own third-person style, he describes his journeys:

"Clark travelled on three continents learning of the past and the present; he worked for brief periods in the laboratory of Jules Bordet at the Pasteur Institute in Brussels and at Cambridge University in the laboratory of G.H.F. Nuttall. He went on pilgrimage to Pasteur's laboratories at the time of the Pasteur centenary, 1923; to Berkeley, the home of Edward Jenner, and entered the thatched hut at the foot of the garden where Jenner kept his cowpox animals; and even to the temple of Imhotep on the island of Philae. But that temple in March projected only about four feet above the engulfing waters of the Nile."