

WISCONSIN MEDICAL ALUMNI

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WISCONSIN MEDICAL ALUMNI

Quarterly

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About the cover

Artist Curt Carpenter took a look at Alumni D 1975 as only an artist can and came up with symbolism on our cover. To a bare Alumni D (left) you add the greening blades of grass (right) of the various classes, their traditions, support identity. In the center is the fully bloomed tree of the Class of 1975.

The Mt. Sinai Affiliation— How Is It Working?

BY RICHARD E. RIESELBACH, M.D.
COORDINATOR FOR ACADEMIC AFFAIRS
UW-MOUNT SINAI AFFILIATION

The previous *Quarterly* examined the UW-Mount Sinai Affiliation anatomy in some detail. Now that the program is nearing completion of its first year, it is appropriate that we take the next logical step and describe how the affiliation is actually working. It appeared that this physiological assessment could best be accomplished by gathering data directly from the people who are most intimately involved — the Mount Sinai voluntary and full-time staff members of the hospital board, UW medical students who have been at Mount Sinai during the past year, and the residents. Thus, representatives of the foregoing groups have been approached for their views.

We asked Dr. Sanford Mallin, '57, to consider how the program had affected his practice and specifically, the relationship with his patients. His reactions: "I am basically pleased by the program, supportive of its efforts and rewarded by my participation and contributions.

"The greatest bonus for me is the increase in the over-all caliber of our house staff, making teaching both more satisfying and challenging," he continued. "My contacts with medical students are not new, since preceptees have been on our service at Mount Sinai for some years. A second bonus is the addition to our staff of a group of talented physicians (the full-time faculty) who, with the exception of cardiology, include subspecialties not previously represented by our active attending staff. This choice of men in 'noncompetitive' fields was an integral part of the initial planning and acceptance of the program.

"The absence of an endocrinologist (my specialty) on the full-time faculty may make acceptance of the program easier for my associate and myself," Dr. Mallin said. "On the other hand, our obligation

to fully staff the service increases the time burden on the three of us in the endocrine section.

'No Significant Patient-Doctor Relationship Change'

"Regarding the patient-doctor relationship and my practice of medicine, there has been no significant change," according to Dr. Mallin. "Basic responsibility for my patients is my own and is actively manifest through close supervision of all aspects of patient care. House officers are encouraged to suggest, challenge and criticize in conversations with me, but in all cases, the final decisions regarding care must be mine.

"The fact that orders are physically written by house officers does not alter my primary control or responsibility," he feels. "Nor does this preclude acceptance of appropriate responsibility by the intern or resident, for this has always been inherent in teaching programs at Mount Sinai or elsewhere for the last half century."

What are the problems? "Some interns and residents are more mature and knowledgeable than others — surely no surprise," Dr. Mallin feels. "Funding of the overall program is not sufficient, since both the Medical Center and University contend with tight budgets. Hence, I feel that the full-time faculty are responsible for generating too large a percentage of their salaries through consultations (though they do not keep any excess, and their salaries are guaranteed).

"This may lead to increasing friction if overlap in subspecialty areas between voluntary and full-time faculty increases. Most men with full-time academic appointments have little experience with the private practice of medicine. Needs or desires relating to the teaching program may lead to decisions or requests unacceptable to the voluntary staff. Constant vigilance by the voluntary staff has been, and will continue to be essential. The present full-time faculty is without exception a very pleasant and bright group of individuals. They are working hard to make the program work, as are most of us on the voluntary faculty," says Dr. Mallin.

(EDITOR'S Note: This is the last of two articles on the UW Medical School-Mt. Sinai (Milwaukee) Affiliation. The Spring issue described the structure and personalities involved.)

Dr. Irvin Becker, '47, Mount Sinai's chief of staff, was asked about overall acceptance of the program by the voluntary staff. He indicated that "some voluntary staff members have viewed the program with enthusiasm, some with reluctance, and virtually all had some initial reservations. One year now has passed. Initially the program had limited acceptance. However, we are now experiencing a rapidly increasing level of enthusiastic participation. The patient-physician relationship continues. There are some frustrations and some misunderstandings but now the triangle of patient care, education and research is beginning to work here at Mount Sinai."

Dr. Robert Saichek is associate chief of the Department of Medicine, an elected position developed to ensure full input from the voluntary staff in the development and implementation of departmental policy. Dr. Saichek notes that "an increasing number of voluntary staff are enthusiastically participating in the teaching program, in both the inpatient and outpatient setting. Their efforts are invaluable, both in terms of lending a perspective not often available in university hospitals and in providing much of the teaching coverage for the program."

"With the advent of the affiliation, the voluntary staff find the opportunities for continuing education now are much more accessible. The noon conferences presented each week day by various sections within the Department of Medicine provide an excellent opportunity for voluntary staff members to remain current in all internal medicine areas."

Virtually all of the affiliation's full-time staff have come directly from an academic setting into an environment which has been strongly oriented toward the practice of medicine. Dr. Roy Holly, chief of the Department of OB/Gyn, notes that, "Mount Sinai has great potential for blending an active private practice of OB/Gyn conducted by a large number of highly-qualified voluntary staff members with the activities of full-time staff members working in selective, highly-specialized areas, thereby creating an ideal atmosphere for medical student and postgraduate training." He indicates that this was a major factor in attracting him to Mount Sinai Medical Center.

'Clearly The Way and Future'

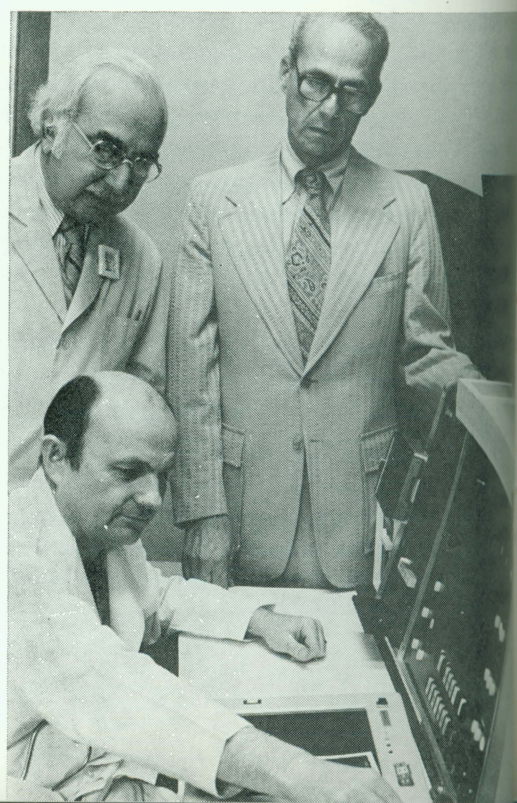
Dr. Donald Schmidt, '60, head of the cardiovascular section in the Department of Medicine feels that "utilization of private patients in the teaching

setting can present some difficulties, but these are far from being insurmountable; this is clearly the way of the future in academic medicine." He considers his present activities to be not very different than those pursued in his previous position in New York at the Columbia-Presbyterian Medical Center. He notes that "the strength of the affiliation program appears to depend upon our ability to develop a high level of participation by voluntary staff and strong bonds of mutual trust between voluntary and full-time staff."

Dr. Edvardas Kaminskas, head of the hematology-oncology section of Medicine, had previously worked as a Harvard faculty member in a Boston community hospital (The Beth Israel Hospital), as a full-time academician.

He observes that "In the community hospital setting there are advantages as well as obligations that may be less apparent than in university hospitals. The academician functions as a consultant to a large number of physicians in practice. Therefore, he has to establish himself both with the patients and their physicians as a good man. In a community hospital, the academician considers himself to be much more a part of the medical community and does not have the feeling of ivory tower isolation that may occur in some university hospitals. I think that this is a very healthy and mutual

(Below): Dr. Donald Schmidt, '60, head of the Mount Sinai cardiology section, demonstrates new technology for isotopic imaging of the heart to other section members Drs. Mischa Lustok, '35, and Nathan Grossman.



satisfying setting and serves as a good example to students and house staff.

"However, to function only as a teacher and a consultant is not enough to justify an academician's status," Dr. Kaminskas says. He must also contribute to the understanding and treatment of human disease. Throughout the history of many university-affiliated community hospitals, active research by the full-time staff has always been a central endeavor. Recently, some have expressed the feeling that research in such institutions should be directed toward the delivery of health care or be strictly clinically oriented.

"I don't have much sympathy with this view. The successful institutions of this type have always supported a broad range of research activity. Direction of research activities into one specific category will lead to a loss of the diversity which characterizes good academic programs, and could lead to selection of faculty who are incapable of providing the stimulation and depth of expertise needed for an outstanding educational environment," Dr. Kaminskas concluded.

'Quality Care, Education Go Together'

We asked Raymond Alexander, executive vice president of Mount Sinai Medical Center, to comment upon hospital board reaction to the affiliation with the University of Wisconsin Medical School, in medicine and obstetrics/gynecology, as an important step to assembling the program and facilities which were laid out in a master plan for the Medical Center conceived in the 1960s.

"The trustees are fully aware that in today's medical care setting the maintenance of educational activities in a community hospital is dependent upon a meaningful relationship with a medical school. Furthermore, high-quality patient care and high-quality educational activities go hand-in-hand in a hospital setting," Alexander continued.

"For these reasons, the affiliation with the UW Medical School marked an important milestone. Mount Sinai has modeled itself after other urban voluntary hospitals under Jewish community auspices that have been major resources of excellence in patient care, education and research. The long-range plan for Mount Sinai is to create a climate of excellence that will blend the best of academic medicine with the talents of the practicing physician in a community-hospital setting.

"The degree of change, and the rapidity with which the Medical Center has implemented the

affiliation with its associated full-time staff has created a complex and sometimes controversial setting," said Alexander. "The trustees have made the financial commitment to the program, but more importantly, they have made the psychological commitment as well. The first few months of the program were traumatic, as the full-time and the voluntary staff began to interact at a number of levels.

"However, the board stood fast in its commitment to maintain the program on an even keel. This is in essence the challenge — to blend town and gown in a meaningful and productive way. Hopefully, as time progresses, the lines between the full-time and voluntary staff will continue to become less distinct, with both recognizing common goals in the provision of patient care and medical education. Hospitals in other communities have worked out the problems related to medical school affiliations; we are fully confident that our collective long-term future looks very bright indeed," he said.

The participation of UW fourth year students in the program's initial year has been most rewarding for students, house staff and faculty. Lea Watts, who is planning a career in family practice, was asked why she elected to spend part of her fourth year at Mount Sinai. "I chose Mount Sinai for a fourth year elective because I wanted exposure to patients representative of those I will be seeing one day in my own practice. Patients I have seen at Mount Sinai are not only representative of the community surrounding the Center, but also present a wide spectrum of disease."

Lea also indicated that she found the attending staff to be eager to teach and to have done an excellent job in preparing daily conferences for house staff and students. She found that most Mount Sinai physicians were willing to allow students and house staff to participate in the management of their patients in a manner most conducive to excellent medical education.

'A Different Clinical Experience'

Greg Dehmer, who will be training in internal medicine and presently has a subspecialty interest in cardiology, spent six months at Mount Sinai on cardiology, neurology, nephrology and the emergency room electives: "Mount Sinai offers a clinical experience different from that available at a university hospital. Mount Sinai is a community hospital and the majority of patients present diagnostic problems common to everyday practice.

"In addition, a substantial number of patients are admitted with an acute medical problem requiring immediate treatment, rather than a lengthy diagnostic workup. I found this type of exposure a valuable addition to that gained at a tertiary care facility like University Hospitals in Madison. Both systems have their advantages and disadvantages; I would encourage *all* students to experience both before their graduation."

Marc Rasansky, who also will be training as an internist, was very satisfied with his rotations at Mount Sinai. He said: "The staff is dedicated to teaching and the improvement of patient care and worked hard to make this a beneficial experience for the medical student. The program strengths lie in the students' exposure to primary patient care, the initial diagnosis of newly presenting illness and involvement with acute medicine. The patient population is excellent and includes a broad spectrum of disease from all socioeconomic groups."

Central figures in the day-to-day operations of the affiliation are the house staff. Their effectiveness and commitment level are major determinants of the program's success as relates to both patient care and student instruction. In view of their intimate daily involvement "in the trenches," house staff members have their fingers on the pulse of the program and are in an ideal position to observe its strengths and weaknesses.

Dr. Francis Wolf, '72: "Speaking as a physician in training I feel the community hospital with a foundation of practicing physicians and a cornerstone of academic medicine, offers unique opportunities. In this setting, one has the opportunity to view a broader area of medicine, as the entire iceberg is seen rather than just the tip, which is often the case at a university hospital. Admittedly, being involved with the base of the iceberg requires more sifting and winnowing than just dealing with the tip, but then, that is the real world. The more rare disease entities are certainly present at Mount Sinai.

"However, they are seen in their natural milieu in conjunction with their primary physician. Service as a house officer in a community teaching hospital requires more forbearance than necessary in a VA or university hospital, with respect to the question of who is directing the day-to-day care of the patient. However, while it is always very clear that the private physician bears ultimate responsibility for the case of his patient and has the final word in all decisions, the practicing physicians at Mount Sinai, with rare exceptions, stand with the house

staff and not in front of them. Thus, the team of medical student, house staff and attending physician has been working effectively."

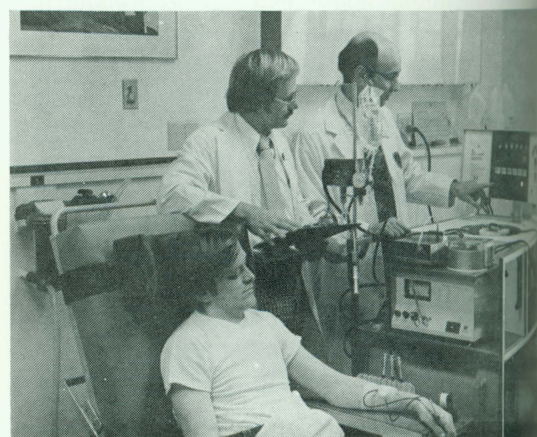
'Acute Diseases at Early Stages'

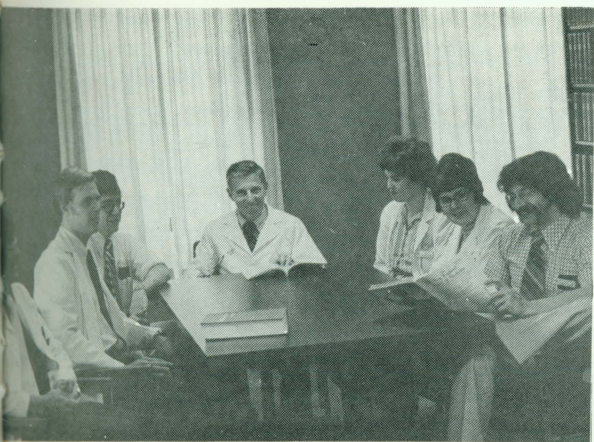
Dr. Janet Wilson will be completing her training as a general internist in the coming year as the first resident in Dr. Thomas Jackson's new Primary Care Program at Mount Sinai. Dr. Wilson, who graduated from Case Western Reserve Medical School and then served her internship at University Hospitals in Madison, made the following observations regarding the Mount Sinai program.

"I found the patient population to consist of a vast variety of pathology in all stages. Many times we were involved in the initial evaluation for a chronic disease or saw acute disease in its earliest stages. This is in contrast to my experiences in University Hospitals of seeing large numbers of patients with a limited number of diseases, most of whom were diagnosed or well worked up long before I saw them. We usually have the first chance to make a diagnosis rather than being the 4th or 14th referral. I think this has allowed more variety in the types and degrees of pathology seen.

"The teaching has been variable, Dr. Wilson said. "I have been stimulated to think and to read, which is perhaps most important. I have been challenged to critically evaluate what is taught and weigh it against the current literature. Having a large number of voluntary attending staff to consult has at times been difficult, but it has been an opportunity to be exposed to different ideas and

Drs. Paul Jenkins, '68, and Frank Gutmann, members of the nephrology section, work with a patient undergoing training for home dialysis — one of the new programs introduced at Mt. Sinai by the full-time faculty.





Dr. Irvin Becker, '47, conducts a seminar with (then) 4th year UW medical students (l. to r.): John Kozarek, Richard Pope, Marc Rasansky, (Dr. Becker) Lea Watts, Mary Gallenberg and Cary Sternick.

approaches rather than only one school of thought.

"I entered residency with private practice in general internal medicine as my goal. This goal has been reinforced during the present year. Also, this program has provided me with increasing awareness concerning social and financial implications of medicine."

In addition to these reactions of program participants, what about the daily mechanics of the program? In the interest of brevity, we will examine only the Department of Medicine in this respect; the Department of OB/Gyn functions in a similar manner. Patients admitted under the care of physicians in the Departments of Medicine or Family Practice are assigned to a medical service with an intern and resident (and frequently UW medical students), unless the physician specifically requests that house staff not be involved — a request which has been very infrequent to date.

A condition of house staff coverage is that the patient is included in the teaching program and that orders are written exclusively by house staff, although in-depth communication with the patient's private physician occurs before initial and subsequent orders are written. The ultimate responsibility for the patient's care remains with his private physician.

The majority of each physician's patients are placed on one or two of the nine medical services. Thus, since the medical services at Mount Sinai are set up geographically, the attending physician always knows the location of a specific house officer. Also, the number of house officers with whom he relates at any given time is limited. While making

their morning work rounds, house staff and students are available from 7:30 to 9:30 a.m. to communicate with attending physicians regarding patients on their service.

Formal attending rounds are conducted every weekday from 9:30 to 11:00 a.m. During this time, any patient on the teaching service may be discussed in depth by the single attending physician who is designated as the "on service" attending for that month; he may be a full-time or a voluntary faculty member. The other time reserved for formal teaching is during the noon hour, when subspecialty conferences are scheduled each week day throughout the year.

The workup of new admissions is initiated in the afternoon, with the medical student, intern and then the resident seeing the patient in that order. Patient reaction generally has been very favorable to the program, in that most patients are very gratified with the depth and intensity of care derived from the team of physicians caring for them. Interestingly, the average length of hospitalization has decreased at Mount Sinai since the Affiliation was initiated. Thus, the teaching environment has been associated with an increase in efficiency of care.

Potential for Greater Contributions

As the gap widens between available resources for medical education as opposed to present or projected requirements, the community hospital's importance as an indispensable component of the health sciences educational system becomes increasingly apparent. In this brief analysis of "how it's working at Mount Sinai," observations by program participants are indicative of its present status and its great potential for providing a progressively greater contribution to Wisconsin's overall medical education resources.

The ultimate development of this educational resource at Mount Sinai and those of other community hospitals is dependent upon effective resolution of the problems inherent in programs of this type. Some of these intra-institutional problems have been discussed in this article. It is clear that in association with the affiliation, Mount Sinai has already changed its character to a substantial degree. However, while now a teaching hospital, it clearly remains a community hospital. The new hospital by-laws and the "ground rules" by which the affiliation functions are designed to guarantee that Mount Sinai maintains its identity as a community

hospital, with an even stronger voluntary staff evolving as time progresses.

However, at the same time, a new dimension has been added to this basic structure. New ideas and alternative methods of practice have been introduced. While this diversity has resulted in some transient turbulence, the ultimate structure of the institution is being greatly strengthened, and thus it will be better prepared to meet the challenge of the rapidly-changing milieu of medical practice.

An even greater challenge is present regarding the changes in *inter*-institutional relationships which evolve as a result of major medical school affiliations within community hospitals. When the profile of a community hospital changes by virtue of its commitment to become a major educational resource, tensions are generated with other area hospitals and health planning considerations become even more complicated. Also, some contend that the development of an adversary relationship between

the state's two medical schools has been nurtured by the establishment of the UW-Mount Sinai Affiliation.

While these inter-institutional problems present a formidable challenge to medical educators and those members of the community who support the institutions and formulate their policies, experience in other parts of the country indicate that these are not insoluble problems. Wisconsin's two medical schools share many common goals with each other and with community hospitals within the state. Everyone benefits when the qualitative and quantitative aspects of medical education are enhanced through optimal utilization of available community resources and the effective development of new resources without undue expenditure — a primary goal shared by all.

Hopefully, this goal will be kept in focus as inter-institutional relationships evolve.

ALUMNI NEWS

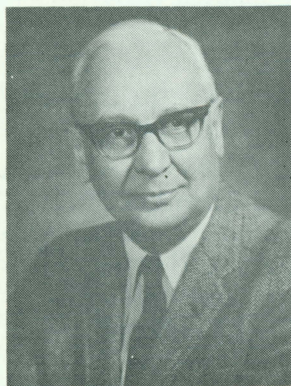
Ansfield, Gaenslen, Randolph Elected

The Wisconsin Medical Alumni Assn. Board of Directors added youth, experience and geographic balance as the result of elections announced at the annual business meeting on May 16.

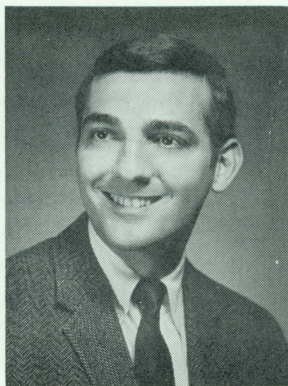
Elected to the board by the dues paying members were Drs. Thomas J. Ansfield, '66, Madison; Frederick G. Gaenslen, '40, Milwaukee; and William

in the Spring *Quarterly* and ballots sent to all dues paying members with space allowed for write-in votes.

In addition to the directors, Dr. Hanno E. Mayer, '46, Milwaukee, was elected president-elect.

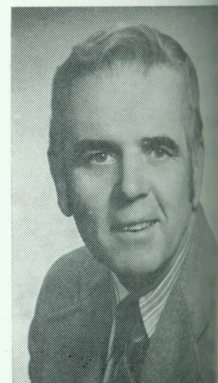


Dr. Gaenslen



Dr. Ansfield

C. Randolph, '44, Manitowoc. Nominations were made by a committee of past presidents, publicized



Dr. Randolph

Dr. Roger I. Bender, '43M, Beaver Dam, became the association's 19th president at the annual business meeting.

Dr. Ansfield, youngest of the new directors, is a cardiologist, medical director of Rural Insurance Co. in Madison and an assistant clinical professor at UW. Dr. Gaenslen has been in the private practice of orthopedic surgery in Milwaukee for almost

years, a clinical professor at Medical College of Wisconsin, and founder and past president of several local and state orthopedics groups.

A Manitowoc otolaryngologist since 1948, Dr. Randolph is in private practice in his home town and active in medical and specialty groups.

The three replace President-elect Hanno Mayer, '46, Milwaukee; Robert M. Senty, '47, Sheboygan; and David S. Vig, '51, Viroqua, on the board.

Almost 200 Attend California Meeting

By W. H. Oatway, Jr., M.D., '26
California Correspondent

The gathering of UW Medical Alumni, spouses and guests at the American College of Physicians meeting in San Francisco on April 8, was natural, large and very pleasant. Origins of the 197 participants I counted includes numerous Wisconsin, Midwestern and Western cities and the tally was limited only by our 1920-45 year span at UW.

We didn't see co-host George Magnin of Marshfield but did note Helen Dickie, Madison, and San Francisco host Frank Van Kirk greeting the alumni. Dr. and Mrs. William Middleton (who planned a post-convention Hawaii trip) shook hands with alumni for 1½ hours!

Madison faculty that we noted include LeRoy Simms, Ovid O. Meyer and Bob Schilling and their spouses. Milwaukeeans included Fred Madison, Herb Pohle and R. P. Jahn. Among the others from Wisconsin were Jim Struthers, Marshfield; Louis Frase and Donald Griffith, Eau Claire; and Thorolf Gunderson, La Crosse. A Midwesterner was Stella Sikkema Hazen of Minneapolis.

Westerners included the Bob Skeels of Los Angeles; the "Rick" Jacobsens of Pasadena (she was on the nursing faculty at old W.G.H.); "Ev" Johnson of Turlock; Ben Lieberman, Clarence "Clancey" Poor and Rosalie Wilhelm Crow of Oakland; Robert W. Clark of Napa; and Chauncey "Sarge" Leake of San Francisco.

Others we noted were Donald E. Olson of Portland and James "Soggy" Bingham and frau from Seattle. We ask the forgiveness of the 170 or so whose names haven't been included.

Word of Ed Gordon's loss on a skiing outing at Yosemite National Park four days earlier was on the lips of many, as was its sadness and hope that he would be safely found.



Dr. Hanno H. Mayer is President-elect

A Milwaukee internist who has practiced in that area for over 25 years will become president of our Wisconsin Medical Alumni Assn. at Alumni Day next year.

Selection of Dr. Hanno H. Mayer, '46, as president-elect was announced at the association's annual business meeting on May 16. He will be the organization's 20th president. Dr. Mayer had completed a three year term as a director of the alumni association and included among his activities making arrangements for and co-hosting the winter meetings in Milwaukee.

Born in Mannheim, Germany, 60 years ago, President-elect Mayer, after moving to this country, matriculated to the University of Wisconsin-Madison, where he received his M.S. in physical chemistry before earning his M.D. with the Class of 1946.

He served in the U.S. Navy Medical Corps and did his internship and residency at Milwaukee Hospital. Active in diabetes association work, Dr. Mayer practices at Milwaukee and Columbia hospitals and is an examiner for a number of insurance firms.

The new president-elect is married and is the father of three children.

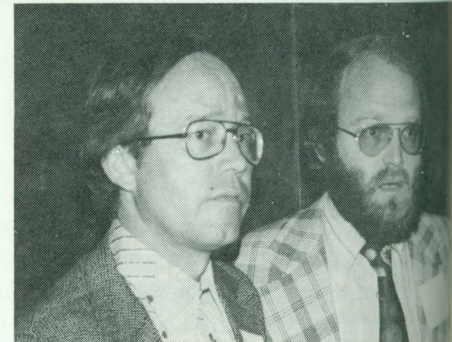
Alumni Day 1975



A "continental breakfast" was a new feature as participants registered and waited for Alumni Day 1975 to begin. Samples of the good fellowship include: (below) Drs. Morrison Schroeder (l.), '33, Whitefish Bay; William E. Gilmore, '43, Parkersburg, W. Va.; and William Merkow, '43, Waukesha.

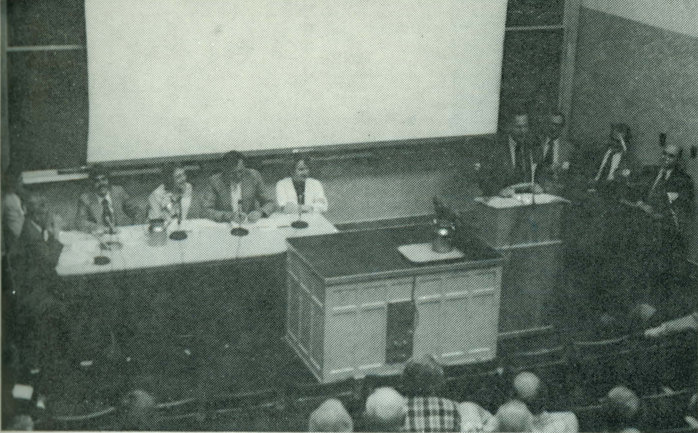
(Below, left) Seniors Richard Sazama and Ann Rock with Dr. John Sazama, '37, Chippewa Falls.

(Right): 1965 classmates Drs. Neal A. Melby (l.), and John R. Milbrath, Wauwatosa, survey the mass of fellow alumni. The coffee, rolls, sweet rolls, juices and small tables proved to be quite popular.



(Below, right): Dr. June Osborn (l.), associate professor of pediatrics and medical microbiology, chats with senior Ada Fisher. (Bottom, right): The UW classes got together in the personages of (l. to r.) Drs. Milton Finn, '38, Superior; Ben R. Lawton, Marshfield; and William D. James, '35, Oconomowoc.



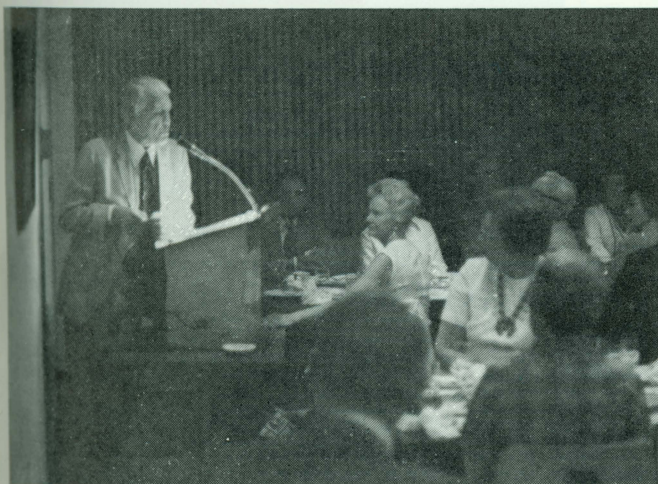
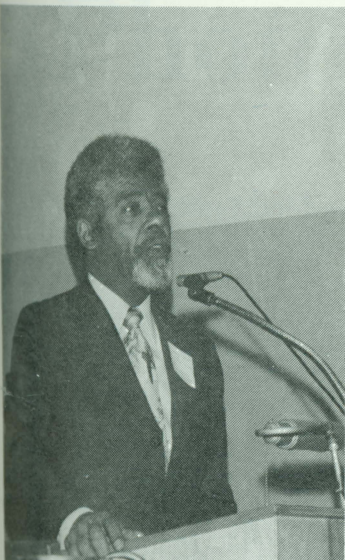


Photos on this page convey samples of the May 16 Alumni Day Activities. (Above, left): Dr. Charles Lobeck, at the lectern, spoke of changes in graduate education as part of the general topic on "where we're going in medical education as the other presentors (right) and reactors (left) listened.

(Above, right): Emeritus Faculty Award Recipient Dr. Karver L. Puestow, '22 (foreground), leads a busload of alumni who toured the campus on their way to lunch at the Wisconsin Center.

(Left): Dr. George I. Lythcott, associate vice chancellor, was introduced at the morning session and greeted the alumni.

(Below, left): Vice Chancellor Robert E. Cooke spoke to the Alumni Day participants and their guests at the noon luncheon. A few moments earlier (bottom, left) the alumni, seniors and their spouses had enjoyed lunch and sherry.



Dr. William T. McKinney (above), new chairman of the UW Psychiatry Department, introduced the afternoon program at the Wisconsin Center. The "Families and Their Problems" topic included presentations on "What is A Normal Family?" and "Aging and Families". Alumni and spouses in the audience later participated with questions and comments.



Annual Meeting Reviews '74-75 Work

Establishment of meetings between the board of directors, Dean Crowley and his staff, was among the year's highlights noted by UW Medical Alumni President G. S. Custer at the association's annual business meeting on May 16. The board has learned much about the medical school's operations, policies and problems and has had a meaningful dialogue with the administration.

Other highlights include four excellent outstate alumni meetings and several national meetings held in conjunction with specialty conventions and a new newsletter to class representatives. The Association can be strengthened, Dr. Custer said, by closer coordination and further development of specialty groups.

The year also held some disappointments, the president said. Most significant was the decision to hold in abeyance the major commitment — development of a continuing education and alumni center — because the rate of inflation made the project unfeasible at this time. Another casualty of the economy was cancellation of the alumni/faculty retreat.

Past President Louis C. Bernhardt will chair a committee consisting of board members Kamp-schroer, Senty and Sivertson to work with Dr. Thomas Meyer in developing future programs. Administration of the program will be vested in the alumni association.

An interim financial and alumni giving report was distributed prior to the meeting. The financial report showed cash in the bank of \$29,003 plus \$60,000 in life membership funds being held and invested by the U.W. Foundation. A deficit of \$28,310.13 currently exists.

President Custer paid tribute to the faculty-alumni committee, spouses and students who planned the successful 1975 Alumni Day. He thanked Dean Crowley for his cooperation and assistance.

A tally of mail ballots resulted in the election of the following: President — Dr. Roger I. Bender, '43, Beaver Dam; President-elect — Dr. Hanno H. Mayer, '46, Milwaukee; Directors (3 year terms) — Drs. Thomas H. Ansfield, '66, Madison, Fred Gaenslen, '40, Milwaukee and William Randolph, '44, Manitowoc.

President Custer expressed personal thanks to the board for their dedicated service and support, paying particular tribute to retiring members Dr. Robert Senty, '47, Sheboygan, and David Vig, '51, Viroqua, who completed three year terms.

After a call for new business, the meeting adjourned. The meeting followed the Alumni Day morning session in the S.M.I. Auditorium.

Dr. Bernhardt Added to Editorial Board

Dr. Louis C. Bernhardt, '63, Madison surgeon and a past president of the Wisconsin Medical Alumni Assn., was named to the Quarterly Editorial Board in April. Dr. Bernhardt fills a vacancy on the board caused when Dr. Einar R. Danielson, '34, Wauwatosa, was earlier promoted to emeritus

status. The appointment was made by President G. S. Custer and approved unanimously at the April 4 directors meeting.

The Quarterly editorial board meets at least annually and determines the magazine's editorial policy and activities. Members also prepare an occasional column.



A Milwaukee native, Dr. Bernhardt was the youngest person to hold the association's presidency when he took office in 1972-73. Prior to joining the Dean Clinic as a specialist in thoracic and cardiovascular surgery in 1971, he was director of emergency services at University Hospitals and an assistant dean for clinical affairs at the UW Medical School.

In 1968, while serving as chief resident and chief surgical resident at UW Hospitals, the junior medical school class chose him as the outstanding teaching resident. A year later he received the "Regular Fellow" Award. A diplomate of the American Board of Surgery, Dr. Bernhardt is the author of over a dozen scientific papers.

Alumni Banquet Photos



The 1975 Medical Alumni Citation is presented to Dr. Richard H. Wasserburger, '46, (seated, center) Madison, by Vice Chancellor Robert E. Cooke as Mrs. Wasserburger watches. Dr. Wasserburger was the Association's 13th president.

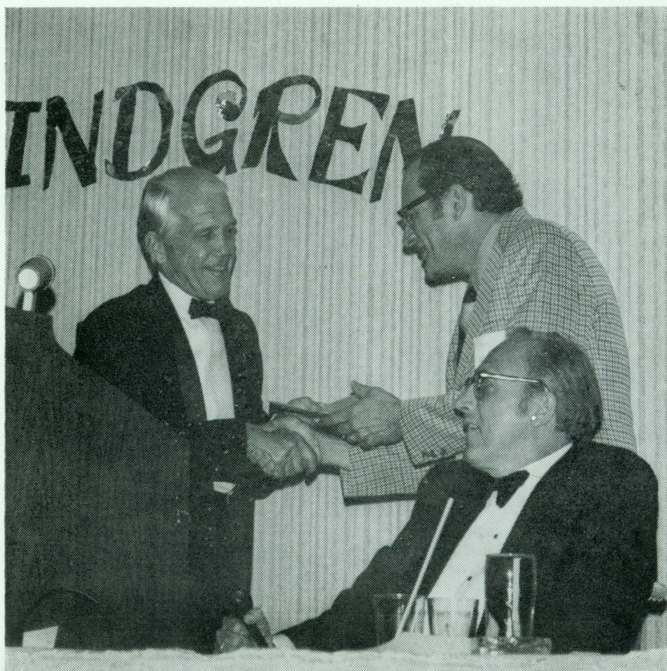


(Left) President G. Stanley Custer (l.) has just presented the Emeritus Faculty Award to Dr. Karver L. Puestow, '22, Madison, emeritus professor of medicine. Dr. Puestow is about to deliver his remarks.

(Below, left) President Custer and Dr. Helen A. Dickie, '37, Madison, unveil a plaster head of Emeritus Dean William S. Middleton. Sculptor was Dr. William A. Oatway, '26, Laguna Niguel, Calif. Dr. Dickie related a very humorous account of bringing the cast head to Madison on her return from a medical meeting.



(Below) One of the Teaching Award recipients was Dr. Benton C. Taylor, Res. '51-54, her being congratulated by Vice Chancellor Cooke.





Probably the largest of the nine gatherings was the 25th reunion of the Class of 1950, Thursday evening at the Edgewater Hotel. Twenty-nine former stu-

dents are shown here surrounding Emeritus Dean William S. Middleton when photographer M. Leidner arrived to take group photographs.

The Class Reunions



Recalling days in the early '30s, the Class of 1935 experienced "rounds" with Emeritus Dean William S. Middleton (back to camera at right) as part of its 40th reunion Thursday afternoon. In a Madison VA Hospital setting Dr. Garrett A. Cooper (left) examines the patient while classmates Lustok, Lee and Grinde and Dr. Middleton watch.

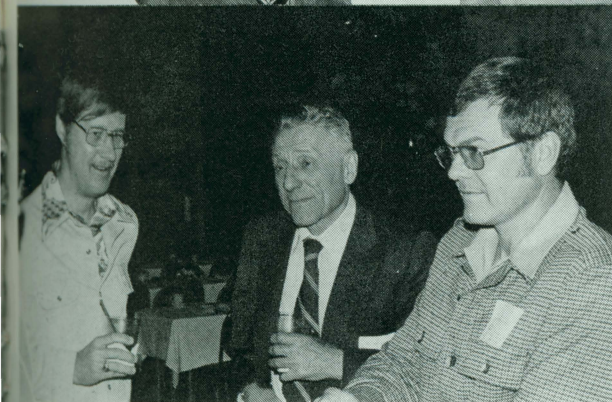


Spouses, a cooler full of Wisconsin brew, plenty appetizers and a family pooch were all ingredients at an informal Class of 1965 gathering at the home of Dr. Norman Jensen (white shirt, kneeling from left). Alumni Day weekend weather favors gatherings such as this and allowed alumni to go from the meeting to lunch at the Wisconsin Cen-



The 40th reunion was pretty special to the Class of 1935 and 21 of the members are shown here in a group photo taken at their Concourse Hotel gathering.

ing. Their special guest was emeritus professor of medicine Dr. Ovid O. Meyer, '26, seated fourth from left.

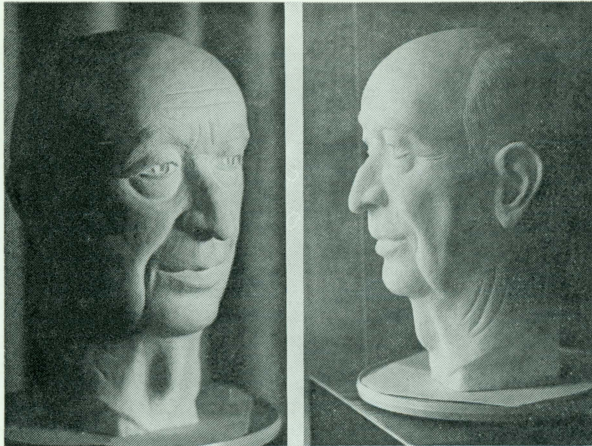


(Above left): Drs. Sandra Osborn, Madison; Craig Stien, Marquette, Mich.; and Tuenis Zonday, Eau Claire, converse at the Class of 1970 gathering. (Left): Dr. Joseph J. Lalich, '37, professor of pathology (center), shown here with Drs. Paul Radlet (l.), Corpus Christi, Tex., and Robert Wheaton, Burlington, was the Class of 1955 guest. (Above): An Edgewater Hotel brunch on Saturday attracted Class of 1930 members and their spouses.

(Below) This happy group of 21 classmates who were graduated from the UW Medical School in 1945 had a Thursday evening reunion at the Edge-

water Hotel on Madison's Lake Mendota. This year there were more hotel gatherings rather than reunions at Madison classmate's homes or lakeside cottages.





Here are two views of the life-sized clay head of Emeritus Dean William S. Middleton presented at Alumni Day by Dr. William H. Oatway, Jr., '26, of Laguna Niguel, Calif. The head, which is on display in the Middleton Medical Library, was prepared by Dr. Oatway using personal measurements and numerous photographs of Dr. Middleton.

34 Alumni Finish UW Hospitals Training

Thirty-four University of Wisconsin medical school graduates were among the 190 house officers and post-doctoral fellows who completed their training at University of Wisconsin Hospitals this year, principally last month.

Nine members of the Class of 1974 completed their internships: Drs. Robert Eising, F. Jeffrey Field, Jerome T. Hanson, Edward J. Kasarskis, Jay R. Kasner, James J. Betzhold, John M. Burch, Michael A. Weiner and William E. Marquis.

Twenty-one alumni completed residencies in nine different specialties: **Family Medicine and Practice** — George L. Gay, Jr., '72; Richard W. Hanke, '72; Kay Ann Heggstad, '70; Robert N. Justl, '72; and Donald M. Lochner, '72. **Gynecology-Obstetrics** — James B. Torhorst, '72. **Internal Medicine** — Paul J. Drinka, '72. **Neurology** — David M. Kashnig, '71; and Gregory L. Sheehy, '73.

Psychiatry — Robert J. Allister, '73; John R. Brinkley, '73; Lawrence A. Champion, '73; and Peter C. Joosse, '73. **Diagnostic Radiology** — William R. Brauer, '71; Glen E. Burmeister, '71; John R. Hesselink, '71; and Bradley D. Munson, '71. **General Surgery** — Thomas J. Pauly, '71. **Orthopedia**

Surgery — James S. Keene, '70. **Otolaryngology** — Stephen W. Rutter, '70; and Craig G. Stien, '70.

Graduating post-doctoral fellows were: William W. Storms, '68 (allergy); William H. Dreher, '68 (nephrology); John C. Kirkpatrick, '71 (radiotherapy); and Carl E. Olson, '69 (radiotherapy).

'75 Houghton Award to Kenneth Bussan

Kenneth L. Bussan, a senior medical student from Cuba City received the State Medical Society's Houghton Award at the Society's Annual Meeting in April. The Award honors two Wisconsin senior medical students who "through scholastic excellence, extracurricular achievement and interest in medical organization, show a high promise of becoming a complete physician."

The recipients are chosen from the Medical College of Wisconsin and the UW Medical School and each receives \$100 and a trophy.

To make the selection, the Board looks for a student who not only demonstrates high scholastic achievement, but who is active in medical school affairs and related activities.

Bussan received the Charles Russell Bardeen Award for his excellent work in anatomy and the Phillips Award in his junior year.

Health Manpower Post to Dr. Korst

Dr. Donald R. Korst, '48, professor of medicine and director of the Independent Study Program at the UW Medical School, has been appointed special assistant to the director of the Bureau of Health Manpower in Washington. He also became a visiting scholar to the Lister Hill Center for Medical Education Technology of the National Library of Medicine for one year beginning July 1. Dr. Korst will be on leave from the University during the period.

The Bureau of Health Manpower provided more than \$710 million in federal support to health profession schools, nursing schools, allied health and public health training programs, and to health professions and nursing students during the 1974 fiscal year.

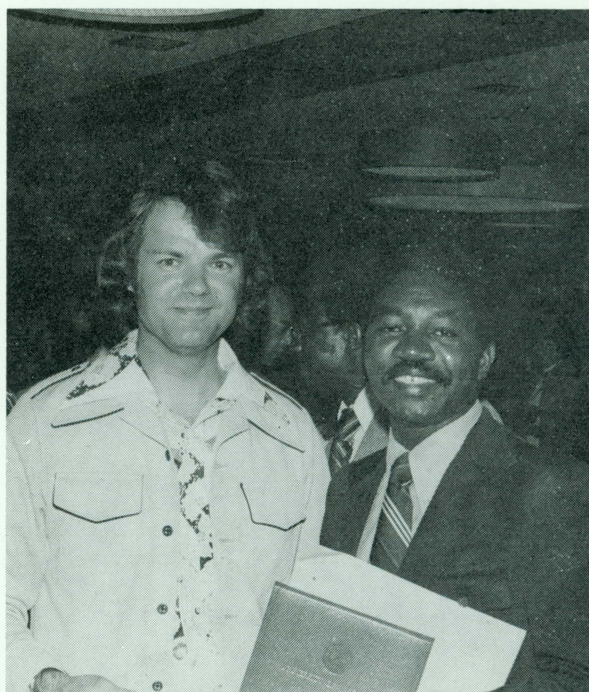
Dr. Crowley has appointed Associate Dean Dr. Thomas C. Meyer as director of the Independent Study Program during the interim.



The Class Of 1975

One hundred nineteen members of the Class of 1975 also enjoyed Medical Alumni Day, just 24 hours before they received their Doctor of Medicine degrees. In these scenes, (above) two presidents converse Friday morning at the continental breakfast prior to the program. (L. to r.) Pres-elect Roger I. Bender, '43, Beaver Dam; Dr. E. N. Stadel, '29, Reedsburg; and Senior Class President Connie M. Smith, Grafton.

(Above, r.): The Class of 1975's "Urethra Lindgren and the Incontinents" provided the Alumni Banquet entertainment. (Right): 1975 classmates Gary B. Zoellner (l.) Marshfield, and Aley S. Tucker, Sierra Leone, have just had "M.D." added to their names. (Lower right): Drs. Susan R. Behrens (l.), Brodhead, Ann M. Rock, Superior, and James R. Westphal, Manitowoc, inspect a "sheepskin" at the post-graduation reception. (Below): Dr. Gary M. Losse, '75, Neenah, still in his graduation robes, sits at the reception with family and friends.



119 Graduate with Class of '75

Late last month the 119 members of the Class of 1975 began post-doctoral education in 29 states, Canada, the Canal Zone and District of Columbia. A record 35 remained in Wisconsin and another 20 remained in the Midwest. California attracted 13, Arizona 10.

This year's listing of addresses includes the new graduate's post-graduate program as an abbreviation after the city. The codes: AN—anesthesiology; FP—family practice; FX—flexible program; IM—internal medicine; OB—OB-Gyn; PA—pathology; PD—pediatrics; PY—psychiatry; SU—surgery; Rd—radiotherapy.

If there's a new '75 UW medical graduate in your area, why not look him or her up?

ARIZONA
Donald W. Hassemer
Good Samaritan Hosp.
Phoenix FP
John W. Herm
Maricopa Co. Gen.
Phoenix OB
Frank Iorio
Tucson Medical Ctr.
Tucson S
John A. Kozarek
Good Samaritan Hosp.
Phoenix IM
Charles M. LaBuw
Un. Ariz. Aff. Hosps.
Tucson P
David A. Lavrinets
Maricopa Co. Gen. Hosp.
Phoenix IM
Michael C. Meythaler
Un. Ariz. Aff. Hosps.
Tucson FP
Gary L. Peterson
Maricopa Co. Gen. Hosp.
Phoenix IM
Ann M. Rock
Maricopa Co. Gen. Hosp.
Phoenix FX
Frederick L. Zwartverwer
Phoenix Hospitals
Phoenix PD

ARKANSAS
John E. Laabs
Univ. Ark. Med. Ctr.
Little Rock FP
Thomas H. Williams
Univ. Ark. Med. Ctr.
Little Rock FP

CALIFORNIA
Elpidio T. Ayala
Kern County Gen. Hosp.
Bakersfield IM
A. Lorris Betz
Univ. Calif. Hosps.
San Francisco PD
Mary E. Gales
LAC-USC Med. Ctr.
Los Angeles PD
Michael A. Gales
LAC-USC Med. Ctr.
Los Angeles PY
Mark W. Light
LAC-USC Med. Ctr.
Los Angeles SU
Karen J. Lindsay
LAC-USC Med. Ctr.
Los Angeles IM
Gary M. Losse
St. Mary's Hosp. Med. Ctr.
San Francisco SU
Jeffery G. Mace
Stanford Univ. Med. Ctr.
Stanford IM
Paul W. Phillips
Sacramento Med. Ctr.
Sacramento FX
Frank P. Polyak
Harbor General Hosp.
Torrance IM
Cary S. Sternick
LAC-USC Med. Ctr.
Los Angeles PY
James R. Westphal
Stanford Univ. Med. Ctr.
Stanford PY

Harold W. Wilkie, Jr.
St. Mary's Hosp. Med. Ctr.
San Francisco IM

CANADA
Michael F. McCaskill
Vancouver Gen. Hosp.
Vancouver FP

CANAL ZONE
Roy D. Ozanne
Gorgas Hospital
Balboa Heights FX

COLORADO
Armin I. Feldman
Univ. Colo. Med. Ctr.
Denver PY
Richard N. Foltz
Presbyterian Med. Ctr.
Denver SU

Christopher L. Larson
Presbyterian Med. Ctr.
Denver FX
David R. Lindgren
St. Joseph's Hospital
Denver OB

Richard F. Wagner
St. Luke's Hospital
Denver FX

CONNECTICUT
Richard A. Pope
Univ. Conn. Affil. Hosps.
Farmington IM

DISTRICT OF COLUMBIA
Errol A. Segall
D.C. General Hospital
Washington IM

FLORIDA
Brian G. McKay
Tampa General Hosp.
Tampa OB

ILLINOIS
James D. Bowman
St. Francis Hospital
Peoria FP

Gary A. Schmidt
U. Ill.-Peoria Med. School
Peoria FP
Lea G. Watts
Rockford Med. Ed. Found.
Rockford FP

Tighe E. Zimmers
Cook County Hospital
Chicago IM

IOWA
Kathleen M. Barkow
Univ. Iowa Hospitals
Iowa City PD

Warren E. Gall
Univ. Iowa Hospitals
Iowa City SU
Thomas T. Midthun
Univ. Iowa Hospitals
Iowa City FP

KANSAS
Robert F. Stader
St. Joseph's Hosp.
Rehab. Ctr.
Wichita FP

MARYLAND
Josef M. Neu
Johns Hopkins Hosp.
Baltimore PD

MASSACHUSETTS
Robert G. Sonntag
Framingham Union Hosp.
Framingham IM

MICHIGAN
John L. Ehlert
St. Mary's Hospital
Grand Rapids FX

Stephen H. Kliman
Detroit Med. Ctr. Hosps.
Grace Hospital
Detroit IM
Terrance M. Scheid
Wayne State Univ.
Detroit OB

MINNESOTA
Mary M. Gallenberg
Mayo Grad. Med. School
Rochester OB

James P. Gierahn
Univ. Minn. Hosps.
Minneapolis IM
John G. Haidinyak
Mayo Grad. Med. School
St. Mary's Hospital
Rochester AN

Thomas J. Pokora
Univ. Minn. Hosps.
Minneapolis PD
Richard C. Sazama
Univ. Minn. Hosps.
Minneapolis SU

MISSOURI
Paul J. Shaffer
Barnes Hospital Grp.
St. Louis PA

NEW HAMPSHIRE
Paul H. Hinderaker
Dartmouth Affil. Hosps.
Hanover IM
Anthony J. Richtsmeier
Dartmouth Affil. Hosps.
Hanover PD

NEW JERSEY
Alex S. Tucker
Raritan Valley Hosp.
Greenbrook SU

NEW MEXICO
David C. Zoschke
Univ. N. M. Affil. Hosps.
Albuquerque IM

NEW YORK
William R. Deshur
N. Y. Univ. Med. Ctr.
New York SU

Ada M. Fisher
Highland Hospital
Rochester FP

Connie M. Smith
Univ. Rochester Assoc.
Hosps.
Rochester IM

Warren W. Wetzel
Bronx Mun. Hosp. Ctr.
Bronx SU

Patrick C. Maginn
Good Samaritan Hosp.
Portland SU
Richard C. Wopat
Univ. Oregon Med. Ctr.
Portland FP

PENNSYLVANIA

Donald C. Dafoe
Univ. Penn. Hosps.
Philadelphia SU
Margaret M. Olsen
Hershey Medical Center
Hershey SU

RHODE ISLAND

William J. Lasher
Brown Psych. Trg. Prog.
Providence PY

TENNESSEE

C. Michael Bowman
Vanderbilt Univ. Hosps.
Nashville PD

TEXAS

Gregory H. Dehmer
U. Texas SW/Parkland
Dallas IM

Carlton Y. Lee
Methodist Hosp. of Dallas
Dallas SU

James R. McGuire
Univ. Wash. Affil. Hosps.
Seattle PY

John L. Vander Heyden
Sacred Heart Med. Ctr.
Spokane FX

WEST VIRGINIA

Susan A. Schmitt
Charleston Area Med. Ctr.
Charleston FX

John M. Thompson
Charleston Area Med. Ctr.
Charleston FX

WISCONSIN

Reuben J. Adams
Lutheran Hospital
La Crosse IM

Mark H. Attermeier
Family Practice Center
Eau Claire FP

James W. Bayuk
Lutheran Hospital
La Crosse FX

Susan F. Behrens
Lutheran Hospital
La Crosse SU

Warren J. Bilkey
St. Luke's Hospital
Milwaukee FP

Gerhild F. Bjornson
University Hospitals
Madison PA

Kenneth L. Bussan
University Hospitals
Madison IM

Edward F. Cody
Deaconess Hospital
Milwaukee FP

William J. Dempsey
University Hospitals
Madison RD

Michael J. Flanigan
University Hospitals
Madison IM

Stephen D. Guthrie
University Hospitals
Madison SU

Bruce G. Hanson
Center for Health Sciences
Madison FP

Paul G. Harkins
University Hospitals
Madison OB

Robert C. Hert
University Hospitals
Madison AN

Murray L. Katcher
University Hospitals
Madison PD

David H. Klehm
Deaconess Hospital
Milwaukee FP

Robert W. Krieger
Milw. Children's Hospital
Milwaukee PD

Gerry K. Larmore
Center for Health Sciences
Madison FP

Charles R. Leadholm
Mount Sinai Med. Ctr.
Milwaukee IM

Robert F. Lemanske
University Hospitals
Madison PD

John W. Linstroth
Mt. Sinai Med. Ctr.
Milwaukee IM

Ricardo V. Lloyd
University Hospitals
Madison PA

Robert W. Marek
St. Joseph's Hospital
Marshfield FX

John M. Mueller
Center for Health Sciences
Madison FP

David S. Nash
Mt. Sinai Med. Ctr.
Milwaukee OB

Dennis K. Ness
Family Practice Center
Eau Claire FP

Nancy Buck Ness
Family Practice Center
Eau Claire FP

Robert W. Rakow
University Hospitals
Madison PY

Ted O. Reinke
Lutheran Hospital
La Crosse FX

Richard J. Romeis
St. Joseph's Hospital
Marshfield IM

Ronald R. Sommerfeldt
Mt. Sinai Med. Ctr.
Milwaukee IM

Karl I. Strelnick
University Hospitals
Madison PY

Nancy E. Thorn
University Hospitals
Madison AN

Lance E. Zernzack
Center for Health Sciences
Madison FP

Gary B. Zoellner
University Hospitals
Madison SU



NORTH CAROLINA
James R. Thiel
N. C. Baptist Hospital
Winston-Salem PY

OHIO
Daniel W. Herrell
Cleveland Clinic Hosps.
Cleveland IM

Nancy C. Herrell
Case Western Reserve
Cleveland PD

Marc Rasansky
Cleveland Met. Gen. Hosp.
Cleveland IM

OREGON
Michael J. Hawes
Good Samaritan Hosp.
Portland IM

Steven A. Mudrovich
Methodist Hosp. of Dallas
Dallas IM

Kathleen A. Stanley
Methodist Hosp. of Dallas
Dallas IM

VIRGINIA

Alf E. Wyller
Univ. Virginia Hospital
Charlottesville OB

WASHINGTON

Charles N. Buser
Sacred Heart Med. Ctr.
Spokane FX

Larry W. Einspahr
Univ. Wash. Affil. Hosps.
Seattle PY

Dr. Donald W. Fink, '56, Denver, in September will begin a two year term as president of the Colorado Radiological Society.

After five years of family practice at Antigo, Dr. Theodor Habel, '66, has switched to full time ER work at St. Francis Hospital in La Crosse. The family lives in Westby, where they're starting a committee to help the nearby Living Waters Bible Camp.

Four alumni were among 22 physicians honored for 50 years of medical service to Wisconsin residents at the State Medical Society's annual meeting in April. They were: Drs. Charlotte J. Burns, Int. '25-26, Madison; Harold J. Dvorak, '25, Milwaukee; Frederick G. Heidner, '24, Milwaukee; and Lester W. Paul, Res. '30-31.

Dr. Vernon J. Hittner, '22, Seymour, recently was named the city's 1975 outstanding citizen. He founded the Hittner Clinic and has been in active practice for 52 years. Dr. Hittner is 77.

For the past two years Dr. Kenneth R. Miller, Medicine Res. '70-73, has been an associate of the McAlester Clinic Group, McAlester, Okla. He is practicing general internal medicine.

The *Wisconsin Alumnus* reported this spring that Dr. William A. Koelsch, '20, and Greta Schultz Kranz were married in Sarasota, Fla., culminating a romance that was postponed 55 years. Campus sweethearts at UW, each later married another

ALUMNI CAPSULES

and had been widowed. Two years ago Dr. Koelsch saw Mrs. Kranz' picture in a *UW Alumnus*, got her address and began corresponding. The marriage was performed by the groom's son, Fr. John W. Koelsch, at the home of the bride's daughter. Dr. and Mrs. Koelsch are living in Boise, Idaho.

Dr. Howard L. Correll, '35, Arena, in April became president of the State Medical Society of Wisconsin.

CDR George W. Kindschi, '68, chief of laboratory services at the Great Lakes (Ill.) Naval Hospital, recently was appoint-



George W. Kindschi, M.D.

ed assistant professor of pathology at George Washington (D.C.) and Chicago Medical Schools.

Dr. Richard C. Christensen, '67, returned from Germany early this year for a hand surgery fellowship under Dr. Ray-

mond M. Curtis in Baltimore and the Walter Reed Army Medical Center. He's residing in Wheaton, Md.

Serving a general surgery residency at Kaiser Foundation Hospital, Sacramento, Calif., and living in nearby Carmichael is Dr. Leonard V. Avedian, '70.

Dr. Donald R. Korst, '48, an assistant dean and director of the UW Medical School's Independent Study Program in April described how his program operates at the Assn. of American Medical Colleges Western Group on Medical Education in Reno.

CAPT John V. Van Gemert, '71, is serving a residency in ophthalmology at Ft. Sam Houston Medical Center, San Antonio, Tex., according to a note from his father, Dr. John G. Van Gemert, '41, Madison.

Recently named a fellow of the American College of Radiology was Dr. Robert F. Douglas, '55, Neenah. He is affiliated with hospitals in Neenah, Oshkosh and Winnebago.

Dr. George G. Stebbins, '53, was unable to attend Alumni Day and his class' 20th reunion in May because he was facing finals in Winter Haven, Fla., to becoming an ordained minister of the Episcopal Church.

Dr. John F. Morrissey, Res. '55-56, Madison, professor and vice chairman of medicine at UW, is president-elect of the

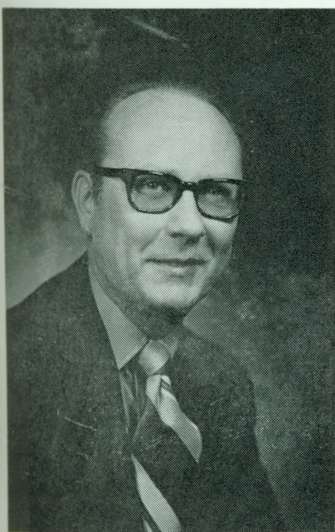
American Society of Gastrointestinal Endoscopy. He has been on the group's governing board for the past three years.

□

New president-elect of the Wisconsin Surgical Society is **Dr. Victor S. Falk, '39**, Edgerton.

□

Named first vice president of the 3,800-member American Occupational Medical Assn. in April was **Bruce E. Douglass, M.D., '42**, senior consultant in



Bruce E. Douglass, M.D.

the division of preventive medicine at the Mayo Clinic, Rochester, Minn.

□

Dr. Palmer R. Kundert, '33, chief of the medical staff at the Madison VA Hospital, earlier this year retired after serving in that capacity for eight years.

□

Anesthesiologist **David E. Goodnough, M.D., '59**, has been elected president of the medical staff at Lutheran Hospital, La Crosse. Retiring officers included **Drs. William A. Kiskin, Res. '58-63**, and **Roland A. Locher, '61**.

After a move from Galveston, **Dr. Sidney Herszenson, '72**, earlier this month began a dermatology residency at the Medical College of Virginia, Richmond.

□

Chairman of radiology at his hospital in Durham, N. C., is **Dr. Donald M. Monson, '55**.

□

LCDR William G. Lowell, '70, is one of two pediatricians at the U.S. Naval Base, Rota, Spain, and was unable to attend his class' first reunion in May. He will be in Spain until 1977.

□

New chairman of the Southern District/Arthritis Foundation of Wisconsin is **Dr. Andrew A. McBeath, '61**, head of orthopedic surgery at UW, Madison.

□

A Kalamazoo alumnus, **Dr. Clarence P. Chrest, '43N**, has been named counsellor for out-state Michigan by the Radiological Society of North America. He and 10 other radiologists have a private office and hospital practice.

□

Dr. Curtis J. Lund, '35, is professor and acting chairman of OB-Gyn at the University of Minnesota and emeritus professor and chairman of OB-Gyn at Univ. of Rochester, N. Y. He lives in the Minneapolis suburb of Edina.

□

Kenneth Salzsieder, M.D., '73, has been accepted as a cardiology fellow at Beth Israel Hospital in Boston and will do research and clinical studies.

□

Former internal medicine resident (1967-67) **Dr. C. Rodney Layton** is in Salisbury, Md., after working 16 months in inten-

sive care at Nymegen, Netherlands.

□

After U.S. Public Health Service that recently included three months of World Health Organization smallpox eradication duty in northern India, **Dr. Carlton K. Meschievitz, '73**, is back at UW Hospitals, Madison, beginning a radiology residency.

□

Board certified in family practice, **Dr. Joseph Moskowitz, '60**, was secretary and is now vice president of the Long Beach (Calif.) Academy of Family Practice.

□

Dr. Steven L. Lawrence, '70, has completed a tour of duty at the Homestead Air Force Base, Fla., and this month joined the Doctor's Clinic, Ltd., in Two Rivers to begin private family practice.

□

Dr. Martin Rammer, '59, Sheboygan, is active as president of the Fox Valley Chapter of the Wisconsin Academy of Family



Martin Rammer, M.D.

Physicians, VP of the Sheboygan County UW Alumni Club, and a Wisconsin Academy of Family Practice Hospitals Committeeman.

Classmates **Robert N. Justl** and **Richard Hanke** (1972) have graduated from UW's family practice residency and are establishing a residency-trained family practice group between Mayville and Horicon.

□
"Class of 1954! Think San Diego!" writes **Dr. Edward J. Pezanoski**. "Ask **Chuck Picus** (Rockford, Ill.). He brought the wine, Lorraine and I cooked the dinner." Ed is at 6201 Falmouth Dr., La Mesa.

□
Elected commander of the U.S. Power Squadron's District 10 this spring was **Dr. Merle L. Brose**, '46, Madison, a US Health Service staff member.

□
Dr. Patricia Randall, '66, has left Neenah to become assistant professor of radiology at the Upstate (N. Y.) Medical Center. She is doing cardiovascular radiology and resides at Fayetteville.

□
Among the new diplomates of the American Academy of Family Practice is **Dr. Ralph P. Bennett**, '51, Ladysmith.

□
Dr. Christine A. Nelson, '70, resides in Garden Grove, Calif., and is an asst. clinical professor of pediatrics at Univ. California-Irvine. She is asst. director of pediatric outpatient services at Orange County Medical Center since last July.

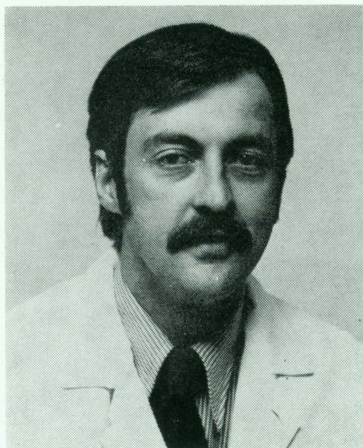
□
Dr. Herman P. Ironson, '52, has been chairman and chief of urology at Highland Alameda General Hospital since 1971.

□
Active over the years as president of the Mecklenburg County, North Carolina State and Southeastern Dermatological So-

cieties has been **Dr. David G. Welton**, '35, Charlotte, N. C.

□
Dr. Robert T. Obma, '65, La Crosse, is vice president of the Wisconsin Heart Assn. Taking over as president at the group's annual meeting last month was Warren H. Dennis, Ph.D., UW associate professor of physiology. Ernest J. Reynolds, M.D., professor of medicine at UW, was elected to the WHA board.

□
Dr. Jack Woodford, '69, has joined the staff of Children's Hospital at the University of Pittsburgh after completing his



Jack Woodford, M.D.

residency in neurosurgery at Dartmouth-Hitchcock Medical Center in New Hampshire.

□
After practicing emergency medicine at St. Mary's Hospital Medical Center, Madison, for the past four years, **Dr. Kathryn S. Budzak**, '69, in February joined the Dean Clinic in that city and established a new Urgent Care Section at the group.

□
Dr. Matthew D. Davis, Int.-Res. '50-55, professor and chairman of ophthalmology at UW, in June was a major speaker

when the National Eye Institute held its Science Writers Seminar at Bethesda, Md. He spoke on clinical trials of photocoagulation in diabetic retinopathy.

Necrology

The following alumni deaths have been reported to the Association officers:

Dr. Carl S. Harper, '16, emeritus professor of Gyn-OB and a founder of the UW Medical School, in Madison, March 31, 1975 (see story elsewhere in this issue)

Dr. Reginald W. Hammond, '24, Manitowoc, Feb. 25, 1975.

Dr. Mary R. Eleston, '25, in New York City, November 1974

Dr. James T. Lacey, '26, in Winter Haven Fla., March 15, 1975

Dr. Henry Luidens, '26, in Columbus, Ohio, Feb. 10, 1975

Dr. Charles A. Faber, '32, in Milwaukee, Feb. 15, 1975

Dr. Edgar S. Gordon, '32, professor of medicine and former UW Hospitals chief of staff, while skiing at Yosemite National Park, Calif., April 4, 1975 (see story elsewhere)

Dr. David J. Zubatsky, '33, Tustin, Calif.

Dr. Bernice Irene Stone, '34, in San Diego, Calif., March 22, 1975.

Dr. Joseph R. Richter, '39, in La Crosse, April 23, 1975

Dr. Frank J. Born, '45, Los Angeles, Calif.

Dr. Sidney Rubin, '46, in Kansas City, Mo., Dec. 14, 1974

Dr. Charles L. Stevenson, '52, Spokane, Wash., Sept. 4, 1974



This "study in lines" . . . horizontal, vertical and diagonal, is our first chance to see interior construction in the new UW Center for Health Sciences being built on the west campus. Our p'otographer shows office wall studding on one of the floors.

MEDICAL SCHOOL NEWS

Med School-La Crosse Affiliation Told

A new teaching affiliation agreement between the UW Medical School and the Gundersen Clinic, Lutheran Hospital and the Adolf Gundersen Research Foundation in LaCrosse was announced jointly this month by Vice Chancellor for Health Sciences Dr. Robert E. Cooke and Dr. Adolf L. Gundersen, president of the Gundersen Clinic.

The affiliation, through which third year UW medical students will receive training in pediatrics and anesthesiology at the LaCrosse institutions as part of their regular curriculum, began July 1. During the affiliation's first year there will be four third year UW medical students in pediatrics and two third year students in the Department of Anesthesiology at all times in LaCrosse.

Dr. Joanne A. Selkurt, '68, a UW faculty member, has accepted a position within the medical education division of the Gundersen Research Foundation and will be responsible for the third year medical student teaching program at LaCrosse.

The LaCrosse affiliation is a forerunner to the development by the University of a statewide clinical campus that will provide quality training for medical students and house officers in hospitals at medical facilities throughout Wisconsin, in addition to the historical training programs involving Madison hospitals, Vice Chancellor Cooke said.

Directors of the three LaCrosse institutions, the Board of Regents of the University of Wisconsin System and the state Medical Educational Review Committee have approved the arrangement.

"The Legislature has given the University a mandate to develop programs to counter the serious problems of too few physicians in the state, the concentration of medical care personnel in metropolitan areas, and the general lack of family practitioners to provide primary care," Vice Chancellor Cooke said.

"We have developed the statewide clinical campus concept, which will involve community facilities throughout Wisconsin, in support of this mandate.

"The LaCrosse affiliation being announced today is a superb antecedent to the statewide clinical campus program which will become a reality when funding is made available from the State Legislature," Dr. Cooke said.

"The traditional excellence of patient care at LaCrosse fits in extremely well with the University of Wisconsin ideal to provide the best possible setting in which to train our medical students," Dr. Cooke said of the affiliation. "It is an outstanding institution in which educational and training resources abound and which can be expanded upon in the future."

In addition to Drs. Gundersen and Cooke, those who assisted in developing the affiliation agreement included Dr. Kermit Newcomer, executive vice president of the Gundersen Clinic; Dr. Edwin Overholt, director of medical education at Gunder-

sen Clinic; Dr. George I. Lythcott, associate vice chancellor for health sciences at UW-Madison; and Dr. Bernard Nelson, associate dean for academic affairs at the Medical School.

Dr. Overholt, through a faculty intermediary in the appropriate discipline at the clinic, will work with the chairmen of Anesthesiology and Pediatrics at Madison in supporting details of the student training programs.

Announcement of other affiliation agreements was imminent as the *Quarterly* neared its press deadline.

Dr. Edgar Gordon Dies in California

A rescue team searching for a lost group of hikers in Yosemite National Park, Calif., on May 26 discovered the body of Dr. Edgar S. Gordon, '32, professor of medicine and chief of staff at University Hospitals, Madison. Dr. Gordon had been missing since April 4, when he became separated from his son, Robert, on a cross-country skiing trip.

Three feet of snow from a freak spring storm hampered a weeklong search by up to 75 persons. Dr. Gordon had been lightly clad and carried no food. The short side-trip with his son was part of attending the American College of Physicians meeting in San Francisco. Exposure was ruled the cause of death.

Dr. Gordon was a widely known nutritionist and an active proponent of regular physical exercise as a defense against heart disease.

Dr. Gordon, age 68, had lived in Madison since 1917. He received his bachelor's degree from UW in 1927 and took his first two years of medical training at Wisconsin before going to Harvard, where he received his M.D. in 1932.

After an internship at Billings Hospital at the University of Chicago, Dr. Gordon served residencies at Massachusetts General and University Hospitals, Madison. He was a member of the UW medical faculty since 1935 and was promoted to full professor in 1953.



Dr. Gordon was chief of the University's metabolism and endocrinology clinic as well as senior attending physician at UW Hospitals. He was a diplomate of the American Board of Internal Medicine and a fellow of the American College of Physicians. His activities included consultant to the Oak Ridge Institute of Nuclear Studies and to the National Aeronautics and Space Agency (NASA).

His membership in medical organizations included the American Society for Clinical Investigation and president (1953) of its central society.

Dean Lawrence G. Crowley said Dr. Gordon was greatly loved by his medical students, patients and colleagues. "The school will miss his services, which have been outstanding over the years, both as a teacher and as a researcher," the dean said.

Dr. Gordon is survived by his wife, Lola, two sons and a daughter. Memorial services were held at Madison's First Congregational Church on June 2 and an Edgar S. Gordon Memorial Fund was established at the UW Medical School in lieu of flowers.

Preceptors Magnin, Senty are Honored

Two Wisconsin physicians, both internists and UW medical graduates, were the ninth and 10th recipients of the Max Fox Preceptorship Award for 1975.

Dr. George E. Magnin, '46, Marshfield, and Dr. Robert M. Senty, '47, Sheboygan, were presented the citation for long service to medical education at Alumni Day ceremonies in Madison.

Dr. Magnin, a preceptor in Marshfield since 1952, was responsible for getting over 135 senior medical students a taste of group medical practice in a medium-sized community over the past 23 years. Associated with the Marshfield Clinic, Dr. Magnin is a Fellow in the American College of Physicians.

A preceptorship in Sheboygan from 1958-74, Dr. Senty helped guide the medical careers of almost 100 senior UW medical students. He is certified by the American Board of Internal Medicine and also served as a director of our Wisconsin Medical Alumni Association for the past three years.

The Max Fox Preceptor Award is sponsored by the Alumni Association and honors physicians for their efforts in developing medical preceptorship in Wisconsin.



Drs. George E. Magnin, '46, (left foreground) Marshfield, and Robert M. Senty, '47, Sheboygan, chat in the audience after just having received the 1975 Max Fox Preceptor Award at Alumni Day on May 16.

Peterson Named Allied Health Dean

Appointment of John L. Peterson, Ph.D., New Orleans, La., as a professor and dean of the School of Allied Health Professions has been announced by Vice Chancellor for Health Sciences Dr. Robert E. Cooke. Dr. Peterson most recently held a similar position at Louisiana State University (LSU) Medical Center.

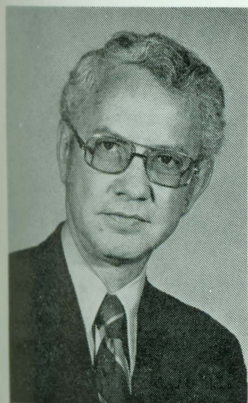
Dr. Peterson became the new school's first dean on July 1. His appointment follows a six month

nationwide search for a person to head the school that will bring together teaching of professionals in the physician assistant, medical technology, occupational and physical therapy fields.

The school was established in 1974 to coordinate the four programs' common strengths while at the same time empha-

sizing their highly specialized functions. It will seek to develop new kinds of health care personnel utilization, better personnel distribution and more comprehensive health care services.

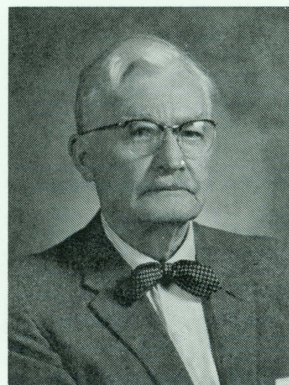
Under Dean Peterson the school will provide new programs that respond to the public's needs and to opportunities offered by scientific advances. During the 1974-75 year there were over 800 students in the four programs.



Dr. Carl S. Harper Dead at 82

Carl Samuel Harper, M.D., '16 . . . a founder of the University of Wisconsin Medical School . . . first physician to practice OB-Gyn in Madison . . . star UW athlete . . . died in Madison March 31. He was 82. Dr. Harper had retired as professor emeritus in 1962 but still performed surgery at age 70.

A Madison resident most of his life, Dr. Harper



in 1913 and 1914 was All-Big 10 guard on Wisconsin's basketball team that lost only one game in three years. He was named to an All-American team those years. Graduating in Pre-Med from Wisconsin in 1914, he coached freshman basketball at Pennsylvania, where he earned his M.D. in 1916.

After internships in Philadelphia and Brooklyn and service in France and Germany during WW I, he returned to practice in Madison for a year before taking an OB-Gyn residency. He returned to Madison's Jackson Clinic in 1921, where he remained for 13 years. Dr. Harper joined the UW faculty that same year and also coached freshman basketball and assisted with the varsity.

He was as well known for his outstanding athletic and coaching records as he was for his medical contributions. He was named to the Madison sports Hall of Fame in 1969.

Dr. Lobeck to be Dean at Missouri

Dr. Charles C. Lobeck, associate dean and director of clinical affairs at University of Wisconsin Hospitals on September 1 will become dean of the University of Missouri Medical School. The former chairman of pediatrics (1964-74) and UW faculty member since 1958 was chosen from a field of 197 nominees, it was reported last month. He assumed the associate deanship and UW Hospitals post last fall.

Neurophysiology's Dr. Woolsey Retires

Forty two years ago when Clinton N. Woolsey received his medical degree from Johns Hopkins, he planned to become a "brain surgeon". "That's what a neurosurgeon was called in those days," said Dr. Woolsey. But while he was in medical school, one of his professors suggested that he work in a research laboratory to develop his manual skills. He joined a laboratory conducting neurophysiological experiments investigating how the nervous system works and how it relates to body functions.

That was the beginning of a life-long career in basic scientific research. Today Dr. Woolsey is internationally known as a research neurophysiologist and has been the mentor of scores of researchers and teachers throughout this country and the world who specialize in the neural sciences.

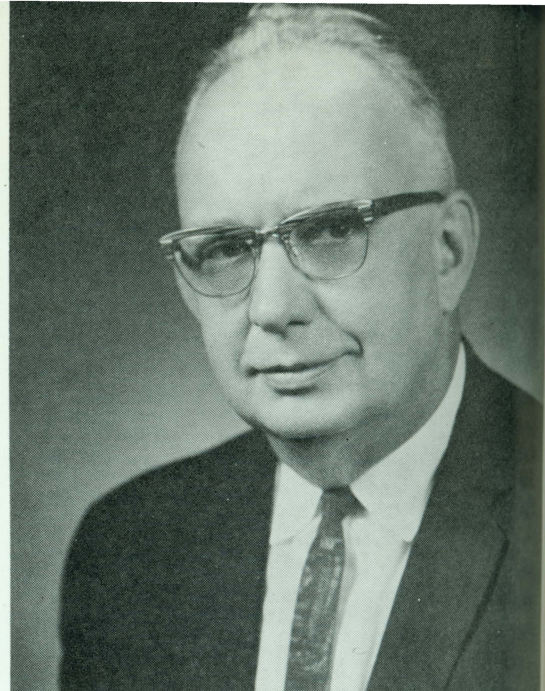
Dr. Woolsey retired as professor of neurophysiology at the end of June but is continuing as coordinator of the Biomedical Sciences Unit at the Waisman Center on Mental Retardation and Human Development.

When he came to Wisconsin from the Johns Hopkins faculty in 1948 as the Charles Sumner Slichter Research Professor, Dr. Woolsey had a mandate from the university to develop a research program in the study of the nervous system. Over the past three decades he has built an interdisciplinary program which has combined the talents of basic scientists in such fields as anatomy, physiology, and psychology, as well as neurologists, neurosurgeons, computer scientists and engineers to investigate the brain and how it works.

"Localization of function — that has been the key to our research over the years," said Dr. Woolsey. "We have tried to map the brain to find out which areas affect particular motor activities and sensory processes such as hearing, vision and the sense of touch."

Electrical recording methods for studying the brain were just being developed when Dr. Woolsey was a medical student. New techniques have been developed and expanded at Wisconsin, including applications of computer technology. Using these methods, research neurophysiologists at Wisconsin

(EDITOR'S NOTE: Dr. Woolsey was one of several faculty members who retired this summer. Space limitations in this issue force postponing other stories until Fall.)



have conducted comparative studies of the nervous system in many kinds of animals.

"We place electrodes at specific sites in the brain and then stimulate a certain part of the body and monitor the electrical response," said Dr. Woolsey. This kind of experimenting is not painful to the animal, since it is done under anesthesia, and it yields a great deal of information about how the brain functions.

"In comparative studies it has been found that the elaboration of certain parts of the brain corresponds to well-developed functions in the animal. For instance, the raccoon explores the world around him with the palms of his front paws. Therefore the part of his brain which is most well developed is that which receives stimuli from his palms and controls the movements of the forepaws."

The research program in neurophysiology was initially developed in the Physiology Department. With construction of the Medical Sciences Building in 1960, the Laboratory of Neurophysiology achieved independent status and in 1973 became the Department of Neurophysiology.

Dr. Woolsey has served as a member of and consultant to many national and international health and research organizations, while at the same time serving the local university community through such activities as the University Research Committee. He is the author of over 60 papers in neurophysiology research. Among various honors he has received was election to the National Academy of Sciences in 1980.

Commenting on Dr. Woolsey's retirement, Vice-Chancellor Robert E. Cooke stated that he has made outstanding contributions to the development of the neurosciences at Wisconsin, both by his own research and through the sustained federal funding he has



Most of the 18 students and faculty cited at the April 18 honors convocation are pictured here with Dean Laurence G. Crowley. They are (l. to r.): Susan Stickels; Richard Wopat; Michelle Zaniewski; Stephen Guthrie, Ph.D.; Satoshi Mizutani, Ph.D.;

Jerel Berres; Kenneth Bussan; A. Lorris Betz; Ty Goletz; Daniel Smith; William Croft, M.D., Ph.D.; Brian Lochen; Armin Feldman; Laurence White; Carter Noble; Alan Jacobs; Dean Crowley.

secured to support development of a broadly interdisciplinary team of investigators operating in unexcelled research facilities.

Establishment of the Woolsey Lectures in Neuroscience was announced at a retirement party held in his honor June 30. The lectureship was established "in recognition of his distinguished contributions to neurophysiology and in gratitude for the warm and uniquely stimulating research environment he created at the University of Wisconsin," according to a statement by his Department of Neurophysiology colleagues. The program will bring distinguished speakers in the neurosciences to Wisconsin each year.

Alumni wishing to contribute may send checks to "University of Wisconsin — Woolsey Lecture Fund", UW Medical School, #758 WARF Building, Madison 53706, according to Associate Dean Ralph Hawley.

Although Dr. Woolsey has retired as professor of neurophysiology, he will continue the research which has been his life's work. "We have learned a great deal about the brain in the past half century," said Dr. Woolsey, "but it is really only a beginning in understanding the complex and fascinating ways in which the nervous system functions."

Zografi is New Pharmacy Dean

George Zografi, Ph.D., has been appointed dean of the School of Pharmacy at Wisconsin. The appointment by Vice Chancellor Dr. Robert E. Cooke was approved by UW System Regents in June. Dr. Zografi, a professor of pharmaceuticals and a faculty member at the school since 1972, succeeds Dean David Perlman, who is returning to teaching.

"We're absolutely delighted that Dr. Zografi has accepted the deanship," said Vice Chancellor Cooke.

"He brings a youthful vigor and a real commitment to making pharmacy a more useful field in relation to medicine and nursing."

Prof Zografi is the fifth head of the UW School of Pharmacy, which was established in 1883 as a department of the College of Letters and Science, and became a school in 1950. The school has graduated over 4,000 pharmacists during its 92 years and introduced the nation's first baccalaureate, first master's and first Ph.D. courses in pharmacy.

A native of New York City, Dean Zografi is 39. He received his B.S. in pharmacy from Columbia University and master of science and Ph.D. from the University of Michigan.

VA Posts to Drs. Whiffen, Goodfriend

Dr. James D. Whiffen, '55, on July 1 became chief of staff of the Madison Veterans Administration Hospital. Dr. Whiffen, professor of surgery at UW and a faculty member since 1962, replaces Dr. Palmer R. Kundert, '33, who retired as VA Hospital chief of staff earlier this year. Dr. Whiffen was acting chairman of surgery at UW from March 1972 until January 1 of this year.

Also effective July 1 was the naming of Dr. Theodore L. Goodfriend as the Madison VA Hospital's associate chief of staff for research. Dr. Goodfriend, professor of medicine and pharmacology, has been a UW medical faculty member since 1965.

COLUMNS AND EDITORIALS

What Makes An Alumnus Tick?

BY ROGER I. BENDER, M.D., '43
PRESIDENT

BEAVER DAM — What makes an alumnus tick? Why does an alumnus keep active? How does an alumnus promote? And, when does an alumnus serve?

Stimulation from associates, friends and from our school create the reasons why we maintain our interest. No organization can survive without stimuli. We must be continually encouraged to accept the



responsibility of maintaining our relationships with other alumni and our medical school.

To promote the progress necessary for creating an active, interested alumnus, projects must be established to stimulate interest in the organization. These projects frequently require money. The young alumnus

rarely has access to funds and when he or she does accumulate a surplus the first priorities include family, relaxation and survival programs. The alumni association is of limited importance, if not farthest from his mind at this time. The lack of contact and stimulus during these first few years aids in divorcing the alumnus from a sense of loyalty for his *alma mater* and his classmates.

We as senior members must demonstrate to the younger ones by increased donations of time and money that we are competent and willing to maintain the Association until such time that the young become more dedicated.

The new alumnus can help the alumni association by selling his school, his experiences and his pride in the faculty. As he spreads the word, he'll reinforce his own thinking and when financially able will begin to support the association.

The age of service arrives with the advent of medical and financial security. With this thought, I

say to the recent graduates: Don't forget your school, the faculty, your classmates, your predecessors and successors so that when time and money become surplus, your energies will turn to our alumni association.

That's what makes an alumnus tick.

We Are An Association!

BY MISCHA J. LUSTOK, '35
EDITOR

MILWAUKEE — If you have any doubts about the verile growth of the Wisconsin Medical Alumni Association, you should have been at our last Alumni Day and class reunion celebration. In spite of competition from the almost irresistible warm sunny weather, the old S.M.I. lecture hall was filled for the presentation program. The luncheon meeting at the Wisconsin Center, attended by both the alumni and their spouses, filled the large dining room area to capacity. The evening banquet arranged with



identity clusters around tables taxed the accommodation of the spacious ballroom at the new Madison Concourse (ne Hilton), and let a little room for wandering around the happy groups of faculty, alumni, graduating students and their families.

After the presentation of honors, and blissful short speeches, no one wanted to go home and new friends milled about in enjoyment of the company. Reunioning classes held their special private parties before and after the general Alumni Day and spilled over into three hotels. Assured we are now a really big organization, and there lurks a real danger.

Women in Medicine

BY KATHE BUDZAK, M.D., '69
MEMBER, EDITORIAL BOARD

We were born of an idea impregnated by a small group of Wisconsin Medical School graduates who were friends while in school and who felt that the warmly shared experiences of those years need not be aborted, but could be nurtured into a different, perhaps more mature but no less enriched fellowship of an alumni body. Support of our school became a rallying point, but conviviality and camaraderie was the intrinsic motivation and basic purpose. Disciples arose from alumni scattered all over the country and our grand company was launched.

Meetings were planned and held. Committees were organized. Work for the Alumni Association became a labor of love. Magically, in the convulsion of birth and the turbulence of early growth we never lost the personal touch. There was sincerity in the welcoming handshake and delight in the pleasure of each other's company.

The common experience of the school years, with overlapping anecdotes, erased the spread of time. Each meeting brought the excitement of a face not seen for years, of stories often told and improved at each telling, the renewal of old friends and the treasure of making new friends. Above all was the holiday of return to the mutual fountain from which we all drank so deeply. That is why we grew in number.

There is hidden danger in this success story. Seduction by the numbers game is the great peril. A big organization tends to become just that — a big organization. Administrative details, formal reports, actuarial tables, logistical directives and structured ceremonials soon dominate the scene and impoverish the spontaneity of the conclave.

The emphasis is on how many were there rather than who was there. The welfare of the whole overshadows the personality of its constituent parts, and the depersonalizing process begins. We now face this hazard.

We need not succumb. Our leadership will sound the alarm. Large groups can exude larger warmth, more people can become more friends, more friends can expand more vistas, and growth in spirit can surpass the growth in numbers. We must always remember that we are an alumni **association** — not an organization, and vigilantly guard that role.

MADISON — Medicine traditionally has been a masculine profession. Cultural conditioning has resulted in a role stereotype and innocent sounding "Nurse Nancy" and "Doctor Dan" in children's books perpetuate the previously accepted patterns. In the past women have been considered superfluous as they may marry, bear children and not practice medicine. Some women have been made to feel they didn't have the right to study medicine as they were taking the place of a man who would be more serious about a career.

However, medicine has not been left out of the upheaval over the role of women. Women are choosing medicine as well as other professional and non-traditional roles because they offer satisfaction as a woman and fulfillment as a person and as an individual who has a contribution to make to society. Changing attitudes of society are encouraging girls to aspire to a career. No longer are medicine, marriage, and maternity mutually exclusive.



As a by-product of the women's liberation and consumer's movement, some women patients are seeking out women physicians, feeling they may be able to talk more easily to another woman and exercising their right to be informed and make decisions regarding their bodies. To some patients the compassionate maternal image is less threatening.

A definite turning point has been reached in the past five years when female enrollment in U.S. medical schools rose from 9% in 1970 to almost 22% in 1975 and predictions of at least 30% by 1980. At present the U.S. ranks fourth from the bottom (above Spain, Madagascar and South Vietnam) with 8% of the nation's M.D.s being female.

The goal of developing an identity as a physician is common to all medical students. Being a para-

doxic profession, medicine combines traditionally female caretaking with judgment and commitment, typically viewed as masculine traits. In the context of a man's world, the woman student must define her identity as a woman and cope with threats to her ability to remain feminine and to be a doctor. The difficulty of combining family and a career is seen as a problem only for the woman physician, although the physician father's absence may disrupt many medical families. Considerable strain is felt if the marriage is very traditional. However, in marriages where the family responsibilities are shared by both partners, both are afforded the opportunity to pursue productive careers.

Many forces currently are attempting to assist and influence prospective and current women in medicine. Increased flexibility in curriculum and residency programs is well underway with pilot programs in a wider range of specialties being established. Although training in some specialties is still difficult for women to obtain, there are ample opportunities for women to have regular hours through group practice and specialties such as radiology, ophthalmology and emergency medicine.

There are also an increasing number of men with flexible attitudes which permit them to become the stabilizing factor in the household in which the woman chooses to pursue medical training and practice with conventional time commitments.

Some practicing women physicians are providing positive roles from the high school level on to female med student groups with the hope of altering cultural conditioning regarding combining a career with a family. Active participation in career day and interim programs at local high schools can give motivated students the encouragement they so eagerly desire.

Positive attempts to broaden the thinking of the younger generation within our own families and friends regarding "traditional" vocations are essential for their own growth and fulfillment as well as the medical profession.

Southwest/Wisconsin News Items

BY JEROME F. SZYMANSKI, M.D., '57
SOUTHWESTERN CORRESPONDENT

PHOENIX — Time-Life's "The Mountain States" tells me, "Nevada is a bleak, rolling plateau inhabit-

ed by ranchers and miners." I didn't know that!

But, sure enough, Millard Duxbury, '42, medicine, has been facing into the wind on the Reno plateau for the past 25 years. One of the early prospectors.

Don Wicker, '61, lives in Ely, 6,500 feet high and 300 miles north of Las Vegas, the game place. His group of four provides health services for settlers within a 150 mile radius. Non-medical activities include raising and racing Thoroughbreds.

Don Christensen, Las Vegas, at UWH '55/56, was operating when I called. He then called me and I was "operating" out of town. I called him and he had left town. We haven't heard the last of each other.

In Phoenix once again — about a year ago four 1974 graduates signed on at Maricopa County General Hospital (MCGH).

Jeff Frost completed a med internship June 28. Future plans include travel, emergency room work and eventually a residency in medicine.

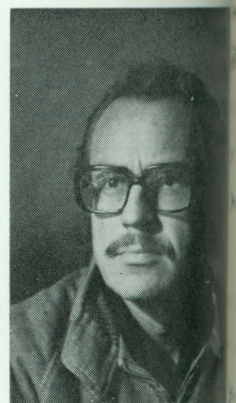
Terry Wood will be continuing in pediatrics at MCGH.

Barry Koerpel has taken a wife and med residency, also at MCGH. Judy, now a Westerner, was an Easterner from South Carolina.

Roger Lunke and wife are packing for five years of orthopedics at Mayo's.

Talking internship caused me to flash to 1958, the Marshfield Clinic, and a basketball game. It was the sporting event of the year. The city rocked with excitement. It was the Fearsome Five (Dolf, Ski pronounced "Szy"), Bob, John, and Tom) again. Bill George Mag (also did an unusual balancing act. Boltin' Ben, Hustlin' Jo Ousley, and company. The score, the score — well, it was just right.

Payson, Arizona, population 5,000, is 88 miles northeast from my office. The lone book store there is small. One day I browsed right into shopkeeper Bill Doudna. Bill recently resigned as editor of the town's weekly newspaper, "The Payson Roundup." We started talking, and, yes, you guessed it, I asked if I knew the late Dr. Ed Gordon, '32. Ed and I were classmates just a few years ago at the University of Wisconsin. But that's not all. The



classmates played together in a string quartet. Ed was featured on cello and Bill on viola. But that's not all! Ed's mother played second viola and Ed's father was the conductor.

Back in January, in Phoenix, I thought I saw a familiar face. The occasion was a symposium sponsored by Barrow Neurological Institute. The face was Paul Baumann, '57. Our last encounter was in 1960 in Wurzburg, Germany. Paul was returning from Ethiopia. What was he doing there? Jungle practice, of course. Paul has given up crocodile bites for radiation therapy in Wichita, Kansas.

Until winter . . .

News from the Northwest

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

SEATTLE — Nola and I have moved our office out the back door to a new building on the Northwest Hospital campus, so currently have a new address: Suite 110, Northwest Medical Arts Building, 1530 North 115th. We have been involved in a new course at the University of Washington Medical School for students in the Family Practice Pathway.

We've had a sophomore with us one morning a week for the full three quarters in an effort to provide continuity training on disease problems for the student. It has worked out quite well and probably will continue to be offered as a course on its own merits. Consequently we needed a bit more space, which our new office provides rather nicely.

James Baker, '70, has started the practice of pediatric allergy in Portland, Oregon. His wife, Diane Haas, is taking a fellowship in dermatology research there. Diane was an intern and dermatology resident at University of Wisconsin Hospitals from 1971-74.



Ken Feldman, also '70, is here in Seattle in pediatrics. He currently is working in the Odessa Brown Children's Clinic and playing in the mountains with climbing, hiking and skiing as off-duty pursuits.

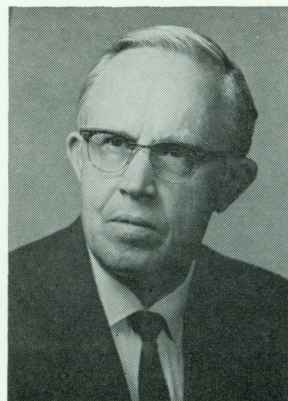
We were saddened to read of the loss of Dr. Ed Gordon in California as per *Sports Medicine* recently. He was truly a fine clinician and teacher who will leave footprints difficult to fill with a physician of equal stature.

Texas Reports

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

GALVESTON — Robert C. Landgren, intern in internal medicine ('66-67) at UW Hospitals, has been appointed assistant radiotherapist and assistant professor of radiotherapy at the University of Texas System Cancer Center, M.D. Anderson Hospital and Tumor Institute, Houston.

Marge Crumbaker's column in the May 25, Sunday *Houston Post* has this note of interest: Al Leiser, '46, has added a hobby of gold plating shark's teeth and sand dollars. A necklace made of the latter worn by his wife Marge (U.W. '45) at a recent party drew admiring glances from those present. Al had been unable to keep his friends supplied with objects of his craftsmanship.



An active participant in the scientific sessions, Texas Medical Associations annual meeting, San Antonio, was Duane Larson, '54, chief of the Shrine Burns Institute, Galveston, and professor of surgery, U.T.M.B. Joseph C. Ogle ('48-49), Dallas, presented the award for excellence in scientific exhibits at the general meeting luncheon. He is chairman of the council on scientific exhibits of the TMA and a member of its house of delegates.

James C. Huhta, a senior medical student from Superior, Wisconsin, was an able representative of

the U.W. Medical School at the 1975 SAMA-UTMB National Student Research Forum held in Galveston, April 23-26. Mr. Huhta's exhibit "Talking Computers in Medicine" featured a direct phone line to the computer located in Madison over which the computer talked to those visiting the exhibit. This exhibit was one of five semifinalists in the SAMA-Squibb Scientific exhibits for 1975.

Visitors to the Galveston Medical School Campus included *Quarterly* correspondent Herb Lee, '35, of Richmond, Virginia. Herb was among a group of visiting surgeons who spent a morning listening to a program put on by the department of surgery at the Medical Branch. I regret that I missed Herb's phone call for I would have enjoyed visiting with him.

Another visitor was William V. Luetke, '42, who interned back in those days at the John Sealy Hospital, Galveston. Bill lives in Madison, Wisconsin. He had attended a meeting of the OB-Gyn specialists in Houston and dropped by on his way to visit his daughter at San Antonio and then to vacation a while at Brownsville.

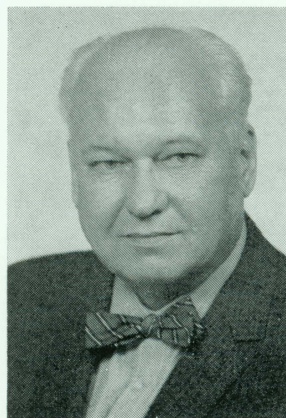
Finally, to speak about hemoglobins before the Human Biological Chemistry and Genetics Seminar at the Medical Branch on April 22, came Dr. Walter M. Fitch, Department of Physiological Chemistry at the University of Wisconsin Medical School-Madison.

An Overdue Trip to Madison

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

RICHMOND — Been traveling a lot lately. First, I went to a meeting in Houston and Galveston. It is always nice to visit there and see and hear about so many U.W. graduates who are doing so well. While in Galveston I called Ed Lefeber, '36, but he was on his afternoon off. I also tried to locate Duane Larson, '54, but was unsuccessful. My wife and I then came by Mobile, Ala., to visit our son and see our new granddaughter for a few days. Grandparents fill a special place in the lives and "loves" of the young. It's too bad they don't have them forever.

I then flew to Madison for the 40th reunion of our medical school class. About half of the original class was there. Everyone looks the same, but a little fatter and a wee bit older. I drove from



Milwaukee with Mischa Lustok and Erv Grossman and their wives. I was delighted to get to hear about the school from Mischa. He has a nice set-up in Milwaukee with the medical students supervising about 60 a year in medicine.

We met with Doctor Middleton at the V.A. Hospital and spent a delightful two hours with him. He presented a very interesting case in his inimitable way. Then he quizzed us like he did 40 years ago. After that we all sat down and chatted around a table. Doctor Middleton will be 85 next year and looks wonderful. He is as keen as ever.

We had a cocktail party and dinner at the Madison Hilton — now the Concourse. Among those present were:

John Grinde, DeForest; Bill James, Oconomowoc; Joe Stone, Erv Grossman, Al Martin and Mischa Lustok, Milwaukee; Chris Dix, Elm Grove; Charles Ihle, Eau Claire; Kan Manz, Neillsville; Jerry Cooper, Madison; Sam Behr, Rockford, Ill.; Frank Elson, Huntington, N. Y.; Herb Krieger, North Hollywood, Calif.; Richard Dickman, Bakersfield, Calif.; and Esther Caldwell, Foster City, Calif.

We had hoped Betsy Owen Steele would be there, but she had been in Madison about a month earlier. Everyone who saw her reported that she was still a "beauty" with the same old glint in her eyes. The next day was spent at the medical school with a banquet in the evening. The new medical school building out near the base of Picnic Point is going up and looks beautifully planned. It is near the V.A. Hospital. Mischa and Jerry had prepared a little brochure with a picture of our graduation class and a resume of each member, i.e., what he is doing, names of wives and children, professional activities, hobbies, etc. It was a great occasion, even though Madison is hard to recognize as we remember it.

I have a few notes of three 1970 graduates: George F. Wittkopp, 3905 Garrett Road, Duluth, Minn.

N. C. 27707, and his wife, Beverly have a son born last August. He is in a first-year residency in psychiatry at Duke and his wife is in pediatrics.

Daniel N. Wochos, 858 Nopales, Myrtle Beach AFB, S. C. 29577, and his wife, Barb have two children, one 3 years and one ½ year old. He was an internist in USAF, and began a nephrology fellowship at Mayo Clinic this month. He has his internal medicine boards and is a member of the American College of Physicians. He sees little future in the USAF Medical Corps.

Fred H. Goldner, 13113 Dauphine Street, Wheaton, Md. 20906, and his wife, Anne have two children, 4½ and 2½ years of age. He has a GI fellowship at Walter Reed in Washington. He has a few more years in the army and then hopes to take a fellowship in hepatology.

I always appreciate news of graduates in this area. So please keep the news coming.

Peace.

Subtle Sexism

BY CONNIE M. SMITH, M.D., '75
SENIOR CLASS PRESIDENT

MADISON—As the first woman president of the UW Medical School class, and thus the first to prepare this column, I could not let the year go by without writing something about women in medicine. This is difficult (you'll notice I've procrastinated to my final column) for several reasons. I find it hard to verbalize my thoughts about the discrimination against women which is often so subtle. This is especially true when I am in the position of speaking for fellow women students as well as myself. Thirdly, it is just plain difficult to write! One's language skills deteriorate markedly thru four long years of multiple choice questions, SOAP notes and concise H&P's!

Most medical school pressures have been common to both men and women in my class. Over the four years, however, I have noted a highly significant use in my "women's lib title," in response to what I believe to be a constant "subclinical" exposure to discrimination.

Previously I was quite content with my treatment as a woman and to be a good sport laughed

off the small sexist things which happen every day. I am no longer content, and have become much more aware and outspoken thru four years of medical school.

I think it can safely be said that overt discrimination against women is rare, at least in the setting of a university medical center. There remain a very few faculty, and even house staff, who believe



women do not belong in medicine, and/or treat them as second class citizens who really belong in the kitchen or the bed. There are also a very few major texts which retain outdated ideas about the female psyche and sexuality.

Subtle sexism, on the other hand, is ubiquitous. There are frequent

jokes about stereotyped women, especially women patients and their trivial complaints, and frequent complaints about the many psychosomatic illnesses of women and about the nagging mothers of pediatric patients. Many times I have been part of a group of medical students referred to as "men" or fellows, or "students and their wives."

Lectures and conferences are still too frequently illustrated with nude or "sexy" photos of women to hold interest or emphasize a point. Women, whether for praise or criticism are singled out — not as physicians, but as women. For example, I once heard a discussion of an x-ray which had been misread, not by "a radiologist" but by a "woman radiologist." I have, at times, been reminded that I must maintain a high performance level because I am a woman, and somehow represent the standing of all women. Several times I have been where a nurse was not present and it was naturally assumed that I would perform the role of assistant, as the only female present.

These are a number of examples of the kind of "minor" sexism which occur every day.

I cannot in good conscience laugh these off to be a good sport or to avoid a fuss. We must be sensitized to the little everyday sexist occurrences because it is these which build lasting stereotypes in people's minds.

Another particularly annoying and frequently recurring attitude is that women have less right to

use taxpayer money to go through medical school because they drop out more frequently and retire from practice earlier and take precious years off to have and raise children. In the past, this was probably true, but it is time for people to realize that "times are a-changing." Our generation of women is choosing a wider variety of careers, marrying later or not at all, having few children and interested in having a long fulfilling life in a profession as well as in the home. We can avail ourselves of excellent day-care facilities and co-operative groups. Our friends and husbands can be expected and wish to participate equally in household chores and child care. Indeed, more and more of my men colleagues are planning to limit their practices and take years off!

I am frequently asked how patients react to women medical students. Patients, almost without exception, assume that any woman who enters their

room is a nurse. Once we explain, however, that we are in the physician category and behave in a professional manner, patients accept us well and are rarely uncomfortable. Indeed we all know many women prefer women physicians.

I admit that "times are a-changing" regarding discrimination too. But it is happening too slowly, and while many people recognize the subtle discriminations (especially if a woman physician or medical student is in the conference room or rounds), many do not.

Many of you who read this will protest that you are aware of much of the above. Even when one is aware of them, however, inbred and socialized attitudes are nearly impossible to eradicate. I have lapses. For example, I recently was berated by a male friend with whom I was having dinner for making *our* reservation in *his* name! We'll all have to keep plugging!



FROM THE MAILBOX

Charleston, S. C.

To the *Quarterly*:

Biggest news was a recent visit from two Wisconsin alumni, Bill and Ann Pollard, '42, from Beloit. Most nauseating experience was reading the remarks of UAW President Leonard Woodcock (Fall 1974 *Quarterly*).

While castigating the insurance industry and the medical profession, he did not mention that his beloved Social Security Administration had \$2.4 trillion in unfunded indebtedness, did he? By the way, I am now in the private practice of Pathology, pursuing Mr. Woodcock's "fast buck" for a good 14 hours a day — so please don't send my Alumni *Quarterly* to my home as I am seldom there.

My wife, Ruth Huegel, UW '42 (Nursing), isn't there either. She is helping me. Maybe if we had some of the fast bucks that Mr. Woodcock knows all about we could sit home and enjoy our *Quarterly*.

Yours for the right to serve our patients, not the union bosses and the Federal bureaucrats.

Forde A. McIver, M.D., Res. '43-44

* * *

Portland, Ore.

Dear Mischa (to Editor Mischa Lustok):

Your editorial in the recent *Quarterly* (Winter 1975 issue) of the Wisconsin Medical Alumni Association titled "No Time to Ask A Silent Actor" is a most poignant, succinct and provocative presentation. I have had the privilege of reading for some time. Possibly it was because it expresses my attitude in articulate pronouncements to student and fellow practitioners.

You might be interested to know that I presented it to my interning son whom I am proud to call

physician concerned more with the patient than with intellectual gymnastics. He was impressed and so it confirms my convictions.

I don't know whether this will alter the attitudes of the clinicians who find shelter in the institution but I am taking the liberty of Xeroxing your editorial for those students with whom I have contact.

Frank Perlman, M.D., '33

* * *

Milwaukee

Dear Doctor Lustok:

Thanks for your message in the Winter issue of the UW Medical Alumni **Quarterly**—it's redeeming, refreshing and reassuring that some physicians think that way.

Certainly, a patient's personal human needs and family relationships, so often reflected by his illness, should be the vital concern of the physician.

Dan Patrinos, Medical Reporter
The Milwaukee *Sentinel*

* * *

Southbury, Ct.

Dear Dr. Lustok:

As a graduate of the Univ. of Wisconsin's first class of M.D.'s in 1927, a recipient of the Wis. Med. Alumni Award a few years ago, and an interested reader of the *Quarterly*, I write you to, first, congratulate you on your well written column, its charm, wit and insights; second, to express my concern with the criticism expressed in the comments by Connie M. Smith in the *Quarterly*, issue Vol. 15, No. 2, Spring 1975.

It is unbelievable to me that the teaching at our medical school is so lacking in teaching the humanistic components of medical training when other schools such as Yale (from which I retired in 1970 as Prof. of Ped. and Psychiatry) have been intensively involved in these areas for 30 years. I do not fault Ms. Smith; I admire her courage in publicly expressing her opinions, but I grieve if the emphasis in the teaching program at Wisconsin is still based on the primacy of science, to the exclusion of other basics.

Yours,

Milton J. E. Senn, M.D., '27

* * *

Washington, D.C.

Dear Mr. Krahn (to Assoc. Editor Kurt Krahn):

Thank you for putting us on your mailing list for the Wisconsin Medical Alumni *Quarterly*. We find it of definite interest and I am sure it will be useful

for our purpose of helping inform others of life in the United States. We appreciate your cooperation.

Aileen Miles, Editor

U.S. Information Agency

* * *

Los Angeles

REQUIEM FOR MEDICS

Why are doctors forced to cope
Against the "retrospectoscope"
That lawyers use in hindsight
To prove we didn't do it right?

When things go wrong, and treatments fail us,
That's the time when they impale us . . .
Knowing ere they reach the door
Our *Res is Ipsa Loquitur!*

Then with righteous sound and fury
This is how they con the jury:
"See this vicious, evil clod
Who dared to measure short of God!
The overwhelming truth in fact is
Here's a doc who's mal'd his practice!"

Now wouldn't it be grand and great
If we could but anticipate
The way these guys expect us to
The end result of all we do . . .
Or know by whom a race is won
Before that race has yet been run . . .
Or have the answer, clear and cold
To every ending yet untold?

No, let's admit before we start
That Medicine is still an Art . . .
There's not just one unchanging way
To cure your ills and save the day.
And, yes, there's even threats to kill in
Wondrous things like penicillin;
The surgery that saved your brother
Might not do it for another.

In truth, no man, however wise
Knows all of Nature's Hows and Whys . . .
If doctors did, they'd have to be
. . . Doctors of Divinity!!

So, if you're not made whole and new, it
Doesn't prove some M.D. blew it.
If that's your answer, come the dawn
Go count the Docs in Forest Lawn!

J. L. Neller, M.D., '39

Wisconsin Medical Alumni Assn.

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HELP THE ALUMNI OFFICE

The Board of Directors has launched a program that requests all members to use their home address for Wisconsin Medical Alumni purposes. They reason that the *Quarterly* and other alumni association mailings have a better than normal chance of getting lost when addressed to our offices because they have to compete with all the other mail sent there. And the Alumni Office is receiving more and more complaints, apparently for just this reason.

If your alumni mail isn't coming to your home please take a few moments and fill out the change of address form below. And while you're at it, why not jot down a few news notes about yourself . . . professional accomplishments, recent travels, publications, things you think fellow alumni might find newsworthy. . . . Tear off the convenient form and mail it to Wisconsin Medical Alumni Assn., #767 WARF Building, 610 N. Walnut St., Madison, Wisconsin 53706.

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