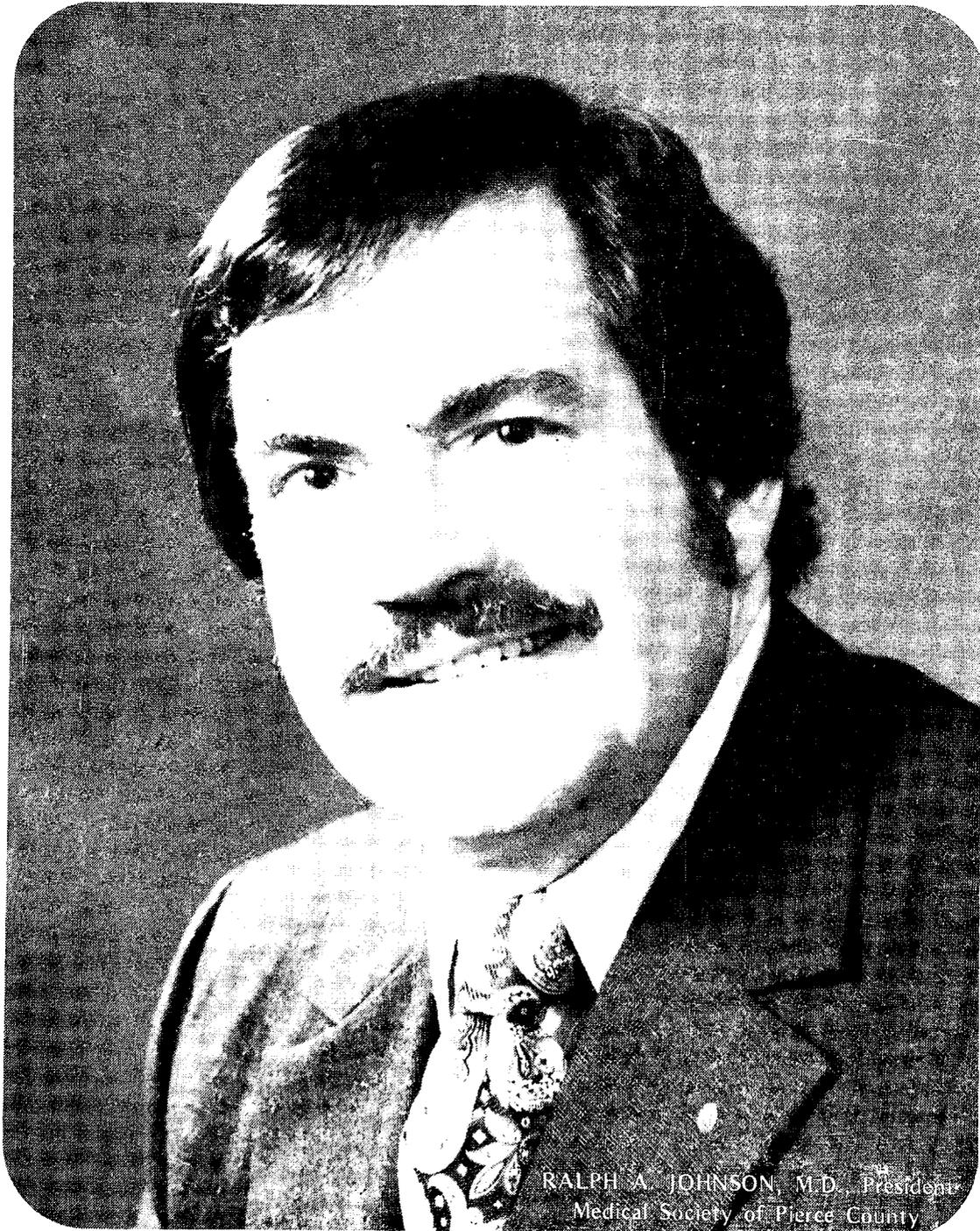




Medical Society of Pierce County

JANUARY 1978 • Vol. XLX, No. 12 • Tacoma, Washington



RALPH A. JOHNSON, M.D., President
Medical Society of Pierce County

BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly some thing else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment, one part tax shelter, one part probate administrator. If you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

TRUST DEPARTMENT
(206) 593-3881

Bulletin of the Medical Society of Pierce County

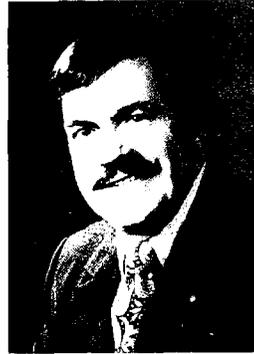
CONTENTS

page	
5	PRESIDENT'S PAGE
13	AUXILIARY PAGE
20	MEMBERSHIP
24	LETTERS
27	CLASSIFIED
4	Medical-Dental Placement Service
7	"Keep Pierce County No. 1 In Immunizations"
9	"Physician-Pharmacist Committee Works To Resolve Mutual Concerns"
11	Excerpts of the Minutes of the Public Health/School Health Committee
11	Health Education Services Available Through the Health Department
12	"Member Physicians Elected to Fellowships"
12	Family Clinic
14	"Guard Changes at General Membership Meeting"
17	Advanced Course in Emergency Medical Treatment - For Physicians
19	Category I - Continuing Medical Education - Pierce County
22	In Brief: A Summary of AMA, Medical and Health News

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U. S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates upon request. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.



Medical Society of Pierce County President for 1978, Ralph A. Johnson, M.D. See pages 5, 14 and 15.

Cover photo by Elson-Alexandre

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-Elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D.	(79)
Melvin L. Henry, M.D.	(80)
William B. Jackson, M.D.	(80)
Richard K. Ohme, M.D.	(80)
Charles C. Reberger, M.D.	(79)
Roy A. Virak, M.D.	(80)
Myra S. Vozenilek, M.D.	(79)
Helen Whitney	(78)

DELEGATES

Duncan T. Baer, M.D.	David S. Hopkins, M.D.
George R. Barnes, M.D.	Ralph A. Johnson, M.D.
David L. BeMiller, M.D.	Herbert C. Kennedy, M.D.
Lloyd Elmer, M.D.	Donald F. McKay, M.D.

ALTERNATE DELEGATES

James M. Blankenship, M.D.	Charles C. Reberger, M.D.
John F. Kemman, M.D.	Myra S. Vozenilek, M.D.

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	George R. Barnes, M.D.
Grievance	D. Ted Baer, M.D.
Health Manpower	Roy H. Virak, M.D.
Legislative	Robert W. Florence, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Program and Entertainment	Herbert C. Kennedy, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Public Relations	William B. Jackson, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

WE SPECIALIZE

IN MATCHING THE RIGHT EMPLOYEE AND EMPLOYER.
OUR GOAL IS TO PROVIDE YOU WITH ONLY
HIGH QUALITY, PROPERLY QUALIFIED CANDIDATES.

FRONT OFFICE PERSONNEL
BACK OFFICE ASSISTANTS
MEDICAL SECRETARIES
NURSES, R.N., L.P.N.
X-RAY TECHNICIANS

LAB TECHNICIANS
BOOKKEEPERS
INSURANCE SECRETARIES
TEMPORARY & VACATION
RELIEF POSITIONS

FULL OR PART TIME

An employment Placement Service that is operated for and by the Pierce County Medical Society and its members. Because our prime concern is service, we take the time to check references, verify job experience, and test job skills. When the physician or dentist pays the placement fee we guarantee satisfaction for 30 days or we will provide a replacement at no cost to the employer.

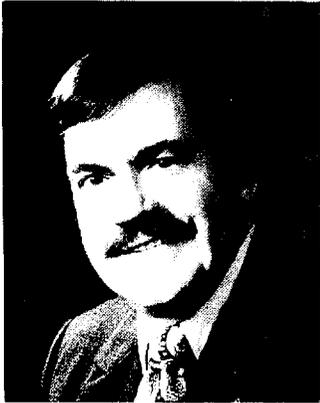
FOR INFORMATION OR TO SECURE A NEW EMPLOYEE
CONTACT

Sondra Sakala, Director
MEDICAL-DENTAL PLACEMENT SERVICE
Medical Society of Pierce County

813 South "K" Street • Tacoma, Washington 98405

572-3709

PRESIDENT'S PAGE



Ralph A. Johnson, M.D.

Your Society Needs Your Involvement

I am truly stunned when a colleague tells me that he cannot afford to spend the time necessary to represent our profession on various committees, or that he cannot financially afford the present dues structure in terms of what is *directly* returned to him. In response to this reasoning, consider the following excerpt from a recent issue of the *WSMA Medical Memo*:

"Best buys for physicians this winter . . . Membership in AMA and WAMPAC. AMA dues support programs that benefit all physicians and the quality of medical care, such as medical education, CMA, scientific journals, government liaison, and much more. WAMPAC is a voluntary, nonprofit organization that studies state issues and candidates, and supports those who support *you*."

It would be nice if my first message of the year could paraphrase the typical political state of the union address which makes a cautious attempt to be calming, reassuring, encouraging and uplifting. Unfortunately, this theme is inappropriate in view of the multiplicity of charges and regulations directed from all sides toward our profession. Therefore now, as in the future, I am going to come on swinging and call things as I see them.

At this time of the year, when resolutions and promises are in order, most of us would be very happy if we could make the words of the song "Make The World Go Away" come true, and we could just practice medicine, in the best way we know, without all the hassle, harassment, and red tape that has become our lot. Obviously, with the growing list of new anagrams from government involvement in health care (along with our old friends HSA, PSRO, and CON), the world is not going to go away.

We can face this dilemma with enthusiasm or depression, apathy or belligerence, or with lackadaisical middle of the road inactivity. Perhaps this latter posture has become too much the norm and possibly is less healthy than either a militant or completely withdrawn position. Most of us, I believe, agree that private enterprise, with some modifications of the past delivery system, remains the best means of providing health care for our nation. I, for one, firmly believe this is best for the public as well as for the medical profession.

Please think about this, and include AMA and WAMPAC membership when submitting your 1978 WSMA and County Society dues. We need a vehicle to speak for us, and these organizations provide just that!

This is not to imply that we should be satisfied with the status quo. Important changes need to be made at all levels of the organizations representing the profession, beginning with our own county medical society. There can be no doubt that we need to improve our public image, and to do so effectively we must first improve our self-image. Your society needs strong participation — from the standpoint of quality and of numbers. To deserve that support, the society should serve its members well with a strong program. The medical society, by design and performance, should be the keystone of information and help for physicians anticipating a practice in our area, as well as those in the process of establishing a practice. Society support should carry on through the formative and productive years. The society should deal with practice problems and disabilities of whatever kind, and, finally, should help deal with the realities of retirement, death, and the problems facing our survivors.

To provide this degree of support, the society needs your involvement. And, I cannot be effective as your designated representative unless I know of your concerns and wishes. *Let me hear from you!*

R. A. J.

Just what do you get for your AMA dues?

You get a package of personal and professional benefits and services that are the most extensive of any professional organization.

You get group insurance programs that provide coverage at far lower costs than individual coverage. They include: Group Life Insurance, Excess Major Medical, Disability Income Insurance, Supplemental "In Hospital" Insurance, Accidental Death and Dismemberment Plan, and Office Overhead Insurance.

You get publications to keep you abreast of medical and health developments: *JAMA*,

American Medical News, and one of nine specialty journals.

There's the AMA Members Retirement Plan. Professional practice management information and guides. Authoritative legal information. Continuing medical education. The nation's largest physician placement service. The research resources of one of the nation's greatest medical libraries.

These are just a few of the broad range of benefits you get for your dues. Even more important, you get a strong and effective spokesman to represent you, your interests, and your views.



**Join us.
We can do much more together.**

Dept. of Membership Development
American Medical Association
535 N. Dearborn St./Chicago, IL 60610

Please send me more information on the AMA and AMA membership.

Name _____

Address _____

City/State/Zip _____

KEEP PIERCE COUNTY NO. 1 IN IMMUNIZATIONS

by George Tanbara, M.D.
Chairman, School Health/Public Health Committee

A July 1977 Washington State Immunization Level Survey of two-year-old children revealed that 50 percent of the children in our county had completed a series of four DTP, four OPV and MMR immunizations. The state-wide rate was 40 percent. This survey also revealed this immunization series could be completed for 28 percent more children with one additional visit. The corresponding state measurement was 42 percent. (The American Academy of Pediatrics (AAP) currently recommends two OPV immunizations rather than three, with the booster dose a year later, for a total of three OPV.)

The School Health/Public Health Committee has spent a great deal of time in recent months evaluating immunization programs in effect in our state. It has done so out of a sense of concern for the general welfare of our community, and because programs are under way at the federal level to require states to maintain a certain level of immunization. The committee and your medical society feel the best response to local health needs is made at the local level, and provision of good medical care rests primarily on the private practitioner, not on another federal program.

One objective of the committee is to completely immunize the children of our community. Attainment of this objective will require a continued cooperative effort among the families, private practitioners, health department, schools, hospitals and news media in our area. Based on its research, the committee suggests the following plan for reaching this objective:

STAGE I

Beginning in January 1978, all physicians who immunize their patients should put forth a concerted effort to begin, continue and finish immunizations on each and every patient by:

1) Evaluating the immunization level on each

visit, no matter how insignificant the visit may be. Give the appropriate immunization(s), or set a date to give them, and inform the patient or responsible person of the need and your plans.

- 2) Make note of what immunization(s) are needed and when they are next due. The charge slip can be an effective means of doing this.
- 3) Be aware of federal immunization materials (DTP, DT, OPV and MMR) which may be obtained from the Public Health Department. They may be appropriate for lowered or no fee patients, or those eligible for coupons from the state Department of Public Assistance. (The physician may charge an administrative fee for immunizations given in these circumstances.) Research shows that about half of the patients referred to the Health Department clinics for their immunizations never get them accomplished.
- 4) Immunization records should be maintained by the patient and when the patient does this, the record-keeping may serve to get the person more involved in the immunization process. Free immunization record cards are available from the Health Department.

STAGE II

Starting in March 1978, the committee plans to publicize the availability of Health Department clinics as well as all the hospitals which may serve as immunization points. The committee urges private practitioners to keep in mind that there are alternate choices for patients needing immunizations.

- 1) Each hospital should encourage its personnel and their families to attain an adequate immunization level and to keep up-to-date immunization records.
- 2) Hospitals may purchase immunization ma-

continued

terials or obtain federal materials. This may be appropriate for immunizing patients seen in the hospital's emergency department if such patients are on a lowered or no fee basis, or on coupons.

- 3) Each newborn child could have a wallet-sized card with plasticized photograph and vital statistics on one side, and on the reverse side, an immunization record stating what immunizations have been given, when they were given, and when the next series of immunizations are due.
- 4) Any locale giving immunizations should notify the primary health care resource (such as the private practitioner), as well as begin or maintain the personal record of immunizations the patient needs.

STAGE III

Starting in May 1978, school district which find it in the best interests of their students, community, physicians, health department and schools, should give immunizations to those students and personnel who are unable to utilize the steps outlined above.

Those schools which take photographs of students may want to issue a wallet-size card with plasticized photograph with the school identification on one side and an immunization record on the reverse side.

STAGE IV

Starting in July 1978, community immunization clinics as planned by the community, Medical Society, Health Department and schools should

be established, with adequate follow-through provided.

STAGE V

By the opening of school in the fall of 1978, all students should be immunized, have plans to be immunized, or have medical, religious or philosophical reasons stated why they should not be immunized.

If the private sector cannot mobilize its resources for more complete immunization in the community, we face a federal immunization program with its inevitable forms, reporting, detailed requirements and further intrusion into the private provision of health care services.

There have been many meetings on a local, state and national basis by concerned physicians regarding immunization. No plan is completely appropriate for each of us. As part of your total medical care of your patients it is hoped that you feel immunizations are important enough to expend the necessary time and effort to assure an adequate immunization level.

What I have outlined in this article is a general approach, all or part of which could serve as the basis for more complete immunization in our community. Any suggestions or ideas that you have would be most welcomed by the Public Health/School Health Committee of the Medical Society. Send your comments to the Medical Society office.

Get active, be involved, attend the meetings of this important committee.

YOUR MEDICAL LIBRARY

Your access to the world literature in medicine through the network of biomedical communication: Hospital Library — Pierce County Medical Library — Pacific Northwest Regional Health Sciences Library — National Library of Medicine — British Lending Library.

Comprehensive library services include: literature searches, bibliographies, interlibrary loans, and Medline searches (Literature retrieval by computer).

HOURS: Monday - Friday 8:00 A.M. - 5:30 P.M.
(Other times key is available by request)

M. Von Bruck, Librarian
572-5340

PHYSICIAN-PHARMACIST COMMITTEE WORKS TO RESOLVE MUTUAL CONCERNS



by Herman S. Judd, M.D.

Probably many physicians and pharmacists in Pierce County are not aware that there is in existence a joint committee of the two professions. Formed first about twenty years ago, the committee was reactivated in the past year for the purpose of getting together to discuss problems common to the two professions. At the present time, this committee consists of three pharmacists, three doctors, and the executive director of the Medical Society. Meetings have been held about every three months, the last on December 7th with breakfast at the Country Squire. (Incidentally, the breakfasts are "no-host.")

Some of the topics discussed have included the complaint physicians have that when they call a pharmacy they may be placed on "hold" until the pharmacist answers the phone. This is naturally aggravating and every effort will be made by the pharmacists to discourage their membership, or staffs, from this practice.

More recently, the new State Law requiring two spaces for the doctor's signature on his prescription order form has been discussed. The space on the bottom left of the prescription form is labeled "substitution permitted;" the space on the right is labeled "dispense as written." The physician is required by state law to sign above whichever option he desires. A rubber stamp will easily convert old prescription forms to the new legal form. Use of this format has been required since September 1977.

From time to time, deliberations of this committee of your society will be mentioned in the BULLETIN, as space permits.

By the way, did you know that the pharmacist is now required by law to point out to the patient and, if necessary, the physician, drug incompatibilities such as the concomitant use of darvon compound and norflex? I didn't know that this would, or could, send a patient on a "trip!" Did you? More later.

SALARY-FRINGE BENEFIT SURVEY

The Salary-Fringe Benefit Survey has been tabulated and is available to those who requested copies. If a doctor wishes to have a copy, please call 572-3667 and we will mail one to your office or residence. The actual survey responses, with detailed comments, can be seen at the Medical Society. You may stop by any time if you wish more information. Thank you for your response to this survey. We hope it will be helpful to you.

Kefzol[®] I.M./I.V.

cefazolin sodium

Ampoules, equivalent to 500 mg., 1 Gm.,
and 10 Gm. of cefazolin



Additional information available
to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206

700773

**EXCERPTS OF
THE MINUTES OF THE
PUBLIC HEALTH/SCHOOL HEALTH
COMMITTEE**

The Public Health/School Health Committee has requested the following items be communicated to all members of the Medical Society:

SPORTS MEDICINE:

"Save January 28th and February 11th for the second annual Sports Medicine Institute to be held at Foss High School. Stan Mueller, M.D., is the chairman of the institute and welcomes input and suggestions from all Society members. The institute qualifies as a Category I AMA credit program focusing on running and fitness."

TEL-MED SUCCESSFUL:

"Thanks are in order to the Medical Society Auxiliary for Tel-Med's successful health education system. This operation is being complimented routinely for the wide range of topics provided and the effectiveness of the program. Society members are requested to submit any new topics or ideas for consideration."

FOOD AND HEALTH:

"On February 25th, a Food and Health Institute will be held at Foss High School. Contact Roger Meyer, M.D., for details and registration."

THE CHILD AND THE LAW:

"On March 4th a program entitled 'The Child and the Law' will bring physicians, lawyers, and educators as well as many others together for a close look at the new juvenile. Justice, education, rights and privacy regulations, and child abuse are the foci for this Saturday program at Wilson High School. Contact Roger Meyer, M.D. for details and registration."

**HEALTH EDUCATION SERVICES
AVAILABLE THROUGH
THE HEALTH DEPARTMENT**

Health Education counseling services are available through the Public Health Education Division of the Tacoma-Pierce County Health Department. These services are intended to serve as an adjunct to the private physician in providing health care.

Health Education counseling consists of the following services:

- High Blood Pressure screening, counseling and referral;
- Smoking Cessation (bi-weekly clinics consisting of five one-hour sessions);
- Nutrition Management (control of weight and related diseases);
- Weight Control;
- Physical Fitness; and
- Overall education on physical and mental health.

Patients are accepted either individually or in groups. The services are offered for patients that need either supervised or group support in developing and maintaining good health behaviors.

These services are under the supervision of a Health Educator and a Community Health Nurse.

If physicians feel that the Health Department can serve as a resource, or that patients could benefit from the department's Health Education services, contact the Tacoma-Pierce County Health Department at its new address, 3632 Pacific Avenue, or call 593-4547.

For more information regarding services, call John L. Castele, Jr., at 593-4507.

- DOCTORS -

There is an important need for proper physician identification should care be provided in an emergency situation. Your best means of identification is your license renewal tab. Please carry this identification in case of an emergency.

Member Physicians Elected To Fellowships

Two member physicians of the Medical Society have been admitted to fellowships in national organizations. Cordell H. Bahn, M.D. has been admitted to fellowship in the American College of Cardiology. John R. McDonough, M.D. has been elected a fellow of the American College of Physicians.



John McDonough, M.D.



Cordell Bahn, M.D.

FAMILY CLINIC — NOVEMBER 1977

Open Monday through Friday — 10:00 to 5:30 1815 South J Street, Tacoma 98401 Phone 627-9182

PATIENT SERVICES	November 1977	Total 1977	Total Since September 1973
Referred to Physicians	78	994	5,766
Laboratory Services	24	342	4,785
X-Ray Services	4	90	555
Prescriptions	50	768	3,531
Referred to Community Agencies	18	295	1,452
Seen by Physicians in Clinic	16	266	1,803

ETHNIC AND DEMOGRAPHICAL DISTRIBUTION

Black.....	30	382	1,666
Caucasian.....	171	2,239	9,220
Asian-American.....	3	67	257
Native-American.....	0	19	257
Mexican-American.....	5	65	238

PARTICIPATING PHYSICIANS ON FRIDAY EVENINGS

Dr. H. Boyd Dr. T. Smith Dr. S. Whaley Dr. A. North
 Dr. G. Tannas Dr. G. Oh Dr. R. Martin Dr. A. Tsoi Dr. N. Magnussen

ATTENDING PHYSICIAN'S REPORT FORMS

Please be advised that the Attending Physician's Report Forms, which previously were available through the Pierce County Health Services, can now be obtained through North Point Press. They are located at 2302 Pacific Avenue. For more information, call 627-9182.

AUXILIARY PAGE

AUXILIARY OFFICERS 1977-1978

President	Helen Whitney
President-Elect	Jo Roller
1st V.P. & Program	Kathy Miskovsky
2nd V.P. & Membership.....	Nicole Crowley
3rd V.P. & Historian & Bylaws.....	Reta Bergstrom
4th V.P. & Arrangements	Lee Jackson
Recording Secretary	Martia Ohme
Corresponding Secretary.....	Jan Thiessen
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

COMMITTEE CHAIRMEN

AMA-ERF.....	Marge Ritchie
Communications:	
Bulletins	Georgia McPhee
Newspaper.....	MaryIn Baer
Mailing	Donna Prewitt
Telephone	Barrie Mott
	Joanne Iverson, Arlene Hopp
Community Health.....	Kay North
Cookbooks	Judy Baerg
Tasting Luncheon	Stephanie Tuell
Dance	Carol Hopkins
Finance.....	Kimi Tanbara
Joint Dinner	Genny Hansen
Legislation	Cindy Anderson
Newcomers	Janet Fry
Nominating.....	Marie Henry
Pierce County Health Council.....	Nadine Kennedy
PCMS Directory.....	Kit Larson
Sunshine.....	Lorna Burt
Superintendent's Advisory Health Council and	
Handicapped Acceptance Program.....	Sharon Lukens
Student Recognition Awards.....	Barbara Wong
	Marilyn Mandeville
Tel-Med Volunteers	Lila Early

Marge Ritchie reports a tremendous response to our holiday sharing card, with over \$6,500 raised for AMA-ERF. Thank you all for your generosity.

This month's meeting will be at Mary Johnston's home, on January 20th. Come and enjoy lunch with your Auxiliary friends.

The number of members paying dues by March first determines the number of delegates our county is allowed at the next annual state meeting. Please send your \$20 today to Dot Truckey, 634 Vista Drive, Tacoma 98465

THANKS FOR JOINING US!

We need people like you who believe in and want to work toward the goals of the American Medical Association Auxiliary.

We need you to continue to expand our services to the community.

We want you to enjoy the rewards gained from volunteering your time to projects which are vital to the health and well-being of the people in this country.

We need you to help us carry out our goals and purposes through a variety of programs— from meeting community needs . . . to seeing that sound health-related legislation is passed . . . to raising funds for medical students and schools.

Your help will enable us to do even more in Pierce County.

Thanks so much for joining.

We need you . . . and we value your help.

The county health department sponsors blood pressure checks at various businesses, schools, and industries throughout the year. When such a screening program is scheduled they need volunteers to help, and will arrange a training session for those willing to learn. If you are interested in giving a little time to such an endeavor please give your name to Helen Whitney.

Remember to register for Valentine's Day Joint Dinner with your spouse. It will be held at the Tacoma Country and Golf Club. Lloyd Cooney, Seattle broadcast executive, is the guest speaker (see notice elsewhere in this month's BULLETIN).

GUARD CHANGES AT GENERAL MEMBERSHIP MEETING

Newly elected officers and trustees were installed at the Society's December general membership meeting.

The new officers for 1978 are: Ralph A. Johnson, M.D., president; Kenneth D. Graham, M.D., president-elect; Richard T. Vimont, M.D., vice president; Lloyd C. Elmer, M.D., secretary-treasurer; and Duncan T. Baer, M.D., past president.

Dr. Melvin L. Henry, William B. Jackson, Richard K. Ohme, and Roy A. Virak were elected to two-year terms on the Society's Board of Trustees.

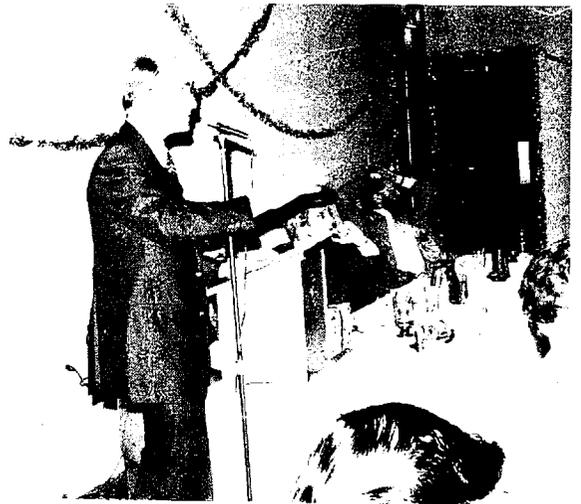
During the meeting, held jointly with spouses, outgoing president Ted Baer thanked members of the Society for their support during his year as president, and presented resolutions of appreciation to outgoing officers and trustees.

New Society President, Ralph Johnson, in his remarks challenged those present to "take stock in ourselves, not to sell ourselves short", and to improve on the work that has been started by the Society.



President Johnson said even more support from members was needed, and he pledged his best for the year to come (see President's Page).

John A. Dawson, M.D., chairman of the Washington State AMA delegation, also spoke at the meeting. He discussed the variety of AMA programs being undertaken on behalf of the medical profession and asked for more member physicians to invest in the profession through joining the AMA. "We need unity, we need even better representation. We can do it best together," said Dawson.



"One last thing . . ." Outgoing President Ted Baer comments on 1977 and extends his appreciation to the membership.

The new President outlines his goals for the coming year.

Ted Baer receives a gift of appreciation from the Society for his efforts during 1977.



The passing of the gavel. Ralph Johnson receives his president's gavel from Ted Baer.



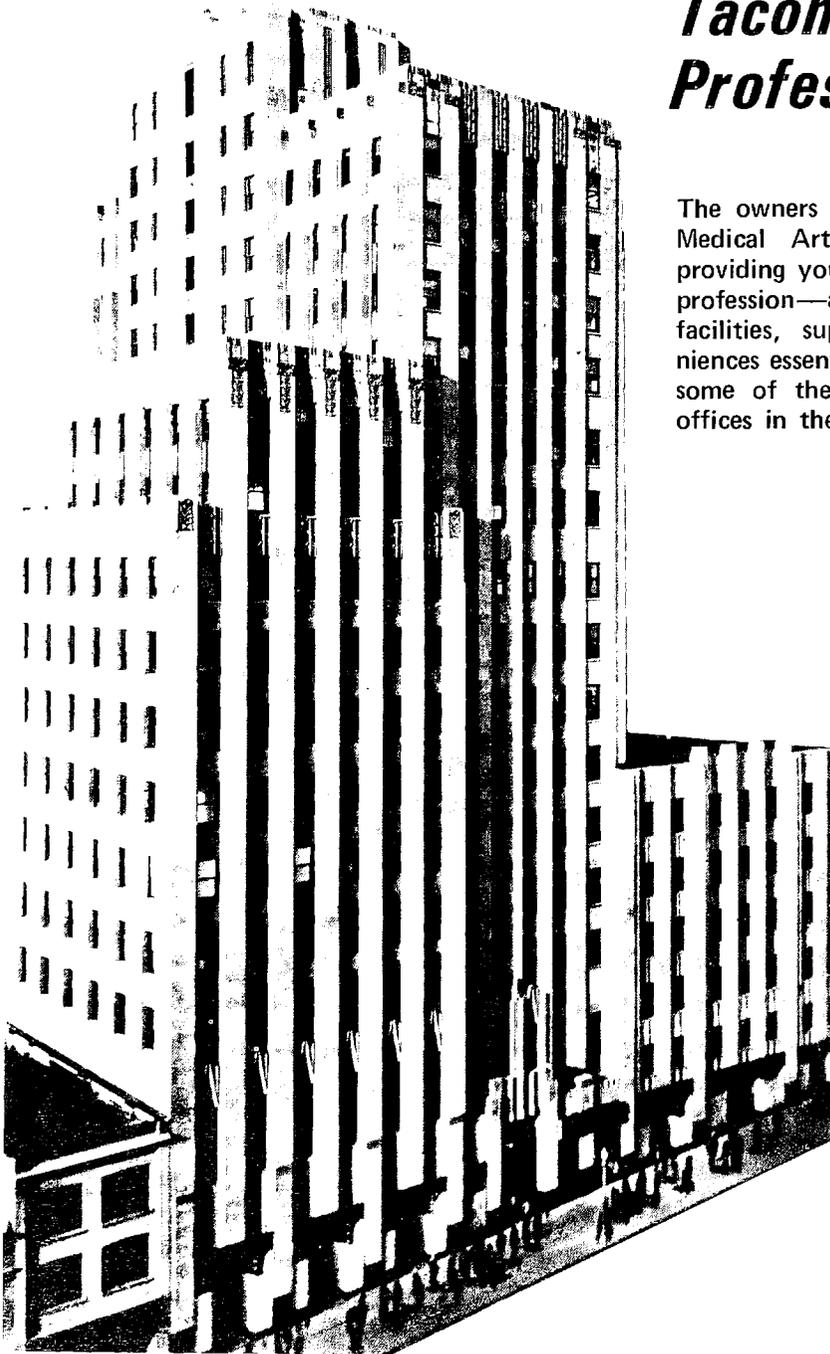
"As there was no further business . . ." Dave BeMiller, the Society's secretary-treasurer for several years, provides an interpretive reading of his final general membership meeting minutes.

THE MEDICAL ARTS BUILDING

Tacoma's Finest Professional Center

The owners and management of Tacoma's Medical Arts Building are dedicated to providing you as a member of the Medical profession—and your patients—with the facilities, supporting services and conveniences essential to your practice. Here are some of the advantages of locating your offices in the Medical Arts Building:

- Office facilities designed specifically to meet your professional needs.
- Extensive supporting services located in the building.
- Centrally situated among three major hospitals—Doctor's, St. Joseph's, and Tacoma General.
- Easy access—by car and by bus.
- Inside parking—at your doorstep, not a "football field" away.
- Personal, professional extras—building hostess to assist you and your patients; distinctive and effective building security system.
- And, reasonable rental rates—an important consideration in these days of rising equipment, insurance, and other costs.



For an appointment or further information, please contact Doug DeForest at:
Medical Arts Building, 740 St. Helens Avenue, Tacoma, Washington 98402, or phone (collect) 206 - 272-3161.

ADVANCED COURSE IN EMERGENCY MEDICAL TREATMENT FOR PHYSICIANS

JANUARY 17, 18, 19, 20, 1978

8:00 TO 10:00 A.M., ST. JOSEPH HOSPITAL, TACOMA

CATEGORY I Credits — 8 hours

As an organization accredited for continuing medical education the College of Medical Education, Inc., certifies that this offering meets the criteria for eight credit hours in Category I for the Physicians Recognition Award of the American Medical Association and for the relicensure requirements of the Board of Medical Examiners of the State of Wash. Accredited by the American Academy of Family Physicians for eight credit hours — Category I (Prescribed). Accredited by the American College of Emergency Physicians for eight hours credit.

Tuesday January 17	The Endocrinologic Emergency Treatment of diabetic keto-acidosis, thyroid storm, myxedema coma, acute adrenal insufficiency and hypercalemia.	John M. Leonard, M.D. Chief, Department of Medicine U. S. Public Health Service Hospital, Seattle
Wednesday January 18	The Cardiac Emergency Recognition and treatment of cardiac arrhythmias, cardiopulmonary arrest, workshop on treatment of cardiogenic shock and cardiopulmonary resuscitation.	John P. Nagle, M.D. Cardiologist, Tacoma
Thursday January 19	Acute Ventilatory Failure Treatment of acute adult respiratory distress. Management of the patient on a ventilator.	Terry R. Rogers, M.D. Pulmonary specialist — Director, Pulmonary Service, Swedish Hospital, Seattle
Friday January 20	Hypertensive Crisis & Electrolyte Imbalance Recognition and treatment of malignant hypertension & the hypertensive crisis, management of the life threatening electrolyte abnormalities.	John A. Kennedy, M.D. Cardiologist/Nephrologist Tacoma

Program Coordinators: Richard Baerg, M.D., Andrew Tsoi, M.D.

Sponsored by: ST. JOSEPH HOSPITAL

In conjunction with: The Committee for Continuing Medical Education
of the Pierce County Medical Society
College of Medical Education, Inc.

To be held at: St. Joseph Hospital, Tacoma — 6th Floor, Quad B

Registration fee: \$40.00. Refunds cannot be made for partial attendance. No refunds will be made after Jan. 17, 1978. Address all correspondence and registration fees to:
Maxine Bailey, Executive Director
College of Medical Education, Inc.
1500 North Warner, Tacoma, Washington 98416, Phone: 756-3152

THERE IS A DISABILITY INSURANCE PROGRAM AVAILABLE THAT TAKES INTO ACCOUNT YOUR SPECIAL NEEDS

As a physician, you are more dependent on good health for your livelihood than most members of other professions. Many disabilities that would merely inconvenience or restrict the activities of a lawyer would prevent you from performing your professional functions.

We recognized your special needs and worked with your county medical society and the WSMA to design a program that protects your future financial plans should disability strike.

It provides a high level of protection at very low monthly cost due to the group rate made possible by the society's and association's buying power.

Here are some of its important benefits:

You may purchase up to \$2,500 income per month (depending on your current monthly net income), and select either a 90 day or 180 day waiting period for benefits.

Two plans are available. Plan I provides sickness benefits payable for five years and lifetime accident benefits. Plan II provides sickness benefits to age 65 and lifetime accident benefits.

Your benefits begin when injury or illness prevents you from practicing medicine. You don't have to be confined in the hospital or your home to receive benefits.

The program also provides a special recovery benefit that helps ease you back into practice while you build up your cash flow and re-establish your work level.

There is another benefit that allows you to return to gainful work in another occupation without losing full disability status.

And, your premium will be waived after benefit payments begin. No further premium would be required until after you return to your practice.

For more information explaining the benefits and provisions of this disability insurance, call Ned Shera, CLU, or Susan Keith, CLU, at Schwarz, Shera and Associates, 572-6010. They can answer your questions and mail you additional information, including rates and an application.

When you examine these benefits and low group rates, we're sure you will agree that this disability insurance program is ideally suited to the special needs of member physicians and surgeons.

Sponsored and endorsed by your county medical society and the WSMA.

Underwritten by: Safeco Life Insurance Co.



**SCHWARZ, SHERA
and ASSOCIATES, INC.**

*Insurance brokers and financial consultants
to Pierce County physicians since 1963.*

572-6010

THIS MESSAGE IS INTENDED TO OUTLINE CERTAIN BENEFITS. IT IS NEITHER AN OFFER OF INSURANCE NOR A LEGAL DESCRIPTION OF ALL POLICY PROVISIONS.

CATEGORY I – CONTINUING MEDICAL EDUCATION – PIERCE COUNTY

The following programs are in the planning process for the winter and spring of 1978 by the Committee for Continuing Medical Education of the Medical Society of Pierce County and the local hospitals in conjunction with the College of Medical Education, Inc. The programs will host visiting and local experts. Notice for each program, including specific information regarding format and speakers, will be mailed to your office at least three weeks prior to the offering. **THIS SCHEDULE IS SUBJECT TO CHANGE** – Please call our office if you are interested in a program that you have not received specific notice for.

		Category I Credit to be applied for
January 17, 18, 19, 20 St. Joseph Hospital 8:00 to 10:00 a.m.	ACUTE CARE CPR, Cardiac Arrhythmias; Coordinator: Richard Baerg, M.D.	8
February 14, 15, 16, 17 St. Joseph Hospital 8:00 to 10:00 a.m.	ONCOLOGY Coordinator: J. G. Katterhagen, M.D.	8
March 16, 17 T/B/A	INTERNAL MEDICINE MEETING Review of Endocrinology, Rheumatology, Cardiology, and Psychiatry in Internal Medicine Coordinator: Mel Henry, M.D.	
March 30, 31 and April 6, 7 Good Samaritan Hospital 8:00 to 10:00 a.m.	THE ENDOCRINE GLANDS Coordinator: Thomas Clark, M.D.	8
April 5, 12, 19, 26 Tacoma General Hospital 8:00 to 10:00 a.m.	POTPOURRI Dermatology, Gyn, GI Disease, Arthritis Coordinators:	
May (Tentative) Tacoma General Hospital Day long	BREAST CARCINOMA Coordinator: J. B. Katterhagen, M.D.	



COLLEGE OF MEDICAL EDUCATION
University of Puget Sound
1500 North Warner; Tacoma, Washington 98416

MRS. MAXINE BAILEY
Executive Director
756-3152

AMA takes decisive action on behalf of physicians

A major concern of the profession is the Federal Health Planning Act of 1974 which gives the Secretary of HEW sweeping powers over nearly every aspect of health care. The state of North Carolina, the North Carolina Medical Society, and the state of Nebraska are coplaintiffs with the AMA in a suit against the federal government asserting that the Federal Health Planning Act "demonstrates contempt" for state and individual rights and is "a radical departure from the American system of government."

The 76-page brief filed by the plaintiffs challenges the very constitutionality of the 1974 law.

If necessary, your American Medical Association is prepared to seek relief through the U.S. Supreme Court.

Your AMA is aggressive in its action programs on behalf of the medical profession and the public.

Your support, through membership, is essential, for our effectiveness is directly related to our numerical strength.

Write: Dept. of Membership Development, AMA, 535 N. Dearborn, Chicago, IL 60610

**Join us.
We can do
more more
together.**



MEMBERSHIP FIRST NOTICE

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:



MICHAEL R. PEARSON, M.D., Psychiatry/Child Psychiatry. Born in San Francisco, California, 6/7/45; medical school at University of Minnesota, Minneapolis, 1971; internship and residency in psychiatry at State University of New York at Buffalo, 1971-75; residency in child psychiatry at University of Oregon in Portland, 1975-76; licensed to practice medicine in the State of Washington, 1976; also practiced medicine as staff child psychiatrist at the Child Study and Treatment Center, Western State Hospital. Dr. Pearson's psychiatric practice is located at 401 Broadway in Tacoma.

SECOND NOTICE



THOMAS K. BROWN, M.D., Obstetrics-Gynecology. Born in Milwaukee, Wisconsin, 2/17/40; medical school at University of Illinois, 1965; internship at Denver General Hospital, Denver, Colorado, 1965-66; residency in obstetrics and gynecology at University of New Mexico, 1966-69; graduate training in endocrinology, University of Washington, 1973-75; Board certified in Ob-Gyn, 1971; licensed to practice medicine in the State of Washington, 1973; also practiced medicine in the U. S. Army Medical Corps, 1969-77. Dr. Brown's office of obstetrics and gynecology is located at 7206 Meadow Park Road W. in Lakewood.



ROBERT C. HARVEY, M.D., General Practice. Born in Pasadena, California, 1/12/49; medical school at Duke University, Durham, North Carolina, 1975; internship at Madigan Army Medical Center, 1975-76; licensed to practice medicine in the State of Washington, 1976; Dr. Harvey is practicing medicine at Ft. Lewis and in emergency rooms of local hospitals.



DENNIS C. KOUKOL, M.D., Internal Medicine (Cardiology). Born in Chicago, Illinois, 12/6/42; medical school at Marquette, 1968; internship at University of Illinois, Chicago, 1968-69; residency in psychiatry also at the University of Illinois, 1969-70; residency in medicine, University of Oregon, Portland, 1972-74; chief medical resident and instructor in medicine, University of Oregon, 1974-75; cardiology fellowship, University of Oregon, 1975-77; Board certified in internal medicine, 1975; licensed to practice medicine in the State of Washington, 1977. Dr. Koukol's office of internal medicine and cardiology is located at Allenmore Medical Center in Tacoma.



FRED J. LEITZ, III, M.D., Family Practice. Born in Oak Ridge, Tennessee, 5/28/47; medical school at University of Washington, 1974; family practice internship and residency at Weld County General Hospital, Greeley, Colorado, 1974-77; licensed to practice medicine in the State of Washington, 1976. Dr. Leitz's office of family medicine is located at 913 Kincaid in Sumner.



ROBERT A. McALEXANDER, M.D., Surgery. Born in Colville, Washington, 6/1/32; medical school at University of Washington, 1954; internship at Johns Hopkins Hospital, 1958-59; residency in surgery at University of Washington, 1959-63, and Virginia Mason Hospital, Mason Clinic, 1964-65; cardiovascular fellowship at Stanford University Hospital, 1976-77; Board certified in surgery; licensed to practice medicine in the State of Washington, 1959; also practiced medicine in the State of California, 1965-76. Dr. McAlexander's office is located at 1422 Medical Arts Building in Tacoma.



JAMES A. McHUGH, Family Practice. Born in Tacoma, Washington, 8/16/46; medical school at University of Washington, 1974; family practice and residency at University of Kansas Medical Center, 1974-77; licensed to practice medicine in the State of Washington, 1977. Dr. McHugh practices family medicine at the Puyallup Indian Clinic.



MARSE L. McNAUGHTON, M.D., General Practice. Born in Cardston, Alberta, 7/8/48; medical school at University of Alberta, Edmonton, Alberta, 1976; internship at Edmonton General Hospital, 1976-77; licensed to practice medicine in the State of Washington, 1977. Dr. McNaughton's office of general practice is located at 3733 South Thompson in Tacoma.



SHARON E. O'CONNOR, M.D., Emergency Medicine. Born in New York, 1/19/50; medical school at Albany Medical College and George Washington University, Washington, D.C., graduated 1975; internship and residency in family practice at University of Colorado Medical Center, 1975-77; licensed to practice medicine in the State of Washington, 1977. Dr. O'Connor practices emergency medicine in King and Pierce County hospitals.



ROGER M. ROPER, D.O., Family Practice. Born in Eagle Grove, Iowa, 6/16/37; medical school at Kirksville College of Osteopathic Medicine, Kirksville, Missouri, 1976; internship at Suncoast Hospital, Largo, Florida, 1976-77; licensed to practice medicine in the State of Washington, 1977. Dr. Roper's office of family practice is located at Allenmore Medical Center in Tacoma.



ROBERT A. TEITGE, M.D., Orthopedic Surgery. Born in Los Angeles, California, 10/18/42; medical school at University of Southern California, Los Angeles, California, 1969; internship at Rhode Island Hospital, Providence, Rhode Island, 1969-70; residency in orthopedic surgery at Los Angeles County-USC Medical Center, 1970-74; fellowship in Sports Medicine, National Athletic Health Institute, 1976-77; Board certified in orthopedic surgery; licensed to practice medicine in the State of Washington, 1970; also practiced medicine in the U. S. Air Force, 1974-76. Dr. Teitge's office of orthopedic surgery is located at 919 South 9th Street, in Tacoma.



HOBERT J. WHITE, M.D., Plastic Surgery. Born in Tremonton, Utah, 8/6/33; medical school at Jefferson Medical College, Philadelphia, Pennsylvania, 1962; internship at San Diego County Hospital, 1962-63; residency in general surgery at San Diego County University Hospital, 1963-67, and a residency in plastic surgery at Wilford Hall USAF Medical Center, Lackland AFB, 1971-73; Board certified in general surgery, 1968, plastic surgery, 1974; also practiced medicine in the U. S. Army, most recently as Chief of Plastic Surgery at Madigan Army Medical Center. Dr. White's office of plastic surgery is located at Allenmore Medical Center in Tacoma.

IN BRIEF: A summary of AMA, medical & health news

American Medical Association/535 North Dearborn Street/Chicago, Illinois 60610/Phone(312)751-6000/TWX 910-221-0300

All members of Congress were offered AMA assistance in responding to inquiries from constituents on health or medical problems. In a letter to each senator and representative, the AMA Washington Office enclosed three AMA health education pamphlets that "are quickly and readily available in bulk if needed." A "Medical Backgrounder," covering AMA policies and positions on health related subjects, is also sent periodically to the lawmakers.

The AMA's Council on Medical Education has approved 54 state and territorial medical associations to conduct surveys of organizations and institutions offering continuing medical education at the local level. As of Oct. 21, 1,464 institutions and organizations had been accredited in the U.S.

Only 25% of foreign medical graduates who took the new Visa Qualifying Exam last fall passed the test, according to the National Board of Medical Examiners. Under the new Health Manpower Act, foreign medical graduates must pass the VQE and an English language proficiency test before receiving either an exchange visitor or immigrant visa. Results showed that foreign physicians tended to perform better on the clinical test than on the basic science test. The exam is given once a year.

An Ad Hoc Committee on FMG affairs has been established by the AMA. The seven-member committee will function as a liaison group for foreign medical graduate leadership, counsel AMA staff, and develop a program to deal directly with the problems of FMGs in the U.S.

On-site interviews with physicians in ten major cities are being conducted by the AMA with the cooperation of state and county medical societies. The physicians' opinions about Association activities will be helpful in reassessing current AMA programs and policies, and in short-term and long-range planning.

The AMA's "Continuing Medical Educational Newsletter," suspended in 1974, is being published again by the Dept. of Physicians Credentials and Qualifications.

A voluntary hospital cost containment program is being developed by the American Hospital Assn., the Federation of American Hospitals, and the AMA. A steering committee composed of representatives of national organizations, business groups, labor and consumers will formulate hospital cost-review guidelines. In a joint statement, officials of the AMA, AHA and FAH said: "We believe that voluntary restraint by hospitals and doctors is the most equitable method to achieve effective cost containment consistent with sound medical practice . . . It is our strong belief that our efforts will be successful . . . that it will then become unnecessary to impose a new, bureaucratic control system that could impair existing efforts to provide better health care for all Americans."

The AMA's 1978 public relations program will emphasize TV appearances by medical spokesmen and speeches before nonmedical audiences, and will include an informational and factual advertising campaign. Local implementation of national PR priorities will be stressed. A report of the program has been sent to state, county and specialty medical societies.

Medical students will get a tax break with the passage of a bill to free their federal scholarship stipends from federal income taxation. As adopted by Congress, the bill provides for a two-year exemption. The AMA-proposed legislation would have made the tax exclusion permanent.

A conference on the categorization of Hospital Emergency Capabilities, sponsored by the AMA's Commission on Emergency Medical Services and the American Hospital Assn., will be held in mid-1978. State and metropolitan medical associations and state hospital associations will be contacted for assistance in gathering categorization material for the meeting.

Advertising revenue in all AMA journals reached the \$10 million mark through October in fiscal year 1977, a 19% increase over the total recorded during the same period last year.

C.M.S.S. EXPANDS — ADDS TWO SOCIETIES

The Council of Medical Specialty Societies (CMSS) has elected the Society of Nuclear Medicine (SNM) and the American Academy of Allergy (AAA) to its membership. The action was taken at the CMSS annual meeting November 16. The SNM, located in New York, has 3700 active voting physician members, while the Milwaukee-based AAA represents over 1020 voting physician members in that specialty. Their membership, effective January 1, 1978, brings the CMSS total to 22 societies.

The Council of Medical Specialty Societies is a unified specialty society effort to improve the quality of medical care and medical education in this country. It began in 1965 with only three members: The American College of Physicians, The American College of Surgeons, and The American College of Obstetricians and Gynecologists. It has since grown steadily to include a major society for each of the twenty primary specialties with voting membership in the American Board of Medical Specialties (ABMS). This year, a Bylaws change permitted admission of these societies representing the two specialties of Nuclear Medicine and Allergy and Immunology which have conjoint examining boards within the ABMS.

JOINT DINNER

TUESDAY, FEBRUARY 14, 1978
TACOMA COUNTRY AND GOLF CLUB

No Host Cocktails — 6:30 P.M.
Dinner — 7:30 P.M.

\$20.70 per couple includes gratuities
Advance Registration

GUEST SPEAKER — LLOYD COONEY
President and General Manager, KIRO-TV

Make check payable to Medical Society of Pierce County
Mail to: Genny Hanson
9020 Lake Steilacoom Pt. Rd. SW
Tacoma, Washington 98498

LIMITED SEATING — PLEASE REGISTER EARLY

MEDICAL SCHOOL ENROLLMENT SHOWS ANOTHER INCREASE

Total enrollment in the 116 U.S. medical schools in 1976-77 was 58,266, an increase of 2,022 over the previous year, says the American Medical Association's 77th annual report on medical education published in a recent issue of the *Journal* of the American Medical Association.

First-year enrollment increased from 15,351 in 1975-76 to 15,667 in 1976-77, the AMA reports. The number of graduates increased from 13,561 to 13,607.

The total number of women enrolled in 1976-77 was 13,059, an increase of 1,532 over the previous year.

There were 41,394 full-time faculty members in the schools in 1976-77, for a ratio of 1 teacher for each 1.4 students. In addition, more than 80,000 physicians and others taught part time.

The total new enrollment of 15,667 students was selected from a total of 42,155 applicants. For the second time in as many years, the number of applicants declined slightly, from the peak of 42,624 in 1974-75. Each applicant applied to an

average of almost nine different schools at the same time, hoping for acceptance by at least one.

By 1981-82, the 116 medical schools projected a first-year class of more than 16,000, with more than 16,000 graduates each year. Some additional medical schools will be in operation by that time.

Ethnic minorities enrolled in medical schools in 1976-77 totalled 4,841, a percentage of 8.2 percent.

A total of 494 U.S. students in foreign medical schools managed to transfer to American schools with advanced standing at various levels.

Family medicine is now offered as a distinct discipline in 102 of the 116 medical schools.

In the field of graduate medical education, there was a decrease in the number of foreign graduates serving in house staff positions in U.S. hospitals. Total at the start of 1977 was 15,097. There were 42,903 graduates of U.S. medical schools serving as interns or residents.

LETTERS

MEDICAL SOCIETY OF PIERCE COUNTY

December 16, 1977

Donald Hearon, D.D.S., President
Pierce County Dental Society
Allenmore Medical Center
Tacoma, WA. 98405

Dear Dr. Hearon:

It has come to our attention that a small number of dentists in Pierce County are using hair analysis as a diagnostic technique. Because one of our member physicians has in recent months used hair analysis as a diagnostic technique, our Society's Ethics Committee has investigated the efficacy of hair analysis. A special sub-committee of the Ethics Committee has completed an extensive investigation of this subject and, in the interest of providing good health care to the residents of Pierce County, I would like to share with you the sub-committee's findings.

Based on consultation with experts from various portions of the United States, the committee concluded that on the basis of limited clinical experience, analysis of the available data, and theoretical grounds, the use of hair analysis in relation to metal and mineral content as a means of diagnosis and treatment has no medical efficacy. The sub-committee therefore concluded that such practice has no merit. There was unanimous agreement by both the sub-committee and Ethics Committee that the use of hair analysis as a diagnostic tool by physicians in Pierce County should cease immediately and that any member physician who persists in such practice should be subject to discipline as outlined in our Medical Society's Bylaws. The Board of Trustees of the Medical Society accepted these recommendations at its Tuesday, December 6 meeting.

Sincerely,

Ralph A. Johnson, M.D., President
Medical Society of Pierce County

TACOMA-PIERCE COUNTY HEALTH DEPARTMENT

To: Members of the Medical Society of Pierce County

The National Cancer Institute and the Fred Hutchinson Cancer Research Center in Seattle, along with many other health agencies, are involved in a nationwide effort to get information to women who might have been exposed to DES-type drugs before giving birth to daughters.

The Tacoma-Pierce County Health Department is assisting in this campaign by offering to distribute a pamphlet published by DHEW, and made available by the Fred Hutchinson Cancer Research Center, which explains this health concern. The pamphlet outlines the problem, how to find out if a young woman has been exposed to DES-type drugs, what procedures a physician might take, and a list of DES-type drugs. We would appreciate your help. The attached pamphlet is available in quantity for distribution through the health department. Let us know the number you will need. They can be picked up at the Health Education office at the new Health Department building, phone 593-4507.

We feel an additional effort should be made to reach the mothers of young women, and the young women themselves, who were treated with this drug, to alert them to this potential problem. For this purpose, we will contact the news media. Thank you for your assistance.

Sincerely,

Walter R. Herron, M.D., M.P.H.
Director of Health

MILLS EDWARD LAWRENCE, M.D.
University Professional Square
2607 Bridgeport Way West
Tacoma, Washington 98466

December 4, 1977

Members of the Medical Society of Pierce County
813 South K Street
Tacoma WA 98405

Dear Colleagues:

I have recently decided to accept an excellent offer from the Air Force and I will be leaving for some special training the end of December.

I wish to express my appreciation for the help, friendship and assistance of all my old friends – doctors, nurses and hospital staff – and I hope that, with the rapid advent of so many new faces, there will still be the communion and comradery which have been outstanding in the society in the past.

I expect to be stationed in the northwest in a few years, and I hope to see all of you again then. Any possible help with my patients will be much appreciated.

Sincerely,

M. E. Lawrence, M.D.

December 23, 1977

Lyon Moving & Storage
10807 Pacific Hy. S.W.
Tacoma Wa 98499

Gentlemen:

This letter is to authorize your office to release any of my medical files in storage upon receipt of a written request from any M.D. or D.O. physician, and to charge whatever fees (to the requesting physician) as would be reasonable for the search and mailing.

I will inform the Pierce County Medical Society of this request, to become official after December 23, 1977, the date of our last day in the office.

It is to be noted that the files are all recent and, essentially, active files, in that charts older than ten years old have been removed. In order to obtain the latter, it will be necessary for me to research my files on any date I may return from Air Force active duty, but these dates cannot be determined at this time.

Thank you for your courtesy and cooperation in this matter.

Sincerely,

M. E. Lawrence, M.D.

cc: 1. Files
2. Pierce County Medical Society
3. Doctors' Telephone Exchange

P.S. Files are also to be released to my receptionist, Mrs. Shirley Harold any expenses for these mailings will be paid by me.



medical diet service

THE WEIGHT CONTROL PROGRAM

- *Nutritional Guidance*
- *Food Provided – Calorie-Controlled*
- *Weekly Counseling for Support*

The Medical Diet Service program works, where other weight loss schemes fail, because its objective is to achieve permanent change in the eating patterns of your patients. That's weight control!

No pills. No liquid protein. The program is nutritionally sound.

medical diet service

TACOMA OFFICE
115 South 38th
Phone: 474-0683



Offices also in Olympia
and the Seattle area.

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- **MEDICAL**
 - **DENTAL**
 - **PROFESSIONAL**
- Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

Refine the Professional Image



Fly

Westgate Aero, Ltd.

- **Flight Instruction**
- **Ground School**
- **Aircraft Rental**
- **Aircraft Sales**

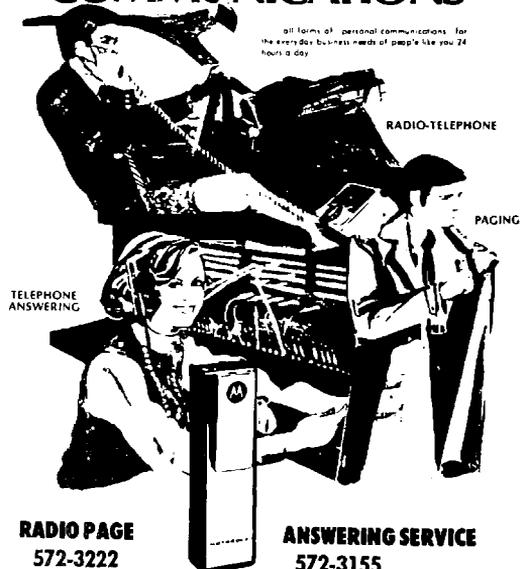
"A Touch of Class"

Tacoma
Industrial
Airport

Call
Collect
(206) 858-8695

INSTANT...TOTAL COMMUNICATIONS

fill forms of personal communications for
the everyday business needs of people like you 24
hours a day.



RADIO-TELEPHONE

PAGING

TELEPHONE
ANSWERING

RADIO PAGE
572-3222

PERSONAL PAGING is like having a
telephone in your pocket 24 hours a
day - when you must be con-
tacted, you get an actual voice mes-
sage from your personal Pager.

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE
fills in when you must be away from
your office. No matter what the hour,
your phone is answered by your own
personal telephone secretary.

For your total communication needs for your practice, contact
Fred McPherson or Tom Brokaw - 24 hour service.

CLASSIFIED

WANTED: ASSOCIATE DIRECTOR: Family Practice Residency. Board Certified practicing Family Physician with interest in teaching. Responsibilities include teaching residents and patient care. Excellent local medical facilities. Outstanding professional, cultural and recreational environment. Contact Roy Virak, M.D., Family Practice Residency Foundation, 737 Fawcett Avenue, Tacoma, Washington 98402.

WELL ESTABLISHED FAMILY PRACTICE available July 1, 1977. Conveniently located close to all major hospitals. Spacious office — reasonable rent. Retiring physician asks only that present records be maintained. For information call 383-5828.

MEDICAL PRACTICE AND OFFICE SPACE — Long established OB-Gyn, with some family practice, vacated. Office in central location, with or without furniture and equipment, available for lease or purchase. Excellent opportunity for starting physician. Call Mrs. Havlina, 752-1426.

ESTABLISHED GENERAL PRACTICE in Puyallup, Washington. Modern medical building suitable for three practitioners. Large child and adult waiting rooms. Ample parking. Fully equipped X-ray and Lab/EKG and Diathermy. Located near Good Samaritan Hospital. Hospital has modern CCU. Cardiologist comes from Tacoma twelve miles away. Space available for two doctors. Terms. 845-0575 / 845-8264.

OFFICE FOR RENT — Medical Center. 800 sq. feet. \$300.00/mo. Phone 272-7892.

LUXURY WATERFRONT APARTMENT, completely furnished, on Kauai. Rent by week. 759-4332, evenings.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T. G. Contact Richard Huish, M.D., 572-4664.

PROFESSIONAL OFFICE SPACE for rent. Central location. Moderate rental. If interested, call 383-1717 for information.

IBM EXECUTARY: Dictation and transcribing machine. Excellent condition. \$200. Also Phone Mate, \$75. 848-6655.

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

Listing 1101: General Surgeon seeking opportunity in General Practice or in Emergency Room setting. Interned at Worchester City Hospital, Worchester, Mass., 1960-61. Residencies at Fairview General Hospital, Cleveland (1961-63) and Freedmen Hospital, Washington, D.C. (1963-64). Overseas General Practice and ER Medical Officer experience 1965-74. Salaried government position, Nov. 1974 to Jan. 1976.

FOR SALE: Examination table, by Enochs; one year old; brown top, cream base; cost \$550.00 new, asking \$375.00; other equipment available; call 1-363-4480, evenings.

FOR SALE: Instrument Sterilizer — 16"x6"x4" — \$97. K. H. Sturdevant, M.D., 845-6645 or 848-2232.

TWO STENORETTES — De Jur-Grundig dictating and transcribing machine; tapes, mobile stand and carrying case. Good condition. \$250. 627-8448.

IMMEDIATE OFFICE SPACE AVAILABLE. Contact Gerald Kohl, M.D., 722 South "K" — 272-4251.

MICROSCOPE WANTED — USED — Binocular with optics to oil immersion. Prefer sub-state lighting. M. L. Bourne, M.D., 752-1111.

RECEPTION AREA white plastic scoop chairs in groups of two and three, \$20 per chair. 383-5437.

1976 PORSCHE 914, fully loaded, \$7,700. 1-858-2897, 383-5521.

RITTER POWER TABLE — Like new, \$2500. 7 white waiting room chairs in groups of 2 and 3, \$140. 3x5 walnut desk, \$100. Fiberglass canoe, 18 ft., \$150. Call 383-5437.

PIERCE COUNTY MEDICAL SOCIETY

813 South K Street
Suite 200
Tacoma, Washington 98405

ADDRESS CORRECTION REQUESTED

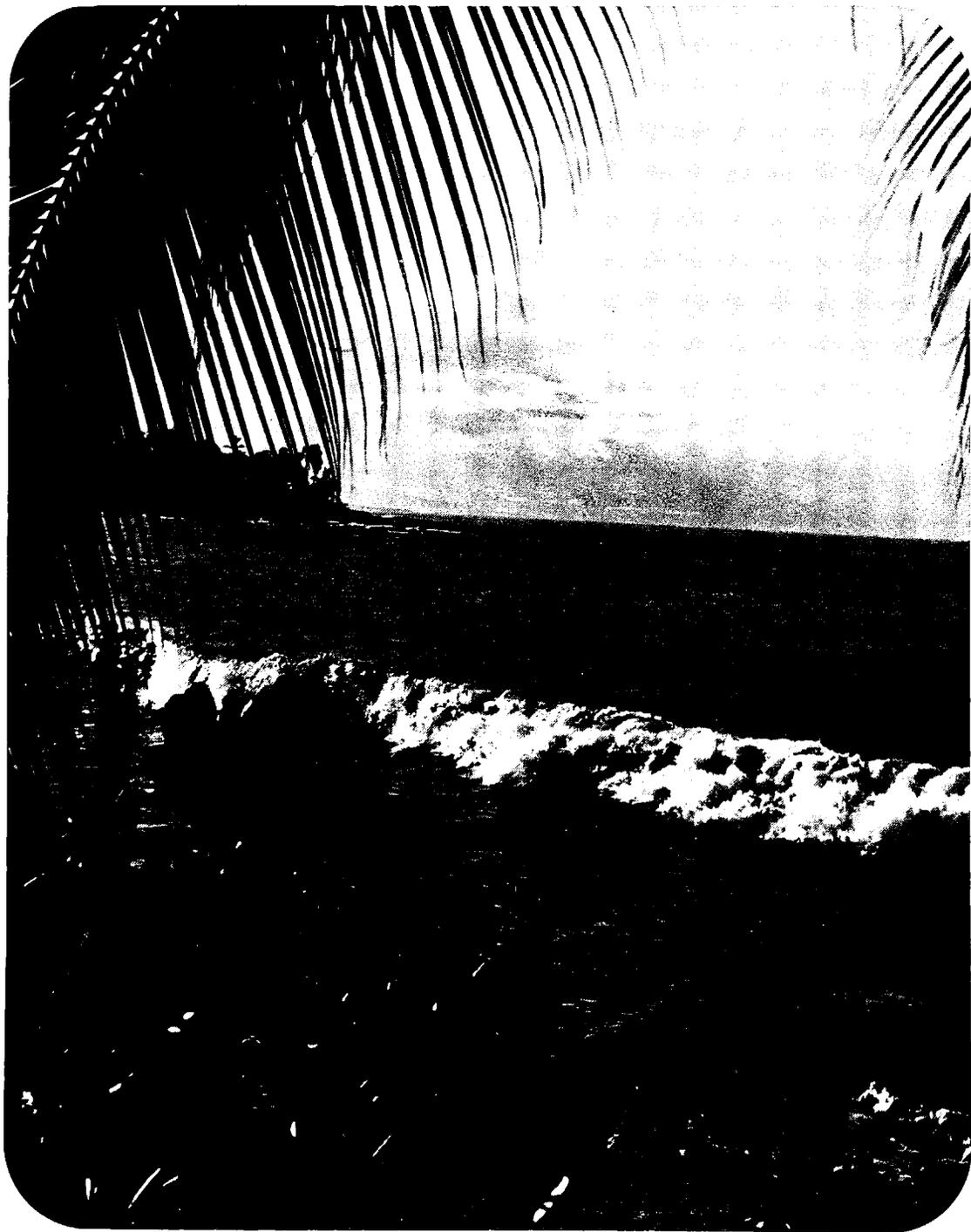
BULK RATE
U. S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

P C M LIBRARY
C/O TACOMA GEN HOSP
315 SO K ST
TACOMA WA 98405

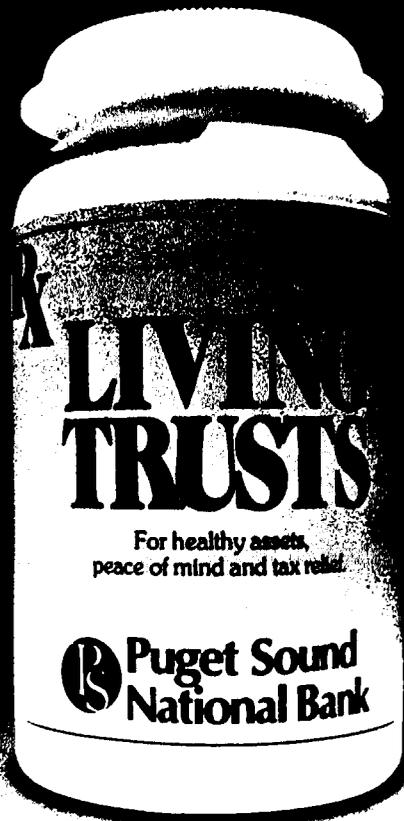


Medical Society of Pierce County

FEBRUARY 1978 • Vol. XLX, No. 2 • Tacoma, Washington



BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

**TRUST DEPARTMENT
(206) 593-3881**

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

Bulletin of the Medical Society of Pierce County

CONTENTS

page	
5	PRESIDENT'S PAGE
14	MEMBERSHIP
19	AUXILIARY PAGE
21	A.A.M.A. PAGE
23	LETTERS
27	CLASSIFIED
6	Tacoma Academy of Internal Medicine – Annual Meeting
7	“Drug Profiles, ‘As Directed,’ and Other Matters”
9	“Congress and Medicine: 1977 – It Was A Very Good Year” (AMA Guest Editorial)
11	“Immunization Campaign Inaugurated in Pierce County”
11	“Roster Production Under Way”
11	“The Child and the Law”
13	“Health Department Family Planning Program Offers More Than Birth Control”
15	Category I – Continuing Medical Education
17	Cancer Update – Primary Care – for Physicians and Nurses
18	“Medical Library Publishes Fee Schedule”
20	“Think Protection,” Editorial from Pierce County Herald
22	1978 Post-Graduate Institute in Psychology – Central Washington University
24	Travel – People’s Republic of China
26	Family Clinic



The Kona Coast, Hawaii.
A nice place to think about
as we await the approach
of spring.

Photo by
Glenn G. McBride, M.D.

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-Elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D.	(79)
Melvin L. Henry, M.D.	(80)
William B. Jackson, M.D.	(80)
Richard K. Ohme, M.D.	(80)
Charles C. Reberger, M.D.	(79)
Roy A. Virak, M.D.	(80)
Myra S. Vozenilek, M.D.	(79)
Helen Whitney	(78)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health / School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U. S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates upon request. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

*We have the qualified, experienced
office help you need.*

ONE PHONE CALL DOES IT ALL!

Call the

MEDICAL-DENTAL PLACEMENT SERVICE

*(a membership service of the Medical Society
of Pierce County)*

*“We specialize in matching the right employee
and employer.”*

*Let us save you time and money.
We pre-screen, test job skills and provide
customized service to meet your specific needs.*

Call

Sondra Sakala, Director

MEDICAL-DENTAL PLACEMENT SERVICE

572-3709

PRESIDENT'S PAGE



Ralph A. Johnson, M.D.

Family Practice Residency Deserving Of Your Support

Have *you* thought about the Family Practice Residency Program lately? What was considered initially by some to be an impossible undertaking will soon become a reality; for in July the program will become the only family practice residency in this state south of Seattle and west of Yakima. While many of us have realized the program has been in its formative state, few of us realize the great amount of effort that a group of dedicated physicians, hospital administrators, and public-minded individuals have put forth to bring the project to fruition.

Our county's program is a part of the University of Washington Affiliated Family Practice Residency Network. The program is unique in that it is a community based and community supported residency under the auspices of the non-profit family residency foundation (therefore, all contributions are tax deductible).

One of the goals of the Medical Society of Pierce County is to improve the quality of medical care in our area. Certainly, the Family Practice Residency is an extension of this policy and, hopefully, will provide at least a partial solution to one of our greatest current problems — the shortage of primary care physicians. In this context, consider the stated goals and objectives of the Family Practice Residency Foundation:

- To provide a model of family practice in which the resident can achieve the knowledge, skills and attitudes required for the various stages of patient care; prevention and

early diagnosis of asymptomatic disease, care of acute and chronic symptomatic disease, rehabilitation and the care of terminal illness.

- To train competent family physicians who are able to provide excellent continuous comprehensive health care to all members of the family. This includes being sensitive to the total needs of the patient and being coordinatory of the health care team.
- To provide a source of well trained Family Physicians for Tacoma and Pierce County. To facilitate the transition of the trainees from residency to private practice in the community, whether it be solo or group practice, by making them aware of the referral patterns and practices, available community facilities and the unique features of both the people and the area.
- To provide an opportunity for the resident to gain self-understanding with its relation to personal and professional life so that a satisfying life career in Family Practice Medicine can be developed.

Certainly this program deserves our support. One important source of funding comes from memberships offered to physicians (as well as to other individuals and business) at a cost of \$100 per membership. Additional funding will come from contributions from Allenmore, Mary Bridge, St. Joseph's and Tacoma General hospitals. Other sources of revenue will be from grants and donations, as well as from fees for services provided by the resident physicians and participating staff physicians.

This program offers an excellent opportunity for the private sector of medicine to work in concert with the general public toward the goal of improving health care delivery at the local level. Labor and business, in particular, are looking to see to what extent we physicians will support this program. Their participation may be greatly influenced by our degree of involvement. I urge you to send your membership check (\$100), as well as your good wishes, to:

Family Practice Residency Foundation
737 Fawcett Avenue
Tacoma, Washington 98402

R.A.J.

TACOMA ACADEMY OF INTERNAL MEDICINE

ANNUAL MEETING — MARCH 16-17, 1978

Application for Category I credit has been made. A specific number of hours of credit was not available at the time this notice was prepared.

Thursday, March 16

<u>MORNING</u>	—	8:00	Rheumatoid Arthritis Update	Bruce Gilliland, M.D.
		9:00	Giant Cell Arthritis	Kenneth Wilsky, M.D.
		10:00	Collagen Disease in 1978	Bruce Gilliland, M.D.
		11:00	Current Treatment of Rheumatoid Disease	Kenneth Wilsky, M.D.

<u>AFTERNOON</u>	—	2:00	Utilization of Endocrine Tests in Clinical Practice	John Leonard, M.D.
		3:00	Thyroid Function Tests and Thyroid Tumors	Neal Elgee, M.D.
		3:45	Thyroid Workshop	Neal Elgee, M.D.
		4:15	Use of Estrogens in Menopause	Donald Smith, M.D.

Friday, March 17

<u>MORNING</u>	—	8:00	Treatment of Acute Myocardial Infarction	John Murray, M.D.
		9:00	Medical Treatment of Angina Pectoris	John Murray, M.D.
		10:00	Recent Advances in Cardiac Surgery	Lester Sauvage, M.D.
		11:00	Panel - Coronary Artery Surgery in 1978	Moderator: Eugene Lapin, M.D. Panel: John Murray, M.D., Cordell Bahn, M.D. Lester Sauvage, M.D., John Nagle, M.D.

<u>AFTERNOON</u>	--	2:00	Neuropharmacology of Depression	David Raskin, M.D.
		3:30 to 5:00	Psychiatry in Medicine	Donald Dudley, M.D.

<u>EVENING</u>	—		Keynote Address	William Rieke, M.D.
----------------	---	--	-----------------	---------------------

Sponsored by: Tacoma Academy of Internal Medicine

In Conjunction With: College of Medical Education, Inc.

Meeting Space Courtesy of: St. Joseph Hospital, 6th Floor - Quadrant B
1718 South "I" Street (enter "J" Street Entrance)
Tacoma



Registration Fee: Non-Members \$75.00. Fee will not be refunded after March 16, 1978. No refunds can be made for partial attendance.
Enrollment Limited.

PAID PREREGISTRATION WOULD BE APPRECIATED BEFORE MARCH 15, 1978.

Address all correspondence and registration fees to: Maxine Bailey, Executive Director, Phone: 756-3152
College of Medical Education, Inc.
1500 North Warner, Tacoma, Washington 98416

My check for \$_____ is enclosed. (Please make check payable to C.O.M.E.)

Name _____

Address _____

I would like AAFP Credit (yes) (no) *circle one* Internal Medicine

Drug Profiles, "As Directed," and Other Matters



by
Herman S. Judd, M.D.

As I reported to you in the last BULLETIN, the Interprofessional Committee of Pharmacists and Physicians of Pierce County has been meeting quarterly and, from time to time, deliberations of your Committee will be published for your information.

Did you know that Washington State Law now requires the pharmacist to keep a profile so that drugs dispensed to any patient are recorded? This information can be in the form of a card file or on a computer. Information thus retrieved will help the pharmacist guard against unauthorized refills and, by knowing what medications the patient is already taking, avoid incompatibilities with new drugs. In addition, the law now provides that the pharmacist, like the physician, must inform the patient of incompatibilities, as well as potential side effects. Failure to do so can result in a suit against either the pharmacist or physician or both.

Physician members of the Committee have brought up the problem of non-pharmacist personnel answering the telephone when a doctor phones in a prescription. The aggravation of being put on "hold" has been mentioned before, but far worse is the non-pharmacist presuming to take the prescription as if he or she were a

pharmacist, and halfway through the conversation the physician suddenly realizes he is not talking to a registered pharmacist. This is, of course, illegal on the part of the pharmacy. The pharmacists are working to eliminate this problem which arises when they are on another telephone line, or are otherwise disposed. To know that the pharmacist is "on the other line" or "will be with you in a moment" or "will call you back in a few moments" is helpful.

I was personally unaware that the signature, "As Directed," is now illegal. We must write the directions, which in the case of some prescriptions, such as birth control pills, seems a bit redundant. I get around this in a "sneaky" way when I phone a prescription for one of these by telling the pharmacist, "... and put the usual directions on, please!"

Concerning refill orders on prescriptions, the pharmacists have pointed out that we should write the number of refills we desire the patient to have, if any, in words such as "refill three times," and not use the numerals, such as "3." With the numerals, the patient can change the number before submitting the prescription to the pharmacist, so that "1" can become "11," for example. This we must particularly watch for on prescriptions for controlled substances.

And finally, for this issue, a reminder of the "Hot Line" numbers should be made; "537-5993" or "531-6533" are not in the phone book but do appear in the directories of physicians and surgeons in Pierce County, as well as on many of our pharmacy phone lists. If you have reason to suspect your prescription blank has been stolen, or that someone is forging your name or going from one pharmacy to another to get a controlled substance, a call to the hot line will alert every pharmacist in Pierce County within about ten minutes!

Kefzol® I.M./I.V. cefazolin sodium

Ampoules, equivalent to 500 mg., 1 Gm.,
and 10 Gm. of cefazolin



700773

Additional information available
to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206

CONGRESS AND MEDICINE: 1977 IT WAS A VERY GOOD YEAR

AMA Guest Editorial

Despite a hard-line attitude among many wielders of political power and influence in Washington, every major Congressional move against medicine in 1977 was defeated, stalled, or defanged.

The achievements reflected not only the AMA's vigor in Washington but its amplified communication and liaison with component societies, other health-care organizations, insurers, and businessmen.

Defeated were:

- A clear-cut Congressional sanction for Federal Trade Commission jurisdiction over non-profit organizations, including medical societies. Denial of that sanction means the FTC's current forays against physicians and their organizations remain subject to the kind of challenge that the AMA has mounted.

- Subjection of physicians' offices to certificate-of-need programs, as called for in several versions of hospital "cost-containment" proposals.

Stalled were Administration proposals for price controls on hospitals and a fixed national dollar limit on capital expenditures of health institutions.

Defanged was HR 3, the Medicare-Medicaid Anti-fraud and Abuse Amendments signed into law by President Carter as PL 95-142.

Our AMA federation supported the basic fraud and abuse control principle of HR 3 but successfully achieved such modifications as these:

- The definition of "shared health facilities" — originally encompassing almost all group practices — is narrowed more closely to the originally intended "medicaid mills" and the like. The practitioner and groups of practitioners are generally exempted from HR 3's cumbersome reporting and disclosure requirements.

- Medicare-Medicaid review programs duplicating those of PSRO's are waived, provided the latter are found to be performing their duties effectively. Also, authority for "program review teams" to evaluate medical care — duplicating PSRO review — is repealed.

- The period for a PSRO's conditional status, and the starting time for ambulatory-care review under PSRO, are extended.

Those are just a sample of the changes our federation achieved in HR 3 — but they symbolize the complexity of its many annual legislative tasks.

In 1977 the AMA stepped up its liaison with both Congress and the White House, and the AMA and all parts of the federation worked closer than ever on these critical issues to achieve these legislative results.

Organized medicine will face many critical legislative issues in the next year, including amendments to the Planning Act, many other Public Health Service programs, and National Health Insurance. Medicine must continue to pull together on legislation in order to protect physicians and patients from legislative acts that would reduce the quality of medical care, increase costs, or reduce access.

— DOCTORS —

There is an important need for proper physician identification should care be provided in an emergency situation. Your best means of identification is your license renewal tab. Please carry this identification in case of an emergency.



**Without you
your practice isn't
worth much more than
the price of a room
full of used equipment.**

**That's something you need to keep
in mind when planning for your
family's financial security.**

There is a program of Survivor Security Life Insurance designed especially for the needs of physicians. It is sponsored and endorsed by your county medical society and the Washington State Medical Association. It provides you with a high level of protection at a very low monthly cost due to the group rate made possible by the society's and association's buying power. This special program offers you the following advantages:

- **Select the plan that best fits your needs:
Choose two if you wish.**

Survivor Security Life Insurance pays your survivors \$500, \$1,000, \$2,000 or \$2,500 monthly, or more, for five years, ten years or 20 years. Total benefit payments range from \$30,000 to \$360,000.

- **Benefits can be paid other than monthly.**

You can determine if your beneficiary may request a lump sum settlement in lieu of monthly payments.

- **Income continues if your survivor also dies.**

In addition to the primary beneficiary, you can also name contingent beneficiaries.

- **Special conversion privilege.**

You may convert to a permanent plan of life insurance at any time.

- **Your insurance will not be cancelled.**

And rates cannot be changed unless they are changed for all participants in this group.

- **Disability death benefit.**

Should you become totally disabled, and then stop premium payments, the full benefit is still payable if death occurs within one year.

When you examine these features and the low group rates, we're sure you will agree that this program is ideally suited to the special needs of physicians and surgeons.

For more information explaining the benefits and provisions of this program, call Ned Shera, CLU, or Susan Keith, CLU, at Schwarz, Shera and Associates, 572-6010. They can answer your questions and mail you additional information, including rates and an application.

**Sponsored and endorsed by your county
medical society and the WSMA.**

Underwritten by: Safeco Life Insurance Co.



**SCHWARZ, SHERA
and ASSOCIATES, INC.**

*Insurance brokers and financial consultants
to Pierce County physicians since 1963.*

572-6010

THIS MESSAGE IS INTENDED TO OUTLINE CERTAIN BENEFITS. IT IS NEITHER AN OFFER OF INSURANCE
NOR A LEGAL DESCRIPTION OF ALL POLICY PROVISIONS.

OPERATION INOCULATION

Immunization Campaign Inaugurated in Pierce County

by **George Tanbara, M.D.**
Chairman, School Health/Public Health Committee

The Medical Society's immunization campaign got off to an excellent start at a meeting held Tuesday, January 10 at Mary Bridge Hospital. The meeting was attended by representatives from the Pierce County Parent/Teacher/Student Association, the School Nurses of Washington, the Tacoma-Pierce County Health Department, the Tacoma Public Schools, the Pierce County Hospital Council, the Medical Society Auxiliary, the Professional Pharmacists of Pierce County, the Tacoma Academy of Internal Medicine, the Pierce County Chapter of the American Academy of Family Practice, and the Southwest Washington Pediatric Society. A reporter from the Tacoma News Tribune also attended.

Response by the news media was quick and positive. The News Tribune carried a front page article announcing the program the day following the meeting, and an editorial urging full immunizations the following Sunday. KOMO-TV and KOMO-Radio reported on the campaign to in-

crease public awareness of the need for full immunizations, and the Pierce County Herald reported on the campaign and endorsed the Society's efforts editorially.

To achieve the goals of this program, your participation is a necessity. Each organization involved has been asked, and will continue to be urged, to do its utmost to insure the adequacy of immunization of all the people in Pierce County — not just children.

The Washington State Medical Association has initiated its statewide program which is supportive of the American Medical Association national program.

If you have questions about our immunization program, or suggestions, please contact me. The School Health/Public Health Committee meets the third Thursday of each month, from 8:00 to 9:00 a.m., at Mary Bridge Hospital. Your attendance and active participation is welcome.

Roster Production Under Way

The 1978 roster of Medical Society member physicians is now being produced by the society auxiliary. Physicians have received mailed questionnaires designed to provide the auxiliary with information to be included in the roster. (Additional information requested will be used for the society office only.)

The auxiliary asks that physicians respond to the questionnaire as expeditiously as possible, to facilitate publishing of the roster. Proceeds from the roster project will be used by the auxiliary for its programs to advance medicine and public health in Pierce County. Kit Larson is chairperson of the roster project committee.

The Child And The Law

On Saturday, March 4, a program entitled "The Child and the Law" will be held at Wilson High School. The program will bring together physicians, lawyers, and educators, as well as others, for a close look at the new juvenile. Justice, education, rights and privacy regulations, and child abuse will be explored at this Saturday program. The cost of \$10.00 includes syllabus and lunch. Those interested in attending should contact Roger Meyer, M.D., 593-6800, for further details and registration.

THE MEDICAL ARTS BUILDING

Tacoma's Finest Professional Center

The owners and management of Tacoma's Medical Arts Building are dedicated to providing you as a member of the Medical profession—and your patients—with the facilities, supporting services and conveniences essential to your practice. Here are some of the advantages of locating your offices in the Medical Arts Building:

- Office facilities designed specifically to meet your professional needs.
- Extensive supporting services located in the building.
- Centrally situated among three major hospitals—Doctor's, St. Joseph's, and Tacoma General.
- Easy access—by car and by bus.
- Inside parking—at your doorstep, not a "football field" away.
- Personal, professional extras—building hostess to assist you and your patients; distinctive and effective building security system.
- And, reasonable rental rates—an important consideration in these days of rising equipment, insurance, and other costs.



For an appointment or further information, please contact Doug DeForest at:

Medical Arts Building, 740 St. Helens Avenue, Tacoma, Washington 98402, or phone (collect) 206 - 272-3161.

Health Department Family Planning Program Offers More Than Birth Control

by Jan McGhee, Public Education Specialist
Health Department

In the past, the phrase "family planning" has been synonymous with "birth control." For family planning proponents, this narrow definition has been one of their greatest obstacles to providing broad family planning services. The Health Department, through its Family Planning Program, is among those working toward a new meaning of the term, family planning, and takes into account the fact that planning may involve a great deal more than the provision of contraceptive services. In some cases, it may be appropriate to assist patients with conception rather than contraception.

The services offered at the Family Planning Clinic attempt to contribute to the community's awareness by providing:

1. Education, counseling, and gynecological examination for persons who are considering a temporary birth control method.
2. Education, counseling, and referral for men and women who are considering a permanent method of birth control. Low-cost vasectomy surgery is also available at the clinic.
3. Counseling and referral for anyone who is concerned about an unplanned pregnancy.
4. Education and counseling with emphasis on early prenatal care for the pregnant patient.
5. Education and counseling for men and women in regard to infertility.
6. Education, counseling, and referral for anyone who has questions about reproductive anatomy, conception, sexual response, or who may have problems related to their own sexuality.
7. Educational presentations for schools, institutions, and other community groups on topics ranging from parent-teen communication to birth control methods.

These Health Department services are available to anyone in the community, regardless of age or ability to pay. By operating on a sliding fee scale, the educational, counseling, and medical services at the Family Planning Clinic are accessible to low-income residents of the Tacoma-Pierce County area who might otherwise be denied the opportunity to plan their families.

The close working relationship that has been established between the clinic and the medical community has been of tremendous value, and the clinic staff depends heavily upon local doctors to assist them by accepting referrals for further treatment or diagnosis.

The Family Planning Clinic also relies on an advisory board, consisting of several physicians, for its medical and policy direction. The clinic staff wishes to extend an invitation to the medical community to tour the new facility and get acquainted with the clinic staff.

YOUR MEDICAL LIBRARY

Your access to the world literature in medicine through the network of biomedical communication: Hospital Library — Pierce County Medical Library — Pacific Northwest Regional Health Sciences Library — National Library of Medicine — British Lending Library.

Comprehensive library services include: literature searches, bibliographies, interlibrary loans, and Medline searches (Literature retrieval by computer).

HOURS: Monday - Friday 8:00 A.M. - 5:30 P.M.
(Other times key is available by request)

M. Von Bruck, Librarian
572-5340

MEMBERSHIP

FIRST NOTICE

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:



RONALD G. EARLY, M.D., Psychiatry. Born in Brownwood, Texas, 8/27/44; medical school at University of Texas, San Antonio, 1975; residency in psychiatry at the University of Washington, Seattle, 1975 to present; licensed to practice medicine in the State of Washington, 1976. Dr. Early is practicing psychiatry at Puget Sound Hospital in Tacoma.



STANLEY M. FEERO, M.D., Emergency Medicine. Born in Juneau, Alaska, 10/3/50; medical school at University of Washington, Seattle, 1976; internship at Chicago Medical School, Chicago, Illinois, 1976-77; licensed to practice medicine in the State of Washington, 1977. Dr. Feero is practicing Emergency Medicine in Pierce County area hospitals.



DELRAY MAUGHAN, M.D., General Practice. Born in Twin Falls, Idaho, 6/23/50; medical school at University of Colorado Medical Center, Denver, 1976; internship at Madigan Army Medical Center, 1976-77; licensed to practice medicine in State of Washington, 1977. Dr. Maughan is currently practicing medicine at the Troop Medical Clinic at Fort Lewis.



JOHN L. MILLER, M.D., Psychiatry. Born in Great Falls, Montana, 6/8/42; medical school at Indiana University, Indianapolis, Indiana, 1970; internship at Methodist Hospital, Indianapolis, Indiana, 1970-71; residency in pediatrics at University of Washington, Seattle, 1973-75; an additional residency in psychiatry at the University of Washington, 1975 to present; licensed to practice medicine in the State of Washington, 1975. Dr. Miller practices psychiatry at Puget Sound Hospital.



PAUL D. SCHNEIDER, M.D., Internal Medicine/Nephrology. Born in Seattle, Washington, 3/13/42; medical school at University of Washington, Seattle, 1970; internship at Fitzsimons Army Medical Center, Denver, Colorado, 1970-71; residency in internal medicine at Fitzsimons, 1970-71, and in nephrology at Walter Reed Army Medical Center, Washington, D.C., 1973-75; board certified in internal medicine and nephrology; licensed to practice medicine in the State of Washington, 1977. Dr. Schneider's office of Internal Medicine/Nephrology is located at A215 Allenmore Medical Center in Tacoma.



GEORGE MICHAEL WIESE, M.D., Neurosurgery. Born in Brooklyn, N.Y., 5/13/41; medical school at Georgetown University School of Medicine, 1967; internship at Madigan Army Medical Center, 1967-68; residency in neurosurgery at Walter Reed Army Medical Center, Washington, D.C., 1968-73; board certified 1976; licensed to practice medicine in State of Washington, 1972; also practiced medicine as Chief of Neurosurgery at Madigan. Dr. Wiese's office of neurosurgery is located at 1624 South "I" Street in Tacoma.

SECOND NOTICE



MICHAEL R. PEARSON, M.D., Psychiatry/Child Psychiatry. Born in San Francisco, California, 6/7/45; medical school at University of Minnesota, Minneapolis, 1971; internship and residency in psychiatry at State University of New York at Buffalo, 1971-75; residency in child psychiatry at University of Oregon in Portland, 1975-76; licensed to practice medicine in the State of Washington, 1976; also practiced medicine as staff child psychiatrist at the Child Study and Treatment Center, Western State Hospital. Dr. Pearson's psychiatric practice is located at 401 Broadway in Tacoma.

CATEGORY I – CONTINUING MEDICAL EDUCATION – PIERCE COUNTY

The following programs are in the planning process for the winter and spring of 1978 by the Committee for Continuing Medical Education of the Medical Society of Pierce County and the local hospitals in conjunction with the College of Medical Education, Inc. The programs will host visiting and local experts. Notice for each program, including specific information regarding format and speakers, will be mailed to your office at least three weeks prior to the offering. **THIS SCHEDULE IS SUBJECT TO CHANGE** – Please call our office if you are interested in a program that you have not received specific notice for.

Category I Credit
to be applied for

March 16, 17
T/B/A

INTERNAL MEDICINE MEETING
Review of Endocrinology, Rheumatology,
Cardiology, and Psychiatry in Internal Medicine
Coordinator: Mel Henry, M.D.

March 30, 31 and April 6, 7
Good Samaritan Hospital
8:00 to 10:00 a.m.

THE ENDOCRINE GLANDS
Coordinator: Thomas Clark, M.D.

8

April 5, 12, 19, 26
Tacoma General Hospital
8:00 to 10:00 a.m.

POTPOURRI
Dermatology, Gyn, GI Disease, Arthritis
Coordinators:

May (Tentative)
Tacoma General Hospital
Day long

BREAST CARCINOMA
Coordinator: J. B. Katterhagen, M.D.



COLLEGE OF MEDICAL EDUCATION
University of Puget Sound
1500 North Warner; Tacoma, Washington 98416

MRS. MAXINE BAILEY
Executive Director
756-3152

RECENT SURVEYS REVEAL ATTITUDES TOWARD MEDICINE, HEALTH SYSTEM

MEDICINE'S LEADERSHIP SCORES HIGHEST

In two recent Louis Harris Surveys, public confidence in major institutions increased throughout the country. In a survey taken in late 1977 and released in January, Harris reported that the public shows its greatest confidence in the "people running medicine." Fifty-five percent of the public said it has "a great deal of confidence" in medical leadership, compared to 42% in a survey made in 1976. Of the 16 "institutions" tested, only the press failed to score higher than in 1976. Scoring second to medical leadership was higher education with 41%. The other percentages: Organized religion, 34%; U.S. Supreme Court, 31%; the military, 31%; television news, 30%; White House, 26%; major companies, 23%; executive branch of government, 23%; local government, 21%; state

government, 19%; the press, 19%; law firms, 16%; Congress, 15%; organized labor, 15%; advertising agencies, 11%.

A few weeks earlier Harris released a similar survey designed to test whether the public thinks the leaders of various institutions and professions are "in touch with" the people they are supposed to lead or help. Again medicine led the list. Seventy-three percent of the public said medicine's leaders "really know what people want," up from 69% in 1975. Next to medicine was television news with 67%. At the bottom of the 15-institution list was Congress with 31%.

RATING OF SERVICE DROPS

A Roper Survey released late in December indicates that the public is becoming less satisfied with all types of ser-

continued on page 27

If you want your patients to buy the margarine highest in beneficial polyunsaturates, recommend Saffola®

Saffola margarine is made with liquid safflower oil. So it's higher in polyunsaturates than even corn oil margarine.

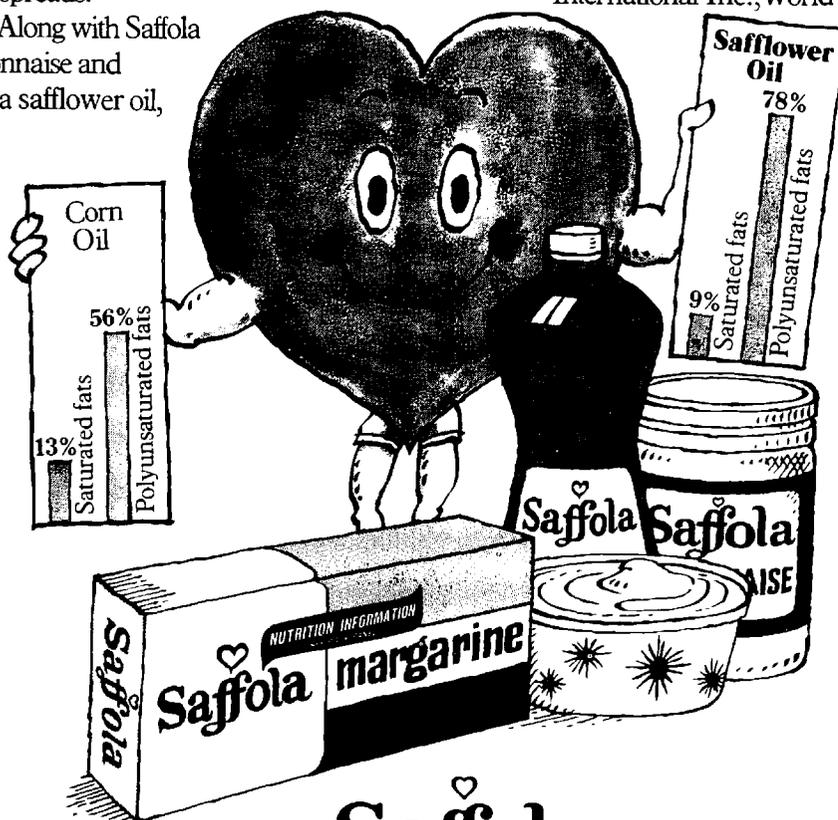
And Saffola margarine contains no cholesterol. But it tastes as delicate and light as other spreads.

Along with Saffola mayonnaise and Saffola safflower oil,

Saffola margarine can help your patients reduce serum cholesterol as part of a fat modified diet.

For comparative nutritional information on all of our safflower oil products write:

Consumer Products Division, PVO
International Inc., World Trade Center,
San Francisco,
California
94111.



Saffola®

Highest in beneficial polyunsaturates.

CANCER UPDATE – PRIMARY CARE *for Physicians and Nurses*
 February 14, 15, 16, 17, 1978 - 8-10 a.m., St. Joseph Hospital, Tacoma

CATEGORY I, CREDITS: 8 HOURS. As an organization accredited for continuing medical education the College of Medical Education, Inc., certifies that this offering meets the criteria for eight credit hours in Category I for the Physicians Recognition Award of the American Medical Association and for the relicensure requirements of the Board of Medical Examiners of the State of Washington.

Accredited by the American Academy of Family Physicians for eight credit hours – Category I (Prescribed)

Accredited by the American College of Emergency Physicians for eight hours credit.

Tuesday Feb. 14	8:00	BREAST CANCER SCREENING: The presentation will describe palpation techniques; aspiration biopsy; the manner of follow-up for the high risk patient; the problems of patients with cystic disease of the breast; indications for mammography, etc.	Robert F. Jones, M.D. Assoc. Professor of Surgery U. of Washington School of Medicine Seattle
	9:00	XEROMAMMOGRAPH – ITS USE & ABUSE: The lecture will include new guidelines from the American College of Radiology & American Cancer Society.	Anthony S. Lazar, M.D. Radiologist Tacoma
	9:45	Discussion Period – Questions from participants.	
Wed. Feb. 15	8:00	SCREENING FOR COLO-RECTAL CANCER: Routine procedures such as proctoscopy, rectal examination, etc., will be described.	Richard D. Baerg, M.D. Gastroenterologist – Tacoma
	9:00	OSTOMY FOLLOW-UP CARE	Barbara Menzel, R.N., M.N. Nurse Practitioner – Tacoma
	9:30	REHABILITATION OF THE MASTECTOMY PATIENT: Physical and psychological needs of the mastectomy patient.	Jeanine Aitchison, Coordinator Reach to Recovery Program of Pierce County
Thurs. Feb. 16	8:00	LUNG CANCER – SCREENING & EARLY DETECTION: Early diagnostic techniques; fiberoptic bronchoscopy; percutaneous needle biopsy; sputum cytology in high risk patients; smoking statistics.	Bruce Buchanan, M.D. Pulmonary Specialist Tacoma
	8:45	SCREENING FOR GYNECOLOGICAL MALIGNANCY: Routine pelvic & Pap smears, use of estrogens, etc.	Peter R. Kosling, M.D. Obstetrician – Tacoma
	9:30	UNPROVEN METHODS OF CANCER CARE: Legal status of Laetrile in Washington State.	A. R. Thiessen, M.D. Oncologist – Tacoma
Friday Feb. 17	8:00	MALIGNANT & PRE-MALIGNANT LESIONS OF THE SKIN: Early detection, slides showing various types of skin malignancies, follow-up care and recognizing recurrent lesions.	James Komorous, M.D. Dermatologist Tacoma
	9:00	COMMUNITY RESOURCES & CANCER REHABILITATION: What is available in Pierce County for the cancer patient and his family? Are our resources adequate?	Mark Livengood, M.D. Tacoma General Hospital
	9:30	HOSPICE CONCEPT OF TERMINAL CARE: The hospice philosophy for the patient and his family – an idea whose time has come!	J. Gale Katterhagen, M.D. Oncologist Tacoma

Program Coordinator: J. G. Katterhagen, M.D.

Sponsored by: St. Joseph Hospital

In conjunction with: The Committee for Continuing Medical Education of the Pierce County Medical Society
 College of Medical Education, Inc.

To be held at: St. Joseph Hospital, Tacoma – 6th Floor, Quad B

Registration fee: Physician: \$40.00 – Nurses: \$25.00

Program is subject to cancellation if minimum paid registrations have not been received. Refunds cannot be made for partial attendance. No refunds will be made after February 14, 1978.

Address all correspondence to: Maxine Bailey, Executive Director, College of Medical Education, Inc.
 Tacoma, WA 98416 – 756-3152

My check for \$_____ is enclosed. (Please make check payable to C.O.M.E.)

Name _____

Address _____

I would like AAFP Credit (yes) (no) *circle one*

Cancer Update

MEDICAL LIBRARY PUBLISHES FEE SCHEDULE

In an effort to more equitably distribute its costs of operation, the Pierce County Medical Library has incorporated the following use fee schedule as part of its 1978 budget. In addition

to the fees listed below, fees for lawyers, other professionals, health care agencies, pharmaceutical agents and paramedics have also been established.

PRACTITIONERS WHO ARE MEMBERS OF THE MEDICAL SOCIETY OF PIERCE COUNTY

Unlimited use of the library and its resources.

Five literature searches per year covering up to 5 years, no charge.

Additional literature searches covering up to 5 years, \$5.00 per search.

Additional literature searches covering 5 to 20 years, \$10.00 per search.

Additional literature searches covering more than 20 years, \$15.00 per search.

Interlibrary loans, no charge.

Xerox copy service, 10¢ per page.

Loan policies: Textbooks — 5 days; can be renewed.

Periodicals — 7 days; can be renewed.

Audio tapes — 2 days per tape; 3 tape limit.

Overdues — \$1.00 first day; 50¢ each additional day.

Lost or damaged materials — borrower will be charged replacement cost.

Library Bulletin with news of acquisitions, publications, and reference section of current articles tailored to individual interest profiles and important general health care information.

PRACTITIONERS WHO ARE NOT MEMBERS OF THE MEDICAL SOCIETY OF PIERCE COUNTY, AND DENTISTS

Annual dues — \$100.00. Unlimited use of the library and its resources.

Five literature searches per year covering up to 5 years, no charge.

Additional literature searches covering up to 5 years, \$10.00 per search.

Additional literature searches covering 5 to 20 years, \$15.00 per search.

Additional literature searches covering more than 20 years, \$20.00 per search.

Interlibrary loans, no charge.

Xerox copy service, 10¢ per page.

Loan policies: Textbooks — 5 days; can be renewed.

Periodicals — 7 days; can be renewed.

Audio tapes — 2 days per tape; 3 tape limit.

Overdues — \$1.00 first day; 50¢ each additional day.

Lost or damaged materials — borrower will be charged replacement cost.

Library Bulletin with news of acquisitions, publications, and reference section of current articles tailored to individual interest profiles and important general health care information.

RESIDENTS AND MEDICAL STUDENTS

Annual dues, \$25.00 (Residents only)

Unlimited use of the library and its resources.

Limited literature searches.

Xerox copy service, 10¢ per page.

Loan policies:

Textbooks — 5 days; can be renewed.

Periodicals — 7 days; can be renewed.

Audio tapes — 2 days per tape;

3 tape limit.

Overdues — \$1.00 first day;
50¢ each additional day.

Lost or damaged materials - Borrower will be charged replacement cost.

No out-of-town loans.

PRE-MED STUDENTS FROM LOCAL OR OTHER COLLEGES AND UNIVERSITIES

Use of the library and its resources under the sponsorship of a practitioner who is a member of the Medical Society, Monday through Friday, 1:00 p.m. to 5:30 p.m.

Xerox copy privilege (have to do their own copying), 10¢ per page.

No literature searches — No loans.

PRACTITIONERS VISITING FROM OUT OF TOWN

Use of the library and its resources as a courtesy during visit.

Xerox copy service, 10¢ per page.

No literature searches — No loans.

AUXILIARY PAGE

AUXILIARY OFFICERS 1977-1978

President	Helen Whitney
President-Elect	Jo Roller
1st V.P. & Program	Kathy Miskovsky
2nd V.P. & Membership.....	Nicole Crowley
3rd V.P. & Historian & Bylaws.....	Reta Bergstrom
4th V.P. & Arrangements	Lee Jackson
Recording Secretary	Martia Ohme
Corresponding Secretary.....	Jan Thiessen
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

COMMITTEE CHAIRMEN

AMA-ERF.....	Marge Ritchie
Communications:	
Bulletins	Georgia McPhee
Newspaper	MaryIn Baer
Mailing	Donna Prewitt
Telephone	Barrie Mott
Joanne Iverson, Arlene Hopp	
Community Health.....	Kay North
Cookbooks	Judy Baerg
Tasting Luncheon	Stephanie Tuell
Dance	Carol Hopkins
Finance.....	Kimi Tanbara
Joint Dinner	Genny Hansen
Legislation	Cindy Anderson
Newcomers.....	Janet Fry
Nominating.....	Marie Henry
Pierce County Health Council.....	Nadine Kennedy
PCMS Directory.....	Kit Larson
Sunshine	Lorna Burt
Superintendent's Advisory Health Council and Handicapped Acceptance Program.....	Sharon Lukens
Student Recognition Awards.....	Barbara Wong
Marilyn Mandeville	
Tel-Med Volunteers	Lila Early

Congratulations to all of you who helped make our AMA-ERF holiday card project a huge success. Each year you come through with more than the year before. This year our donations totalled \$6,577 — more than \$900 over last year's contributions. It's an easy way to send holiday greetings to your colleagues and help out medical schools and students at the same time.

A big thanks goes to Betty Bahn, Judy Baerg, Mary Ann Lee and Sharon Lawson for helping address the Holiday cards.

Remember — you can say "thank you" to another doctor by contributing in his name to AMA-ERF throughout the year.

Marge Ritchie
AMA-ERF Chairman

Of course, the successful outcome of this project is due to Marge's careful attention to detail. In addition to doing all the secretarial work and book-keeping involved, she helped to bring our mailing list up to date before sending out letters to all the doctors in the county. Well done, Marge!

The Auxiliary was represented by Helen Whitney and Lila Early at a kick-off meeting for "Operation Inoculation," the project of the Public Health/School Health committee chaired by Dr. George Tanbara. Enthusiastic support was also offered by representatives of the Health Department, PTSA, Tacoma Public Schools, Hospital Council, pharmacists, and several medical specialty groups. The aim of the project is to have all school children fully protected against diphtheria, pertussis, polio, measles, tetanus, mumps and rubella by September 1978. The private physicians of Pierce County will try to accomplish this before the federal government forces upon us its expensive, bureaucratic plan to do the same thing.

The board members have reviewed responses to the membership questionnaire sent in the last newsletter and are grateful for your suggestions and compliments. We depend on the Medical Society's records for names of potential members. If, heaven forbid, we have not contacted you, it could be because your spouse did not include your name on his/her application for membership in the Medical Society; or perhaps you were married after he or she became a member. Don't be shy. Call new membership chairman Janet Fry, 584-2517, and tell her you'd like to hear more about Auxiliary. We welcome all spouses.

The March meeting will be in Puyallup at the home of Barrie Mott, with a program concerning widowhood. The Washington State Auxiliary's helpful booklet, "Physician's Survivor Information," will be available.

State Auxiliary President Bev Downing urges all members to attend the Mid-Year Conference in Yakima, March 13-15. Seminars are planned on public speaking, the battered woman, Pierce County's Project Awareness, and parliamentary procedure. The Yakima Auxiliary is famous for its hospitality and good fellowship. Please call Helen Whitney for registration information.

Are you sure you've paid your dues? Dot Truckey is sending in her report to the State Auxiliary in March.

JOINT DINNER

Tuesday, February 14, 1978

Tacoma Country and Golf Club

NO HOST COCKTAILS 6:30 P.M. • DINNER 7:30 P.M.

\$20.70 PER COUPLE INCLUDES GRATUITIES

GUEST SPEAKER — LLOYD COONEY
President and General Manager, KIRO-TV

Make check payable to Medical Society of Pierce County
Mail to: Genny Hanson, 9020 Lake Steilacoom Pt. Rd. SW, Tacoma, WA 98498

LIMITED SEATING — PLEASE REGISTER NOW

(EDITOR'S NOTE: The news media in Pierce County, and Seattle, was quick to respond to the society's public awareness campaign on immunizations. As the following editorial indicates, there is a receptive attitude regarding the need to support complete immunization, and thus the society's position, in the community.)

Page A4-Pierce County Herald-Wednesday, January 18, 1978

comment/opinion

Think protection

Every school-age child in Pierce County should be completely immunized before October.

That goal was set by the Pierce County Medical Society as it launched an immunization program last week. A secondary goal of the program is to meet federally mandated immunization standards before federal agencies become involved in local immunization.

There could be no more worthwhile goals for the physicians.

We live in a period when the once controlled diseases are again posing a health threat. Young children are paying the toll for parental apathy and complacency.

A recent poll revealed the statewide immunization level is 40 percent. Pierce County is a little better with about half the children having the complete series of recommended immunizations.

If 28 percent of the Pierce County children had one more visit to their physician for complete protection, the county level would be boosted to 78 percent. Statewide another 42 percent need an additional immunization to complete the required series.

There is no need for our children to have measles, mumps, reubella, diphtheria, tetanus and whooping cough. Neither is there a need to have the paralysis of polio rear its ugly head again after being virtually conquered.

Many of us can remember as youths foregoing summertime congregational type activities because of the threat of polio. Some can remember a close friend who contacted the disease. Should our children be subjected to this same threat when protection is so easy and painless?

Why wait until October? With a conscientious effort on the part of physicians, school officials, parents and the entire community this worthy goal could be accomplished by June.

As the medical society has said, awareness is the key and we applaud their efforts to make the immunization needs of the children in our county known.

We would like to aid this effort and would like to capitalize upon the positive attitude of skiers who continually express the need to "Think Snow." We say, "Think Protection." Does your child have complete protection? If not, act now. Protection is as close as your physician or the nearest health clinic.

A.A.M.A. PAGE

by Doris Stansell, Pierce County Chapter

The Pierce County Chapter, American Association of Medical Assistants, Washington State Society, met on January 9th at the Yukon Mining Co. and Dancehall for its first meeting of 1978.

Since our last report we held a Bosses' Night in November (at Busch's Round Table) which turned out to be such a success we have plans for making it an annual affair. In addition to our members and their bosses, a number of other physicians and their assistants, primarily in the Lakewood area this time, were invited to attend and we had a great turnout. Election by ballot was held for our new officers. Dr. Zimmerman presented an extremely interesting slide show called "Exploration Northwest," a history of the San Juan Islands and their exploration. Entertainment was furnished by a new barbershop quartet, enjoyed by all.

On December 3, our annual Christmas and Installation Banquet was held at Honan's, with another good turnout. New officers installed were: President, Maggie Polwarth; President-Elect, Sharron Vigil, CMA; Vice-President, Karen Cardin; Secretary, Debbie Still; Treasurer, Kathy Carenbauer. Sally Aarhus was elected a Board member. The ever-delightful Rhinestone Rosie provided the entertainment, and if you have never had the pleasure of seeing and listening to a performance by Rosie, you have truly missed something and have something to look forward to.

Our January meeting was primarily organizational and no educational program was held. New

members and new committee chairmen were introduced, and some of their plans for the year were presented. Sharron Vigil, CMA, has been quite busy working with UPS to establish some short courses or seminars for the community medical assistants, and more information will be available later on this. These courses or seminars would be available to all, and in addition would help CMA's keep their certification current by providing CEU's.

In our local chapter we now have two CMA-C's and four CMA's. One of our members who joined only this past year will be sitting for her CMA this summer, two CMA's will be sitting for their Clinical, and one CMA-C will be going after her Administrative category. Good luck to all of them. It takes many hours of study to prepare for these examinations.

Our February 13th meeting will be held once again at the Yukon Mining Co. The program planned for this meeting will be by representatives of Vocational Rehabilitation, and it should be very imformative. Guests are always most welcome at our meetings. Since we are continuing dinner meetings this year, reservations are, of course, necessary.

For information as to time and place of meetings contact Maggie Polwarth, at 383-1524. Hopefully we can get our programs so established that we might announce them three months in advance through our page in the Society Bulletin.

D.S.

ATTENDING PHYSICIAN'S REPORT FORMS

Please be advised that the Attending Physician's Report Forms, which previously were available through the Pierce County Medical Society, can now be obtained through North Point Press. They are located at 2302 Pacific Avenue. Call 627-4147 for further information.

CENTRAL WASHINGTON UNIVERSITY

presents the

1978 POST-GRADUATE INSTITUTE IN PSYCHOLOGY

for Psychologists practicing in Schools, Communities and Agencies - JULY 17-28, 1978

SIX ONE-WEEK TRAINING SEMINARS DURING THE TWO-WEEK INSTITUTE:

FIRST WEEK

"Neuropsychological Assessment" - Ralph M. Reitan, Ph.D., University of Arizona

"Constructive Management of Stress in Organizations" - Maurice L. Pettit, Ph.D., Director of the OD Center, CWU

"Effective Learning for the Socially Withdrawn Child" - Hill M. Walker, Ph.D., Director of CORBEH, Univ. of Oregon

SECOND WEEK

"Neuropsychological Assessment" (advanced, if warranted) - Ralph M. Reitan, Ph.D., University of Arizona

"Effective Guidance for the Aggressive Child" - Hill M. Walker, Ph.D., Director of CORBEH, University of Oregon

"Adlerian Counseling" - Darwin J. Goodey, Ph.D., Associate Professor of Psychology, Central Washington University

6 college credits (3 credits per seminar) can be earned.

The Institute provides 60 hours of Category I continuing education credits (30 hours per seminar) for psychologists licensed in Washington State.

Each Institute participant has the following learning possibilities:

choice of two training seminars from the six available; up to six keynote addresses by the training specialists; individual contacts with Institute leaders and participants from various locations; use of a variety of resources on the beautiful CWU campus such as libraries, faculty, computer center, clinics, etc. (The training clinic in the modern CWU Psychology Building is unsurpassed in the Pacific Northwest.)

Fee: \$180 for two weeks (\$125 for single week), including packets of work materials.

For information write to: Dr. T. F. Naumann, Dept. of Psychology, Central Washington University, Ellensburg, WA 98926.

EEO/AA/Title IX Institution

Low cost housing available on campus for individuals, couples, and families.

**UNIVERSITY PLACE
MEDICAL CLINIC**

Office Space Available For Lease

- 1062 square feet; four examination rooms; two restrooms; waiting room and receptionist/filing area.
- 1,250 square feet; ground level.

Both office spaces offer ample free patient parking and an excellent location. For further information contact:

Clay Anderson or Don Huber

Telephone 564-6069

Huber & Antilla Construction

2607 Bridgeport Way, Suite 2D

Tacoma, WA 98466



medical
diet
service

THE WEIGHT CONTROL PROGRAM

- *Nutritional Guidance*
- *Food Provided - Calorie-Controlled*
- *Weekly Counseling for Support*

The Medical Diet Service program works, where other weight loss schemes fail, because its objective is to achieve permanent change in the eating patterns of your patients. That's weight control!

No pills. No liquid protein. The program is nutritionally sound.

medical diet
service

TACOMA OFFICE
115 South 38th
Phone: 474-0683

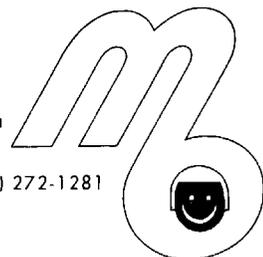


Offices also in Olympia
and the Seattle area.

LETTERS

mary bridge children's health center

311 south L street / tacoma, washington 98405 / (206) 272-1281



January 18, 1978

Ralph Johnson, M.D.
President
Medical Society of Pierce County
813 South K Street, Suite 200
Tacoma, Washington 98405

Dear Doctor Johnson:

On behalf of the Board of Trustees and Staff of Mary Bridge Children's Health Center, I would like to extend to you and your fellow physicians an invitation to join us in the dedication of our recently completed Radiology and Outpatient Wing. The dedication ceremony will take place on Sunday, February 26th, at 2:00 p.m. at the hospital.

We are designating this time to formally present this new facility and service to the community and to publicly thank all who supported this project in so many different and meaningful ways.

There will be an open house for the public with guided tours of the new areas from 11:00 a.m. until 5:00 p.m. that day. The ceremony at 2:00 p.m. will include a brief dedication and ribbon cutting attended by the media and public.

I look forward to hearing from you and will welcome your participation on this important occasion.

Sincerely,

MARY BRIDGE CHILDREN'S HEALTH CENTER

(signed)

Fred A. Pritchard
Executive Director

THE MEDICAL SOCIETY OF PIERCE COUNTY

presents

A SPECIAL TRAVEL OPPORTUNITY FOR MEMBER PHYSICIANS

PEOPLE'S REPUBLIC OF CHINA



...TEN DAYS IN THE PEOPLE'S REPUBLIC OF CHINA VIA EASTERN EUROPE ...

DEPART SEATTLE/TACOMA MARCH 20 - RETURN APRIL 5

You are invited to participate in a unique inaugural program to People's Republic of China, via Belgrade, Yugoslavia. This will be a truly memorable experience, a journey with style. Depart Seattle/Tacoma on March 20, 1978. Fly to New York on a United Airlines DC-10. Take a Yugoslav Airlines flight to Dubrovnik, Yugoslavia, where you will rest, shop and sightsee in one of the few remaining walled cities in the world. Then, it is on to Peking for one of the most memorable experiences for any traveler.

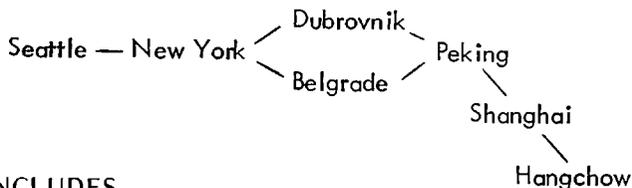
While you are in China, visits to medical and dental facilities, as well as demonstrations in acupuncture, have been arranged. In addition to Peking, your ten days in

China will also include stays in Shanghai, Hangchow, Wusih or Soochow, where you will visit the Great Wall, the Forbidden City, plantations, museums, famous shrines, beautiful parks, and enjoy various cultural events.

Following your ten days in China, you will return to Belgrade, Yugoslavia and transfer to Novi Sad on the Danube to rest prior to your return flight to New York.

The program as outlined in the accompanying itinerary may be somewhat altered by the host country, but it will be essentially as outlined.

The cost of this once-in-a-lifetime travel experience is \$2,699 per person, plus taxes, and services fee of \$15.00.



WHAT YOUR TRIP INCLUDES

Your Sightseeing: Within China, comprehensive sightseeing, entrance fees, guide and interpreter service included.

Your Hotels: In Dubrovnik, the 5-star Argosy; in Novi Sad, the Hotel Varadin, a castle on the Danube; in China, the customary no-frills accommodations (which are their first class).

Your Meals: All meals included within China; and all meals except luncheon and dinner in Novi Sad, and luncheon in Dubrovnik.

ADDITIONAL INFORMATION

You will need a current passport (with no Taiwan visa), a visa for China, and a valid smallpox vaccination. Two photographs will be needed for visas. All About Travel, Intl. will furnish you with a visa application after receiving deposit.

Baggage: Please limit your luggage to one checked and one carry-on per person. Weight for flights should not exceed 44 pounds.

Travel Insurance: Applications for cancellation insurance, baggage insurance, and accident and sickness benefits will be sent to you automatically on receipt of your deposit. Cancellation insurance is a protection plan providing reimbursement up to the policy limit for non-refundable penalties or additionally incurred expenses in the event you or any covered member must cancel or change your trip because of covered illness, accident, or death.

Payment Schedule: Deposit of \$600 per person is payable upon confirmation. Deposit is fully refundable if visa is denied. Balance is due upon visa issuance and/or not later than 30 days prior to departure. Cancellations made prior to 30 days before departure are subject to a \$50 per person name change. All payments become non-refundable 30 days prior to departure unless space is resold. Trip cancellation insurance is available and recommended.



ITINERARY

Hotel conditions in the host country may make it necessary for changes of itinerary upon your arrival in China, but the program will be approximately as follows:

March 20: Depart Seattle/Tacoma International Airport 8:30 a.m. via a United Airlines DC-10 to New York, arriving 4:20. Depart JFK at 6:00 on Yugoslav Airlines for flight to Yugoslavia.

March 21 thru March 23: Arrive Dubrovnik 10:30 and transfer to the 5-star Argosy Hotel, where you will have three nights accommodations with two meals a day. Dubrovnik is one of the few remaining walled cities in the world. Explore the inner city, with the Onofrio Fountain, Rector's and Sponza Palace, the Cathedral, and the third oldest pharmacy in the world. Shop for handwoven rugs, lace, dolls, wood carvings and fine leather goods at reasonable prices.

March 24: Depart Dubrovnik 3:35 for your flight to Peking via Belgrade and Karachi. The flight from Belgrade to Peking is 13 hours, including the fuel stop in Karachi.

March 25 thru April 2: Your arrival in Peking is timed so that after the welcoming ceremonies, you will be taken directly to your hotel for a restful night's sleep. During your stay as guests of the People's Republic of China, you will be provided with meals, hotel rooms, sightseeing, and transfers as part of the tour

package. Cities to be visited are: Peking, 4-5 days; Shanghai, 2-3 days; and Hangchow, Wusih or Soochow, 2 days. While in these cities you will visit the Great Wall of China, the Forbidden City, plantations, museums, famous shrines, beautiful parks, and enjoy various cultural events. Your ten days in this exciting country will pass all too quickly.

April 3: This evening you will depart Peking at 10:00 for your return flight on Yugoslav Airlines to Belgrade.

April 4: Arrive Belgrade at 6:00, where you transfer to one of the most interesting cities in all Europe — Novi Sad. If every man's home is his castle you will feel right at home in the Hotel Varadin, a luxury hotel on the Danube, within the walls of an ancient castle. Diplomats and important visitors from abroad are often housed here as guests of the government. Novi Sad is, although in Yugoslavia, a very Hungarian type of city, and it is said that it is more like Budapest than Budapest. Gypsy music, goulash and various paprika dishes make this a spot to remember. During your night's stay at the Hotel Varadin, breakfast will be provided.

April 5: Depart Belgrade at 10 a.m. for your return flight to the U.S. Arrive JFK at 3:00, where you will clear customs. Depart New York at 6:30 for your United Airlines non-stop flight to Seattle/Tacoma, arriving at 9:20 p.m.

For further information on the China Tour, contact **ALL ABOUT TRAVEL, INTL.**, 100 South 9th, Tacoma, WA 98402. Telephone (206) 272-4191.

REGISTRATION

Make check payable and mail to: **MEDICAL SOCIETY OF PIERCE COUNTY**
813 South K Street, Suite 200
Tacoma, Washington 98405

Enclosed is my check for \$ _____ (\$600 per person) as deposit. I (we) understand that final payment is due thirty (30) days prior to departure or upon issuance of visa. Also the deposit will be refunded in full if I (we) cancel at least thirty (30) days before the departure date.

Name _____

Address _____

City _____

State _____

Zip _____

Telephone: Home () _____

Office () _____

FAMILY CLINIC — DECEMBER 1977

Open Monday through Friday — 10:00 to 5:30 1815 South J Street, Tacoma 98401 Phone 627-9182

PATIENT SERVICES	December 1977	Total 1977	Total Since September 1973
Referred to Physicians	67	1,061	5,833
Laboratory Services	45	387	4,830
X-Ray Services	5	95	560
Prescriptions	52	820	3,583
Referred to Community Agencies	17	312	1,469
Seen by Physicians in Clinic	27	283	1,830

ETHNIC AND DEMOGRAPHICAL DISTRIBUTION

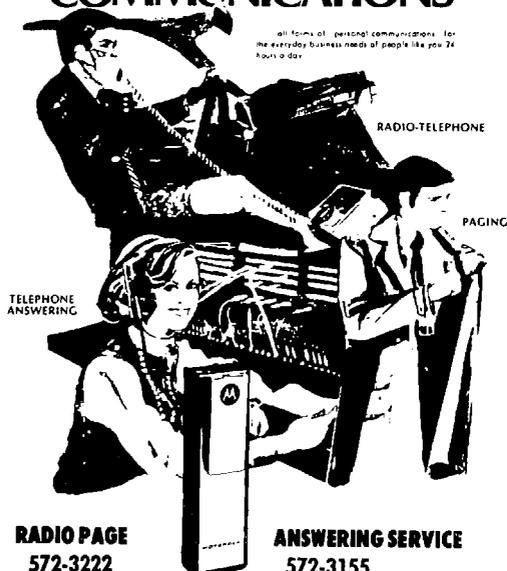
Black.....	29	411	1,695
Caucasian.....	165	2,404	9,385
Asian-American.....	2	69	259
Native-American.....	2	21	259
Mexican-American.....	9	74	247

PARTICIPATING PHYSICIANS ON FRIDAY EVENINGS

Dr. H. Boyd	Dr. N. Magnussen	Dr. R. Martin	Dr. A. North
Dr. G. Oh	Dr. T. Smith	Dr. G. Tanbara	Dr. S. Whaley

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for
the everyday business needs of people like you 24
hours a day.



RADIO PAGE
572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day... when you must be contacted, you get an actual voice message from your personal Pager.

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact
Fred McPherson or Tom Brokaw — 24 hour service.

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
- DENTAL
- PROFESSIONAL

 Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

CLASSIFIED

WANTED: ASSOCIATE DIRECTOR: Family Practice Residency. Board Certified practicing Family Physician with interest in teaching. Responsibilities include teaching residents and patient care. Excellent local medical facilities. Outstanding professional, cultural and recreational environment. Contact Roy Virak, M.D., Family Practice Residency Foundation, 737 Fawcett Avenue, Tacoma, Washington 98402.

MEDICAL PRACTICE AND OFFICE SPACE — Long established OB-Gyn, with some family practice, vacated. Office in central location, with or without furniture and equipment, available for lease or purchase. Excellent opportunity for starting physician. Call Mrs. Havlina, 752-1426.

ESTABLISHED GENERAL PRACTICE in Puyallup, Washington. Modern medical building suitable for three practitioners. Large child and adult waiting rooms. Ample parking. Fully equipped X-ray and Lab/EKG and Diathermy. Located near Good Samaritan Hospital. Hospital has modern CCU. Cardiologist comes from Tacoma twelve miles away. Space available for two doctors. Terms. 845-0575/845-8264.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T. G. Contact Richard Huish, M.D., 572-4664.

SURVEYS (continued from page 15)

vices. Roper found 54% of the public to be "very well satisfied" with its banking services. Physicians and dentists followed with identical ratings of 45%. The physician rating had dropped from 50% in 1975 and the dentist rating had fallen from 52%. Thirty-nine percent said they were very well satisfied with their hospitals, down from 45% in 1975. The greatest declines in satisfaction were shown for television and radio stations. TV stations fell 13 percentage points in two years. Radio stations were down 12 points.

MOST FEEL SYSTEM IS ACCEPTABLE

Another Harris Survey released at year's end shows that 62% of the public feels that the current health care

OFFICE FOR RENT — Medical Center. 800 sq. feet. \$300.00/mo. Phone 272-7892.

FOR SALE: Retiring physician's office equipment. Phone 759-1152, evenings.

IMMEDIATE OFFICE SPACE AVAILABLE. Contact Gerald Kohl, M.D., 722 South "K," 272-4251.

MICROSCOPE WANTED — USED — Binocular with optics to oil immersion. Prefer sub-state lighting. M. L. Bourne, M.D., 752-1111.

FOR SALE: Examination table, by Enochs; one year old; brown top, cream base; cost \$550.00 new, asking \$375.00; other equipment available; call 1-363-4480, evenings.

IBM EXECUTARY: Dictation and transcribing machine. Excellent condition. \$200. Also Phone Mate, \$75. 848-6655.

1976 PORSCHE 914, fully loaded, \$7,700. 1-858-2897, 383-5521.

LUXURY WATERFRONT APARTMENT, completely furnished, on Kauai. Rent by week. 759-4332, evenings.

system is acceptable, although only 39% show real enthusiasm for it. On the other hand, 49% of the public is opposed to "a national health service under which everyone would get free health care paid for out of taxes; in such an arrangement, doctors would work for salaries paid for by the government, and hospitals would be managed by the government." Only 31% of the public favored such a scheme.

In between, Harris found, the public would give considerable support to changes in the current system that would require all employers to provide health insurance for their employees, require the government to provide health insurance for the unemployed, and extend private sector coverage for catastrophic expenses.

— STAFF MEETING SCHEDULED —

The quarterly professional staff meeting for Lakewood General Hospital will be held on Wednesday, March 15. It will begin at 7:00 p.m. For further information contact Mrs. M. Morgan, administrative secretary, Lakewood Hospital, 588-1711.

MEDICAL SOCIETY of PIERCE COUNTY
813 South K Street
Suite 200
Tacoma, Washington 98405

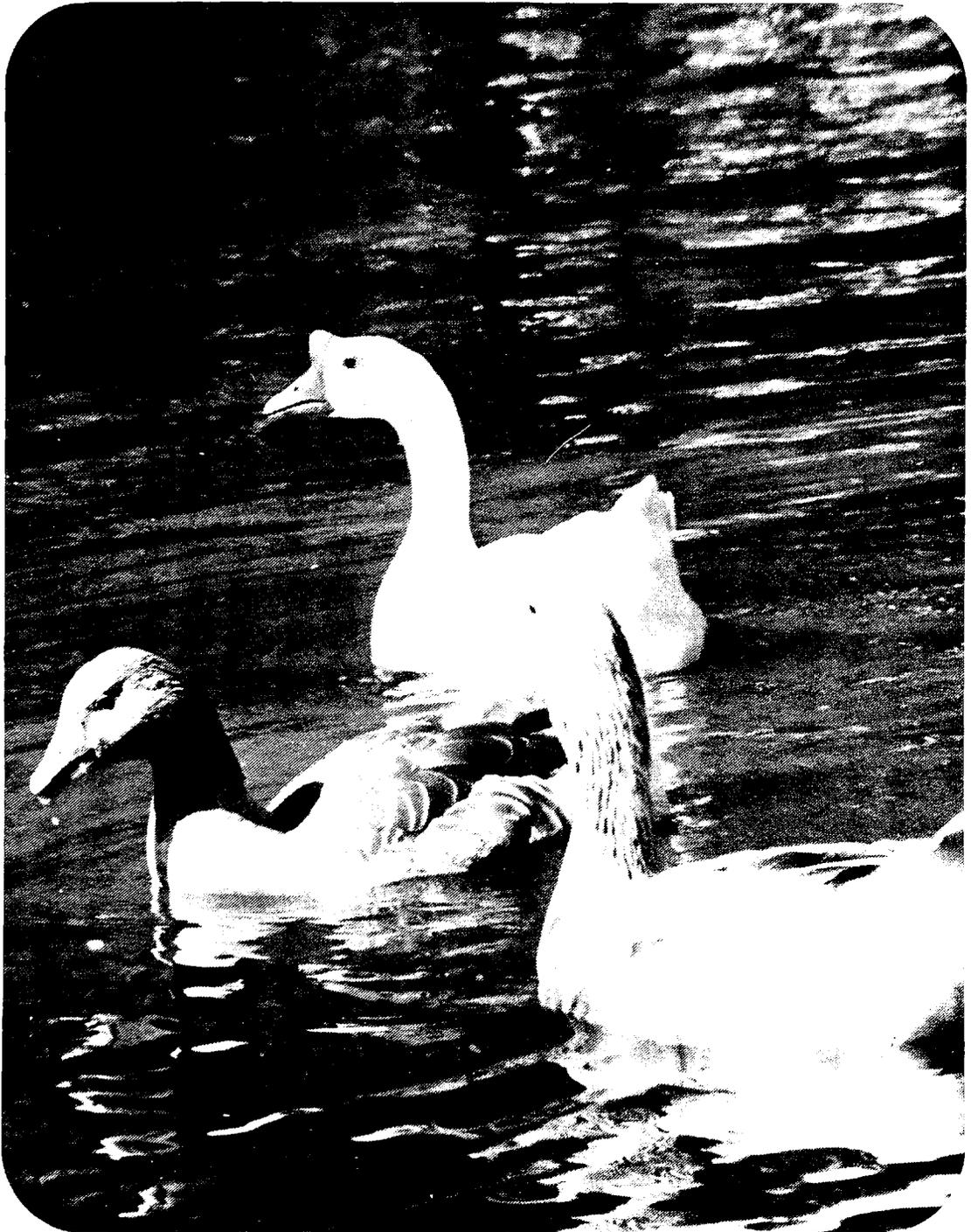
ADDRESS CORRECTION REQUESTED

BULK RATE
U. S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

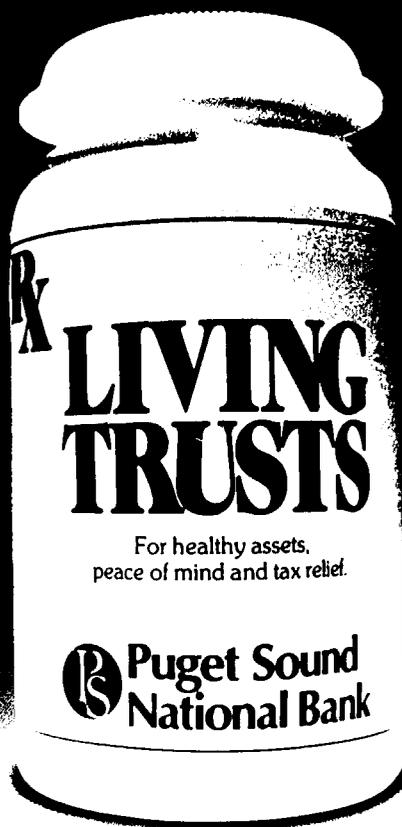


Medical Society of Pierce County

MARCH 1978 • Vol. XLX, No. 3 • Tacoma, Washington



BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

Bulletin of the Medical Society of Pierce County

CONTENTS

page	
5	PRESIDENT'S PAGE
9	LEGISLATIVE NEWS
13	AUXILIARY PAGE
17	A.A.M.A. PAGE
18	MEMBERSHIP
27	CLASSIFIED
7	"Hotline, Refills, and "Diabetic"
11	HSA Report
14	Menninger Foundation, "Physicians and Their Families"
15	"Immunization Clinic Evening Hours Announced"
15	"Revised Procedures for Obtaining Vaccine Supplies Announced"
21	General Membership Meeting Notice
21	"Physicians Accept Court Challenge"
22	Category I - Continuing Medical Education in Pierce County
22	Allergy/Immunology Course
23	In Brief - A summary of AMA, medical & health news
24	Annual Meeting - Tacoma Academy of Internal Medicine
25	Family Clinic



Photo by
Glenn G. McBride, M.D.

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-Elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D.	(79)
Melvin L. Henry, M.D.	(80)
William B. Jackson, M.D.	(80)
Richard K. Ohme, M.D.	(80)
Charles C. Reberger, M.D.	(79)
Roy A. Virak, M.D.	(80)
Myra S. Vozenilek, M.D.	(79)
Helen Whitney	(78)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U. S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates upon request. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

**The type
of disability
insurance you need
for your future
security is
available now.**



There is a special disability insurance program available for physicians that protects your future financial plans should disability strike. This program is endorsed and recommended by your county medical society and the WSMA. It recognizes your special needs and, that as a physician, you are more dependent on good health for your livelihood than most members of other professions. It provides you with a high level of protection at a very low monthly cost due to the group rate made possible by the society's and association's buying power.

Here are some of its important benefits:

You may purchase up to \$2,500 income per month (depending on your current monthly net income), and select either a 90 day or 180 day waiting period for benefits.

Two plans are available. Plan I provides sickness benefits payable for five years and lifetime accident benefits. Plan II provides sickness benefits to age 65 and lifetime accident benefits.

Your benefits begin when injury or illness prevents you from practicing medicine. You don't have to be confined in the hospital or your home to receive benefits.

The program also provides a special recovery benefit that helps ease you back into practice while you build up your cash flow and re-

establish your work level. There is another benefit that allows you to return to gainful work in another occupation without losing full disability status.

And, your premium will be waived after benefit payments begin. No further premium would be required until after you return to your practice.

When you examine these benefits and low group rates, we're sure you will agree that this disability insurance program is ideally suited to the special needs of member physicians and surgeons.

For more information explaining the benefits and provisions of this disability insurance program, call NED SHERA, C.L.U., or SUSAN KEITH, C.L.U., at Schwarz, Shera and Associates, 572-6010. They can answer your questions and mail you additional information, including rates and an application.

Sponsored and endorsed by your county medical society and the WSMA.

Underwritten by: Safeco Life Insurance Co.



**SCHWARZ, SHERA
and ASSOCIATES, INC.**

*Insurance brokers and financial consultants
to Pierce County physicians since 1963.*

572-6010

THIS MESSAGE IS INTENDED TO OUTLINE CERTAIN BENEFITS. IT IS NEITHER AN OFFER OF INSURANCE
NOR A LEGAL DESCRIPTION OF ALL POLICY PROVISIONS.

PRESIDENT'S PAGE



Ralph A. Johnson, M.D.

The Drive Toward Cost Containment

The recently issued Summary Report of the Commission on the Cost of Medical Care has generated a great deal of debate within the ranks of organized medicine. Several key sections of the Summary report are discussed in the following article which appeared in a recent issue of the BULLETIN OF THE AMERICAN COLLEGE OF SURGEONS. The points made in this article could be of value to all of us as our Medical Society, the WSMA, and all of medicine address the issues raised in the Summary Report.

At the dawn of 1978, one major issue faces both consumers and providers of health-care services alike: how to hold down the cost of medical care.

Throughout 1977 the high cost of health care was bandied about in medical societies, in the halls of Congress, at cocktail parties, and around the family dinner table. People started pointing fingers. Legislators started proposing legislation. And the medical profession found itself in the unfamiliar and unenviable position of defending itself against outside attack.

Out of the melee have come a number of direct cost-cutting programs and a brace of studies all aimed at that elusive hobgoblin termed "cost containment" — a term that sprang into national prominence so quickly no one is really sure what it means.

Indeed the figures are staggering. In a seemingly endless quest to receive and provide an ever greater quality and quantity of health care, Americans spent some \$140 billion in 1976 on medical services — an elevenfold jump from 1950. By 1980, according to federal government figures, that sum will increase to \$223.5 billion. If we throw nationalized health insurance into the pot, the cost will be much higher.

Cost containment programs

The reaction within the medical community has been to formulate voluntary cost containment programs to stave off federal legislation on medical costs. One major push is toward rate regulation within states as an alternative to a national program.

On December 12, a joint committee of the American Medical Association, the American Hospital Association, and the Federation of American Hospitals met in Washington, D.C. to set up goals and guidelines for state-level cost containment committees. These committees, to be established in every state, would be under the direction of state hospital associations and medical societies.

Earlier in December, the American Medical Association released a cost containment report prepared by a 27-member commission appointed by the AMA Board of Trustees. In essence, the report calls for a turnabout in attitudes toward cost.

"After years of consumers wanting unlimited care; governments promoting growth in the production of both providers and facilities; and physicians providing services based solely on quality, it is necessary to instill alternative behavior in everyone. Changes of the magnitude necessary are best developed through the combined efforts of decision makers from the areas where health care is purchased, delivered, and used," the study states.

Two approaches

The commission examined two alternative approaches to the issue of cost containment —

continued on page 26

**Your comments
regarding the recommendations
of the Summary Report on
the Cost of Medical Care
are invited.**

The Medical Society of Pierce County has been asked to provide comments regarding the 48 recommendations of the Summary Report issued by the National Commission on the Cost of Medical Care. The Commission was established by the American Medical Association Board of Trustees as an independent body to address the issue of the increasing cost of medical care. The recommendations made in the Summary Report are not official AMA policy at this time, but will be considered by the AMA at its June House of Delegates meeting.

Our state's AMA delegation, of which David Hopkins, M.D., is an alternate member, will take the comments and concerns of the WSMA and the state's county societies with them to the AMA meeting. The Executive Committee of your society is now evaluating the Summary Report and your comments are welcome. If you do not have a copy of the Report, call the Society office, at 572-3667. Comments must be made in writing and be submitted to the Society office no later than Thursday, March 16.

HOT LINE, REFILLS, AND "DIABETIC"



by
Herman S. Judd, M.D.

The Interprofessional Committee of pharmacists and physicians meets, as you know, quarterly, and this is the third report on the deliberations of that committee.

In my last report I discussed the "hot line." Should you have difficulty in finding its number, just dial any pharmacy in Pierce County and they will initiate the call for you. On a recent weekend I had occasion to use the hot line and I am sure that an attempt to secure narcotic drugs under false pretenses was stopped immediately.

The committee has discussed at length the problem of the patient who wants a refill of his prescription after normal office hours or on a holiday or a Sunday. It is the consensus of the members that the best solution is for the physician to note on the prescription the number of refills allowable. This would obviate the pharmacy having to phone the physician or his alternate to see if a refill could be authorized. Naturally, the pharmacist would, in his good judgement, be inclined to refill a prescription for digitalis or orinase, for example, but we physicians should remember to designate "N.R." when we want a prescription not to be refilled. This, of course, is not necessary with prescriptions for controlled substances.

Did you know that the pharmacist is now required to ask the patient if he is allergic to the drug prescribed for him by the physician? I

wasn't aware of this requirement and it raised my hackles, for I consider it my responsibility to know these possibilities and be on guard for them. There are many new laws affecting our professions and this is just one of them. This may not be a bad law, at that, for I have been known to forget! We should always alert our patients to medications to which they have demonstrated an allergic reaction, and place this in the patient's record.

Don Hebert, long with Rankos Pharmacy and one of the senior citizens in the Pharmacists of Pierce County (he will love that designation), will be contacting the State of Washington Department of Motor Vehicles with the suggestion that the word "diabetic" be placed on the driver's licenses of all diabetics. While many diabetics wear bracelets or necklaces calling attention to this fact, there are still cases of diabetics being jailed as "drunks" despite their request that they be taken to a hospital. An insulin reaction can easily be interpreted as inebriation. Policemen are not physicians. They need our help.

To help our pharmacist friends, when we are on call for another physician or group of physicians we should, when we write or phone in a prescription, give notice of the patient's doctor for whom we are covering. Then, in the event of a request for a refill, the patient's own physician can be contacted.

If you want to prescribe a generic drug write the generic name legibly or type it. Or, write the trade name of the drug and sign the left-hand part of your prescription blank entitled "substitution permitted." Pharmacists often have difficulty making out the generic name of a drug as so many are similar and to make a mistake could be a serious thing.

Your committee has voiced a unanimous condemnation of advertising by any pharmacy in a doctor's office. We feel that this would be as inappropriate as a sign in the pharmacy directing patients to a specific doctor. Believe it or not, this has happened!

continued on page 26

Kefzol[®] I.M./I.V. cefazolin sodium

Ampoules, equivalent to 500 mg., 1 Gm.,
and 10 Gm. of cefazolin



700773

Additional information available
to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206

H.S.A. REPORT

by Lloyd Elmer, M.D.
Society Secretary-Treasurer and HSA Region I Board Member

In Pasternak's epic novel, Dr. Zhivago returns from the horrors of war attending the Russian wounded, and to his utter amazement his home is no longer his. It has been completely taken over by the Bolsheviks, and his family restricted to existing in one small room. He may not even light a fire without permission of his new masters.

* * * * *

The tedium is over. After two years of organizational efforts, endless hours of discussion over procedural and housekeeping matters, the Board of Directors of the Health Service Agency, Region I, of the State of Washington is now dealing with substantive measures. I'm not sure I'm ready for it. The stacked deck created by Public Law 93-641 demanding a consumer majority at all meetings of the HSA Board, and on all specific votes didn't always lead to strict adherence to the "party line" in the earlier days.

But that was not the case at the February 1978 HSA Board Meeting. Consumers voted in block fashion on every issue, often pulling many so-called "providers" with them. The *three* physicians (out of seventy board members) found themselves outnumbered and rarely able to enlist a single vote to their side of an issue.

After a lunch break, a highly emotional film was shown which damned medicine, and brought cheers when the issue of socialized medicine was extolled by fiery zealots. The Board, thus prepared and properly indignant toward "mercenary doctors and medicine based upon the profit motive," moved back to their seats for reasoned debate and deliberation of the issues.

The CT Scanner issue was the major one of the afternoon. The HSA staff proposed that all CT Scanners be hospital based. A substitute motion was made by Dr. Martin Greene that scanners be located in, or adjacent to, hospitals. The chair accepted the substitute motion, but the properly aroused and indignant Board of Directors overruled the chair by a vote of 25 to 3, thus preventing a vote on the motion. It was then pointed out, to no avail, that a quorum was not present and did not vote. Little matter, the three physician members are of really minor import when it comes to health planning. *Welcome home, Zhivago.*

* * * * *

NEXT: *The 1978 HSA budget and proposed changes in health planning laws to include a Federal Certificate of Need Law to encompass private physician offices.*

YOUR MEDICAL LIBRARY

Your access to the world literature in medicine through the network of biomedical communication: Hospital Library — Pierce County Medical Library — Pacific Northwest Regional Health Sciences Library — National Library of Medicine — British Lending Library.

Comprehensive library services include: literature searches, bibliographies, interlibrary loans, and Medline searches (Literature retrieval by computer).

HOURS: Monday - Friday 8:00 A.M. - 5:30 P.M.
(Other times key is available by request)

M. Von Bruck, Librarian
572-5340



Working together is the best medicine.



Avoiding malpractice is often a matter of knowing ahead of time where the pitfalls are. Aetna Life & Casualty wants to help alert physicians and their employees to malpractice traps. So we offer a variety of services and materials at no charge.

For instance, we offer a free videotape service demonstrating some of the frequent causes of malpractice. Our constantly updated selection of brochures offers common sense tips. We also conduct seminars for doctors to benefit from their collective experience.

Aetna employs the know-how of physicians, medical malpractice lawyers and health and safety experts to prepare these services.

This Loss Control and Education Program has been instrumental in allowing Aetna to provide professional liability coverage to physicians on a continuing basis.

We believe covering you against malpractice is not enough. We want to work with you to help you prevent it. Your Aetna Account Supervisor is there to help. Call:



Tom Fine
Aetna Life & Casualty
800 Washington Building
1325 Fourth Ave.
Seattle, Washington 98101

The Aetna Casualty and Surety Company

Standard Fire Insurance Company

AUXILIARY PAGE

AUXILIARY OFFICERS 1977-1978

President	Helen Whitney
President-Elect	Jo Roller
1st V.P. & Program	Kathy Miskovsky
2nd V.P. & Membership.....	Nicole Crowley
3rd V.P. & Historian & Bylaws.....	Reta Bergstrom
4th V.P. & Arrangements	Lee Jackson
Recording Secretary	Martia Ohme
Corresponding Secretary.....	Jan Thiessen
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

COMMITTEE CHAIRMEN

AMA-ERF.....	Marge Ritchie
Communications:	
Bulletins	Georgia McPhee
Newspaper.....	Maryln Baer
Mailing	Donna Prewitt
Telephone	Barrie Mott
	Joanne Iverson, Arlene Hopp
Community Health	Kay North
Cookbooks	Judy Baerg
Tasting Luncheon	Stephanie Tuell
Dance	Carol Hopkins
Finance.....	Kim Tanbara
Joint Dinner	Genny Hansen
Legislation	Cindy Anderson
Newcomers	Janet Fry
Nominating.....	Marie Henry
Pierce County Health Council.....	Nadine Kennedy
PCMS Directory.....	Kit Larson
Sunshine	Lorna Burt
Superintendent's Advisory Health Council and Handicapped Acceptance Program.....	Sharon Lukens
Student Recognition Awards.....	Barbara Wong
	Marilyn Mandeville
Tel-Med Volunteers	Lila Early

Our January meeting was held in the lovely home of Mary Johnston. Sharon Lukens demonstrated how her committee presents the Handicapped Awareness Program to pre-schoolers, aptly played by Nikki Crowley, Cathy Schneider, Norman Heimgartner and Gayle Martin. Mr. Vic Clark discussed ways to improve marriage. Doing a delightful job in the kitchen to serve us all were: Bonnie Stagner, Janice McIlroy, Lila Early and Penny Detje.

Lee Jackson has obtained large buttons to identify the wearers as Medical Auxiliary volunteers. These will be available at the next meeting for anyone involved in a volunteer project.

At the Joint Dinner in February a capacity audience enjoyed hearing Mr. Lloyd Cooney tell us "Why the Little Red Hen Doesn't Bake Bread Anymore." Mr. Cooney's speech was thought-provoking and timely. We were sorry that Mrs. Cooney, though invited, was unable to attend. Genny Hanson was in charge of the arrangements and deserves the compliments, as do Marge Ritchie and Lona LaTona, who provided able assistance to Genny.

We have been invited to send a representative to the Medical Society's committee on School Health/Public Health, which is currently emphasizing immunization. Elsie Parrott has volunteered for this position.

The Nominating Committee, chaired by Marie Henry, and composed of Marlene Waldron, Genny Hanson, Jeanne Judd, Kathy Miskovsky and Jo Roller, presents the following slate of officers for consideration:

President-Elect	Kit Larson
1st V.P., Program	Nikki Crowley
2nd V.P., Membership	Alaire Sheimo
3rd V.P., Historian & Bylaws	Marge Ritchie
4th V.P., Arrangements	Sharon Lukens
Recording Secretary	Barrie Mott
Corresponding Secretary	Shirley Bourdeau
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

Elections will be held at the March meeting at Barrie Mott's home. Program Chairman, Kathy Miskovsky, has come up with another outstanding speaker for us, Dorothy Connor: "Are You A Woman Unaware," concerning the preparation for widowhood.

Kit Larson's committee expects to have the new Medical Society's directories published soon. She will welcome offers to help distribute the books.

The Medical Society of Pierce County and the Auxiliary invite you to a dinner dance on April 15th at the Tacoma Golf and Country Club. No-host cocktails will be served at 6 p.m., dinner at

continued on page 27

The Menninger Foundation

PHYSICIANS AND THEIR FAMILIES: *An Experience in Communications*

June 18-23, 1978 and August 13-18, 1978 — YMCA of the Rockies — Estes Park, Colorado

A WORKSHOP SPONSORED BY THE DIVISION OF CONTINUING EDUCATION — Accredited for 25 hours of Category I Credit.

Continuing education credit

As an organization accredited for continuing medical education, The Menninger Foundation certifies that this continuing medical education offering meets the criteria for twenty-five (25) hours of credit in Category I of the Physician's Recognition Award of the American Medical Association, provided it is used and completed as designed.

Tuition fee and registration deadline

The continuing education tuition fee is in addition to the arrangements for lodging and meals made directly with the YMCA Camp.

Faculty (Faculty assignments are subject to change)

JUNE 18-23, 1978 WORKSHOP

- Roy W. Menninger, M.D.: President, The Menninger Foundation; Workshop Leader.
- Lulubelle Clarke, M.S.W.: Coordinator of the Transitional Living Program in Aftercare, The Menninger Foundation.
- Arthur Mandelbaum, M.S.W.: Director, Family Therapy Staff Training Program; faculty, Menninger School of Psychiatry.
- George M. Penn, M.D.: Section Chief, C. F. Menninger Memorial Hospital; staff psychiatrist, Alcoholism Recovery Program.
- Mary Ann Penn, R.N.: Former staff nurse, C. F. Menninger Memorial Hospital.
- William D. Trussell, Ph.D.: Supervisor, Individual Psychotherapy; faculty, Menninger School of Psychiatry; specializing in residential treatment of adolescents; unit director, Children's Division.

This workshop also has been approved for twenty-five (25) prescribed hours of credit by the American Academy of Family Physicians.

Application for approval has been made to the director of Social Work Licensing for the State of Kansas for the same number of hours of continuing education credit for social workers.

The tuition fee for the continuing education program is \$325.00 per family (parents and unmarried children under twenty-one years of age).

AUGUST 13-18, 1978 WORKSHOP

- Erwin T. Janssen, M.D.: Director, Division of Continuing Education; interim director, Children's Division; Workshop Leader.
- C. Alton Barnhill, M.D.: Staff psychiatrist, Adult Psychotherapy Service; member, Family Therapy Staff Training Program.
- Joseph M. Hyland, M.D.: Staff psychiatrist, C. F. Menninger Memorial Hospital, Aftercare Programs; consultant, Capital Region Radiotherapy Center, St. Francis Hospital, Topeka, Kansas; faculty, Menninger School of Psychiatry.
- Patricia Hyland, R.N.: Team nurse, C. F. Menninger Memorial Hospital.
- Stephen Jones, M.S.W.: Staff Supervisor in family therapy; member, Family Therapy Staff Training Program; faculty, Menninger School of Psychiatry.
- Roy W. Menninger, M.D.: President, The Menninger Foundation.

Brochures explaining the program and application forms are available at the Medical Society office.

Doctor, I Can't Pay You Today

We've heard all of the excuses; basically, there are five:

1. "Bill me"
2. "It's covered by insurance"
3. "I forgot my checkbook"
4. "My husband pays the bills"
5. "My attorney told me not to pay a thing"

We are practice management consultants with **TACTFUL** answers to all of the above. Last year we helped over 2,000 physicians and their staff solve these and other business problems.

If you feel your office could use some new answers, call (206) 725-5371.



Professional Office Management
207 Elliott Avenue, West
Seattle, Washington 98119

Your Best Investment Is In Your Own Practice

DINNER DANCE

Medical Society of Pierce County
and the Auxiliary

APRIL 15, 1978

TACOMA GOLF CLUB

•

No Host Cocktails — 6:00 p.m.

Dinner — 7:30 p.m.

Dancing — 9:00 p.m. - 1:00 a.m.

to the music of

"The Sand Band"

•

\$35.00 per Couple

Reservations Requested

Mail to: Nancy Spangler, Reservations Chairman
3620 Soundview Drive West, Tacoma 98466

IMMUNIZATION CLINIC EVENING HOURS ANNOUNCED

- HOURS:** Monday evenings from 5 p.m. until 8 p.m.
Regular daytime clinic hours will continue daily from 8 until 4:30 p.m.
- LOCATION:** New Health Department Building
3629 South "D" Street
Tacoma, Washington 98409
Phone: 593-4807
- EXCEPTIONS:** When City and County observe a holiday on Mondays.
- CHARGE:** Effective approximately March 1, 1978, there will be a \$2.00 charge for each immunization given beginning at 6 years of age. If the patient cannot afford that fee, the necessary vaccine will be provided at no charge.
- QUESTIONS:** Please call the Immunization Clinic, at 593-4060.

REVISED PROCEDURES FOR OBTAINING VACCINE SUPPLIES ANNOUNCED

In the past, physicians have been required to sign only for polio vaccine provided by the state. All other vaccines supplied by the Washington State Immunization Program did not require the physician's signature. The Department of Social and Health Services has revised this regulation to cover all vaccines as follows:

"Effective immediately, each private physician who obtains vaccines which have been supplied by the Washington State Immunization Program must sign a 'Physician Certification Form,' DSHS 13-361.

"Vaccine may not be released to any private physician, or members of his or her staff, until this form has been signed by the physician. Once the physician signs the form, he or she may receive vaccines for twelve months. At the end of the twelve-month period another 'Physician Certification Form' must be signed covering the next twelve-month period."

"Physician Certification Forms" are available from the Health Department. If you have any questions regarding this change please feel free to call the Health Department, 593-4807.

If you want your patients to buy the margarine highest in beneficial polyunsaturates, recommend Saffola®.

Saffola margarine is made with liquid *safflower oil*. So it's higher in polyunsaturates than even corn oil margarine.

And Saffola margarine contains no cholesterol. But it tastes as delicate and light as other spreads.

Along with Saffola mayonnaise and Saffola safflower oil,

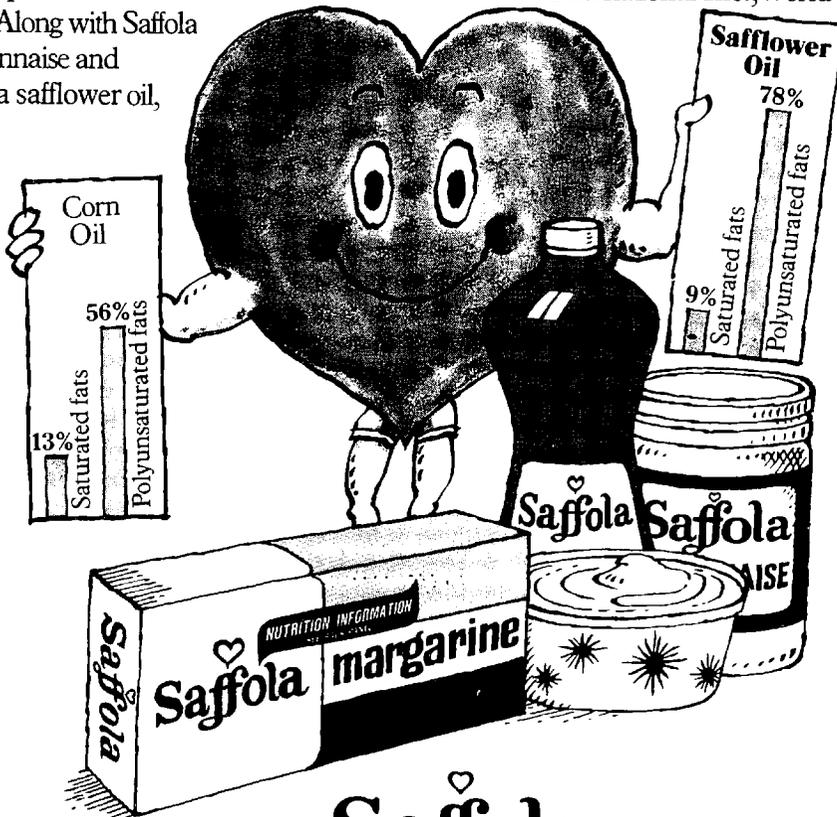
Saffola margarine can help your patients reduce serum cholesterol as part of a fat modified diet.

For comparative nutritional information on all of our safflower oil products write:

Consumer Products Division, PVO

International Inc., World Trade Center,

San Francisco,
California
94111.



WITH WARRANTY TO CONSUMER
★ Good Housekeeping
PROMISE
SATISFACTION OR REFUND OF MONEY

Saffola®

Highest in beneficial polyunsaturates.

A.A.M.A. PAGE

by Dee Lunstrum, CMA
Vice President, Washington State Society AAMA

Accreditation for Tacoma Community College's Medical Assistant Program. What does that mean to you, Doctor?

A medical assistant is broadly defined as "an individual who assists qualified physicians in their offices or other medical settings, performing those administrative and/or clinical duties delegated in relation to the degree of training and in accord with respective state laws governing such actions and activities." But who trains these individuals? Where do they get their education or experience that would qualify them for such a responsible role?

The American Medical Association (AMA) and the American Association of Medical Assistants (AAMA) cooperate in a program of accreditation to establish and maintain standards of appropriate quality for educational programs for the medical assistant, and to provide recognition for educational programs which meet or exceed the minimal standards established by the AMA. Graduates of accredited medical assisting programs are trained to work with and under the direction of physicians to provide quality health care service. Graduates demonstrate an equal balance of administrative and clinical competencies in the basic subjects. These competencies are developed within the training program from an initial foundation of basic skills. The program includes thorough preparation and demonstrated understanding of the ethical and legal responsibilities of the medical assistant in the health care delivery system. Graduates will have validated their competencies to the employing medical community through supervised externship experience in both administrative and clinical positions.

Until recently most office assistants were trained in the office; they learned their job by trial and error. A receptionist gradually expanded her duties to bookkeeping or learned to take blood pressures when it might be required. But now there is a better way.

Last year the Tacoma Community College initiated a program for medical assistants. Under the able leadership of Dorothy Galloway, R.N., director of the Medical Assistant Program, the school is making great progress. It is a two year course, with the first graduates receiving their diplomas this June. This year the college has begun the long and arduous task of applying for accreditation. To physicians these graduates will be a source of well trained medical assistants, and to the public they will represent well trained professionals in the health care field. Upon completion of this two year course in an accredited school, the graduate is eligible to sit for her certification examination. Passing this exam qualifies her as a Certified Medical Assistant. At the present time, certification eligibility is limited to those having a degree from a non-accredited school (either one or two year course) plus one year of experience in the field; or to those having worked in the field for a period of three years. Currently in Pierce County there are no accredited schools and only six Certified Medical Assistants.

Tacoma Community College should be commended for having initiated this effort to provide quality education for this relatively new profession in the health care field.

— STAFF MEETING SCHEDULED —

The quarterly professional staff meeting for Lakewood General Hospital will be held on Wednesday, March 15. It will begin at 7:00 p.m. For further information contact Mrs. M. Morgan, administrative secretary, Lakewood Hospital, 588-1711.

MEMBERSHIP

FIRST NOTICE

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:



PHILIP M. ANDRESS, JR., D.O., Emergency Room. Born in Philadelphia, PA, 6/14/44; medical school of Philadelphia College of Osteopathic Medicine, Philadelphia, WA, 1974; internship at Naval Regional Medical Center, Camp Pendleton, California, 1974-75; residency in family practice at Naval Regional Medical Center, Camp Pendleton, CA, 1975-77; licensed to practice medicine in the State of Washington, 1977. Dr. Andress practices medicine in emergency rooms of Pierce County hospitals.



RONALD G. EARLY, M.D., Psychiatry. Born in Brownwood, Texas, 8/27/44; medical school at University of Texas, San Antonio, Texas, 1975; residency in psychiatry at University of Washington, 1975-77; licensed to practice medicine in the State of Washington, 1976. Dr. Early is practicing psychiatry at Puget Sound Hospital and has a private practice in Seattle.



LEONARD P. ELIEL, M.D., Internal Medicine. Born in Los Angeles, California, 9/14/14; medical school at Harvard, Boston, Mass., 1940; internship at Massachusetts General Hospital, Boston, Mass., 1940-42; fellowship at Boston's Children's Hospital, Boston, 1946-68; fellowship at Memorial-Sloan Kettering, New York, N.Y., 1948-51; board certified in Internal Medicine, 1952; also practiced medicine in New York, Oklahoma City and Seattle. Dr. Eliel is a staff administrator at Veterans Administration Hospital in Tacoma.



RICHARD A. HOFFMEISTER, M.D., Orthopedic Surgery. Born in Denver, Colorado, 6/15/32; medical school at University of Colorado, Denver, 1958; internship at Tripler Army Medical Center, Honolulu, Hawaii, 1958-59; residency in General Surgery, Womack Army Hospital, Fort Bragg, 1959-60; residency in Orthopedic Surgery, Letterman Army Medical Center, San Francisco, 1960-63; licensed to practice medicine in the State of Washington, 1974; board certified in Orthopedic Surgery, 1967; also practiced medicine in the U.S. Army, most recently at Madigan Army Medical Center. Dr. Hoffmeister's office of orthopedics is located at 5924 - 100th St. S.W. in Tacoma.



JOHN V. MERRICK, M.D., General Practice. Born in Boston, Mass., 6/25/29; medical school at University of Pennsylvania, Philadelphia, PA, 1956; internship at Presbyterian Hospital, Philadelphia, PA, 1956-57; general residency at Puget Sound Hospital, Tacoma, 1961-62; residency in pathology at Tacoma General Hospital, 1963-66; licensed to practice medicine in the State of Washington, 1962. Dr. Merrick's office of general practice is located at 2819 East Main, Puyallup.

SECOND NOTICE



RONALD G. EARLY, M.D., Psychiatry. Born in Brownwood, Texas, 8/27/44; medical school at University of Texas, San Antonio, 1975; residency in psychiatry at the University of Washington, Seattle, 1975 to present; licensed to practice medicine in the State of Washington, 1976. Dr. Early is practicing psychiatry at Puget Sound Hospital in Tacoma.



STANLEY M. FEERO, M.D., Emergency Medicine. Born in Juneau, Alaska, 10/3/50; medical school at University of Washington, Seattle, 1976; internship at Chicago Medical School, Chicago, Illinois, 1976-77; licensed to practice medicine in the State of Washington, 1977. Dr. Feero is practicing Emergency Medicine in Pierce County area hospitals.



DELRAY MAUGHAN, M.D., General Practice. Born in Twin Falls, Idaho, 6/23/50; medical school at University of Colorado Medical Center, Denver, 1976; internship at Madigan Army Medical Center, 1976-77; licensed to practice medicine in State of Washington, 1977. Dr. Maughan is currently practicing medicine at the Troop Medical Clinic at Fort Lewis.



JOHN L. MILLER, M.D., Psychiatry. Born in Great Falls, Montana, 6/8/42; medical school at Indiana University, Indianapolis, Indiana, 1970; internship at Methodist Hospital, Indianapolis, Indiana, 1970-71; residency in pediatrics at University of Washington, Seattle, 1973-75; an additional residency in psychiatry at the University of Washington, 1975 to present; licensed to practice medicine in the State of Washington, 1975. Dr. Miller practices psychiatry at Puget Sound Hospital.



PAUL D. SCHNEIDER, M.D., Internal Medicine/Nephrology. Born in Seattle, Washington, 3/13/42; medical school at University of Washington, Seattle, 1970; internship at Fitzsimons Army Medical Center, Denver, Colorado, 1970-71; residency in internal medicine at Fitzsimons, 1970-71, and in nephrology at Walter Reed Army Medical Center, Washington, D.C., 1973-75; board certified in internal medicine and nephrology; licensed to practice medicine in the State of Washington, 1977. Dr. Schneider's office of Internal Medicine/Nephrology is located at A215 Allenmore Medical Center in Tacoma.



GEORGE MICHAEL WIESE, M.D., Neurosurgery. Born in Brooklyn, N.Y., 5/13/41; medical school at Georgetown University School of Medicine, 1967; internship at Madigan Army Medical Center, 1967-68; residency in neurosurgery at Walter Reed Army Medical Center, Washington, D.C., 1968-73; board certified 1976; licensed to practice medicine in State of Washington, 1972; also practiced medicine as Chief of Neurosurgery at Madigan. Dr. Wiese's office of neurosurgery is located at 1624 South "I" Street in Tacoma.

ATTENDING PHYSICIAN'S REPORT FORMS

Please be advised that the Attending Physician's Report Forms, which previously were available through the Pierce County Medical Society, can now be obtained through North Point Press. They are located at 2302 Pacific Avenue. Call 627-4147 for further information.

THE MEDICAL ARTS BUILDING

Tacoma's Finest Professional Center

The owners and management of Tacoma's Medical Arts Building are dedicated to providing you as a member of the Medical profession—and your patients—with the facilities, supporting services and conveniences essential to your practice. Here are some of the advantages of locating your offices in the Medical Arts Building:

- Office facilities designed specifically to meet your professional needs.
- Extensive supporting services located in the building.
- Centrally situated among three major hospitals—Doctor's, St. Joseph's, and Tacoma General.
- Easy access—by car and by bus.
- Inside parking—at your doorstep, not a "football field" away.
- Personal, professional extras—building hostess to assist you and your patients; distinctive and effective building security system.
- And, reasonable rental rates—an important consideration in these days of rising equipment, insurance, and other costs.



For an appointment or further information, please contact Doug DeForest at:

Medical Arts Building, 740 St. Helens Avenue, Tacoma, Washington 98402, or phone (collect) 206 - 272-3161.

GENERAL MEMBERSHIP MEETING NOTICE

TUESDAY, MARCH 14, 1978

PROGRAM

"Helping the Impaired Physician — Whose Responsibility?"

Donald M. Keith, M.D., Chairman of the WSMA Committee on the Personal Problems of Physicians, will discuss current efforts to assist the impaired physician.

THE HUNTSMAN RESTAURANT — 3902 BRIDGEPORT WAY WEST
in the Green Firs Shopping Center near University Place.

6:15 Cocktails • 7:00 Dinner • 8:00 Program
(\$7.50)

RESERVATION FORMS AVAILABLE AT THE SOCIETY OFFICE.

IN NAME OF CHARITY

Physicians Accept Court Challenge

Late Thursday afternoon, March 23, several Pierce County doctors will leave their offices early, not for medical emergencies, but to accept the challenge of a benefit basketball game against the Student Nurses of Tacoma General Hospital. This annual event will be held at the Wilson High School Gym. Doors open at 6:30, and the "game?" will begin at 7:00.

Donations of \$2.00 for adults, \$1.25 for students, and 75¢ for children 6-12 (under 6 free) will be accepted at the door. All proceeds will go to Easter Seals.

Do not miss this once-a-year chance to cheer your favorite team to victory as well as enjoy some of the best comedy ever before witnessed on the basketball court.

Wilson High School — 7:00 p.m. — March 23.
See you there.

Physician Wanted



POSITION: A physician to provide medical supervision and epidemiological diagnosis and treatment in various clinics run by the Tacoma-Pierce County Health Department. A valid license to practice medicine in Washington State is required with specialization in family or community health medicine desirable.

WORKING CONDITIONS: Clinics are normally scheduled between 8 a.m. and 5 p.m. Monday through Friday. However, night clinics occasionally require physician supervision.

SALARY: \$2,365 to \$2,873 per month depending upon qualifications, plus many benefits.

FOR INFORMATION: Ms. Kerry Schaefer (206) 593-4250. City Personnel Department, Room 335, 930 Tacoma Ave. South, Tacoma, WA 98402.

Equal Opportunity Employer

CATEGORY I – CONTINUING MEDICAL EDUCATION – PIERCE COUNTY

The following programs are in the planning process for the winter and spring of 1978 by the Committee for Continuing Medical Education of the Medical Society of Pierce County and the local hospitals in conjunction with the College of Medical Education, Inc. The programs will host visiting and local experts. Notice for each program, including specific information regarding format and speakers, will be mailed to your office at least three weeks prior to the offering. THIS SCHEDULE IS SUBJECT TO CHANGE – Please call our office if you are interested in a program that you have not received specific notice for.

Category I Credit
to be applied for

March 30, 31 and April 6, 7
Good Samaritan Hospital
8:00 to 10:00 a.m.

THE ENDOCRINE GLANDS
Coordinator: Thomas Clark, M.D.

8

April 5, 12, 19, 26
Tacoma General Hospital
8:00 to 10:00 a.m.

POTPOURRI
Dermatology, Gyn, GI Disease, Arthritis
Coordinators:

6

May (Tentative)
Tacoma General Hospital
Day long

BREAST CARCINOMA
Coordinator: J. B. Katterhagen, M.D.

-



COLLEGE OF MEDICAL EDUCATION
University of Puget Sound
1500 North Warner, Tacoma, Washington 98416

MRS. MAXINE BAILEY
Executive Director
756-3152

Allergy and Clinical Immunology for Non-Allergist Physicians



FOUR-DAY POSTGRADUATE COURSE SELECTED TOPICS IN ALLERGY/CLINICAL IMMUNOLOGY JULY 22-25, 1978

Saturday, Sunday, Monday and Tuesday
**NEWPORT BEACH,
CALIFORNIA**

Conducted by
The American Association for Clinical Immunology and Allergy

FACULTY

William T. (Ted) Kniker, M.D. Prof. Pediatrics & Microbiology U. of Texas Health Science Center	Wilbur G. Avery, M.D. Chief, Div. Pulmonary Diseases South Miami Hospital, Florida
Raymond G. Slavin, M.D. Prof. Internal Medicine St. Louis School Medicine	Thomas L. Nelson, M.D. Chmn. Dept. of Pediatrics U. of California Med. Center Irvine
Joseph Bellanti, M.D. Prof. Pediatrics & Microbiology Georgetown U. Medical School	Harold S. Novey, M.D. Allergy Immunology Division U. of California Med. Center Irvine

HOW SHARP IS YOUR KNOWLEDGE ON ALLERGY/IMMUNOLOGY? ARE YOU UP TO DATE? DO YOU NEED A REFRESHER?

The American Association for Clinical Immunology and Allergy plans to conduct a postgraduate course and update on allergy/clinical immunology topics of interest to non-allergist physicians. This continuing educational experience will be held July 22-25, 1978, at Del Webb's luxurious NEWPORTER INN Newport Beach, California. Twenty-six Category I AMA credit hours can be earned through the course which includes lectures and panel discussions.

A distinguished national faculty will conduct the postgraduate program. Newport Beach is located convenient to Disneyland, Knott's Berry Farm, Laguna Art Festival and numerous other Southern California vacation attractions.

REGISTRATION FEE is \$260. Advance registration is requested. LODGING, Del Webb's NEWPORTER INN. Rate information available on request.

Return this coupon for preregistration and/or more information.

CLIP AND MAIL

AMERICAN ASSOCIATION FOR CLINICAL IMMUNOLOGY & ALLERGY (AACIA)
PO BOX 912, OMAHA, NEBRASKA 68101 PHONE 551-0801

NAME _____ PRACTICE _____

ADDRESS _____ CITY _____ STATE ZIP _____

Register me for the AACIA Course July 22-25, 1978

My check for \$260 is enclosed

Send information on rooms rates NEWPORTER INN MARRIOTT

Send additional information on this postgraduate course

Make checks payable to AACIA

in Brief

A summary of AMA, medical & health news

American Medical Association • 535 North Dearborn Street/Chicago, Illinois 60610/Phone (312) 751-6000/TWX 910-221-0300

A one-third reduction in capitation assistance for medical education and a meager 1.5% increase in funding for the National Institutes of Health were proposed in President Carter's budget for fiscal year 1979. In letters last year to the Office of Management and Budget and Congress, the AMA had urged that the NIH budget be increased 9% over the fiscal year 1978 budget. The AMA also recommended the following increases for other federal health programs: \$50 million for maternal and child health; \$10 million for family planning; \$4.5 million for migrant health; \$8 million for the National Health Service Corps; \$15 million for emergency medical services; \$14 million to combat venereal diseases; \$13 million for immunization; \$2.5 million for lead-based paint poisoning prevention; \$7 million for occupational health; \$60 million for mental health; \$25 million to combat alcoholism; \$13.2 million for health professions education; \$80 million for aging; \$30 million for the Food and Drug Administration; \$40 million for Indian health services.

The Voluntary Cost Containment Program designed by the AMA, the American Hospital Assn., and the Federation of American Hospitals was described recently in a letter to each member of Congress. The letter is the first in a series of direct communication with Congressmen. It points out that the 15-point action program of the Voluntary Cost Containment Program "covers the key factors in health care cost inflation" and "will reinforce mechanisms that are already in place to address this problem."

A national health insurance bill will be submitted to Congress "later this year," President Carter said in his State of the Nation address. "While Congress will not have the time to complete action on this proposal in 1978," Carter said, "it is important to begin the national debate on the many complex issues involved in national health insurance." Most people believe the national debate on NHI has been going on for at least 20 years.

The theme for the 31st National Conference on Rural Health will be "Building Local Alliances for Rural Health." The meeting will be April 5-7 at the Regency Hotel, Denver.

National medical specialty societies will participate directly in AMA policymaking at the 1978 Annual Meeting. The House of Delegates, at its Interim Meeting in Chicago, adopted criteria to provide one delegate seat to any specialty society that was represented on an AMA Section Council in 1977 and (1) has at least 1,000 members or (2) represents a specialty for which there is an approved examining board listed in the Liaison Committee on Graduate Medical Education's Directory of Accredited Residencies. The Section Councils will be retained as official components of the AMA to provide a mechanism for the deliberation and study of scientific, education and other interests of the specialty disciplines.

A 15-point plan featuring a goal of a 2% reduction in the rate of increase over each of the next two years in community hospital expenditures has been drafted by the national steering committee that is developing a Voluntary Cost Containment Program. The committee was formed late last year by the AMA, the American Hospital Assn., and the Federation of American Hospitals. It is composed of officials of the AMA, AHA, FAH, the Health Insurance Assn. of America, the Health Industry Manufacturers Assn., the Blue Cross Assn., the U.S. Chamber of Commerce, and a consumer consultant. Describing the project as "a more concerned effort than any undertaken before," an AMA spokesman said a goal of the program will be to expand public awareness of the need for cost constraints and cost awareness on the part of consumers as well as providers.

A program to stimulate public participation in food and drug policy will be launched this spring in seven cities by the Food and Drug Administration. The program will open simultaneously in Boston, Chicago, Denver, Los Angeles, New York, Pittsburgh and St. Louis. FDA Commissioner Donald Kennedy, Ph.D., said one aim of the project is to "demystify medicine."

A 30-minute version of the AMA film "A Critical Difference" is now available for use by state, county and specialty medical societies. The original 60-minute version was viewed last year by several million people. The film examines the important role of the private sector in health care delivery in this country. Write Dept. of Radio, TV and Motion Pictures, AMA Headquarters.

continued on page 27

TACOMA ACADEMY OF INTERNAL MEDICINE

ANNUAL MEETING — MARCH 16-17, 1978

Application for Category I credit has been made. A specific number of hours of credit was not available at the time this notice was prepared.

Thursday, March 16

<u>MORNING</u>	—	8:00	Rheumatoid Arthritis Update	Bruce Gilliland, M.D.
		9:00	Giant Cell Arthritis	Kenneth Wilsky, M.D.
		10:00	Collagen Disease in 1978	Bruce Gilliland, M.D.
		11:00	Current Treatment of Rheumatoid Disease	Kenneth Wilsky, M.D.
<u>AFTERNOON</u>	—	2:00	Utilization of Endocrine Tests in Clinical Practice	John Leonard, M.D.
		3:00	Thyroid Function Tests and Thyroid Tumors	Neal Elgee, M.D.
		3:45	Thyroid Workshop	Neal Elgee, M.D.
		4:15	Use of Estrogens in Menopause	Donald Smith, M.D.

Friday, March 17

<u>MORNING</u>	—	8:00	Treatment of Acute Myocardial Infarction	John Murray, M.D.
		9:00	Medical Treatment of Angina Pectoris	John Murray, M.D.
		10:00	Recent Advances in Cardiac Surgery	Lester Sauvage, M.D.
		11:00	Panel - Coronary Artery Surgery in 1978	Moderator: Eugene Lapin, M.D. Panel: John Murray, M.D., Cordell Bahn, M.D. Lester Sauvage, M.D., John Nagle, M.D.
<u>AFTERNOON</u>	—	2:00	Neuropharmacology of Depression	David Raskin, M.D.
		3:30 to 5:00	Psychiatry in Medicine	Donald Dudley, M.D.
<u>EVENING</u>	--		Keynote Address	William Rieke, M.D.

Sponsored by: Tacoma Academy of Internal Medicine

In Conjunction With: College of Medical Education, Inc.

Meeting Space Courtesy of: St. Joseph Hospital, 6th Floor - Quadrant B
1718 South "I" Street (enter "J" Street Entrance)
Tacoma



Registration Fee: Non-Members \$75.00. Fee will not be refunded after March 16, 1978. No refunds can be made for partial attendance.

PAID PREREGISTRATION WOULD BE APPRECIATED BEFORE MARCH 15, 1978.

Address all correspondence and registration fees to: Maxine Bailey, Executive Director, Phone: 756-3152
College of Medical Education, Inc.
1500 North Warner, Tacoma, Washington 98416

My check for \$_____ is enclosed. (Please make check payable to C.O.M.E.)

Name _____

Address _____

I would like AAFP Credit (yes) (no) *circle one* Internal Medicine

FAMILY CLINIC – JANUARY 1978

Open Monday through Friday

1815 South J Street, Tacoma 98405

Phone 627-9182

PATIENT SERVICES

	January 1978	Total 1978	Total Since September '73
Referred to Physicians	78	78	5,911
Laboratory Services	55	55	4,885
X-Ray Services	17	17	577
Prescriptions	65	65	3,648
Referred to Community Agencies	23	23	1,492
Seen by Physicians in Clinic	57	57	1,887

ETHNIC AND DEMOGRAPHICAL DISTRIBUTION

Black.....	45	45	1,740
Caucasian.....	209	209	9,594
Asian-American.....	7	7	266
Native-American.....	3	3	262
Mexican-American.....	6	6	253

PARTICIPATING PHYSICIANS ON FRIDAY EVENINGS

Dr. H. Boyd

Dr. N. Magnussen

Dr. R. Martin

Dr. A. North

Dr. G. Oh

Dr. T. Smith

Dr. G. Tanbara

Dr. A. Tsoi

Dr. S. Whaley

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people like you 24 hours a day.

RADIO-TELEPHONE

PAGING

TELEPHONE ANSWERING

RADIO PAGE
572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day . . . when you must be contacted, you get an actual voice message from your personal "Pager."

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw – 24 hour service.

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301
•
11TH & PACIFIC AVE.

SERVING THE

- MEDICAL
- DENTAL
- PROFESSIONAL

Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

PRESIDENT'S PAGE continued from page 5

strengthening consumer and provider price consciousness, and expanding regulatory measures. The study concluded:

"A process of strengthening price consciousness combined with complementary regulatory schemes will lead, in terms of cost, quality and access, to an optimal program of health care delivery."

The commission made 48 specific recommendations aimed at cost containment. Among the recommendations directed at the medical profession are:

- Physicians, hospitals, insurers and others should work at the local level to agree on reasonable levels of reimbursement.
- The hospital industry is urged to put in place a structured voluntary cost constraint program, based on periodic review and public notice of all hospital expenditures exceeding a predetermined acceptable limit.
- The medical profession should develop and disseminate guidelines for appropriate care based on criteria of medical necessity, quality, and cost benefit. Neither the patient nor third party payer should bear the costs of decisions which result in inappropriate care.

Second opinions

Specific recommendations for the surgical profession center on second opinions:

"Studies have shown that the second opinions do not always recommend surgery. However, because there is no evidence to believe that second opinions are more valid than first opin-

ions, these results do not constitute sufficient evidence to conclude that there is excess surgery. But if some surgery is indeed inappropriate, the practice of encouraging patients to obtain an additional opinion may have the potential for reducing unnecessary elective surgery with some resultant cost savings. The long-range effect of such programs has not yet been measured. Second opinion surgical study projects should continue to be conducted.

"Third-party payers, working with providers, should undertake conscientious evaluation of the methodologies and the results of current experimentation with coverage of second opinions prior to elective surgery. The long-term results and general adaptability of such programs should be evaluated in terms of medical care quality, cost effectiveness, the cost and quality of alternative care provided in place of surgery, and the long-range medical implications for the patients who did not have surgery.

"In a broader sense, physicians are demanders of health care as they make decisions on behalf of patients. In this role, physicians may recommend care that is considered inappropriate because it is not medically necessary or consists of expensive amenities. The decision to prescribe such care can result from patient preference, the form of payment, or physician attitudes regarding current and acceptable medical practices."

How much weight the commission's study will carry remains to be seen. One thing is certain, however. The battle over cost containment will continue through 1978 and well beyond.

— Dennis Connaughton

HOTLINE continued from page 7

This is all for this trimester. A report on deliberations of your Pharmacy-Doctor Committee will be forthcoming after the March meeting. In the meantime, if you have any suggestions for improvement of professional relations between the two groups or if you see problems that exist and need the Committee's attention do not hesitate to call me at 588-5559. I may not solve them but I'll see they get to the proper people for discussion.

LEGISLATIVE NEWS continued from page 9

total number of hospital beds, and reduce new capital expenditures by 20 percent this year. There are skeptics who believe the Committee's fifteen-point approach to be fruitless because the major causes of increased cost (inflation, wages, etc.) are beyond control. They argue that the private sector is setting itself up for automatic failure and subsequent automatic regulation.

Let us hope that the efforts of this group can prove the skeptics wrong.

W.B.J.

CLASSIFIED

WANTED: ASSOCIATE DIRECTOR: Family Practice Residency. Board Certified practicing Family Physician with interest in teaching. Responsibilities include teaching residents and patient care. Excellent local medical facilities. Outstanding professional, cultural and recreational environment. Contact Roy Virak, M.D., Family Practice Residency Foundation, 737 Fawcett Avenue, Tacoma, Washington 98402.

PROFESSIONAL MEN: Corner lot, 120x125 feet at 38th St. and Sheridan in Tacoma. Zoned for professional offices, Drs., etc.; also mult. family. Asking \$55,000. Call Bob Fay, 1-858-9144, 1-272-2106.

LUXURY WATERFRONT APARTMENT, completely furnished, on Kauai. Rent by week. 759-4332, evenings.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T.G. Contact Richard Huish, M.D., 572-4664.

FOR SALE: Retiring physician's office equipment. Phone 759-1152, evenings.

FOR SALE: Examination table, by Enochs; one year old; brown top, cream base; cost \$550.00 new, asking \$375.00; other equipment available; call 1-363-4480, evenings.

IBM EXECUTARY: Dictation and transcribing machine. Excellent condition. \$200. Also Phone Mate, \$75. 848-6655.

AUXILIARY PAGE continued from page 13

7:30 p.m., and dancing will continue from 9 p.m. to 1 a.m. to the music of the Sand Band. Nancy Spangler is the Reservations Chairman and will accept checks in the amount of \$35.00 mailed to her at the following address: 3620 Soundview Drive West, Tacoma 98466. Nancy will also have tickets available at the March Auxiliary meeting. No tickets will be sold after April 8th.

This dance is the sole funding for the scholarship fund for graduating seniors of our medical family, and is held every other year. Hence, \$5.00 of the \$35.00 donation will be designated for the scholarship fund and may be tax deductible. Reservations will be limited to the first one hundred couples sending in their donations to the Reservation Chairman.

IN BRIEF continued from page 23

The Board of Trustees is making a study of the "weakening of relationships in a number of states" between physicians and Blue Cross-Blue Shield. In a report to the House of Delegates the Board noted that an increasing number of physicians maintain that the Blues are using payment mechanisms "to direct the manner in which physicians may treat patients." The House recently adopted a resolution opposing third-party differential payment for the services of participating and nonparticipating physicians. The resolution said such programs discriminate against physicians who do not have separate contractual relationships with the carrier and inhibit the free choice of physician by patients.

More than \$5.3 million in guaranteed loans for medical students and \$1.18 million in grants to medical schools were made possible by the AMA Education and Research Foundation during the first nine months of last year.

During that period approximately 3,800 students and physicians-in-training benefited from the AMA-ERF guaranteed loan fund.

An update of the fourth edition of Current Procedural Terminology (CPT-4) has been published. The 38 revisions include new codes for mastectomy procedures, cryosurgery, and foot surgery, and deletions of outmoded processes. The update is available at no additional cost and can be obtained by using a prepaid mailer in the back of the book. CPT-4 computer tapes have also been revised.

Cost-awareness programs for medical students and physicians were called for by the House of Delegates at its Interim Meeting in Chicago. In a related action the House adopted a policy urging physicians to volunteer fee information to their patients and called for development of an AMA program to encourage and assist physicians in making such information available in their offices.

MEDICAL SOCIETY of PIERCE COUNTY

813 South K Street

Suite 200

Tacoma, Washington 98405

ADDRESS CORRECTION REQUESTED

BULK RATE
U. S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605



Medical Society of Pierce County

APRIL 1978 • Vol. XLX, No. 4 • Tacoma, Washington



BULLETIN

Compare these benefits provided by Survivor Security Life Insurance

Compare these benefits with your present policy. When you do, we're sure you will agree that Survivor Security Life Insurance, developed to meet the special needs of physicians and surgeons, is an excellent insurance value.

✓ **Excellent protection at low group rates.**

A high level of protection at a very low monthly cost due to the group rate made possible by the society's and association's buying power.

✓ **A variety of monthly payment options.**

\$500, \$1,000, \$1,500, \$2,000 or \$2,500 monthly, or more, depending on your needs. Total payments range from \$30,000 to \$360,000.

✓ **A variety of benefit payment plans.**

Payment over 5 years, 10 years, or 20 years, at your option. You choose what is best for your survivor's needs.

✓ **The ability to select more than one plan.**

You may want a high level of income to your beneficiary for five or ten years with a reduced amount for 20 years.

✓ **Benefits that can be paid other than monthly.**

You may select a lump sum settlement in lieu of monthly payments.

✓ **Income that continues if your survivor also dies.**

You can name contingent beneficiaries.

✓ **A special conversion privilege.**

You may convert to a permanent insurance plan at any time.

✓ **A group policy that can't be cancelled.**

And, rates cannot be changed unless they are changed for all participants.

✓ **A disability death benefit.**

If you become totally disabled, and then discontinue premium payments, the full benefit is still payable if death occurs within one year.

✓ **"No hassle" application.**

Just call NED SHERA, C.L.U., or SUSAN KEITH, C.L.U., at Schwarz, Shera & Associates, at 572-6010. They can answer your questions and mail you additional information, and an application.

Sponsored and endorsed by your county medical society and the WSMA.

Underwritten by: Safeco Life Insurance Co.



**SCHWARZ, SHERA
and ASSOCIATES, INC.**

*Insurance brokers and financial consultants
to Pierce County physicians since 1963.*

572-6010

THIS MESSAGE IS INTENDED TO OUTLINE CERTAIN BENEFITS. IT IS NEITHER AN OFFER OF INSURANCE NOR A LEGAL DESCRIPTION OF ALL POLICY PROVISIONS.

Bulletin of the Medical Society of Pierce County

CONTENTS

page	
5	PRESIDENT'S PAGE
11	AUXILIARY PAGE
13	A.A.M.A. PAGE
20	LETTERS
22	MEMBERSHIP
27	CLASSIFIED
7	"That Cost Commission Report: An Answer Before It's Too Late"
8	"How To Hire the Right Person For the Job - Planning the Interview"
9	"Privacy-Confidentiality Conference Planned at P.L.U."
12	Family Clinic
14	"Happy Birthday, Tel-Med"
17	"HEW's Medicare Payment List Useless to the Public"
17	"Volunteer Physicians Needed"
17	"Make Medicine's Voice Heard In the Planning Process"
18	"Clinical Cardiology - Update 1978"
18	Tacoma General Topics - A Reminder
19	"Your Pierce County Medical Library"
24	"Physicians and Their Families"
24	Lakewood General Education Conferences
25	In Brief - A Summary of AMA, Medical and Health News
26	"Annual WSMA Child Health Committee Meeting To Be Held In Tacoma"
26	Washington State Hospital Cost Facts



Cover photo courtesy of Lee Merrill and Custom Photographic Laboratories

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-Elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D.	(79)
Melvin L. Henry, M.D.	(80)
William B. Jackson, M.D.	(80)
Richard K. Ohme, M.D.	(80)
Charles C. Reberger, M.D.	(79)
Roy A. Virak, M.D.	(80)
Myra S. Vozenilek, M.D.	(79)
Helen Whitney	(78)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

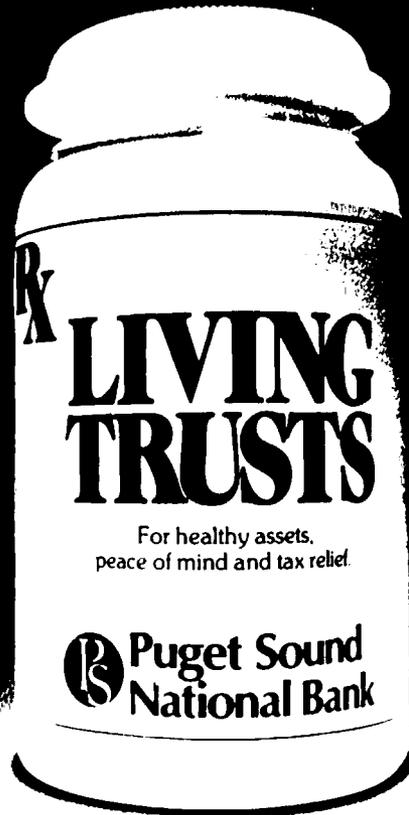
COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U. S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates upon request. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

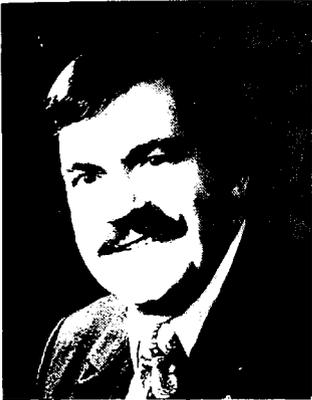
duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

PRESIDENT'S PAGE



Ralph A. Johnson, M.D.

Happy Birthday Tel-Med!

One year ago the Medical Society of Pierce County and the Society Auxiliary joined together to sponsor the Pierce County Tel-Med Society. This organization provides access to a library of tape recorded health messages of interest to the general public. The messages are concise and easily understood and are evaluated by local physicians prior to being accepted for the program.

Public interest in health matters seems to be at an alltime high. We have only to consider the enthusiasm with which TV "Talk Shows" on health related matters are met. Formal medical presentations or documentaries have high TV ratings.

Consider also the great interest of the viewing audience in medical-oriented series. We are also well aware of the public interest in syndicated newspaper articles which answer health related questions. It should come as no surprise, therefore, that the public in our area has quickly embraced Tel-Med as a valuable service.

Thanks to those who administer our Tel-Med Service and to those who are volunteer operators. Our Medical Society and Auxiliary are gaining highly desirable positive public relations. At the same time, a very beneficial education system is provided at no cost to the public.

Early criticism by some who regarded the service as an intrusion in the doctor-patient relationship has, I believe, been largely dispelled during Tel-Med's first year of operation. In fact, the program may well encourage patients to seek appropriate medical evaluation, and thus act as a factor in early detection and treatment of disease.

The officers and board members of this non-profit corporation are to be congratulated on their achievement in making Tel-Med operational, and in seeking out and obtaining the necessary financial support. *Ongoing operational expenses need additional funding, and our individual contributions to this worthwhile service are still needed to provide a continuing public service.*

Tel-Med — We wish you many happy returns of the day!

R.A.J.

PERSONAL CUSTOMIZED SERVICE

**is available at the
Medical-Dental Placement Service**

*Tired of too many fruitless interviews?
Tired of dealing with staffing problems?*

One Phone Call Can Do It All!

**WE WILL ADVERTISE, SCREEN, SEND RESUMES,
AND SCHEDULE A MINIMUM OF INTERVIEWS FOR YOU.**

Call Sondra Sakala, Director

MEDICAL-DENTAL PLACEMENT SERVICE

(a membership service of the Medical Society
of Pierce County)

572-3709

"We specialize in matching the right employee and employer."

THAT COST COMMISSION REPORT: AN ANSWER BEFORE IT'S TOO LATE

An AMA Editorial

The AMA-created National Commission on the Cost of Medical Care — in submitting its report with 48 recommendations — has given America a bold and far-ranging statement of **what** has to be done about that cost. And among physicians, there are bound to be **why's**.

- *Why was the commission created?*

Because the AMA recognized the damage and danger inherent in the relentless surge in health-care costs — an average of 11 percent a year. And because the AMA, as the nation's largest physician organization, was the logical choice to take the lead in curbing that surge and in reducing costs where possible.

- *Why was the commission composed of representatives from a variety of fields — including industry, insurance, labor, government, and academia — instead of being limited to physicians and health-care institutions?*

Because on an issue affecting as many fields and as many people as health-care costs, a panel lacking breadth of membership would also lack credibility. Conclusions reached by persons of like opinion generally excite little attention outside their own group, in contrast with the widely favorable notice the commission report has received in the media and elsewhere. Even so, 11 of the 27 commission members are physicians, and one is a dentist. Thus, the doctors' interests were amply and realistically represented.

- *Why are some of the 48 recommendations at variance with medicine's established way of doing things and even with AMA policy?*

Because **every** group involved directly or indirectly with health care must put cost containment ahead of certain other considerations. To cite examples from the recommendations, experimental payment to hospitals on the basis

of prospectively determined rates could be a financial disadvantage to hospitals. Marketplace choice of health-care plans on the part of employees could be a bookkeeping burden for employers.

PULL TOGETHER TO WIN

Responsibility on the part of each segment of health care is integral to working together — and the various segments must act together to act effectively and fairly. They must pull together to head off really tough regulation.

The major thrust of the report is that it calls for mostly voluntary action and has things like this to say about regulation:

"The costs of regulations of all kinds, both governmental and voluntary, have significant impact on the total costs of health care. Government, as well as providers of care, must give attention to the simplification of the regulatory process and to consolidating and reducing the number of inspections, audits, surveys, reports, and other mechanisms of enforcement."

The private-sector initiative sparked by the AMA is the way to be our own enforcer in doing what the public wants. Polls show that while most people are satisfied with their medical services, they are uptight about costs — and recognize the impact of physicians on hospital costs, which they resent most.

The AMA House of Delegates will be weighing the commission report at the June annual convention. Naturally the report raises some questions. But it answers the great basic question — *Who is to hold down costs?* It may well be the last bona fide set of answers the health-care world can offer on its own.

HOW TO HIRE THE RIGHT PERSON FOR THE JOB

Part I. Planning the Interview

by **Sondra Sakala, Director**
Medical-Dental Placement Service

The personal interview is the time-honored method of hiring a new employee. Yet most of us, if we are honest, do not do a very good job of using this instrument called the "interview." Here are some steps which you can take to make the interview situation a more effective tool.

Preparation is the key. Before you interview, write a job description listing specific skills and responsibilities. The hours and days of the job should be clearly defined. This might seem obvious, but sometimes new jobs are created (particularly, part-time) to ease the workload without much thought being given to details. Define what you are looking for. Planning also helps eliminate confusion on the part of the employee as to your expectations once the person has been hired. Job descriptions are essential so that the duties/responsibilities of individuals already employed in the office are clear and do not overlap. Finally, a job description is a valuable tool for evaluation of performance. It is not unusual for an individual to be fired for failure to perform up to expectations without having ever been given a clearly-defined job description.

Use the interview to elicit information which is incomplete or unclear on the written application. Some employers waste time by interviewing without any written information. A good application will always ask for specific dates of employment, job title, duties/responsibilities and reasons for leaving former jobs. Resumes can be informative but they often omit information which may be damaging to the applicant. Therefore, a well-designed application is essential.

You will have greater success if you ask each applicant the same questions in the same sequence. There should be an atmosphere of trust, with comments which encourage the applicant and give that person a feeling that you are actively listening. Interviewing is a skillful blending of active listening and effective questioning. Questions that allow a person to simply answer "yes" or "no" should be rephrased to elicit information about motivation, attitudes, work habits, and personality.

An effective interviewer gives information about the job and encourages the applicant to ask further

questions about matters which are unclear. The applicant is part of a two-way communication. He or she is weighing the information given to determine whether the job meets his or her needs (hours, salary, opportunities for growth). Ten years ago clerical workers seldom had definite vocational goals and changed jobs infrequently. Now a secretary wants to know what opportunity she will have for growth and advancement. The applicant should know whether or not the file clerk or insurance billing clerk job you have to offer can eventually lead to other opportunities.

Ask job-related questions! It is illegal to solicit particular kinds of information. The Human Rights Commission has determined that inquiries about ownership of a home or car, marital status, race, sex, handicaps, and spouse's employer are not job-related and thus can be considered discriminatory.

There are certain questions which can help you determine the reliability and stability of an applicant, but which are not illegal. They include:

Do you have transportation to get to your job?
(This is a different question than whether or not one owns a car.)

How long do you expect to live in this area?
(This is acceptable whereas inquiries about spouse's military status is not.)

How do you feel about working late when I haven't finished seeing all my patients?

How do you feel about asking patients to pay for their medical services?
(These are questions which alert the applicant to your expectations.)

What are your long-range vocational goals?
(This will tell you whether the person is planning to work for a year and then go back to school.)

When closing the interview, be sure to state whether you think the applicant is reasonably qualified for the job you have to offer, without necessarily committing yourself to hiring that person. Give the applicant a definite indication of when you expect to make your decision. If you consider the applicant

a strong candidate for the job, then say so; he or she may have interviewed for several openings that week and might accept another job if not given positive encouragement. If a person is unqualified, it is kinder to let him know by the end of the interview. Common courtesies should always be observed in interviewing.

After the interview, check references. These checks are more effective if you personally call previous employers (written letters of reference do not allow an employer to be candid). Ask the employer if he would rehire the individual. Ask why the person left the job. Always call more than one reference, if there have been several jobs. Keep in mind that one bad reference may not always tell the whole story.

One last thought. Allow sufficient time for the interview. Don't hire in haste. Diane Palmer, of the American Medical Association's Medical Practice Division, notes that professional consultants have estimated "the cost of recruiting, hiring and training a new employee, considering the non-productive time for both the trainer and trainee, is \$5,000." Arrange to interview when you will not be disturbed or in a great hurry. Interviewing before or after office

hours seems to be best. Interview in your office, if at all possible, so the applicant can clearly see the job setting and whether or not he or she would fit into your office.

Studies indicate that the personal interview is the least effective, least objective means of hiring the right person. Since the interview is still the most frequently used method, it is imperative that your interviewing skills be as sharp as possible. One convenient way to reduce costly errors when hiring personnel is to use the Placement Service provided by your Medical Society. The Placement Service will test basic job skills and obtain complete information before the applicant is referred to your particular job. Hasty interviews, done under the pressure to hire immediately, will result in poor choices. Faulty hiring processes contribute to high employee turn-over rates and an inefficient office.

For assistance in obtaining qualified staff, call Sondra Sakala, Medical-Dental Placement Service, 572-3709.

NEXT MONTH: How can you predict future job success and stability during an interview?

Privacy-Confidentiality Conference Planned at PLU

A privacy-confidentiality conference will be held at Pacific Lutheran University, April 19-22. Nationally recognized authorities will discuss the privacy and confidentiality spectrum, including health and medical care records and confidentiality in a panel discussion, 2:00 p.m. to 4:40 p.m., Friday, April 21.

W. Maurice Lawson, M.D., WSMA Secretary-Treasurer, and Ms. Almeta Cooper, AMA Staff Attorney, will participate in the health and medical records panel on Friday afternoon. The total four-day conference will cover privacy of women/abortion, students, credit/financial, sex/obscenity/pornography, domestic intelligence agencies, national security, and employment records. There is no charge for attendance. Simply show up and register at the University Center reception area, Pacific Lutheran University, 121st Street and Park South, Tacoma. For further information, call David Atkinson, (206) 531-6900, ext. 497 or 587.

**We're your convenient
source for WSMA/AETNA
professional liability
insurance.**

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



**PERSING, DYCKMAN
& TOYNBEE, INC.**
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty

Doug Dyckman, Jr.

John Toynbee

Wayne Thronson

Bob Sizer

Thom Comfort

Life Department

B. Dennis Schmidt, CLU

Mark Hanks

Kefzol[®] I.M./I.V. cefazolin sodium

Ampoules, equivalent to 500 mg., 1 Gm.,
and 10 Gm. of cefazolin



Additional information available
to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206

700773

AUXILIARY PAGE

AUXILIARY OFFICERS 1977-1978

President	Helen Whitney
President-Elect	Jo Roller
1st V.P. & Program	Kathy Miskovsky
2nd V.P. & Membership.....	Nicole Crowley
3rd V.P. & Historian & Bylaws.....	Reta Bergstrom
4th V.P. & Arrangements	Lee Jackson
Recording Secretary	Martia Ohme
Corresponding Secretary.....	Jan Thiessen
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

COMMITTEE CHAIRMEN

AMA-ERF.....	Marge Ritchie
Communications:	
Bulletins	Georgia McPhee
Newspaper.....	Maryln Baer
Mailing	Donna Prewitt
Telephone	Barrie Mott
	Joanne Iverson, Arlene Hopp
Community Health.....	Kay North
Cookbooks	Judy Baerg
Tasting Luncheon	Stephanie Tuell
Dance	Carol Hopkins
Finance.....	Kimi Tanbara
Joint Dinner	Genny Hansen
Legislation	Cindy Anderson
Newcomers.....	Janet Fry
Nominating.....	Marie Henry
Pierce County Health Council.....	Nadine Kennedy
PCMS Directory.....	Kit Larson
Sunshine.....	Lorna Burt
Superintendent's Advisory Health Council and Handicapped Acceptance Program.....	Sharon Lukens
Student Recognition Awards.....	Barbara Wong
	Marilyn Mandeville
Tel-Med Volunteers	Lila Early

Melba Cowgill, Bev Harrelson, Margaret Granquist and Shirley Murphy. We also have some Dental wives and one Pharmacy wife helping. Lila Early has done a super job as chairman of the volunteers and is looking for more help, especially for Tuesday, Wednesday and Friday. Call her if you can give 2½ hours once every three months from 10 a.m. to 12:30 p.m. Of course, any day will be appreciated, Lila reports.

Thank you Barrie Mott for opening your home for the March meeting. Marny Weber was in charge of the delicious luncheon, assisted by Grace Kanda, Shirley Kemman, Marlene Arthur and Margaret Granquist.

Carol Hopkins and her hard working committee sent out 500 invitations for the dinner dance April 15. We hope you were one of the lucky first 100 couples to get your reservations in for this fun evening.

There will be a new outlet for cookbooks: Jane McDonough, 702 North 6th Street, 572-2521.

Reminder to Committee Chairmen: Please have your reports ready, in duplicate, for the May board meeting.

At the mid-year conference in Yakima, Pierce County projects were artfully displayed on posters made by Barbara Wong and Sharon Lukens. You would be proud of them. More about the conference follows:

MID-YEAR STARS "JULIE"

On Tuesday morning of the auxiliary conference in Yakima, Sharon (Mrs. David) Lukens and Nicole (Mrs. James) Crowley presented to the attending group of state and county leaders the film strip "Julie," featuring a young handicapped girl and her family. Sharon also taught us a song about hinges, which we were expected to know when the second part of the program was given that afternoon.

As we were lunching on the garden terrace and watching with awe and envy three cultural, belly dancers' performance, several little noses accompanied by huge, staring eyes were pressed against the glass windows. Our four-year-old class had arrived to see "Spanish Dancer," the follow-up film strip of Project Awareness! After this film-

continued on page 27

HAPPY BIRTHDAY TEL-MED from all the volunteers: Marion Doherty, Debbie McAlexander, Georgia McPhee, Donna Prewitt, Kay North, Barrie Mott, Betty Allot, Donna Roper, Glenna Blackett, Carol Hopkins, Pat Annest, Ellie Barnes, Marie Henry, Julia Hoffmeister, Nancy Frederickson, Marilyn Mandeville, Jo Roller, Florence Dean, Elsie Parrott, Linda Bede, Kathy Miskovsky, Helen Whitney, Bea Yasayko, Martha Bargren, Nikki Crowley, Shirley Kemman, Nadine Kennedy, Janice McIlroy, Marlene Waldron, Liz Murphy, Marge Ritchie, Martia Ohme, Bonnie Cargol, Lee Jackson, Sharrie Boyd, Dolores Havlina, Bernice Lazar, Em Stern, Marny Weber, Nancy Bageant, Sharon Lukens, Anna Becker, Lila Early, Elaine Brown, Edith Lawrence, Deva Vaught, Anne Katterhagen,

FAMILY CLINIC — FEBRUARY 1978

Open Monday through Friday 1815 South J Street, Tacoma 98405 Phone 627-9182

PATIENT SERVICES	February 1978	Total 1978	Total Since September 1973
Referred to Physicians	39	117	5,950
Laboratory Services	59	114	4,934
X-Ray Services	17	34	594
Prescriptions	46	111	3,694
Referred to Community Agencies	15	38	1,513
Seen by Physicians in Clinic	102	159	1,989

ETHNIC AND DEMOGRAPHICAL DISTRIBUTION

Black.....	34	79	1,774
Caucasian.....	187	396	9,781
Asian-American.....	4	11	270
Native-American.....	0	3	262
Mexican-American.....	4	10	257

PARTICIPATING PHYSICIANS ON FRIDAY EVENINGS

Dr. H. Boyd	Dr. N. Magnussen	Dr. R. Martin	Dr. A. North
Dr. G. Oh	Dr. T. Smith	Dr. G. Tanbara	Dr. A. Tsoi
			Dr. S. Whaley

INSTANT...TOTAL COMMUNICATIONS

All forms of personal communications for the average business professional, 24 hours a day.



RADIO-TELEPHONE

PAGING

TELEPHONE ANSWERING

RADIO PAGE
572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day — when you must be contacted, you get an actual voice message from your personal Pager.

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw — 24 hour service.

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
- DENTAL
- PROFESSIONAL

Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

A.A.M.A. PAGE

by Dorothy Gallaway, Instructor/Coordinator
Medical Assistant Program, TCC

In the fall of 1976, Tacoma Community College initiated a two-year educational program for the Medical Assistant. Under the leadership of Dorothy Gallaway, R.N., and the invaluable support of the community advisory committee, the program is developing into a quality educational experience.

The student interested in the Medical Assistant Program must first apply for admission to the College and enroll in "CORE" courses common to five Allied Health programs. These introductory courses give the student time for exploration of her/his chosen field, and enables the College staff to assess student progress and assist the student with setting goals. Only then is the process of application and acceptance in the Medical Assistant Program completed.

The chosen applicant had made a commitment to meet the minimum program requirement of 98 credits in general and professional education. Upon graduation from a two-year program, the student is awarded an Associate Degree in Technical Arts and may be expected to assume greater responsibility in the medical office through advanced work in basic sciences and supervisory management skills.

The first graduating class is now in its final quarter of externship in physician offices in the Tacoma

area. Evaluations of student performance at the clinical sites have been excellent.

Students are encouraged to participate in the Pierce County Chapter of the American Association of Medical Assistants, which meets for the purpose of improving professional competencies through continuing education. Their voluntary attendance speaks well of this fine organization and the students. Attendance by practitioners from offices where students have been placed in externships has increased noticeably. Also, a number of inquiries have been made by medical offices personnel interested in furthering their educational goals through the Medical Assistant Program.

Tacoma Community College faculty are proud to have been instrumental in establishing an organization of Medical Assistant program directors in the State. Coordination of resources and activities will help to improve educational programs throughout the State.

Finally, success of this young program is due, in large part, to the commitment of a very active program advisory committee.

The College administration and faculty are committed to the continued growth and development of a high quality Medical Assistant Program.

NEED TEMPORARY EMPLOYEES?

We have qualified medical personnel who are immediately available for temporary assignments. If there is emergency illness or anticipated vacation time, let us know. Call Sondra, Director, Medical-Dental Placement Service, 572-3709, for Temporary Help.

HAPPY BIRTHDAY, TEL-MED!

As of April 18, 1978 the Pierce County Tel-Med Society will have completed its first year of operation. It has been an extremely successful year. Through February 1978, Tel-Med received just over 49,800 calls, a monthly average better than 4,700 calls. Calls were received in a ratio of: 3:1 female to male, 6:1 female to child.

There have been additions to the tape library since the original brochure printing. Tapes are being prepared on depression and suicide. Scripts on the proper use of medications, nutrition in athletics, and weight reduction are being reviewed.

Requests have been received for the following topics: dysmenorrhea and menstrual cycle, goiter, bedwetting, food poisoning, pierced ears, sciatica, laryngitis, leukemia, sunburn, tubes in ears, scarlet fever, myelogram, cold sores, cerebral palsy, hyperactivity in children. If any Society member would be willing to prepare a script on these or any other topics, please contact Dr. Robert Whitney. Tapes produced from scripts originating in Pierce County are made available to Tel-Med systems throughout the U.S.

Direct Line Service via telephone linkage to other cities is being investigated. Bremerton, Olympia, Longview and Vancouver have been sent information concerning Tel-Med services and telephone link cost quotations to their respective cities. To date, one city has expressed definite interest. These telephone links would provide monthly revenue to support Tel-Med operational costs.

A tape listing in Braille is also under consideration. Lists would be made available through the Association for the Blind rather than to the general public.

Brochures are available by calling Tel-Med 627-6181.

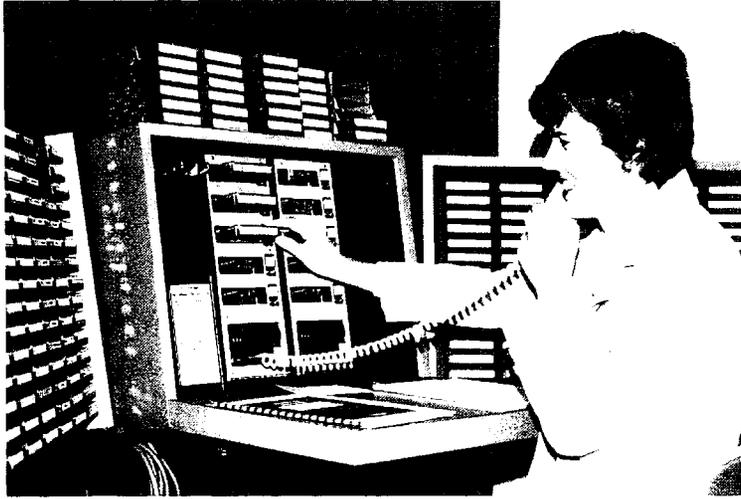
TAPES MOST REQUESTED:

- *Fear of the After Forty Man*
- *Where Did I Come From, Mama?*
- *Diaphragm, Foam, and Condom*
- *I'm Just Tired, Doctor*
- *The Pill*
- *Teen Years — Age of Rebellion*
- *Homosexuality*
- *Vasectomy*
- *Marijuana*
- *Masturbation*
- *Male Sexual Response*
- *Female Sexual Response*

Are these topics that patients are hesitant to discuss with their doctors?

TEL-MED BOARD OF TRUSTEES

- Cindy Anderson
- Duncan T. Baer, M.D.
- Judy Baerg
- Linda Brain
- Max Brachvogel, M.D.
- Nicki Crowley
- Thomas Curry
- Lila Early
- Kenneth Graham, M.D.
- Marie Henry
- Ralph Johnson, M.D.
- Anne Katterhagen
- Mrs. Robert Lordahl
- Jo Roller
- Helen Whitney
- Robert Whitney, M.D.



AUXILIARY VOLUNTEERS, such as Cindy Anderson, help respond to more than 4,700 calls monthly. Two part-time staff operators take over from the volunteers for the 12:30 to 8:00 shift.

A special "thank you" to all the volunteers from auxiliaries — pharmacy, dental, medical — who operate Tel-Med lines and who provide brochure delivery. We can always use more volunteers. Please call Lila Early, 584-0482, if you can give time.

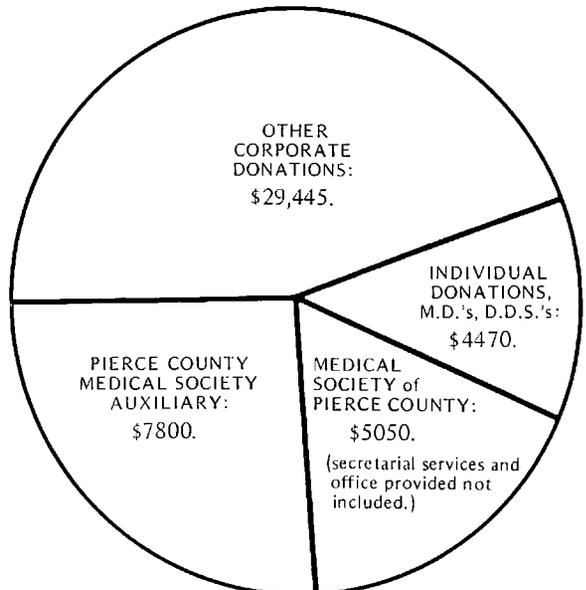
Health educators have expressed their pleasure at having available for their use

tapes suitable for classroom explanations and for homework assignments. Mothers have appreciated being able to call and listen to tapes on care of children, childhood diseases, and discipline.

Tel-Med is a reality and is fulfilling its intent: *to provide factual health care information.*

Thank you to all who saw the need for Tel-Med and who supported it with their donations. The 1978-79 budget of \$18,800 will provide Tel-Med services without purchase of the equipment currently under lease. If funds are made available for purchase of the equipment, the yearly budget would then be decreased significantly. Many of the corporate donations in 1977 were "one time only" donations, so corporate donations will represent a smaller portion of the "pie" this year. If anyone has knowledge of a corporation, foundation or organization that seeks projects to fund, Tel-Med can use their help.

Personal and Group Donations were made by physicians and dentists as follows:



THE MEDICAL ARTS BUILDING

Tacoma's Finest Professional Center

The owners and management of Tacoma's Medical Arts Building are dedicated to providing you as a member of the Medical profession—and your patients—with the facilities, supporting services and conveniences essential to your practice. Here are some of the advantages of locating your offices in the Medical Arts Building:

- Office facilities designed specifically to meet your professional needs.
- Extensive supporting services located in the building.
- Centrally situated among three major hospitals—Doctor's, St. Joseph's, and Tacoma General.
- Easy access—by car and by bus.
- Inside parking—at your doorstep, not a "football field" away.
- Personal, professional extras—building hostess to assist you and your patients; distinctive and effective building security system.
- And, reasonable rental rates—an important consideration in these days of rising equipment, insurance, and other costs.



For an appointment or further information, please contact Doug DeForest at:
Medical Arts Building, 740 St. Helens Avenue, Tacoma, Washington 98402, or phone (collect) 206 - 272-3161.

HEW's Medicare Payment List Useless to the Public

HEW's costly list of payments to physicians for Medicare services during 1977, now being compiled by carriers throughout the country, will be useless to the public, reports the AMA in a recent release. The list won't show how much physicians actually received, and what it does show will be wide open to question and subject to misinterpretation. The Department of Health, Education and Welfare delayed the project for a few days late in January, but then ordered the carriers to begin the busy work. The compilation is scheduled to become available for public inspection and puzzlement about April 30 in the carriers' offices and at HEW's Baltimore and regional offices.

The project is full of holes. One problem is that the list will include a figure totaling payments made to all beneficiaries for each physician's non-assigned claims, but the carriers won't be able to verify that the physician identified with the figure ever got the payment. Another problem is that the figures for both assigned and non-assigned claims will not include the Medicare deductible and coinsurance amounts, and the non-assigned claim figures will not show the reasonable charge reductions.

What's worse, each physician who had Medicare patients is getting a letter from the carrier showing these strange figures and is being asked to

report any discrepancies within 30 days. HEW has thus shifted the burden of accuracy to the physician — but without giving him the information he needs to find discrepancies. No breakdown of the non-assigned total figure is possible under the Privacy Act.

"I don't know that there is any solution to the problem," an HEW spokesman told the AMA last week. "It is obvious that the doctors cannot reconcile their records with what is posted." Then he added: "If a doctor finds the amount for assigned claims satisfactory, perhaps he will be reassured that the amount shown for unassigned claims is correct also."

The new compilation is HEW's follow-up to the unfortunate listing of last year, which the AMA found to be about 65% inaccurate. After apologizing for the department's work last year, HEW Secretary Califano said he would make sure that "financial information is accurate and relevant" in future lists. The AMA responded that "the issuance of any such lists is an inherent violation of privacy and inevitably results in instances of gross injustice." Early this year, commenting on the new project, the AMA told HEW it would seem "that an Administration with such a strong public commitment to cost-effective government would seriously question and find lacking the value of such an undertaking."

Make Medicine's Voice Heard In the Planning Process

Any physician, or physician's spouse, may become a member of the local health planning council by filling out a simple application form (available at the Medical Society office). Members of the health council elect those who serve on the area's Health Systems Agency. Medicine's minority status in the planning process doesn't mean that medicine can't make a greater impact. Sign up for health council membership today.

Volunteer Physicians Needed

Physicians interested in contributing up to three hours of time per month are asked to contact the Tacoma Rescue Mission, 383-4462. The Mission conducts a free health clinic each Wednesday morning from 9:00 a.m. to 12:00 noon for low income residents living in the vicinity of the Mission. Two local physicians currently volunteer one morning each per month to the clinic, which served over 300 patients in 1977.

Additional information can be gained by calling G. Hanley Barker, Superintendent, at 383-4462.

CLINICAL CARDIOLOGY — UPDATE 1978

The American College of Physicians (ACP) will sponsor a three-day postgraduate course, "Clinical Cardiology — Update 1978," in Vancouver, British Columbia, from May 31 through June 2, 1978.

The postgraduate session is one of approximately 45 to be sponsored by the ACP in the United States and Canada during the 1977-78 academic year. Their purpose is to give specialists in internal medicine and related fields an opportunity to review basic information and to find out what is new in medical diagnosis and therapy.

The American College of Physicians postgraduate

courses have been approved by the American Medical Association Advisory Committee on Continuing Medical Education. The Vancouver, B.C. course may be used to fulfill 15 hours of Category I requirements for the AMA's Physician Recognition Award.

The Vancouver, B.C. course entitled "Clinical Cardiology — Update 1978," is being planned by the University of British Columbia, Vancouver, B.C. For further information and registration forms, contact Registrar, Postgraduate Courses, ACP, 4200 Pine Street, Philadelphia, PA 19104.

TACOMA GENERAL TOPICS

(A REMINDER)

for physicians/Tacoma General Hospital 8 to 10 a.m./ Category I Credits: 8 hours

As an organization accredited for continuing medical education the College of Medical Education, Inc., certifies that this offering meets the criteria for eight credit hours in Category I for the Physicians Recognition Award of the American Medical Association and for the relicensure requirements of the Board of Medical Examiners of the State of Washington.

Also, accredited by the American Academy of Family Physicians for eight credit hours — Category I (Prescribed)

April 12 HUMAN IMMUNE COMPLEX DISEASES

Mart Mannik, M.D., Internist — Rheumatology
Professor of Medicine and Head, Division of Rheumatology, School of Medicine, University of Washington, Seattle

April 19 UPDATE: THE HEPATITIS ANTIGENS

Leonard Rosoff, Jr., M.D., Internist — Hepatology
Mason Clinic, Seattle

NEWER APPROACHES TO THE EVALUATION OF JAUNDICE

Jonathan A. Levant, M.D., Internist — Gastroenterology, Tacoma

April 26 UPDATE: ORAL CONTRACEPTIVES

Donald E. Moore, M.D., Internist
Assistant Professor and Director, Obstetrics and Gynecology Division of Reproductive Endocrinology, School of Medicine, University of Washington, Seattle

UPDATE: ESTROGEN THERAPY

Donald C. Smith, M.D., Section of Obstetrics and Gynecology, Mason Clinic, Seattle

Program Coordinator: Herbert Kennedy, M.D.

Sponsored by: Tacoma General Hospital, in conjunction with The Committee for Continuing Medical Education of the Pierce County Medical Society and the College of Medical Education, Inc.

To be held at: Tacoma General Hospital, School of Nursing — Jackson Hall, 315½ South "K" Street, Tacoma

Enrollment limited. For late registration information contact Maxine Bailey, Exec. Dir., College of Medical Education, Inc., 756-3152.

Your Pierce County Medical Library

by Kenneth E. Gross, M.D.
Chairman, Library Committee

Many members of the Medical Society of Pierce County seem to be uncertain as to the status of their Medical Library. Some members are being confused by appeals from King County to join that newly recreated entity. The following statistics are submitted to reiterate the important activities of your Library and to demonstrate its usefulness to a considerable number of our Medical Society. These figures are conservative because there was a period of six to eight weeks during which there were less than the optimal number of personnel available to operate the Library and some of these statistics were not recorded. Nevertheless, they should serve to indicate that your Medical Library is a very busy place and those of you who have requested Library services certainly find it to be a very efficiently operated establishment.

During the year of 1977:

- One physician member of the Medical Society of Pierce County made 114 visits to the Library.
- 225 different members of the Medical Society of Pierce County, plus a considerable number of Residents and medical students, made requests.
- 3,362 telephone calls were answered.
- 1,367 volumes were supplied out of the Library's own source material and were sent by courier to the requesting individual.
- 3,097 Xerox copies were made (payment made for 1,444).
- 1,185 journals were loaned from the Library's own collection.
- Extensive literature searches totalled 264, of which 46 were demanded as STAT. These were requested for direct patient care, for medical education and research, for presentation at medical meetings and others for involvement in court cases.
- In addition, the requests to other Libraries for reference material involving the Pacific Northwest Regional Health Sciences Library, the Washington State Medical Association Library, Madigan Army Medical Center Library and other outside libraries add significantly to these numbers.

It is well known that budgeting for the expenses of this Library is accomplished by a consortium of all the hospitals in Pierce County and the Medical Society of Pierce County. It is hoped that from the above statistics it will be appreciated that a very fine dollar-for-dollar value is being obtained by all contributors. Also, a need is being filled which this community cannot afford to be without.

None of the above should in any way discourage, but hopefully will encourage, further use of the Library by greater numbers of Medical Society of Pierce County members.

LETTERS

Dear Fellow Physicians:

Operation Inoculation continues to need your help in assuring adequate immunization levels in our community. Your effort in assuring a high priority for immunizations is appreciated. If governmental vaccines will allow your patients to obtain one-stop medical care, the logistics of obtaining these vaccines through the Health Department with the help of your friendly pharmacist have been worked out. The Health Department and hospitals will assist those who do not choose to utilize their personal physician's services or do not want a personal physician.

Some school districts in Pierce County are helping Operation Inoculation by immunizing students now. Others may start immunizations soon. Throughout these efforts, the personal physician's role has been stressed. For some patients, finances may be a hindrance so I will assume each physician will take into consideration means of allowing lowered or no fee immunizations in his practice in order to promote continuity of care.

Respectfully submitted,

George Tanbara, M.D.
Chairman, Public Health/School Health
Committee

To My Fellow Society Members:

It is with regret that I am announcing that I must unexpectedly discontinue my practice of obstetrics and gynecology. I have made this decision reluctantly due to unforeseen and unfortunate personal health reasons. My office has been closed as of February 28, 1978.

The records of my active patients have been transferred to the offices of Drs. Peter R. Kesling and Dennis A. Wight, Obstetricians and Gynecologists. Their office practice is located at 1624 South I Street, Suite 200, Tacoma, WA 98405. Their phone number is 572-2211 and their office hours are 9 to 11:30 a.m., and 1 to 4:30 p.m., Monday through Friday. Any of my former active patients who would like to have a copy of their records sent to any physician or medical facility of their choice may do so at the cost of a \$1.00 handling fee by contacting Drs. Kesling and Wight's office.

I would like to thank all of my former patients for the confidence and loyalty they have given me over the years in my practice of obstetrics and gynecology in the Tacoma area.

Sincerely,

J. Edmund Deming, M.D.

NEUROLOGY & NEUROSURGERY ASSOCIATES OF TACOMA, INC., P.S.

Ralph A. Johnson, M.D., President
Medical Society of Pierce County

February 21, 1978

Dear Ralph:

Thank you for your letter of February 7, 1978 confirming my appointment as the chairman of the Committee on Continuing Medical Education and requesting monthly reports from my Committee, however brief, to the Board of Trustees. I should be very glad to do my best to provide such monthly reports to you. With the pressure of daily work, with all that is currently

happening in Continuing Medical Education, with the busy involvement of the whole Committee it remains to be seen whether this promise will be realized. Nonetheless, I am anxious to say how much I welcome and appreciate this interest in the work of the Committee on Continuing Medical Education.

As my first report let me outline where we are now and where we are going.

We are at present one of the very few organizations in the State of Washington which is fully recognized by Washington State Medical Association on behalf of the American Medical Association for accreditation of Category I programs. These past two years with the help of the whole Committee and with the energetic guidance of Dr. Richard Baerg we have produced a number of excellent Category I programs both at Tacoma General Hospital and at St. Joseph Hospital. The attendance at these meetings was higher than ever before, the cost was kept down to approximately \$5 per contact hour for Category I program and considerable savings were achieved in the traveling time. We feel also that we were able to integrate our programs well into the physicians' busy time schedule.

It is our intention to continue in this way and to continue fulfilling our objectives of providing quality continuing medical education, relevant to the practical clinical needs of physicians of Pierce County, based on the best possible evaluation of these needs and at very reasonable costs with maximum saving of traveling time and best fitted to the time schedules of our colleagues in the local hospitals.

In addition to being a producer of the programs here in Tacoma we have been, it seems to me, perhaps the only agency in the State of Washington willing and capable of providing co-sponsorship of Category I programs for other institutions and organizations involved in continuing medical education. In doing so, we have given help and encouragement to programs in Thurston County, in Snohomish County, to regional specialty organizations, to specific educational institutions in Seattle and of course, to our own Surgical Club and Academy of Internal Medicine. In this we have been advised and strongly encouraged by the Washington State Medical Association, but also we have run into questions and comments from those who may have felt threatened or who misunderstood what we were doing.

In April of 1978 our activities over the past two years will be reviewed by a team of accreditors from the Washington State Medical Association. We are fully prepared for this review and we hope to pass it with flying colors.

Amongst the many continuing medical education organizations both in this state and in the country ours has been unique in having survived for ten years now only and solely on the proceeds of registration fees for our offerings. Not only have we survived but we have grown. At this moment, however, we have arrived at a situation where we will be in need of some financial support, especially from the hospitals, if we are to survive in the shape in which we have existed up to now. In a way, in this we have been our own enemies. Because we have worked so efficiently and at such a low expense, there has been little pressure on the hospitals in Pierce County and the Medical Society to provide budget and monies for continuing medical education for physicians, as mandated by the Joint Commission on Accreditation of Hospitals. Other hospitals in the state have had to engage physicians and others for the paid position of directors of continuing medical education at an expense far exceeding our whole budget. I suspect that our organization has not been given full credit for having saved our hospitals this large expense.

Under the laws of the State of Washington beginning with January 1979 the physicians seeking relicensure will need to submit evidence of having attended 150 hours of continuing medical education in one form or another over a period of three years. We feel that by having provided viable, ongoing and interesting programs of continuing medical education in Pierce County, we have served our colleague well and reliably.

Should you so desire I would be glad to make myself available to you and the Board of Trustees as may be necessary.

With kindest regards.

Yours,

Marcel Malden, M.D., F.A.C.P.

MEMBERSHIP

FIRST NOTICE

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:



TOSHIO J. AKAMATSU, M.D., Anesthesia. Born in Omaha, Nebraska, 11/20/33; medical school at University of Minnesota, Minneapolis, Minn., 1959; internship at Mercy Hospital, Toledo, Ohio, 1959-60; residency in anesthesia, University of Washington, Seattle, 1960-62; Board Certified in anesthesia; licensed to practice medicine in the State of Washington, 1963; also practiced medicine in Seattle at the University of Washington Dept. of Anesthesiology, 1963-77. Transfer from King County Medical Society. Dr. Akamatsu is Chief of Anesthesia at St. Joseph Hospital in Tacoma.



HAROLD B. BETTON, M.D., Emergency Medicine. Born in Little Rock, Arkansas, 11/24/47; medical school at University of Washington, 1975; internship at University of Washington, 1975-76; residency at University of Washington, Department of Family Practice, 1976 to present; licensed to practice medicine in the State of Washington, 1976. Dr. Betton practices emergency medicine in Pierce County hospitals.



CARL A. GIOMBETTI, D.O., Pediatrics. Born in Yonkers, New York, 2/17/44; medical school at Philadelphia College of Osteopathic Medicine, Philadelphia, PA, 1969; internship at Doctors Hospital, Columbia, Ohio, 1969-70; residency in Pediatrics at Albany Medical Center, Albany, N.Y., 1974-76; licensed to practice medicine in the State of Washington, 1976; Board Certified in Pediatrics. Dr. Giombetti's office of pediatrics is located at 2603 Bridgeport Way West, in Tacoma.

YOUR MEDICAL LIBRARY

Your access to the world literature in medicine through the network of biomedical communication: Hospital Library – Pierce County Medical Library – Pacific Northwest Regional Health Sciences Library – National Library of Medicine – British Lending Library.

Comprehensive library services include: literature searches, bibliographies, interlibrary loans, and Medline searches (Literature retrieval by computer).

HOURS: Monday - Friday 8:00 A.M. - 5:30 P.M.

(Other times key is available by request)

M. Von Bruck, Librarian
572-5340

SECOND NOTICE



PHILIP M. ADDRESS, JR., D.O., Emergency Room. Born in Philadelphia, PA, 6/14/44; medical school of Philadelphia College of Osteopathic Medicine, Philadelphia, WA, 1974; internship at Naval Regional Medical Center, Camp Pendleton, California, 1974-75; residency in family practice at Naval Regional Medical Center, Camp Pendleton, CA, 1975-77; licensed to practice medicine in the State of Washington, 1977. Dr. Address practices medicine in emergency rooms of Pierce County hospitals.



RONALD G. EARLY, M.D., Psychiatry. Born in Brownwood, Texas, 8/27/44; medical school at University of Texas, San Antonio, Texas, 1975; residency in psychiatry at University of Washington, 1975-77; licensed to practice medicine in the State of Washington, 1976. Dr. Early is practicing psychiatry at Puget Sound Hospital and has a private practice in Seattle.



LEONARD P. ELIEL, M.D., Internal Medicine. Born in Los Angeles, California, 9/14/14; medical school at Harvard, Boston, Mass., 1940; internship at Massachusetts General Hospital, Boston, Mass., 1940-42; fellowship at Boston's Children's Hospital, Boston, 1946-68; fellowship at Memorial-Sloan Kettering, New York, N.Y., 1948-51; board certified in Internal Medicine, 1952; also practiced medicine in New York, Oklahoma City and Seattle. Dr. Eliel is a staff administrator at Veterans Administration Hospital in Tacoma.



RICHARD A. HOFFMEISTER, M.D., Orthopedic Surgery. Born in Denver, Colorado, 6/15/32; medical school at University of Colorado, Denver, 1958; internship at Tripler Army Medical Center, Honolulu, Hawaii, 1958-59; residency in General Surgery, Womack Army Hospital, Fort Bragg, 1959-60; residency in Orthopedic Surgery, Letterman Army Medical Center, San Francisco, 1960-63; licensed to practice medicine in the State of Washington, 1974; board certified in Orthopedic Surgery, 1967; also practiced medicine in the U.S. Army, most recently at Madigan Army Medical Center. Dr. Hoffmeister's office of orthopedics is located at 5924 - 100th St. S.W. in Tacoma.



JOHN V. MERRICK, M.D., General Practice. Born in Boston, Mass., 6/25/29; medical school at University of Pennsylvania, Philadelphia, PA, 1956; internship at Presbyterian Hospital, Philadelphia, PA, 1956-57; general residency at Puget Sound Hospital, Tacoma, 1961-62; residency in pathology at Tacoma General Hospital, 1963-66; licensed to practice medicine in the State of Washington, 1962. Dr. Merrick's office of general practice is located at 2819 East Main, Puyallup.

ATTENDING PHYSICIAN'S REPORT FORMS

Please be advised that the Attending Physician's Report Forms, which previously were available through the Pierce County Medical Society, can now be obtained through North Point Press. They are located at 2302 Pacific Avenue. Call 627-4147 for further information.

The Menninger Foundation

PHYSICIANS AND THEIR FAMILIES: *An Experience in Communications*

June 18-23, 1978 and August 13-18, 1978 – YMCA of the Rockies – Estes Park, Colorado

A WORKSHOP SPONSORED BY THE DIVISION OF CONTINUING EDUCATION – Accredited for 25 hours of Category I Credit.

Continuing education credit

As an organization accredited for continuing medical education, The Menninger Foundation certifies that this continuing medical education offering meets the criteria for twenty-five (25) hours of credit in Category I of the Physician's Recognition Award of the American Medical Association, provided it is used and completed as designed.

Tuition fee and registration deadline

The continuing education tuition fee is in addition to the arrangements for lodging and meals made directly with the YMCA Camp.

Faculty (Faculty assignments are subject to change)

JUNE 18-23, 1978 WORKSHOP

- Roy W. Menninger, M.D.: President, The Menninger Foundation; Workshop Leader.
Lulubelle Clarke, M.S.W.: Coordinator of the Transitional Living Program in Aftercare, The Menninger Foundation.
Arthur Mandelbaum, M.S.W.: Director, Family Therapy Staff Training Program; faculty, Menninger School of Psychiatry.
George M. Penn, M.D.: Section Chief, C. F. Menninger Memorial Hospital; staff psychiatrist, Alcoholism Recovery Program.
Mary Ann Penn, R.N.: Former staff nurse, C. F. Menninger Memorial Hospital.
William D. Trussell, Ph.D.: Supervisor, Individual Psychotherapy; faculty, Menninger School of Psychiatry; specializing in residential treatment of adolescents; unit director, Children's Division.

This workshop also has been approved for twenty-five (25) prescribed hours of credit by the American Academy of Family Physicians.

Application for approval has been made to the director of Social Work Licensing for the State of Kansas for the same number of hours of continuing education credit for social workers.

The tuition fee for the continuing education program is \$325.00 per family (parents and unmarried children under twenty-one years of age).

AUGUST 13-18, 1978 WORKSHOP

- Erwin T. Janssen, M.D.: Director, Division of Continuing Education; interim director, Children's Division; Workshop Leader.
C. Alton Barnhill, M.D.: Staff psychiatrist, Adult Psychotherapy Service; member, Family Therapy Staff Training Program.
Joseph M. Hyland, M.D.: Staff psychiatrist, C. F. Menninger Memorial Hospital, Aftercare Programs; consultant, Capital Region Radiotherapy Center, St. Francis Hospital, Topeka, Kansas; faculty, Menninger School of Psychiatry.
Patricia Hyland, R.N.: Team nurse, C. F. Menninger Memorial Hospital.
Stephen Jones, M.S.W.: Staff Supervisor in family therapy; member, Family Therapy Staff Training Program; faculty, Menninger School of Psychiatry.
Roy W. Menninger, M.D.: President, The Menninger Foundation.

Brochures explaining the program and application forms are available at the Medical Society office.



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*

Dear Doctor:

The Monday morning (8:00 a.m. to 9:00 a.m.) schedule for educational conferences at Lakewood General Hospital and Convalescent Center for the month of April is:

- April 10 HAND INFECTIONS
 Bartholomew Kubat, M.D.
- April 17 TOTAL HIP REPLACEMENT AT
 LAKEWOOD GENERAL HOSP. -
 CASE PRESENTATIONS
 Ralph Marx, M.D.
- April 24 PARASITIC INFECTIONS - CASE
 PRESENTATION
 Lawrence Cargol, M.D.

Please plan to attend.

Sincerely,

James Chappell, M.D.
Chairman, Medical Education

in Brief

A summary of AMA, medical & health news

American Medical Association / 535 North Dearborn Street / Chicago, Illinois 60610 / Phone (312) 751-6000 / TWX 910-221-0300

If HEW's revised National Guidelines for Health Planning are not substantially changed "the patient will be the one to suffer," the AMA said in a statement opposing the latest version of the controversial guidelines. "We still believe that the mandatory nature of the department's actions distorts the Congressional intent behind health planning and ignores the realities of medical care and the education of health professionals . . . We continue to believe that the present approach HEW is taking is contrary to the needs and interests of patients."

A health care costs program for medical students at the U. of Oregon School of Medicine will be financed by a \$100,000 grant from Oregon Physicians Service-Blue Shield. The grant is believed to be the first of its kind. Last year at the AMA's Interim Meeting the House of Delegates passed a resolution urging medical schools to institute cost-awareness programs. In a related action last spring the nation's medical school deans "urged the corporate community . . . and the general public to provide the financial support we need to underwrite new teaching methods and curricular experiments."

Four national health insurance proposals were reviewed by the National Advisory Committee for NHI. One of the plans, or some combination of them, apparently will constitute the NHI proposal that will be sent to Congress later this year by the Administration. All the plans called for a substantial federal role, but the amount of control ranged from moderate to almost complete.

Based on 1977 AMA membership, constituent medical associations will have four fewer delegates in the AMA House this year. California will lose five delegates and Washington will gain one.

A Department of Consumer Relations has been established at AMA Headquarters. The department will identify and respond to major consumer concerns and inquiries about medical care and health services delivery.

The Board of Trustees approved dates and sites for AMA Annual and Interim meetings. Annual Meetings will be July 22-26, 1979; July 20-24, 1980 and June 7-11, 1981, all at the Chicago Marriott Hotel. Interim Meetings will be Dec. 2-5, 1979, Sheraton Waikiki Hotel, Honolulu; Dec. 7-10, 1980, San Francisco, and Dec. 6-9, 1981, Las Vegas, at hotels to be determined.

The AMA Education and Research Foundation will fund and co-sponsor four student research forums this year. The AMA-ERF Board of Directors has granted \$41,412 to the U. of Texas Medical Branch in Galveston to finance three regional forums in Miami, Omaha and Carmel, Calif., and a national forum in Galveston.

The AMA testified 22 times in 1977 at hearings before Congress or federal agencies. In addition, the AMA submitted 90 statements to Congress, the White House, the National Governors' Conference, and federal agencies. Among the communications were 20 on drugs, seven on health manpower, and six on health planning.

All hospital accreditation requirements are contained in the latest edition of *Accreditation Manual for Hospitals*. Published by the Joint Commission on Accreditation of Hospitals, the standards became effective upon publication. Future editions of the *Manual* will be published annually in August, beginning this year, and will contain requirements that become effective the following January. The JCAH has also published a monograph on *Medical Staff Bylaws*. Both the *Manual* (\$20) and the monograph (\$6) may be ordered through the Publications Manager, JCAH, 875 N. Michigan Ave., Chicago, Ill. 60611.

Publication order operations at the AMA have been moved to a private vendor. The change was made to reduce AMA operating costs and increase the effectiveness of publication order processing. Orders for all AMA saleable items should be addressed to: AMA, P. O. Box 821, Monroe, Wis. 53566.

Annual WSMA Child Health Committee Meeting To Be Held In Tacoma

The WSMA Child Health Committee will hold its annual meeting on Saturday, April 29, at Jackson Hall (9:00 a.m. to 2:00 p.m.) and the Tacoma Lawn Tennis Club (from 2:30 p.m. to 5:15 p.m.).

All members of the Medical Society are invited to the annual meeting, reports George Tanbara, M.D., committee chairman. This is the third year the WSMA Committee meeting has been held locally in the hope of attracting local physicians to participate in this WSMA activity, adds Dr. Tanbara.

Topics affecting physicians and their patients — such as athletic participation, educational participa-

tion regardless of abilities, immunizations, and health education — will be discussed and recommendations forwarded for action by the WSMA House of Delegates. Stanley Mueller, M.D., chairman of Medical Aspects of Sports; David Sparling, M.D., chairman of Developmental Disabilities; and other physicians concerned with school health will participate in the meeting.

Physicians are asked to indicate their desire to be part of the WSMA effort to improve the care of children in Washington by attending the annual meeting. Those planning to attend are asked to complete the following registration form:

I will attend the annual meeting of the WSMA Child Health Committee

Jackson Hall program _____

Tacoma Lawn Tennis Club program _____

I will bring my own tennis shoes, racket(s), balls, towel, etc., to participate in the following:

Tennis _____

Squash _____

Table Tennis _____

Swimming _____

Enclosed is a check for \$4.00 to cover the cost of my continental breakfast, coffee and sandwich lunch.

Please make checks out to: THE WASHINGTON STATE MEDICAL ASSOCIATION

Mail to: WSMA, Attn. George Morford
900 United Airlines Building
2033 Sixth Avenue
Seattle, Washington 98121

(A program and additional information will be sent to you prior to the meeting.)

FOR YOUR INFORMATION:

Washington State Hospital Cost Facts
(published by the AHA, 1978)

- In 1976, Washington residents paid an average of \$973.11 per hospital admission, compared to \$1,308.37 nationally.
- Hospital beds in Washington are fewer. In 1976, 3.4 per 1,000 population, compared to national average 4.5.
- The average hospital length of stay was 5.6 days in Washington, compared to 7.7 nationally for 1976.
- Washington residents ranked 48th in hospital expenses per capita in 1976, as a percentage of per capita income.

CLASSIFIED

WANTED: ASSOCIATE DIRECTOR: Family Practice Residency. Board Certified practicing Family Physician with interest in teaching. Responsibilities include teaching residents and patient care. Excellent local medical facilities. Outstanding professional, cultural and recreational environment. Contact Roy Virak, M.D., Family Practice Residency Foundation, 737 Fawcett Avenue, Tacoma, Washington 98402.

PROFESSIONAL MEN: Corner lot, 120x125 feet at 38th St. and Sheridan in Tacoma. Zoned for professional offices, Drs., etc.; also mult. family. Asking \$55,000. Call Bob Fay, 1-858-9144, 1-272-2106.

LUXURY WATERFRONT APARTMENT, completely furnished, on Kauai. Rent by week. 759-4332, evenings.

VASHON ISLAND NEEDS A DOCTOR!

We have space in Medical Building
(approximately 1500 sq. ft)
Available for lease May 1, 1978
Call 1-463-3498

RENTAL AVAILABLE in late 1978. Quality office space in rapidly growing Federal Way. Ideal for Family Practitioner or Pediatrician. Phone (206) 838-0661.

FOR SALE — Large brick home above Narrows Bridge with sweeping view of Sound and Olympics. 759-0011.

SAVE FUEL — SAIL. 73 Catalina 27 ft., excellent condition. 848-2423 (days), 843-3833 (after 7:00)

AUXILIARY PAGE continued from page 11

strip in which Julie, who has stumps for arms and legs, jumps rope, the children and ladies sang "Hinges" together. Each group delighted in the other. Sharon and Nicole just happened to have some artificial limbs in a box close by, which they encouraged the children to handle and examine under their supervision. The children responded with comments and questions and shared their reactions freely without inhibition. Results? Powerful drama!

Each Mid-Year Conference provides an opportunity for the county level medical auxiliaries to share, on an informal basis, successes as well as problems occurring in their county during the auxiliary year. "Robert's Rules" were demonstrated by Peg (Mrs. Roscoe) Mosiman, State Parliamentarian, and her committee. Public speaking tips, "How to Avoid Mike Fright," were presented by Bob Clem of Yakima. "The Battered Woman" was a slide presentation given by Patty Nagle and Dale Reed, who run a shelter for these victims in Yakima.

We topped off a full exciting day by joining the Yakima County Medical Society for a banquet featuring University of Washington Professor Jennifer James' comments on "Sex Roles, Intimacy and Economics." After hearing that Whew!

The AMA ERF booth sold apples from the Yakima Valley, however the apple tree was designed in Tacoma by Barb (Mrs. Howard) Wong. A macrame poodle and jeweled egg made by Barbara were raffled and the proceeds given to the Education and Research Foundation. Nancy (Mrs. Ronald) Spangler assisted Jo (Mrs. Gilbert) Roller at the booth, as did three local ladies interested in AMA ERF.

We urge any interested auxiliary member to watch for the 1979 Mid-Year dates and plan to join us next year. It's worth it!

Jo Roller
President-Elect

MEDICAL SOCIETY of PIERCE COUNTY

813 South K Street

Suite 200

Tacoma, Washington 98405

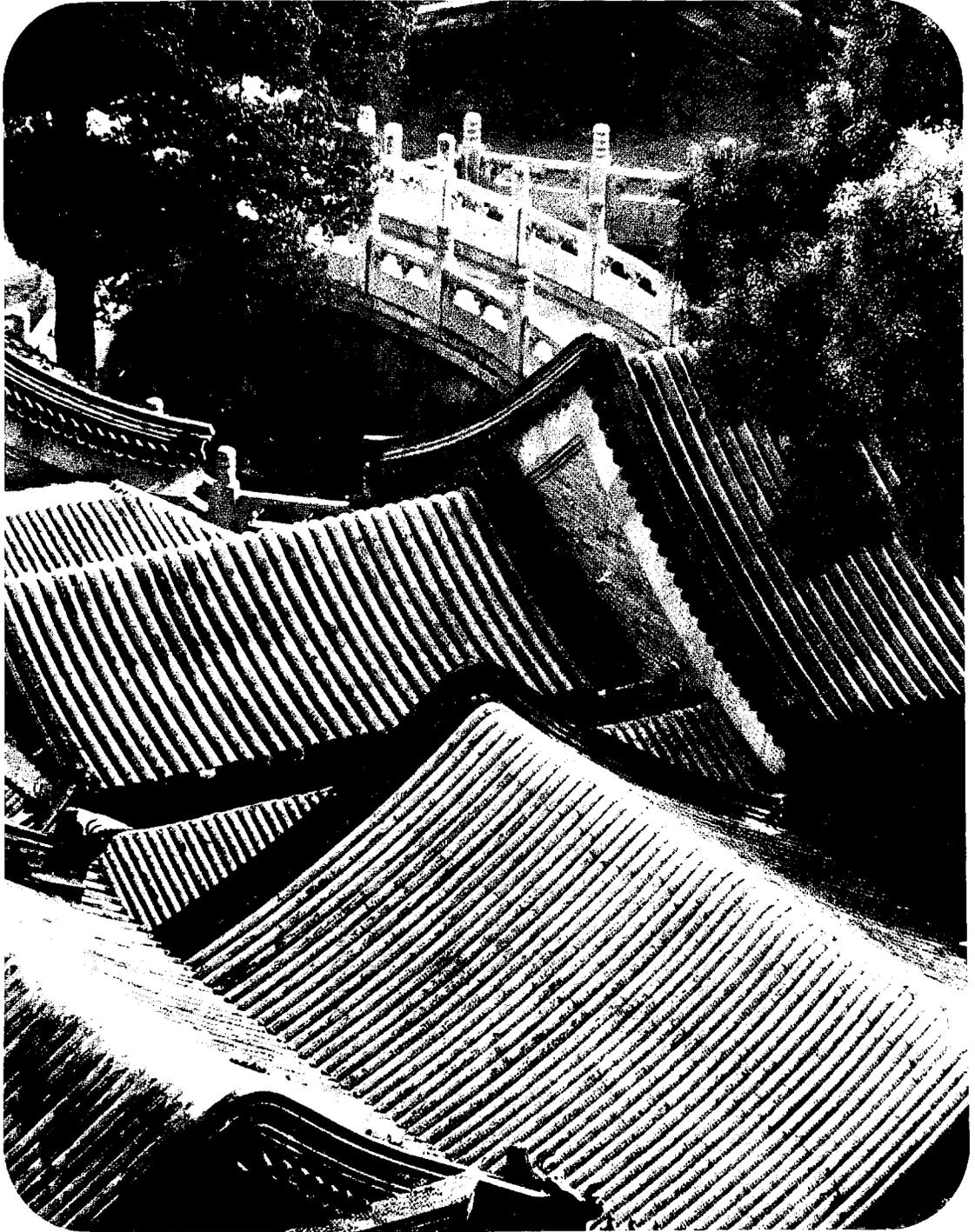
ADDRESS CORRECTION REQUESTED

BULK RATE
U. S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605



Medical Society of Pierce County

MAY 1978 • Vol. XLX, No. 5 • Tacoma, Washington



BULLETIN

*Does your office get the blues
when vacations or emergency illnesses occur?*

**We have the qualified, experienced individuals
who can do**

TEMPORARY ASSIGNMENTS

and keep your office running smoothly!

Call the
MEDICAL-DENTAL PLACEMENT SERVICE
(a membership service of the Medical Society
of Pierce County)

Call
Sondra Sakala, Director

572-3709

*"We specialize in matching the right
employee and employer"*

Bulletin of the Medical Society of Pierce County

CONTENTS

page

5	PRESIDENT'S PAGE
23	AUXILIARY PAGE
25	AAMA PAGE
27	MEMBERSHIP
31	CLASSIFIED
6	"Pierce County Sports Medicine Clinic Established"
7	"Reinforce Your Message" - Patient Brochure.
8	"How to Hire the Right Person for the Job - II. How to Predict Future Job Success and Stability During an Interview"
11	Guest Editorial - "April Foolishness"
14	"Unwed Mother Determines Name"
15	"Adventure on the Orient Express"
19	AMA Guest Editorial - "Marketplace Choice as Determinant to Government Price Controls"
20	"Cancer Rehab Subject of Everett Meeting"
20	American Academy of Family Practice - Monthly Meeting
20	"Make Medicine's Voice Heard in the Planning Process"
20	"Volunteer Physicians Needed"
21	"DSHS Revises Drug Procedures"
22	"Thank You, Tel-Med Boosters"
24	"Annual Pap Test Declared Unnecessary for Most Women"
28	Family Clinic
28	Educational Conferences, Lakewood General Hospital
29	In Brief - A Summary of AMA, Medical and Health News

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U. S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates upon request. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.



"Adventure on the Orient Express"

- See page 15.

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-Elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D.	(79)
Melvin L. Henry, M.D.	(80)
William B. Jackson, M.D.	(80)
Richard K. Ohme, M.D.	(80)
Charles C. Reberger, M.D.	(79)
Roy A. Virak, M.D.	(80)
Myra S. Vozenilek, M.D.	(79)
Helen Whitney	(78)

DELEGATES

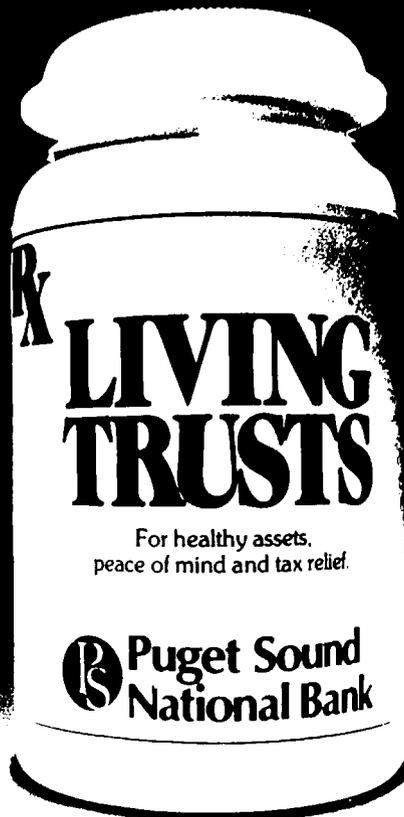
Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

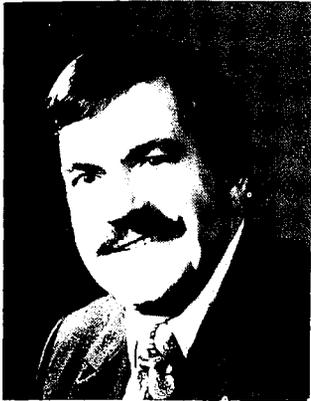
After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

President's Page

ABOUT THAT WHITE HOUSE REPORT . . .



by
Ralph A. Johnson,
M.D.

The following letter was written in response to an editorial, "Rising doctors' fees," which appeared in the TACOMA NEWS TRIBUNE following release of a White House Council on Wage and Price Stability report on physician income. That

the White House Council should issue such a terribly biased and self-serving — that is, NHI promoting — report should come as no surprise to those of us who have experienced ever increasing government pressure over the past few years. The fact that so many segments of the news media gave the White House report such credence with little apparent verification of the facts or methodology behind the report's conclusions stresses again the need for medicine to tell its story directly to the public whenever possible.

In support of this, the Board of Trustees of your Medical Society recently authorized production of a supply of patient information brochures. These brochures focus on two related subjects: How the individual can save money on medical expenses, and why medical costs have increased. A copy of the brochure will be sent to you shortly and I hope you consider ordering a supply for your patients. There is no charge.

To the Editor:

The editorial on physician fees recently published by the TACOMA NEWS TRIBUNE unfortunately perpetuated several questionable conclusions drawn by a recent White House Council report on which the editorial was based. The credibility of the original report itself is highly questionable in light of its inadequate reporting of the facts, use of statistical data to present partial conclusions, lack of documentation to support some conclusions, and general failure to recognize the initiatives being undertaken by the private sector to restrain the rate of increase in overall health care costs.

For example, the White House Council's reported physician median income was derived from data drawn from a limited survey (conducted by a magazine) which recorded a low response rate of 40 percent. Further, there is no documentation in the report that supports its charge of how fees are established, and the report's implication that restrictions are needed in effect asks the public to believe that there are no restraints on physician charges when, in fact, the number and impact of professional review mechanisms increases each year. In addition, the report's allegation that the medical profession has restricted entry into the profession runs counter to organized medicine's over 25 years of documented official policy supporting expansion of the physician population.

You would perform a valuable service to your readership by explaining that:

- The greatest portion of each dollar spent on health care (more than 43 cents) is spent on hospital care while less than 19 cents of each dollar is spent on physician care, a figure which has declined over the past five years;
- Hospital stays in our state are much shorter than the national average (5.6 days compared to 7.7 days);

continued on page 30

PIERCE COUNTY SPORTS MEDICINE CLINIC ESTABLISHED

by Craig Goebbel
Public Affairs Coordinator
Family Practice Residency Foundation

Sports. They have been called the opiate of the masses in America. Witness any "Super Sunday," high school basketball game or local foot race and it is easy to understand. No longer satisfied being sideline spectators, more and more people are getting involved in sports. They want to keep fit, stay healthy and enjoy the benefits of regular activity and organized play. With this increase in sports activity has been an increase in sports related injuries. In response, the idea of the Pierce County Sports Medicine Clinic was conceived.

Scheduled to begin seeing patients on May 1st, it will be a clinic dealing with, and caring for, sports related injuries. It was organized by local physicians, trainers and others interested in Sports Medicine. The clinic will provide immediate consultation and necessary care of sports related injuries for people who do not have a family physician and who do not wish to seek emergency room care. It is not intended to siphon patients from practicing physicians. As in private practice, the clinic will operate on a fee-for-service basis.

Beyond the care and treatment of sports related injuries, the clinic also acts as a vehicle for communication and education among all facets of sports medicine. It conducts an annual seminar in Sports Medicine available to everyone. This two-part seminar, sponsored by the clinic, Tacoma Public Schools, the Medical Society, and other organizations, offered courses titled "Run For Your Life" and "Heart and Sole" last January and February. The courses incorporated lecture, discussion, small group participation, and were very well attended.

A mid-August seminar for student trainers of area high school football teams is planned. This seminar will prepare each student trainer to anticipate and provide first aid for common football ailments.

To date, all participation in the seminars by physicians, physical therapists, coaches, trainers and athletes has been on a volunteer basis. The clinic and its educational seminars should continue to grow. Any physician who wishes to participate in the clinic, or wants more information, should contact Dr. Wouter Bosch or the Sports Clinic.

As part of the Family Practice Residency Foundation, the clinic will be located in Suite A-314, Allenmore Medical Center. The phone number is 383-2272.

Reinforce Your Message

Quantities of an informative patient brochure that explains how your patients can save money on their medical expenses and outlines several reasons why medical costs have increased are now available through the Medical Society office.

The brochure lists many of the common-sense things anyone can do to enjoy better health — and thus reduce their medical bills. And, the impact of general inflation, the cost of increasingly complex equipment, and insurance costs are discussed in easy-to-understand terms.

**HOW TO
SAVE MONEY
ON MEDICAL
EXPENSES**

**WHY MEDICAL
COSTS HAVE
INCREASED**

**To My Patients:
"I Recommend
You Read This!"**

Call the Medical Society office, 572-3667,
for a supply of these brochures for your office.

HOW TO HIRE THE RIGHT PERSON FOR THE JOB

Part II. How to Predict Future Job Success and Stability During an Interview

by Sondra Sakala, Director
Medical-Dental Placement Service

The art of interviewing and hiring staff will always be subject to human variables. We have no infallible crystal ball which can tell us precisely which person will be most stable and most successful in a particular job. Instead, we seek to *reduce the risks*, considering all the factors which might affect a person. Awareness of certain factors will make it possible for you to make the wisest possible choice, realizing that no one can accurately predict the future.

There are eight factors which most significantly affect the success and stability of an employee. These factors might be summarized as MOTIVATION, INITIATIVE, ABILITY TO WORK WITH AND COMMUNICATE WITH OTHERS, JOB SUITABILITY, ADAPTABILITY, ASPIRATIONS, PERSONAL PRESENTABILITY, AND PAST WORK PERFORMANCE HISTORY.

Motivation is a key factor in determining the future reliability of an employee. A self-motivated person will endure through the "rough" times, the pressures, and the "ups and downs" which are encountered in any job. A self-motivated person will want to do the work efficiently, accurately, and seek ways to improve the office routine. Motivation is an internal factor which is affected by, but not entirely subject to, external factors such as working conditions, recognition, salary raises, and promotions.

During the interview, ask questions which will give clues as to the person's dependability. You, the employer, want to know if he/she has demonstrated and maintained good work habits and attendance records in the past, either at school or on the job. A volunteer work experience might indicate strong motivation. Can this person work with a minimum of supervision? Employers have found that many individuals with ability and aptitude are not able to maintain good work habits. This accounts for the label, "poor motivation," which appears so frequently.

Secondly, initiative is a strong factor in success on a job. Will this person assume responsibility

for the job? Will he/she take the initiative when it is appropriate, yet seek assistance when necessary? Will he/she look for ways to improve procedures, expedite matters and generally increase efficiency and productivity?

The inability to work and communicate with others is most often the reason why persons are terminated. When communication breaks down, the work flow suffers. A rigid, inflexible individual who cannot understand the need for coordination and communication within an office will be a liability. The emphasis, in this instance, is upon maintaining work flow rather than upon personality. Many different kinds of persons can work together if there is a willingness to work with others. Good communication does not just happen! Each employee must work with everyone else to keep communication lines open.

Job suitability refers to the "match" between the interests of the applicant and the requirements of the position which is being offered. Is the individual sincerely interested in this particular job? Is he/she interested in future growth opportunities which the job has to offer? Will he/she be motivated by and receive personal satisfaction from this job? The individual who says, "I just need a job; I don't care what job," is not likely to stay very long.

Adaptability is critical. Adaptability means flexibility, being prepared for change. Adaptability in a medical office is essential when emergencies arise. That person must be capable of maintaining composure and dealing coolly with the situation.

Aspirations is certainly a factor which must be considered in determining job stability. Are the goals and aspirations of the applicant consonant with the available opportunities? Times have changed. Today, each individual seems to have a personal timetable for achieving certain accomplishments. Turnover among nonprofessionals was considerably less a few years ago, when secretaries stayed secretaries. Now secretaries expect to move into Administrative Assistant positions.

Your receptionist may wish to move into Office Manager. Find out what an individual's vocational goals and aspirations are.

Personal presentability refers to the manner and appearance of the applicant. The initial impression you, the employer, receive through the dress, tone of voice, eye contact, posture and gestures, etc. will be the same first impression your patients will have when this individual represents you in the office. Some employers ask applicants to call them back on the telephone in order to get an idea of the person's phone voice and manners. Someone who works with the public must be articulate and warm without being a chatterbox.

Finally, the work history of an individual is revealing. The reasons for leaving previous employment are extremely important. Did the person go to progressively more responsible positions? Did he or she receive regular raises on previous jobs? If not, perhaps that reflects upon their motivation and job performance. Even a person who has stayed in one job too long may indicate lack of motivation. He or she might not be adaptable to new situations or people, or may be afraid to risk the challenge of a new job. Job-hopping is not always indicative of instability. Perhaps the person's skills surpassed the demands of the job, or opportunities for advancement were non-existent. Listen carefully to the reasons the applicant gives for leaving various employments. Reading between the lines will provide strong clues as to future job success and stability. Sometimes it is better to hire a person who is highly qualified but may plan to stay only a few years rather than a non-motivated person who will stay forever.

Predicting future job success and stability is a tall order. There are six ingredients in basic interviewing skills which will ensure *your* success, as an employer, in finding the right person for your office. Review the steps in the interview procedure which were discussed in more detail in Part I (Planning the Interview) in last month's issue (see insert).

Finally, use all available resources. One source of help is the Medical-Dental Placement Service. Imperfect as it is, the interview will probably never be discarded. Therefore, let the Placement Service do the initial screening interview for you to save you time. We can test for job skills, provide complete applications, and refer those individuals who meet your specifications. We are aware of

Basic Interviewing Skills*

- I. *Planning the Interview.* Examination of the application blank, the job requirements, and also mapping out areas to be covered in the interview, planning and organizing questions pertinent to these areas. Insuring that the interview will be held in an optimal environment, free from interruption.
- II. *Getting Information.* Use of appropriate questioning techniques to elicit relevant information in the same sequence over all interviewees. Probing incomplete answers and problem areas while maintaining an atmosphere of trust. Structuring the interview. Comprehensive questions and follow-up comments.
- III. *Giving Information.* Effectiveness in communicating appropriate and accurate information about the company and available jobs for which the applicant would qualify, and in answering the applicant's questions. Closing the interview.
- IV. *Personal Impact.* The total effect the interviewer has on the applicant, both as an individual and as a representative of the organization. This includes the applicant's first impression of the interviewer, given to the applicant through the interviewer's tone of voice, eye contact, personal appearance and grooming, postures and gestures, as well as the interviewer's impact throughout the interview.
- V. *Responding to the Applicant.* Concern for the applicant's feelings while maintaining control over the interview. Reacting appropriately to the applicant's comments, questions, and nonverbal behaviors. Convey a feeling of interest in the applicant, encourage an atmosphere of warmth and trust, and make use of encouragement and praise.
- VI. *Information Processing.* Gathering, integrating, and analyzing interview information, culminating in a final placement decision. Identifying personal characteristics and judging them in the context of the job requirements. Skill in assimilating, remembering, and integrating all information relevant to the final evaluation.

* Contributed by Milton D. Hakel, Department of Psychology, Ohio State University.

employment regulations, available to answer any questions you might have, and can assist you in your screening/hiring process. Prediction of job success and stability is not easy *but steps can be taken* to increase the chances of hiring the right person. The Medical-Dental Placement Service is a Medical Society membership benefit created to serve you. Call 572-3709 or 572-3667 from 9:00 a.m. to 5:00 p.m., Monday through Friday, for further information.

contains no aspirin

tablets

Darvocet-N[®] 100

100 mg. Darvon-N[®] (propoxyphene napsylate)
650 mg. acetaminophen

100



Lilly

700300

*Additional information available
to the profession on request from
Eli Lilly and Company
Indianapolis, Indiana 46206*

*Eli Lilly and Company, Inc.
Carolina, Puerto Rico 00630*

Guest Editorial

APRIL FOOLISHNESS

"Is this your signature?" The prosecuting attorney thrusts the tax form into my hand. I examine it slowly.

"Yes, I signed this," I say.

"And would you please read aloud to the court, doctor, what it says above your signature on your tax return," the prosecutor says with a slight sneer.

I read aloud, "Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete

"Now, remember you are under oath here and subject to punishment if you perjure yourself. Did you examine your tax return as prepared by your accountant?"

"Yes, I did."

"You read it carefully and can attest to its correctness?"

"No, sir. I only *examined* it."

"To what extent did you examine it, doctor?"

"Well, I — I sort of looked at it."

"Looked it over throughout, doctor?"

"Not exactly."

"Well, doctor, exactly how carefully did you examine it?"

"Well, I glanced at the front page and riffled the accompanying schedules and statements and signed where my secretary had put the red 'X'."

"You riffled it — like a deck of cards? You didn't read it at all?"

"No, sir, I didn't."

"Is that the way you would examine one of your patients, doctor?"

"Certainly not."

"Why, then, as an intelligent citizen would you neglect your duty to ascertain the correctness of your return?"

"I'm — I'm unable to understand it."

"Unable to understand your duty to —"

"No, understand the form."

"But —"

"You see, it says 'to the best of my knowledge and belief, it is true, correct, and complete.' And it is to the best of my belief — my blind belief in my accountant. I don't understand any of it. I know when treating patients I have to explain things simply in lay terms the patient can understand. But the government and the accountants and especially the lawyers don't do that for me and . . ."

The judge's gavel pounds. "Doctor, you may think you are a wily witness and that you have not according to the strict letter of the law lied on your income tax return, but I find you in contempt of court and of lawyers and I sentence you to ten more years of hard labor among government forms and the adjusted gross incomes subtracting line 30 from line 29, the excess FICA and RRTA tax withheld, the instructions for line 35 on page 11 and . . ."

D.W.A.

Courtesy of David W. Allen, M.D., editor, SAN FRANCISCO MEDICINE.

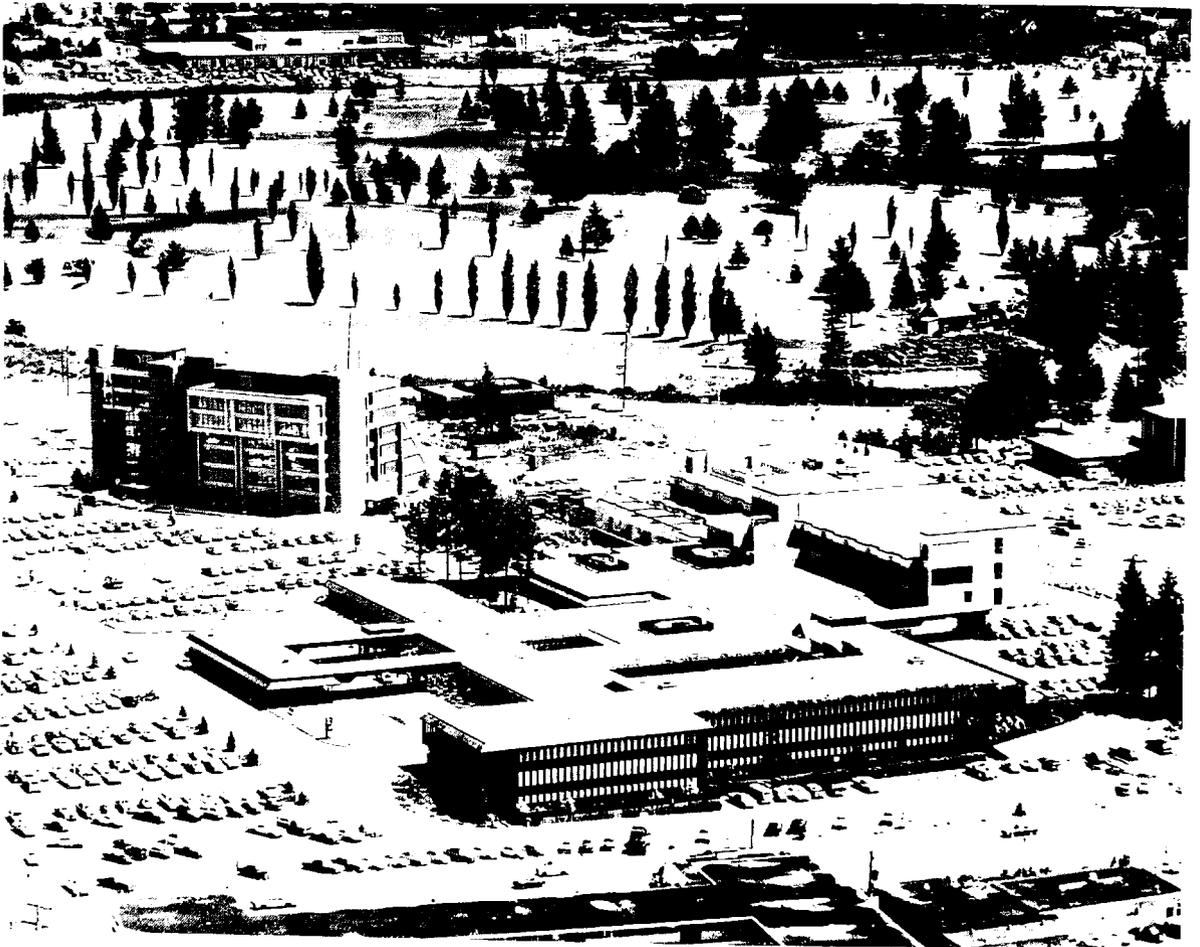
PHYSICIANS PLEASE NOTE

The Washington State Medical Association will no longer routinely mail membership cards to member physicians. Those who desire 1978 membership cards may request one by contacting the WSMA office in Seattle (1-800-552-0612).



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

From the Health Department . . .

UNWED MOTHER DETERMINES NAME

The birth certificate of a child born to an unwed mother may carry any name the mother cares to give the child. The child does not automatically have to take the maiden name nor the last name of the mother. In the space provided on the certificate for the father's name, the notation "None Named" shall appear. The name of the father may appear on the birth record only in the event that paternity of the child is fixed by court OR a notarized affidavit of paternity is filed with the Vital Statistics office by the father, together with a consent affidavit from the mother. The statement from the father should include his occupation, race, birthplace, and age.

If the parents of a child born out of wedlock

marry, paternity proceedings may be pursued. The parents will be required to submit a certified copy of their marriage record along with a notarized statement by the mother and her husband verifying that he is the father of the child involved. When these steps are taken, a new birth certificate will be filed to include the proper information and to place the child in the proper marriage. Cost is minimal; under \$10 in most cases.

The percentage of out-of-wedlock births by teenage mothers in Pierce County has dropped each of the last four years — from 54.5 percent in 1974 to 46.8 percent in 1977. In 1977 there were a total of 967 out-of-wedlock births (all age groups) in the county.

DOCTOR:

is your Medical Assistant keeping in step with you?

As medical practice becomes more complicated and more highly specialized, you need more highly trained medical assistants in your office.

Membership in the AMERICAN ASSOCIATION OF MEDICAL ASSISTANTS will help your assistants keep up-to-date and informed of new ideas and techniques. AAMA's continuing education program offers workshops and seminars that will enhance the professionalism of your office employees.

As the first professional organization for medical assistants (founded 1956), AAMA pioneered in developing the only certification program in this field. A medical assistant who successfully completes the basic examination is identified as a Certified Medical Assistant (CMA). Specialty categories include administrative (CMA-A), clinical (CMA-C), and pediatric (CMA-Ped). More than 7,500 certificates have been earned since the first examination was given in 1963.

The AAMA pioneered in the development of curriculum standards for medical assisting programs. The American Medical Association, in collaboration with AAMA, is recognized as an official accrediting agency for such programs by the U.S. Office of Education.

On five different occasions the AMA House of Delegates has passed resolutions commending the objectives of AAMA, endorsing its functions, and urging every physician to encourage medical assistants to join the association in order to benefit from its educational programs.

To help your medical assistants do a better job of helping you, urge them to join AAMA — the professional association dedicated to their continuing education. Fill in the attached coupon and mail it today. Your practice deserves the best.

I wish to inquire about membership for my medical assistant in the American Association of Medical Assistants, Inc. Please send more information to:

Name _____

Business Address _____ Phone _____

City _____ State _____ Zip Code _____

County _____

Names of assistants _____ Addresses _____

Clip and mail to: American Association of Medical Assistants, Inc., One East Wacker Drive, Chicago, Illinois 60601.

ADVENTURE ON THE ORIENT EXPRESS

by Mavis Kallsen,
Contributing Editor

While a recent past president is mainly remembered for having put his best foot in his mouth, some jet-setters now reap the benefits of his having put his other foot in the door of Red China. China, the great enigmatic giant of the Orient, has after decades of mysterious aloofness, opened the door just a little and the American tourists are slipping in.

What they are sightseeing there must be the philosophical wonder of the modern world . . . an enormous population living in a busy, orderly fashion, seemingly happy to own nothing but their bicycles. Hopefully the door will open a little wider and we can all have the opportunity to see this curious part of the world. For the present, the only tourist route into Mainland China is via the new Orient Express, a junket as cloaked in mystery as the original of the thirties.

Through an ingenious arrangement between a local tour operator and the Yugoslav government, four bookings for Mainland China from the West Coast have been made for this spring and another six are tentatively scheduled for next fall. Technically

a Yugoslav tour, visas are provided by Belgrade and three-fourths of the tour passengers originate in Yugoslavia.

On the inaugural flight of this series of Orient adventures, two of the first group to make the trip were Edith and Charles McGill. The McGills are experienced world travellers and declare this to have been a most wonderful experience, the best of their travels so far.

"It's a fascinating land," Edith says, "and we were received most graciously by the Chinese. Throughout our journey there we were given the red carpet treatment."

The red carpet was an actuality . . . a bright red expanse about thirty feet wide, extending from the plane up the steps and into the airport for their arrival at Peking. After thirteen hours in flight from Belgrade, during which time the boisterous Yugoslavs celebrated with continuous drinking and song, the weary American pioneers were grateful to leave the plane and the warm welcome was much appreciated.



Edith McGill and the Great Wall of China.



Chinese boats on West Lake.

The tourists were ushered up the red carpeted stairway through the airport at Peking and into a dining room where the places were set for dinner. As Edith describes, "The food had run out early on the plane from Belgrade and we were very hungry. At each place at the tables were a saucer-sized plate and a small soup bowl. At first as the platters of food were passed we were a little apprehensive about getting enough to eat on our small plates, but the food continued to arrive in a procession of courses which seemed endless. There was every kind of Chinese delicacy you could imagine, and some you would find it hard to imagine, almost all of it delicious. With the exception of American-style breakfasts, the meals were served this way all the while we were in China. We ate everything and suffered from nothing other than overeating and the common cold."

After dinner at the Peking airport the group boarded a Russian-made Chinese plane for Hangchow, where they were settled into their hotel rooms.

"Throughout our visit in China," Edith recalls, "there were no delays. Our bags were never searched and our visas were accepted without question. Guides hustled us past lineups wherever we went. At the theater the performance would begin as soon as we were seated!"

The tour visited Hangchow, Shanghai and Peking. Hangchow was the McGill's favorite. A comparatively small city by Chinese standards, it's one of China's most beautiful cities and one of the oldest, having a history of over twenty-two centuries. For centuries Hangchow has been a resort area

for the Chinese, located on a lake and surrounded by lush hills on three sides.

On their first morning in Hangchow the tour group boarded a bus for a trip to the Yellow Dragon Caves, a popular park for the Chinese tourists. It was their first acquaintance with the people of China and their strangest encounter while there.

As Edith describes this experience . . . "It was really quite unnerving. When the tour bus brought us to the entrance of the park we could see nothing but these smallish figures in blue before us. Everything in China seemed to be entered upwards . . . up steps, up paths, up roads. In this case we were looking at a mass of people climbing up a wide roadway, and all of them dressed precisely alike in the blue Mao uniform. As we got off the bus the sea of blue parted and we were allowed to pass through. The Chinese all stopped and stared at us most curiously. They did not blink. Once in awhile their eyes would waver and they looked at our shoes or our clothing, but it was mostly our faces they stared at. If you looked at one person and smiled they might smile back at you and they might not. It was an odd feeling."

The guide later explained that this was a special holiday for the Chinese and these were farmers who had come in from the surrounding communes and had probably never seen Caucasians before.

Edith says they never saw a Chinese woman in a skirt or wearing makeup or jewelry except on the stage at the theaters. Men and women dressed alike in the mandarin-collared coat and slightly baggy pants of the Mao costume, almost always blue.



Empress' marble boat, at Summer Palace near Peking.

In Peking they saw numbers of foreigners in western dress, but few in Shanghai and none in Hangchow. Peking appeared to be a modern city, with broad streets and large bicycle lanes for orderly traffic. Bicycles are the main form of transportation in China and move in waves everywhere in the cities. The old walls around Peking are down and the city stretches out into suburbs of modern apartment complexes.

Shanghai impressed the McGills as being much less affected by the Western influence. The streets there are narrow, crammed with bicycles and people, and the busses plow through continuously sounding their horns. Huge loaded carts were pulled through the streets by both men and women and the honey carts, usually drawn by bicycles, passed through the streets mornings and evenings.

The honey carts are filled with "night soil," which is used to fertilize the tea plantations. It was explained to the tourists that commercial fertilizer spoiled the flavor of tea!

Between seven and eight o'clock each morning a group of old men shadowboxed in the alley below the McGill's hotel window.

The tour group stayed at the Cathay Hotel in Shanghai, a famous terminus for passengers on the old Orient Express four decades ago. Now called the Peace Hotel, it has been completely refurbished, retaining the Chinese style decor. All the hotels where they stayed in China were for foreigners only, and the guides always told them they had been built in 1953. Before that date they had been "foreign imperialist properties."



Tea Brigade in Hangchow suburbs.

They attended two operas and an acrobatic performance in China. In Hangchow the theater was dingy and plain, with hard seats and no heat. It was so cold the tourists kept their coats closely buttoned up. But the stage was elegantly set with elaborate stage designs, lavish curtains and costumes, and the orchestra was comprised of Chinese instruments.

In Shanghai they attended an opera about the revolution. The theater was again quite plain except for the stage. The settings were much more elaborate than in our operas and there was a lot of dancing and almost Western music. Edith was most intrigued by the announcer at the side of the stage who introduced each scene in a weird sing-song prose, her voice rising and falling dramatically.

Two of their days in Peking were spent touring the ancient wonders of the Chinese Dynasties which are now being meticulously restored and which, for the most part, are just now open for public viewing. Chairman Mao has said that the people have to learn from their past and they are now digging into things that for thousands of years were protected as being sacred.

The Forbidden City, forbidden to all but the high-ranking Chinese throughout its history, is now a public museum. Edith describes it as being a wondrous huge compound of the most beautifully designed buildings, furnished with treasures of the dynastic period.

The Summer Palace, likewise off limits for foreigners until the past few years, is now a public park, very lovely and serene. The tour group lunched



Bonsai house at Hangchow Gardens nursery-park.

there by the lake, facing the huge marble barge of Empress Tsu Chi.

The Ming Tombs outside of Peking hadn't been excavated until the last ten years, and one of the tombs was explored by the tour group. Going down into the tomb was quite an experience for the McGills. They were amazed to find large underground halls with the elaborate altars, jewelled headdresses of the emperors and their gold dishes so well preserved after hundreds of years.

During these tours Chairman Mao got credit for everything. The splendors of the ancient dynasties were all at the price of the people's suffering, according to the guides. The decadent rulers had enslaved the people who gave their lives building these monuments, and Mao has freed the people at last.

Edith tells us the Great Wall was the greatest thing they had ever seen. The guides were quick to reinforce the fact that this, the largest construction on earth, was built by slaves. Viewing the wall, it was almost beyond belief that there could have been enough people bound in slavery four thousand years ago to build anything like it. Of the wall's thirty-four hundred miles, the first three or four have been restored just outside of Peking and the tourists could climb up on top and walk along the broad roadway.

They were fortunate that the day was clear and they could see the great wall humping the hills and turning and twisting northward like some giant dragon. Edith tells us that it is not just one continuous wall, but that it branches out to five or six walls in some places, that its height varies

from thirty to sixty feet, and in some places it drops down into steep ravines.

For all the wonders they had seen, the most remarkable part of the journey was, for the McGills, the Chinese people themselves.

Outside of Hangchow and again on the outskirts of Shanghai the tour group visited the Chinese in their communes. They were taken in small groups into homes and through interpreters were able to talk with the people. Their homes were small and sparsely furnished, with an occasional relic from a more elegant past . . . such as a huge, beautifully carved bed in one home. The bed took up almost a third of the living area for this three-generation family. Each home had one electric light bulb hung from the ceiling of the main room. Kitchen facilities consisted of a cast-iron laundry tub and a two-burner gas stove. Bathroom facilities were minimal and were shared by several homes. Crowded somewhere in each home was the family bicycle.

The Chinese seemed quite pleased and satisfied with the spare comforts they had. The family is still very strong in China. The people are so well indoctrinated in the party ideals it amounts to an almost religious faith that theirs is the best of all possible worlds.

With good health and few anxieties, the Chinese seemed to do very well with very little. For those in poor health, Chinese medicine offers some interesting treatments!

The McGills and their companion tourists visited two health care centers in China . . . a clinic in the agricultural commune just outside of Shanghai and a sanatorium for railroad workers near Hangchow.

continued on page 30



On the road to the Ming Tombs.

AMA Guest Editorial

MARKETPLACE CHOICE AS DETERRENT TO GOVERNMENT PRICE CONTROLS

The AMA-created National Commission on the Cost of Medical Care has opened up a new horizon by emphasizing the need to restore the concept of free-marketplace choice in health-care delivery.

What does that mean?

Well, picture the delivery system as a marketplace where producers and consumers handle their transactions through insurers, private and public. The Cost Commission report recommends that producers and consumers have direct impact on decisions made in their behalf.

Consumers want to buy services at a lower annual rate of cost growth than the 11 percent it has averaged since 1966.

However, the marketplace right now is not functioning well. It was flexible in the days when consumers paid the producer directly. But the patterns of coverage offered by today's middleman insurers are largely standardized in benefits and therefore in costs.

The Cost Commission report suggests ways in which those patterns can be stimulated to offer a latitude and freedom of choice.

For instance, employees could choose among health-care plans in terms of premium price, whereas employer contributions to premiums would be the same for any plan. The employee selecting a plan less expensive than the employer contribution would either be reimbursed for the difference or receive additional benefits.

The report makes this general observation:

"Reliance on market mechanisms can lead to cost-effective production of output, and permit

consumer preferences to play a key role in determining what goods and services are available."

Unfortunately, this leeway cannot control costs all by itself. Nor does the marketplace assure care to the poor and uninformed, and their health-care costs could continue to rise sharply.

Hence, there must be some reliance on provider self-regulation and on local regulation if the overall tab is to be kept in line. No federal controls are recommended by the report.

Self-regulation would include cost containment initiatives in the private sector of care, among third-party payers, and in medical practice. Says the report:

"In the past, providers have considered primarily the medical needs of their patients. The Commission believes that providers must now take steps to make cost-effective utilization recommendations without sacrificing the quality of care. There are a number of programs that can be undertaken within the health-care system that are not dependent on major changes in the delivery system."

The chief value of the report is that it brings many ideas and groups together in a coordinated program for genuine action. Some of the ideas are old but have never been implemented. Group responsibilities include those placed on the consumer.

The upshot could be a momentum that would head off arbitrary, unwieldy federal formulas for cost containment. Developed after a year and a half of intensive study and effort, the Cost Commission report presents credible alternatives to those formulas.

American Academy of Family Practice Monthly Meeting

7:00 A.M.

Allenmore Hospital Cafeteria

Tuesday, June 13, 1978

Speaker: Michael D. Soronen, M.D.

Topic: Radiation Therapy
and Family Practice

Cancer Rehab Subject of Everett Meeting

Cancer rehabilitation in the community will be the subject of a meeting to be held June 10 at the Holiday Inn, Everett. The meeting will be sponsored by the Fred Hutchinson Cancer Research Center. It is intended to be of value to those physicians whose hospitals already have cancer rehabilitation programs as well as those physicians involved in planning for such activities.

Agenda and registration information can be obtained by contacting the Hutchinson Center, 1-292-2468.

Make Medicine's Voice Heard In the Planning Process

Any physician, or physician's spouse, may become a member of the local health planning council by filling out a simple application form (available at the Medical Society office). Members of the health council elect those who serve on the area's Health Systems Agency. Medicine's minority status in the planning process doesn't mean that medicine can't make a greater impact. Sign up for health council membership today.

Volunteer Physicians Needed

Physicians interested in contributing up to three hours of time per month are asked to contact the Tacoma Rescue Mission, 383-4462. The Mission conducts a free health clinic each Wednesday morning from 9:00 a.m. to 12:00 noon for low income residents living in the vicinity of the Mission. Two local physicians currently volunteer one morning each per month to the clinic, which served over 300 patients in 1977.

Additional information can be gained by calling G. Hanley Barker, Superintendent, at 383-4462.

YOUR MEDICAL LIBRARY

Your access to the world literature in medicine through the network of biomedical communication: Hospital Library — Pierce County Medical Library — Pacific Northwest Regional Health Sciences Library — National Library of Medicine — British Lending Library.

Comprehensive library services include: literature searches, bibliographies, interlibrary loans, and Medline searches (Literature retrieval by computer).

HOURS: Monday - Friday 8:00 A.M. - 5:30 P.M.
(Other times key is available by request)

M. Von Bruck, Librarian
572-5340

Physician-Pharmacist Committee

DSHS REVISES DRUG PROCEDURES



by
Herman S. Judd,
M.D.

This is the fourth in the series of articles to acquaint you with the activities and deliberations of your Interprofessional Committee of Pharmacists and Physicians. As you know, this committee was formed by the joint action of the Medical Society of Pierce County and the Pharmacists Association to discuss problems common to both professions and their interrelationships.

At the last quarterly meeting held in March 1978, we learned that there has been a change in the procedure to be followed when a non-formulary drug must be prescribed for a patient receiving Medicaid benefits through the Department of Social and Health Services (DSHS). Formerly the pharmacist sent the prescription to the DSHS office for approval by the "screening physician." This is now no longer acceptable by DSHS and if you want to prescribe a drug that is non-formulary you must send the prescription to the local public assistance office for review by the medical consultant. If approved, it will be returned to you to be given to the

patient or pharmacist. It seems to me it would be a lot less folderol to prescribe a formulary drug in the first place or, if in my medical judgment the patient needed the non-formulary drug sufficiently to warrant it, inform him that he must pay for this one himself. Sometimes there is clinical improvement at this stage of the proceedings.

The subject of prescription refills also has been discussed. Did you know that the pharmacist is now required by law to indicate on the back of the prescription when it is refilled the date of the refill and the permission of the physician as expressed by him or his office staff, the initials of the pharmacist making the refill, and the notation that it has been logged on the profile card of the patient? And we physicians think we have paperwork! It would behoove the physician, when the pharmacists call for permission to refill a prescription, that when the request is granted, a note of the refill, the medication and the date be entered in the patient's record. A lot of time could be saved if we physicians would always write on our prescriptions, or if they are telephoned include, the number of refills we desire the patient to have — from none to prn (depending on whether it is for digitalis or for tetracycline).

Our next meeting will be in June. Your Interprofessional Committee sincerely hopes that you have benefited from the discussions and deliberations we have held in this ever changing world of medicine, pharmacy, and regulation by state and federal government. We shall try, as we continue our meetings, to face the problems of both professions with equanimity and to keep you informed of our deliberations.

THANK YOU TEL-MED BOOSTERS!

The Tel-Med board of trustees wishes to thank the following physicians for their loyal support during Tel-Med's first year of operation. You believed in the value of this health education service; you made it possible with generous donations totalling \$4,420; and now you can share our delight in having answered nearly 60,000 calls to better inform your patients:

Leonard Alenick
Charles Anderson
Cordell Bahn
Myron Bass
David BeMiller
James Blankenship
Robert Bond
Cardiac Care Study Center
Theodore Crowell
James Crowley
Charles Wayne Curl
Lawrence Cutner
Robert Detje
Dale Doherty
James Early

Gastroenterology Associates
Kenneth Graham
Gross, Larson, Whitney & Associates
Ted Haley
Melvin Henry
Galen Hoover
William Jackson
Ralph Johnson
Robert Johnson
John Kanda
Gale Katterhagen
John Kemman
Herbert Kennedy
James Kenney
Peter Kesling

Kenneth Kilborn
George Kittredge
Gerald Kohl
Mills Lawrence
Harry Lawson
David Lee
Michael Lovezzola
Robert Martin
Donald McKay
John McDonough
Roger Meyer
Thomas Miskovsky
Donald Mott
Stanley Mueller
Charles Prewitt

Quadra Medical Inc.
Gilbert Roller
Alan Sobul
Kenneth Stern
George Tanbara
Max Thomas
Robert Truckey
Stanley Tuell
Charles Vaught
Joseph Vozenilek
Donald Weber
Western Clinic
George Whitacre
Robert Whitney
Wayne Zimmerman

Of course the need for funds continues and Tel-Med will gratefully accept all donations in support of its second year of operation.

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communication for the everyday business needs of people 24 hours a day.



RADIO-TELEPHONE

PAGING

TELEPHONE ANSWERING

ANSWERING SERVICE

RADIO PAGE
572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day... when you must be contacted, you get an actual voice message from your personal Pager.

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw - 24 hour service.

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301
•
11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
- DENTAL
- PROFESSIONAL

Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

Auxiliary Page

AUXILIARY OFFICERS 1977-1978

President	Helen Whitney
President-Elect	Jo Roller
1st V.P. & Program	Kathy Miskovsky
2nd V.P. & Membership.....	Nicole Crowley
3rd V.P. & Historian & Bylaws.....	Reta Bergstrom
4th V.P. & Arrangements	Lee Jackson
Recording Secretary	Martia Ohme
Corresponding Secretary.....	Jan Thiessen
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

COMMITTEE CHAIRMEN

AMA-ERF.....	Marge Ritchie
Communications:	
Bulletins	Georgia McPhee
Newspaper.....	Maryln Baer
Mailing	Donna Prewitt
Telephone	Barrie Mott
	Joanne Iverson, Arlene Hopp
Community Health	Kay North
Cookbooks	Judy Baerg
Tasting Luncheon.....	Stephanie Tuell
Dance	Carol Hopkins
Finance.....	Kimi Tanbara
Joint Dinner	Genny Hansen
Legislation	Cindy Anderson
Newcomers	Janet Fry
Nominating.....	Marie Henry
Pierce County Health Council.....	Nadine Kennedy
PCMS Directory.....	Kit Larson
Sunshine.....	Lorna Burt
Superintendent's Advisory Health Council and Handicapped Acceptance Program.....	Sharon Lukens
Student Recognition Awards.....	Barbara Wong
	Marilyn Mandeville
Tel-Med Volunteers	Lila Early

Thanks to our 225 dues paying members, Pierce County will have nine delegates to the annual convention in September. Please let Helen Whitney know if you would like to represent our auxiliary in Spokane on September 21 and 22. We will have the chance to prove we can run three miles preceding Dr. Kenneth Cooper's scientific session on cardiovascular fitness (doctors will be asked to run five miles). Time to shape up!

It's not too late to pay dues for this year. Dot Truckey will be happy to receive your \$20 check.

Maryln Baer, Judy Brachvogel and Jan Thiessen scurried all over the county to find rhododendrons for decorations for our April 15th celebration. Carol Hopkins and her cochairman, Jean Vadheim, were assisted also by Nancy Spangler, who took

care of reservations, and the tireless telephone committee under the direction of Barrie Mott, Joanne Iverson and Arlene Hopp. Proceeds of the dance support recognition of our outstanding senior students.

This year the committee, consisting of two doctors (fathers of previous winners), two high school principals, and three auxiliaries, was able to choose from among many well qualified applicants one girl and one boy who stood out above the others. These two will receive plaques and \$50 checks at their schools' awards assemblies, and their names will be announced in the July BULLETIN.

The long-awaited physicians' directory will be out this month. Many hundreds of hours have gone into the project under the capable direction of Kit Larson. Helping her with typing, proofreading and gathering information from pharmacists, nursing homes, health agencies, hospitals, funeral homes, therapists, laboratories, and from those doctors who did not return their questionnaires, were the following members: Linda Bede, Glenna Blackett, Jo Roller, Helen Whitney, Edith McGill, Marge Ritchie, Hilda Lantiere, Cindy Anderson, Nikki Crowley and Kimi Tanbara. We are extremely grateful for the efficient and cheerful cooperation of Medical Society staff members Sue Knutsen and Phyllis Kaser.

The membership has voted to give our surplus funds this year to the children's therapy unit at Good Samaritan Hospital, and to Tel-Med. Sales of directories and of cookbooks will benefit these two organizations. Don't forget cookbooks when you are choosing gifts for bridal showers, graduations and weddings this spring. They may be purchased from Judy Baerg, Kit Larson, Glenna Blackett, Kathleen Skrinar, Nikki Crowley, Bev Harrelson, Deva Vaught, Lorraine Sulkosky and Jane McDonough. Cookbooks will also be available at the May meeting at Oakbrook Country Club. For that meeting, Dee Havlina, Lona LaTona and Aija Ozolin have arranged a fashion show by Lulu and a gourmet luncheon complete with wine, door prizes and a raffle. The price is \$6, with a no host cocktail hour beginning at 11:30. Lunch will be served at 12:15. Invite your friends and make firm reservations for them and for yourself with your telephone caller, or with Dee or Lona. Seating is limited.

Annual Pap Test Declared Unnecessary For Most Women

Most women don't need a yearly Pap test for cervical cancer, says a report in a recent issue of the Journal of the American Medical Association (JAMA).

Emerson Day, M.D., associate director of Northwestern University Medical School's cancer prevention center, told JAMA that — with certain important exceptions — most women could go two or three years between Pap tests without making much difference in findings of cancer.

"This should not be taken in any way to understate the value of the test," Dr. Day said. Rather, he believes that women who have had normal results on two or more negative Pap smears in a row are in such a low-risk group that less frequent tests would suffice.

Some gynecologists might agree, but would argue that the test is harmless and possibly life-saving, and that annual (or more frequent)

repeat examinations bring the woman into a physician's office for a thorough examination that could turn up unrelated problems, the JAMA report says.

Dr. Day points out that the American College of Obstetricians and Gynecologists and the American Cancer Society recommend "periodic" Pap tests, but not necessarily annually.

Those who should be examined frequently are women who began sexual activity in the early teen years, especially those who have had many sexual partners. These individuals have a higher than usual incidence of abnormal Pap test findings, he says.

Since introduction of the Pap test in the 1940's, incidence and mortality for cervical cancer have both declined. In 1947 the disease developed in 44 women per 100,000. In 1970 incidence was 8.8 per 100,000. Death rates also dropped.

**We're your convenient
source for WSMA/AETNA
professional liability
insurance.**

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



**PERSING, DYCKMAN
& TOYNBEE, INC.**
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynbee
Wayne Thronson
Bob Sizer

Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks

LENOX TRANSCRIPTION SERVICE

Your 24 hour medical secretary
offers these benefits:

- Direct dictation line
- Experienced medical steno
- Personalized service
- Full-time, part-time or temporary service

**24 HOUR DICTATION LINE
535-0332**

For more information contact:
Nancy Lenox/537-3921

AAMA Page

MEMBERSHIP GROWING

by Doris Stansell, Publicity Chairman

At long last the Pierce County AAMA Chapter is beginning to show a substantial growth in membership and interest, after a sometimes quite frustrating struggle. We now have 43 members on our roster, including 37 Active members, one Associate (Instructor), and five Student members. This is a slow growth from the original thirteen charter members of November 1973, but things are looking up.

At the present time we are looking forward to State Convention, to be held May 5, 6 and 7 at the Sheraton Inn in Olympia, with the Thurston Mason Chapter hosting this annual event (the ninth for our State Society.) The scheduled program includes many capable speakers, including: Michael Merchant, M.D., Washington State Advisor; Karl Ruppert, M.D.; Ann Steele, M.D., Washington State Advisor; Robert Brunton, M.D.; Gary Forrest, M.D.; Robert Reeves, M.D.; Don Taylor, attorney; Edgar R. Palarea, M.D., AAMA National Advisor, California; Lendon Smith, M.D.; Betty Kutter and Burton Guttman, Ph.D.; Donald Humphrey, Ph.D.; Wayne Dickason, M.D., Thurston Mason Chapter Advisor. A national representative, Mabel A. Veech, trustee, from Louisville, Kentucky, will also attend. Application has been filed with AAMA for consideration of awarding CEU credits for this program. Naturally, there will be time allowed for fun and frolic, as well as an educational tour of the Evergreen State College. A report on this convention will be forthcoming.

The educational program for our April 10 meeting was presented by Sheila Buchanan and Naomi Hanley, R.N., caseworkers with the Children's Protective Services — a very interesting and informative program with good audience participation. Our May meeting program will feature Ralph A. Johnson, M.D., surgeon, and 1977-78 President of the Medical Society of Pierce County.

Quote from *MEDICAL ECONOMICS*, December 26, 1977: "On the Way: A Bumper Crop of Medical Assistants" —

"Physicians will have an ever-broader choice of capable office help as training programs for

medical assistants keep on multiplying. Last year, 9,518 students were enrolled in 99 training programs accredited by the American Association of Medical Assistants; in 1970, there were just 240 students in six such programs. A fact sure to please private practitioners: Program trainees learn both administrative and clinical skills, meaning they can work in the back as well as up front."

There is such a program now at Tacoma Community College which will hopefully be accredited by AAMA, Inc. soon. (The AAMA page in the March and April BULLETINS discussed this program.)

In closing, I would like to submit the following beautiful poem, a tribute to nurses, by Gerhart A. Drucker, M.D., of Tacoma. It was published in the March 27, 1978 TACOMA NEWS TRIBUNE, the first issue put out after their strike ended, and perhaps many missed it. Thank you, Dr. Drucker. I hope you don't mind my passing it on.

In praise of nurses

Comrades-in-arms! For years we have joined ranks
to fight disease and death, our common aim.
Defeats we suffer, victories we acclaim;
you share them both, and you deserve my thanks.

Many a night Death stalked your darkened hall,
a life entrusted to my hands ebbed low.
Your skill helped me restore life's precious flow,
unfailing to your oath and duty's call.

Most left, their health restored, our battle won,
their gratitude was your reward, and mine.
Some went, for whom the sun had ceased to shine;
we mourned them, and our daily fight went on.

Accept my gratitude and praise, dear friends,
you who sustain me on my arduous way.
I trust your skill, your courage day by day
in common task and chore, that never ends.

Gerhart A. Drucker (M.D.) Tacoma

FROM THE BIGGEST OF ALL THE BEST OF ALL!

Negotiable rates and terms on Jumbo Certificates of

\$100,000 or more

& Public Funds Certificates of

\$10,000 or more

For complete information call your nearest Pacific First Federal office.

Pacific First Federal Savings

A TRADITION
OF EXCELLENCE.



and Loan Association

A Mutual Savings Institution

Seattle ■ Bellevue ■ Auburn ■ Seatac
Tacoma ■ Lakewood ■ Olympia
Spokane ■ Tri-Cities ■ Bellingham
Longview ■ Vancouver ■ Portland
Eugene ■ Springfield ■ Bend

IN TACOMA
11th & Pacific
383-2511

IN LAKEWOOD
10011 Gravelly Lake Dr. S.W.
582-5000

IN AUBURN
55 A Street S.E.
833-0920



EQUAL
OPPORTUNITY
LENDER

Largest in the Pacific Northwest/over 1¼ billion dollars strong.

Membership

FIRST NOTICE

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:



WILLIAM BRANST BEDE, M.D., Orthopaedic Surgery. Born in Tacoma, Washington 10/29/43; medical school at McGill University, Montreal, Canada, 1970; internship at Presbyterian Medical Center, Denver, Colorado, 1970-71; residency in general surgery, St. Joseph Hospital, Denver, Colorado, 1971-72; additional graduate training in orthopaedic surgery, Montreal General Hospital, Montreal, Canada, 1972-75; licensed to practice medicine in the State of Washington, 1978. Dr. Bede's office of orthopaedics is located at 1624 South I Street in Tacoma.

SECOND NOTICE



TOSHIO J. AKAMATSU, M.D., Anesthesia. Born in Omaha, Nebraska, 11/20/33; medical school at University of Minnesota, Minneapolis, Minn., 1959; internship at Mercy Hospital, Toledo, Ohio, 1959-60; residency in anesthesia, University of Washington, Seattle, 1960-62; Board Certified in anesthesia; licensed to practice medicine in the State of Washington, 1963; also practiced medicine in Seattle at the University of Washington Dept. of Anesthesiology, 1963-77. Transfer from King County Medical Society. Dr. Akamatsu is Chief of Anesthesia at St. Joseph Hospital in Tacoma.



HAROLD B. BETTON, M.D., Emergency Medicine. Born in Little Rock, Arkansas, 11/24/47; medical school at University of Washington, 1975; internship at University of Washington, 1975-76; residency at University of Washington, Department of Family Practice, 1976 to present; licensed to practice medicine in the State of Washington, 1976. Dr. Betton practices emergency medicine in Pierce County hospitals.



CARL A. GIOMBETTI, D.O., Pediatrics. Born in Yonkers, New York, 2/17/44; medical school at Philadelphia College of Osteopathic Medicine, Philadelphia, PA, 1969; internship at Doctors Hospital, Columbia, Ohio, 1969-70; residency in Pediatrics at Albany Medical Center, Albany, N.Y., 1974-76; licensed to practice medicine in the State of Washington, 1976; Board Certified in Pediatrics. Dr. Giombetti's office of pediatrics is located at 2603 Bridgeport Way West, in Tacoma.

ATTENDING PHYSICIAN'S REPORT FORMS

Please be advised that the Attending Physician's Report Forms, which previously were available through the Pierce County Medical Society, can now be obtained through North Point Press. They are located at 2302 Pacific Avenue. Call 627-4147 for further information.

FAMILY CLINIC – MARCH 1978

Open Monday through Friday

1815 South J Street, Tacoma 98405

Phone 627-9182

PATIENT SERVICES	March 1978	Total 1978	Total Since September 1973
Referred to Physicians	165	282	6,115
Laboratory Services	67	181	5,001
X-Ray Services	18	52	612
Prescriptions	50	161	3,744
Referred to Community Agencies	19	57	1,532
Seen by Physicians in Clinic	109	268	2,098

ETHNIC AND DEMOGRAPHICAL DISTRIBUTION

Black.....	48	127	1,822
Caucasian.....	227	623	10,008
Asian-American.....	2	13	272
Native-American.....	0	3	262
Mexican-American.....	12	22	269
Others.....	4	4	4

PARTICIPATING PHYSICIANS ON FRIDAY EVENINGS

Dr. H. Boyd

Dr. N. Magnussen

Dr. R. Martin

Dr. A. North

Dr. G. Oh

Dr. T. Smith

Dr. G. Tanbara

Dr. A. Tsoi

Dr. S. Whaley



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*

Dear Doctor:

The Monday morning (8:00 a.m. to 9:00 a.m.) schedule for the educational conferences at Lakewood General Hospital for the month of May is:

- May 8 CLINICAL TOPICS IN NUCLEAR
 MEDICINE
 John Flood, M.D.
- May 15 TOTAL HIP REPLACEMENT AT
 LAKEWOOD GENERAL HOSPITAL –
 CASE PRESENTATIONS
 Ralph Marx, M.D.
- May 22 DIFFERENTIAL DIAGNOSIS OF
 ARTHRITIS – Film
 James Krueger, M.D., Moderator
 (With examination - 2 hours Category I)

Please plan to attend.

Sincerely,

James Chappell, M.D.
Chairman, Medical Education

in Brief

A summary of AMA, medical & health news

American Medical Association / 535 North Dearborn Street / Chicago, Illinois 60610 / Phone (312) 751-6000 / TWX 910-221-0300

The Administration sent a bill to Congress that would overhaul prescription drug laws. The Drug Regulation Reform Act of 1978 would establish a monograph system for drug approval, give extensive controls over the distribution and dispensing of drugs to the HEW secretary, and require patient information labeling for most drugs. In line with House of Delegates action, the AMA is developing amendments to the present law that would speed up the introduction of safe and effective drugs, provide an optional procedure for the new drug approval process, and provide for patient information leaflets under certain conditions.

HEW spent \$14,000 to prepare the original list of physicians who supposedly received \$100,000 from Medicare in 1975 and then spent \$122,000 to correct the list, according to the General Accounting Office. The GAO also said the listing was "poorly managed," full of mistakes, prematurely released, and expensive. The AMA had found the list to be about 65% inaccurate.

The AMA said state and local medical societies should be involved at every step in HEW's process of designating physician shortage areas, including the actual assignment of physicians. In a letter commenting on regulations to establish new criteria for such areas, the AMA also recommended that the regulations be modified to remove undue reliance on the population-to-physician ratio in designating shortage areas.

A national contest for physician-speakers has been organized by the AMA Speakers Bureau. The contest was launched to improve the overall effectiveness of medical spokespersonship and is open to any physician chosen by his or her medical society this year before the media, lay or professional audiences, or in legislative testimony. Contest rules have been mailed to state, county and specialty medical societies.

Five more jails in six pilot states have been approved for accreditation by the AMA National Advisory Committee to the Program to Improve Medical Care and Health Services in Correctional Institutions. Last year, 16 jails were accredited.

The third National Conference on Impaired Physicians will be Sept. 29 - Oct. 1 in Minneapolis. The meeting will be sponsored by the AMA in cooperation with the Minnesota State Medical Assn.

The second annual jail conference, sponsored by the AMA, will be Oct. 27-28 in Chicago.

A new directory of medical practice opportunities for physicians, the *Opportunity Directory*, has been published. Important features are the computer-generated indexes which facilitate finding the most suitable opportunity. Also published is the new *Physician Directory*, containing resumes (but not the names) of physicians seeking opportunities. Both directories will be published quarterly. For more information write Physicians' Placement Service, AMA Headquarters.

The number of Americans living in areas officially designated as having a physician shortage could increase by 56% to a total of 25 million under new criteria proposed by HEW's Bureau of Health Manpower. Under current rules, a shortage level is reached when there are 4,000 or more persons per primary care physician. The new proposal would lower this level to 3,500. Of the estimated 25 million people who would be in shortage areas under the new criteria, 15 million live in inner cities.

Available from AMA: *Aesthetic Surgery . . . What it Can and Cannot Do*, OP 208, provides a realistic look at cosmetic surgery. Cost is 40¢ ea. for 1 - 99 copies; 25¢ ea. for 100 - 499 copies; 22¢ ea. for 500 - 999 copies; and 21¢ ea. for 1,000 or more . . . *How Are Your Eyes?*, OP 008, describes the anatomy of the eye, eye infections, and corrective lenses. Cost is \$1.25 ea. for 1 - 99 copies; 90¢ ea. for 100 - 499 copies; 85¢ for 500 - 999 copies; and 82¢ ea. for 1,000 or more . . . *Your Body and How it Works*, OP 176, is a pamphlet for parents and young children. Cost is \$1.50 ea. for 1- 99 copies; \$1.30 ea. for 100 - 499 copies; \$1.27 ea. for 500 - 999 copies; and \$1.26 ea. for 1,000 or more . . . *Medicolegal*, OP 440, contains proceedings of the AMA/ABA cosponsored National Medicolegal Symposium in San Francisco last year. Cost of the book is \$7 ea. Write AMA, P.O. Box 821, Monroe, Wis. 53566.

PRESIDENT'S PAGE — continued from page 5

- Washington State ranked 48th in hospital expense per capita in 1976, as a percentage of per capita income, and while statistics on total health care expense per capita are not currently available, the state probably ranked just as low in this regard;

- The cost of health care in our state has increased at a slower rate than health care costs nationally.

A variety of factors have helped to keep the cost of health care lower in Washington State, and many sections of the country look to our area as a leader in developing new and less expensive modes of care.

Your dissemination of these facts will support rational discussion as the nation works to establish an equitable health policy.

Sincerely,

Ralph A. Johnson, M.D., President
MEDICAL SOCIETY OF PIERCE COUNTY

ORIENT EXPRESS — continued from page 18

Both were secondary care centers on the scale of four levels of medical care in China. Edith is quick to note that the "barefoot doctors," mostly women, were not barefoot, nor did they see anyone without shoes in China.

Edith describes the sanatorium near Hangchow as . . . "looking just like a very old TB San, very bare, located in a park-like garden area, with all of the windows wide open!" Some of the patients were out working in the flower beds. It was so cold inside the building the tourists were glad to be wearing heavy coats. The patients all wore coats too, in their beds!

Acupuncture was the prevalent treatment at the commune clinic, for almost every illness. They observed a woman being treated for abdominal cramps, with needles in her legs and in her head.

Another woman with stomach ulcers was being given a hot wax treatment with a bag of hot paraffin across her abdomen.

They watched one group of men at the sanatorium being led by their doctor in shadowboxing as part of the therapy for hypertension. As the tour went on, this kind of approach to medicine began to seem less bizarre. They saw a young man with an obviously bad injury on his shoulder being treated with two bamboo tubes placed on the wound to draw the poison out! The bamboo had been boiled in a mixture of herbs and as it cooled it contracted, effecting a suction action.

Hydrotherapy, electric treatments and vibrating

machines galore were in use in the sanatorium. Doctor McGill asked the doctors there about the use of these contraptions which appeared to be similar to those in vogue here at the turn of the century. He was told that the most modern methods in medicine were combined with the traditional, but the basic treatments for healing were sunshine, fresh air and a peaceful atmosphere, political studies and manual work.

Edith was fascinated by one form of therapy they saw at the clinic. As she described it . . . "In one room was a group of women, all suffering from insomnia. They were sitting in chairs in a circle, all with their coats on but with bare feet. Their feet rested on a pad in the center of the circle. The pad was electrified in some way. The women sat stoically, looking straight ahead. A nurse with a small fluorescent tube went around the circle of women and as she touched each patient's forehead, the rod would light up. They were perfectly serious about this being a treatment for insomnia . . . but who knows?"

For the McGills, the splendors of the ancient dynasties were never the fascination that the people of China were. As Edith says . . . "Their prevailing courtesy and their apparent sincerity of purpose was unlike anything we had seen in our travels before. We didn't see suspicion in the eyes of the Chinese, in contrast to the Russians, who have a lot of resentment and it shows. The Chinese accept their hard work and what little they have, and leave the extravaganzas to the theater."

Classified

WANTED: ASSOCIATE DIRECTOR: Family Practice Residency. Board Certified practicing Family Physician with interest in teaching. Responsibilities include teaching residents and patient care. Excellent local medical facilities. Outstanding professional, cultural and recreational environment. Contact Roy Virak, M.D., Family Practice Residency Foundation, 737 Fawcett Avenue, Tacoma, Washington 98402.

FOR SALE: Modern medical office building, space for 3 to 4 physicians, excellent location near Auburn General. Des Moines Realty. Call only Ralph Shively, Tacoma (206) 564-1050 after 4:00 p.m. for further information.

LUXURY WATERFRONT APARTMENT, completely furnished, on Kauai. Rent by week. 759-4332, evenings.

CUSTOM DESIGN your new office space in Spokane, Washington. 1880 square feet on top floor, with elevator, available in prime location. Adjacent to Spokane's largest shopping center and near Holy Family Hospital. Esthetic new building to be completed in June 1978. Northtown Park Medical-Dental Center. Call (509) 489-3964.

FOR SALE: 1976 Porsche 911S, \$15,000 firm, Dr. Morrison, 848-4564.

FOR SALE: John Deere tractor with front loader, \$1,300, Dr. Morrison, 848-4564.

VASHON ISLAND NEEDS A DOCTOR!

We have space in Medical Building
(approximately 1500 sq. ft)
Available for lease May 1, 1978
Call 1-463-3498

RENTAL AVAILABLE in late 1978. Quality office space in rapidly growing Federal Way. Ideal for Family Practitioner or Pediatrician. Phone (206) 838-0661.

FOR SALE — Large brick home above Narrows Bridge with sweeping view of Sound and Olympics. 759-0011.

SAVE FUEL — SAIL. 73 Catalina 27 ft., excellent condition. 848-2423 (days), 848-3833 (after 7:00)

NURSE PRACTITIONER INTERESTED IN PRACTICE OPPORTUNITY

Nurse practitioner (Certified R.N.) would like to join a physician practice in the Tacoma area. Has specialized training and experience in treatment of common adult problems, physical exams, and in following patients with chronic conditions such as arthritis, hypertension, and chronic obstructive lung disease. Has experience in teaching stress reduction exercises to meet individual needs. Training is in general primary care, but would consider working with a specialist. A trial period of employment or association with a physician could be arranged.

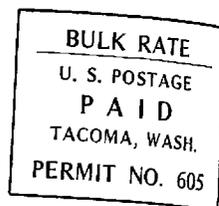
MEDICAL SOCIETY of PIERCE COUNTY

813 South K Street

Suite 200

Tacoma, Washington 98405

ADDRESS CORRECTION REQUESTED

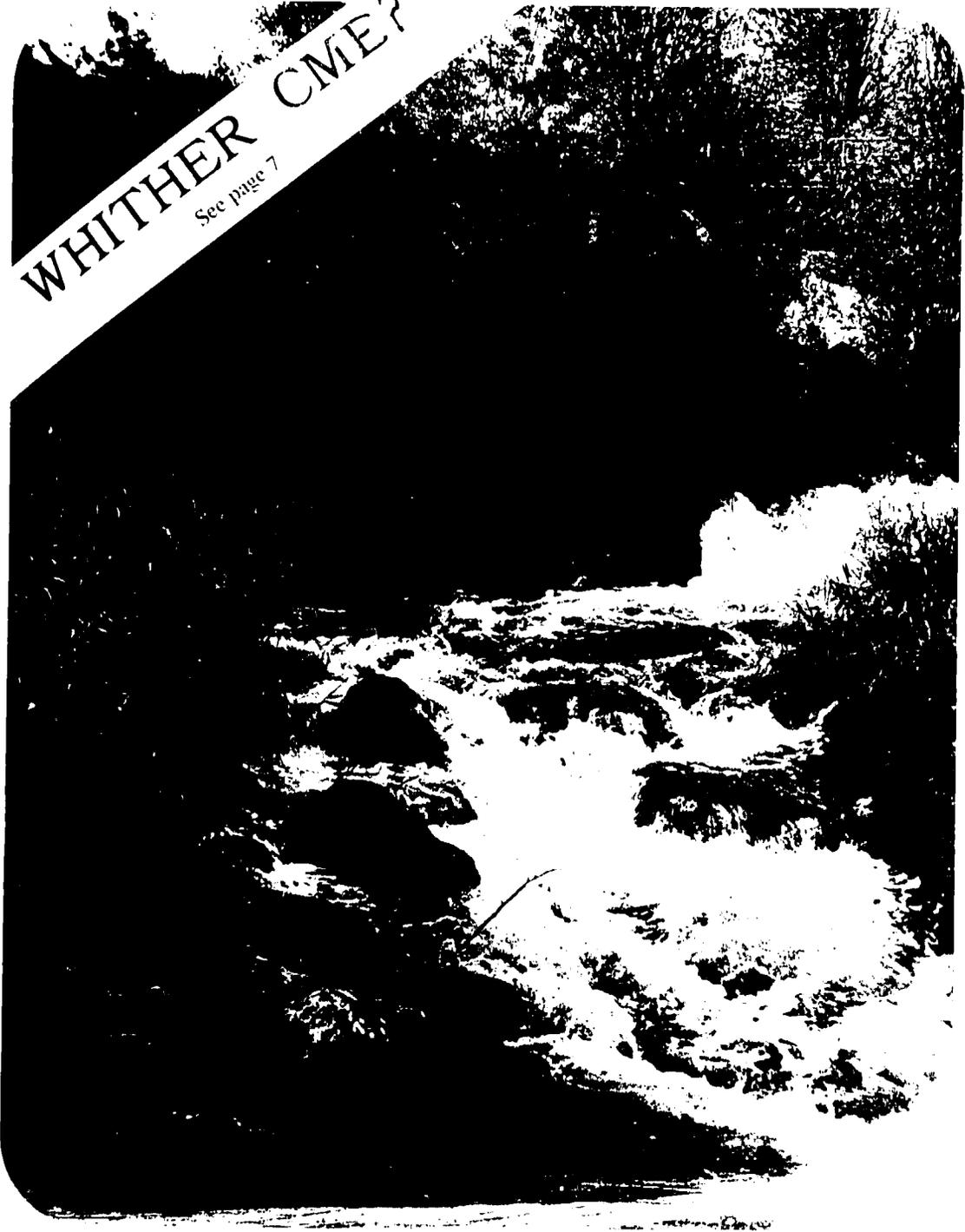




Medical Society of Pierce County

JUNE 1978 Vol. XLX, No. 6 Tacoma, Washington

WHITHER CME?
See page 7



BULLETIN

DIAPER RASH is not a way of life

YOU CAN RECOMMEND
WITH CONFIDENCE
PROFESSIONAL DIAPER SERVICE



The professional processing of diapers is our only business. Doctors and nurses approve and recommend both our processing methods and our safety controls. And so do leading hospitals who use our services regularly.

LABORATORY CONTROLLED

Each month a random sample of our diapers is subjected to exhaustive studies in a biochemical laboratory.

Utmost Convenience. Our product doesn't come in a box that you tote home from the supermarket. Thanks to pick-up and delivery service, it comes when you need it.

And Economy. All this service — all this extra protection against diaper rash costs you far less than paper diapers. In fact, only pennies more a day than home-washed diapers.

CAUTION TO YOUR PATIENTS

It is illegal to dispose of human excrement in garbage. Mothers are doing this with paper/plastic diapers. 'Disposable' is a misnomer.

KC Ord 800

Washington's oldest, most trusted Professional Diaper Service — serving our second generation

TACOMA
475-1234



SEATTLE
Call: ME 4-BABY

456 No. 36th St. Seattle, Wash. 98103

MEMBER: The National Institute of Infant Services - Philadelphia, Pa.

Bulletin of the Medical Society of Pierce County



“Spring run-off”

Photo —

Mrs. Chris Reynolds

CONTENTS

page	
5	President's Page
6	In Memoriam — Lester S. Baskin, M.D.
7	<i>Whither Continuing Medical Education?</i> Marcel Malden, M.D.
8	A.A.M.A. Page
14	Membership
15	Society News Briefs
17	Auxiliary
18	A.M.A. Briefs
20	<i>Residency Program Counts Down</i> Craig Goebbel

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor.	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D. (79)
Melvin L. Henry, M.D. (80)
William B. Jackson, M.D. (80)
Richard K. Ohme, M.D. (80)
Charles C. Reberger, M.D. (79)
Roy A. Virak, M.D. (80)
Myra S. Vozenilek, M.D. (79)
Helen Whitney (78)

DELEGATES

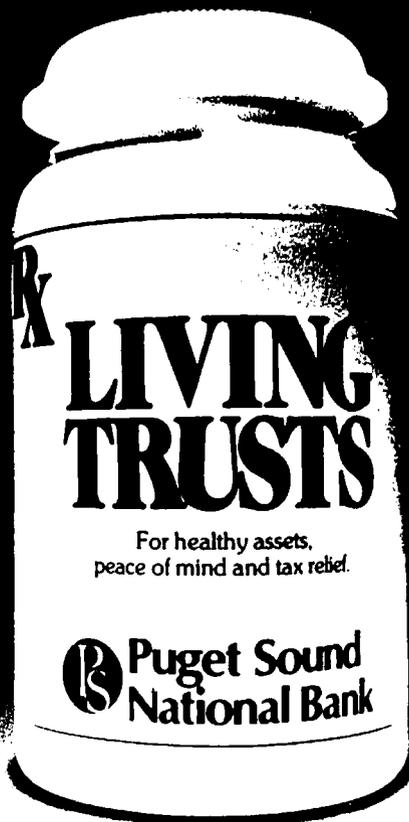
Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

President's Page

GETTING THE NEW PHYSICIAN INVOLVED

One of the primary goals I had when assuming the Society presidency was to get new physicians actively involved in Society activities earlier and to a greater degree than has been the case in the past. I was very pleased, therefore, that Dr. Dick Bowe, who has similar convictions, agreed to serve again as Credentials Committee chairman, and to direct this committee's work with doctors new to the Society. The committee's program and objectives have been expanded, leading it to play a more dynamic role in our Society's organizational structure. The committee, comprised of the chairmen of the credentials committees of each hospital in Pierce County, is meeting regularly with the following guiding objectives:

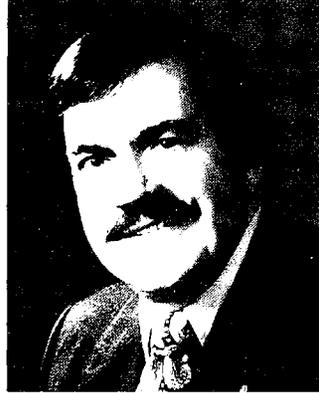
To provide useful information to new physician applicants; to get these applicants involved in the Medical Society; and, to make them a part of the medical community.

On the basis of recommendations recently made by the Credentials Committee and approved by the Board of Trustees the committee is taking the following steps to achieve these objectives:

1. Effective immediately, new members may not vote or hold office in the Medical Society until they attend a general membership meeting following a favorable vote on their membership application by the Credentials Committee and Board of Trustees.

2. New applicants are now invited, and strongly encouraged, to attend a Credentials Committee meeting for the purpose of orienting them to the medical community and Medical Society.

3. A protocol is being developed to help guide the Credentials Committee in its dealings with new applicants (the committee began meeting with new applicants at its May meeting).



Ralph A. Johnson, M.D.

4. An information packet is being developed for new members.

I find this last step particularly desirable. In concise and easy-to-use form, this packet will contain such information as an explanation of the Medical Society, how physicians can open an office, medical ethics, specialty listings, laws affecting physicians, the Medical Society bylaws, available insurance plans, the Medical-Dental Placement Service, and other topics. Physicians who have seen a prototype of this packet have been enthusiastic regarding its value and usefulness.

To me it is obvious that the strength of the Medical Society depends on the vitality that is transfused by new members. In dealing with its objectives, I believe our Credentials Committee is right on target and Dick Bowe, Don McKay and the other physicians working on this committee are deserving of our strong support.

R.A.J.



IN MEMORIAM
LESTER S. BASKIN, M.D.

A great loss has been sustained by us, individually and collectively, with the death of Lester S. Baskin, late in April. How can one truly express the respect, admiration and full appreciation which this man earned and received during his unusually productive lifetime?

It seems to me, the touchstone of his particular lifestyle was his unrelenting concern for the needs of others. His was, indeed, a genuine concern for his many grateful patients who responded by keeping him more than comfortably busy during his active days.

Alert and sensitive at all times to the needs of others, he endeavored to improve the lot of all who came in contact with him in the many avenues of his activities—in his family, in his professional life, in the business world, in our community and in the world of art appreciation. His great concern for others extended to the very last conscious moments of his life—I was there and I know this to be true.

We shall miss him greatly but we will be comforted by the many legacies of good which he left to us and which make this a better world for all of us.

Ed Kanar, M.D.

WHITHER CONTINUING MEDICAL EDUCATION?



by Marcel Malden, M.D., Chairman
Continuing Medical Education Committee

EDITOR'S NOTE: The current status of CME in Pierce County and its future in a period of continuing cost increases has been discussed by the Society's Board of Trustees and others in the medical community. Dr. Marcel Malden, chairman of the Society's CME Committee, has authored the following article to provide a perspective to this discussion. Your comments are invited.

It has been said that in this century the amount of human scientific knowledge doubles every ten years. This statement would seem to apply also to medicine. The advances in every sphere of medicine are too numerous to list individually and it is not surprising that continuing medical education (CME) has always been important to any conscientious medical practitioner. The fact that Washington State's Board of Medical Examiners has imposed the added constraint of 150 hours of CME every three years as a requirement for re-licensure has served as an additional academic stimulus. Actually, the Washington Re-Licensure Law, thanks to the efforts of the WSMA, seems to be the least restrictive and thus the wisest of the various laws enacted by other

states, as it gives physicians an opportunity to choose from a number of methods of achieving their required CME hours. Such an opportunity to choose has also served as a significant method of saving on CME expense.

The arguments as to whether this law is useful or will be beneficial to patients and physicians are beyond the purview of this article. To be sure, there are no studies which show in a reliable and practical way that continuing medical education of physicians brings about a change in their behavior, an improvement in patient care or a change in physicians' efficiency and competence. For that matter, there are no studies that would incontrovertibly demonstrate that a change in physicians' competence changes the quality of patient care. And yet, whilst the medical educators look for a final measuring stick, we, the practicing physicians, know from our own experience that the acquisition of new information and new skills does change the way in which we treat our patients.

We have clearly demonstrated our ability to acquire new knowledge and put it into practice in relation to revolutionary changes in medicine. This is demonstrated by the way we know how to administer sulfonamides and antibiotics, treat coronary artery disease or practice new surgical methods including organ transplantation. We have also learned the use of such new diagnostic procedures as percutaneous cholangiography, various arteriographies and recently computerized axial tomography, not to mention the use of Doppler devices, ultra-sound and temperature measuring procedures. Although the academics have been unable to demonstrate how we learned to use these innovations, learn we did and one way or the other we did it through a process of continuing medical education.

The Cost of CME

This has not come cheaply. The cost of registration at conventions, courses or workshops has increased astronomically. Where one used to pay a \$40 registration fee, now one may pay \$400. As a result of these increased costs and the new

legal obligation, a great deal of controversy has arisen as to how CME should be financed. Some maintain it should be financed out of the "sick dollar," the money spent by those who are ill and who pay for hospital care. This appears unfair as only a portion of the population would then pay for the continuing medical education of physicians. Others suggest that the expense should be covered by dollars from general taxation funds. The political impracticality of such a move is obvious. And yet, in various areas in the United States and Canada these methods are used to finance CME. Finally, some physicians hold that they must be responsible for their own education out of monies which they earn.

In discussion after discussion, the Washington State Medical Association's Committee on Continuing Medical Education has strongly supported this view. Such a financing mechanism has many advantages. "He who pays the piper calls the tune" is a statement the truth of which has been amply demonstrated. Physician payment leaves the control of CME in the physicians' hands. It in part involves the "sick dollar" since the physicians' earnings come from those who are ill, and also the "tax dollar" as part of the money comes out of taxes because CME expenses are tax deductible. This belief that physicians should be responsible for their own educational expenses has been the guiding principle of our College of Medical Education, Inc. and the Medical Society's Committee on Continuing Medical Education since both were formed in 1968. This principle has been expressed and reaffirmed by the Board of Trustees of the Society on several occasions.

In my view, it is evident that some large educational institutions seem to have unduly benefited from CME programs. Thus, when a well-known university offers a specific course in a desirable location, charges a \$300 registration fee, and has a successful attendance of 300 physicians, the university grosses \$90,000. The expense of producing even a most luxurious course is unlikely to exceed perhaps \$40,000. The remaining \$50,000 becomes a profit which goes directly into the departmental coffers. This financial sleight of hand notwithstanding, such courses seldom are directed at the needs of the physicians who attend them. The quality of learning in such a huge group leaves much to be desired and the speakers often attend to what they may think may be important rather than what the participants really need.

In all fairness it should be added that, while we may feel very critical of these large educational circuses, they are immeasurably better than they were five or ten years ago. I hasten to add that our own University of Washington Program on Continuing Education, under the inspiring chairmanship of Dr. Jack Lein, has never demanded such exorbitant fees from participants. The University of Washington could stand as an example in its efforts at providing physicians in its "catchment area" with a large variety of practical offerings. I feel that over the years the U of W courses have improved tremendously in their variety of contents and methods of presentation. The "Circuit Course" principle has been especially innovative and useful.

In the last year I attended three educational programs held by hallowed institutions in large cities. The titles were most seductive, teachers well known, but the amount of useful knowledge I received was unfortunately much less than anticipated. The cost averaged over \$60 per contact hour (without taking into account the traveling time or the time away from my office).

Our High Quality CME

In Pierce County the College of Medical Education, Inc., with the guidance of the Committee on Continuing Medical Education, has provided high quality educational opportunities related to the perceived needs of Pierce County physicians. The courses have been structured to minimally interfere with the physicians' practice obligations and have required virtually no traveling time. Most of this education has been provided at the cost of approximately \$5 per contact hour for Category I programs. Other Category II programs have been provided without charge to physicians. Both types of programs have had the support of hospitals, which provide the space, administrative staff, etc. Indeed, the physician practicing in Pierce County may never need to leave the county to acquire the 150 hours of educational credit required by the Re-licensure Law. Through the years the College has funded these programs for physicians and outstanding continuing educational opportunities for nurses, allied health personnel and others, only and solely on the basis of registration fees. At no time has the College received any kind of grant or support from any organization.

The College is located on the University of Puget Sound campus and has two employees. Mrs.

Maxine Bailey, executive director, has been with the College virtually from its inception. Initially she worked part time, now she is employed virtually full time and the duties and complexities of her job continue to increase. Mrs. Ginger McElvey is a full-time secretary. Most of you at one time or another have probably met Maxine and Ginger and share my respect for their skill, efficiency, reliability and courtesy. Both of them have contributed immeasurably to the College's success.

In addition to the two full-time employees, a large number of nurses and physicians have generously donated their time to the College. Mrs. Audrey Martin, RN, and Mrs. Pam Shull, RN, and others have been with the College for many years. Dr. Edward Herbert, and more recently Mr. George Stricker and Mr. Lloyd Stuckey of the University of Puget Sound have attended many meetings of the College and have extended a helping hand when called upon. Through the years various physician members of the CME Committee, have attended the at times rather lengthy monthly meetings. Dr. Tom Clark has been with the Committee since its inception and has served as head of the Program Evaluation Subcommittee. Dr. Richard Baerg has taken a particularly active role in the Program Planning Subcommittee and in adapting the programs of the College to the needs of various hospitals. Through the years Doctors Scherz, LaTona, Mott, Pim, H. Zimmerman and many others have unstintingly and generously given their time, experience and knowledge to the success of CME in Pierce County.

At the time when the College was "the only game in town" for nursing and allied health continuing education, course attendance was large and it was a relatively simple matter to earn enough money to cover expenses. However, today the number of nursing and allied health personnel attending the courses is decreasing due to competition from other sources. The resulting financial constraints are not only preventing use of innovative approaches to CME, they are actually threatening the existence of the College.

What About the Future?

The College performs a badly needed function in our medical community. This being so, what should be the College's future? This is a very important question which the physicians in Pierce County will have to answer. At this moment the

College faces a number of choices. With the increasing number of education offerings elsewhere, it could simply cease to exist; or, it could pass from its present independent existence into the fold of a major educational institution, in Pierce County or elsewhere. If it is to remain in its present independent form, responsible to an elected Board of Trustees representing physicians, nurses and allied health personnel, and if it is to provide programs tailored to their specific needs, rather than the dictates of an outside authority, the College will need to achieve much greater financial stability through regular financial support.

The question of the College's continued existence and of possible financial support for it was recently discussed by the Board of Trustees of the Medical Society of Pierce County. The Board and those responsible for the College would greatly welcome your views, interest and concern.

□

UNIVERSITY PLACE MEDICAL CLINIC

Office Space Available For Lease

- 1062 square feet; four examination rooms; two restrooms; waiting room and receptionist/filing area.
- 1,250 square feet; ground level.

Both office spaces offer ample free patient parking and an excellent location. For further information contact:

Clay Anderson or Don Huber
Telephone 564-6069

Huber & Antilla Construction
2607 Bridgeport Way, Suite 2D
Tacoma, WA 98466

AAMA PAGE

STATE AAMA CONVENTION SUCCESSFUL: TWO LOCAL CHAPTER MEMBERS INSTALLED AS OFFICERS

"Conventions? I've heard about conventions. Isn't that when a bunch of people get together and have a good time for a whole weekend?"

Well, you are in for a surprise if that is what you expect from a medical assistants' convention. The Washington State Society of the American Association of Medical Assistants conducted its 11th annual convention in Olympia in May. The convention featured a variety of educational programs and was made particularly noteworthy by the installation of two local chapter members as officers of the state organization. Doris Stansell was installed as state treasurer and Dee Lundstrom, CMA, was installed as state president-elect during the convention.

The convention opened with a luncheon and fashion show by Uniforms Unlimited. Dan Evans, president of the Evergreen State College, and Lyle Watson, mayor of Olympia, welcomed medical assistants from across the state and several representative from the Oregon State Society to the Capitol City. The first educational session followed the luncheon and was a lecture on fiberoptic endoscopy by Dr. Karl Rupert of Olympia. The Board of Trustees met concurrently.

A wine tasting party Friday evening was the social highlight of the convention's first day and delegates were serenaded by the Strolling Strings, a group of young ladies very adept at the violin. An Italian dinner was served and Dr. Edgar Palarea, national physician advisor to the AAMA from Long Beach, California, spoke on "Rising to the Challenge of Excellence," stressing the importance of certification and continuing education for the medical assistant.

The House of Delegates' annual business meeting then got underway and delegates tackled the many items of business that had to be decided that evening. Each county chapter in the state society was represented at this meeting, with

voting power. The delegates' meeting concluded in the early hours of Saturday morning.

Saturday started out with a continental breakfast and a self-assessment examination followed by a general educational session. Mabel Ann Veach, national AAMA trustee from Louisville, Kentucky, spoke on "Professional Growth and Leadership in AAMA."

Dr. Robert Brunton and Dr. Gary Forrest of Olympia presented a lecture and slides on IOL (do you know what an IOL is?). An IOL is an intraocular lens implant, a procedure where the lens of the eye is replaced with an artificial lens. Usually this procedure is done when vision has been impaired due to cataracts.

Clinical pharmacology was the topic of the next lecture. Delegates were told how a drug reaches the stage of being prescribed by physicians, and of the numerous tests and trials a drug must pass before it is considered safe for patient use.

Dr. Lendon H. Smith, ABC's Baby Doctor and author of several articles published in McCall's Magazine, spoke at Saturday's luncheon. Dr. Smith presented his theory on the "Biochemical Origin of Behavior and Its Psychiatric and Social Implications." Tours and shopping were part of Saturday afternoon's program while some delegates answered the questions necessary to qualify for CEU credits for the weekend.

This year's convention was most definitely filled with useful educational sessions and numerous events not mentioned in this report due to space limitations. The Thurston-Mason County Chapter, convention host, did a superb job of bringing a well-rounded program to the delegates. I am certainly looking forward to next year's convention. Won't you join me?

Susan Thornton

*Does your office get the blues
when vacations or emergency illnesses occur?*

**We have the qualified, experienced individuals
who can do**

TEMPORARY ASSIGNMENTS

and keep your office running smoothly!

Call the
MEDICAL-DENTAL PLACEMENT SERVICE
(a membership service of the Medical Society
of Pierce County)

Call
Sondra Sakala, Director

572-3709

*"We specialize in matching the right
employee and employer"*



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

Membership

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:

FIRST NOTICE



W. GARY BECKER, M.D., Allergy and Respiratory Diseases. Born in Pottstown, Pennsylvania, 8/26/40; medical school at Johns Hopkins, Baltimore, Maryland, 1966; internship at Duke University Medical Center, Durham, N.C., 1966-67; residencies in Pediatrics at Duke University, 1967-68, and Sacramento Medical Center, 1970-71; graduate training in Pediatric Allergy and Immunology, Duke University, 1975-77; licensed to practice medicine in the State of Washington, 1971; Board certified in Pediatrics; also practiced pediatric medicine in Olympia 1971-74. Dr. Becker's office of allergy and respiratory diseases is located at Allenmore Medical Center in Tacoma.



WILLIAM E. BILJAN, M.D., General Practice. Born in Milwaukee, Wisconsin, 8/20/44; medical school at University of Minnesota, Minneapolis, Minn. 1969; internship at LAC USC Medical Center, Los Angeles, CA, 1969-70; residency in Psychiatry at Mendocino State Hospital, Talmadge, CA, 1970-72; graduate training in psychiatry, Langley-Porter Neurophys. Inst., San Francisco, CA, 1972-73; and in general practice at Cottage Hospital, Santa Barbara, CA, 1976-77; licensed to practice medicine in the State of Washington 1978; previously practiced medicine in Minnesota and California. Dr. Biljan practices general medicine in Buckley.



SHIRLEY R. DEEM, M.D., Family Medicine. Born in Chicago, Illinois, 5/27/44; medical school at Washington University, St. Louis, MO, 1970; internship at St. Lukes/St. Louis Children's Hospital, St. Louis, MO, 1970-71; licensed to practice medicine in the State of Washington 1973; also practiced medicine in Missouri, Colorado and Seattle. Dr. Deem's family practice is located at Allenmore Medical Center in Tacoma.



JAMES T. GILLESPIE, M.D., General Surgery. Born in Honolulu, Hawaii, 4/4/31; medical school at Stanford University, Stanford, CA, 1956; internship at Walter Reed Army Hospital, Washington, D.C., 1956-57; residency in general surgery at Walter Reed, 1958-61; graduate training in thoracic surgery at Letterman General Hospital, San Francisco, CA, 1965-67; board certified in general and thoracic surgery; licensed to practice medicine in the State of Washington 1977; also practiced medicine in the military, most recently as Chief of Surgery at Madigan Army Medical Center. Dr. Gillespie's office of general surgery is located at Western Clinic in Tacoma.



WILLIAM H. MARTIN, M.D., General Surgery. Born in Clarinda, Iowa, 3/28/41; medical school at University of Illinois, Chicago, 1967; internship at Fitzsimons Army Medical Center, Denver, 1967-68; residency in General Surgery at Fitzsimons, 1968-72; board certified in general surgery; licensed to practice medicine in the State of Washington, 1976; also practiced medicine in the military, most recently at Madigan Army Medical Center as Assistant Chief of General Surgery. Dr. Martin is now practicing medicine at 34616 - 11th Place South in Federal Way.



JOSEPH A. ROBINETTE, M.D., Ob-Gyn. Born in LeMars, Iowa, 5/22/46; medical school at University of Iowa, Iowa City, 1971; internship at Tripler Army Medical Center, Honolulu, Hawaii, 1971-72; residency in Ob-Gyn at Madigan Army Medical Center, 1972-75; licensed to practice medicine in the State of Washington 1974; also practiced medicine as Chief of Obstetrics at Madigan 1975-78. Dr. Robinette has recently opened a private office at 1624 South I Street in Tacoma.

SECOND NOTICE



WILLIAM BRANT BEDE, M.D., Orthopaedic Surgery. Born in Tacoma, Washington 10/29/43; medical school at McGill University, Montreal, Canada, 1970; internship at Presbyterian Medical Center, Denver, Colorado, 1970-71; residency in general surgery, St. Joseph Hospital, Denver, Colorado, 1971-72; additional graduate training in orthopaedic surgery, Montreal General Hospital, Montreal, Canada, 1972-75; licensed to practice medicine in the State of Washington, 1978. Dr. Bede's office of orthopaedics is located at 1624 South I Street in Tacoma.

SOCIETY NEWS BRIEFS

PATIENT BROCHURE RESPONSE HIGH

Initial response to the Medical Society's offering of patient information brochures explaining how patients can help reduce their medical expenses and why medical costs have increased has exceeded projections. Over 20,000 brochures were requested by member physicians in the first week following announcement of its availability. Additional brochures are being produced to meet the high demand.

PHYSICIANS ANSWER TEL-MED REQUEST

Physicians are answering Tel-Med's request for second-year financial support. At the time this *Bulletin* went to press, over \$1,500 in individual contributions had been received by the Tel-Med Society. The need for additional support continues, however, and the Tel-Med Society Board urges all physicians to consider contributing to this community project. Substantial contributions from the Pierce County Hospital Council and Allenmore Medical Foundation, Inc. have been pledged to Tel-Med.

COLLEGE OF CONTINUING MEDICAL EDUCATION RE-ACCREDITATION RECOMMENDED

A WSMA survey team has completed its review of the College of Continuing Medical Education, Inc. and has recommended to the Liaison Committee on CME (LCCME) that the College's accreditation be extended for four years. The survey team made no suggestions for improvement. The LCCME is comprised of representatives from the AMA, AHA, Council of Medical Specialty Societies, American Board of Medical Specialties, and other medical groups involved in con-

tinuing medical education.

TEL-MED SOCIETY OFFICERS ELECTED

Helen Whitney, past president of the Medical Society Auxiliary, has been elected by the Tel-Med Society Board to serve as Tel-Med president. Nicki Crowley has been elected to serve as vice-president, and Robert Whitney, MD, and Tom Curry have been re-elected to serve as treasurer and secretary, respectively. New officers will assume their official duties at the Tel-Med Society's July board meeting.

IMMUNIZATION CARDS AVAILABLE

Physicians who wish to make wallet sized immunization cards available to their patients may obtain these cards from the Health Department. Call 593-4807 to order a free supply of these pre-printed immunization cards for your patients.

CANCER HOTLINE ESTABLISHED

The Washington State Cancer Information Service, a program of the American Cancer Society and Fred Hutchinson Cancer Research Center, has established a free Cancer Hotline. Trained personnel in Pierce County have answered 151 calls from the general public in the past eight months about the causes, treatment and prevention of cancer. The telephone number for Pierce County residents is 383-1665. The service is intended to provide a source of medically accurate and current information about cancer. Operators also answer questions about community services available to cancer patients. Operators make no recommendations as to treatment or diagnostic procedures. The service is available from 9:00 a.m. to 5:00 p.m., Monday through Friday. It is

part of nation-wide network established by the National Cancer Institute.

SPECIAL DIETS AND THE ATHLETE

Recent reports from schools in this area and elsewhere indicate significant abuse of "muscle building" reducing and other diets among school athletes, reports the Public Health/School Health Committee. Dr. Nathan Smith of the University of Washington Sports Medicine Department particularly warns against the high protein (liquid or powdered) drinks which are not needed when an adequate diet is followed and which may cause extensive body damage. Symptoms are commonly severe headaches and bone pain as well as generalized body and digestive symptoms. It has been learned that school personnel on occasion market these preparations. The Committee has urged Pierce County school superintendents to bring this problem to the attention of their coaching staff and physical educators, noting there is no substitute for an adequate diet.

OPERATION INNOCULATION GETS BOOST/ MUCH REMAINS TO BE DONE

Operation Innoculation, the Medical Society's immunization awareness campaign, has received much favorable media support, particularly from the *TACOMA NEWS TRIBUNE*. Support for this community project continues, reports George Tanbara, MD, chairman of the Public Health/School Health Committee. Many physicians are updating their patients' immunization . . . the Public Health Department has increased the number of immunization clinics it holds and is now including evening hours . . . hospitals in the county are updating their inpatient pediatrics immunization records, and updating personnel and their families' immunizations. A few school districts offer immunizations to their students.

A community immunization date is scheduled in July, coordinated through the Public Health Department and school nurses, to be held with the cooperation of the Medical Society. The committee is stressing that everyone in Pierce County be strongly encouraged to maintain and carry a personal immunization record. This can best be accomplished through the encouragement and initiation of the personal physician, otherwise the Health Department or schools. To date, 25 physicians are utilizing government vaccines, notes the committee, encouraging more physicians to do so for their lowered fee, no fee or public assistance patients. Pharmacists will deliver these vaccines to the physicians' offices upon

request.

With the cooperation of the private physician chaos will be avoided when school opens in September, states Dr. Tanbara, otherwise October could mean federally mandated immunizations with inevitable forms, etc.

TEL-MED TELEPHONE VOLUME STRONG

7,606 telephone inquiries were answered by Tel-Med in April, bringing the total number of calls answered since the first of the year to 25,778. New taped messages on suicide, depression and nutrition have been ordered. Brochures for physicians' offices listing the over 280 available taped messages can be obtained by calling TEL-MED, 627-6181.

MEETINGS OF NOTE

Educational Conferences at Lakewood Hospital: Non-Penetrating Thoracic Injuries, by C.C. Chan, MD, June 19; Two films—"A Short Physical Examination of the Articular System" and "The Arthroscope in Diagnosis & Treatment." moderated by Ray Lyle, MD, and Ralph Marx, MD. Both programs begin promptly at 8:00 a.m. and are scheduled to conclude at 9:00 a.m.

Professional staff meeting, Lakewood Hospital, Wednesday June 21, starts at 7:00 p.m.

**We're your convenient
source for WSMA/AETNA
professional liability
insurance.**

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



**PERSING, DYCKMAN
& TOYNBEE, INC.**
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynbee
Wayne Thronson
Bob Sizer

Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks

Auxiliary Page

YEAR FINISHED WITH FLOURISH

YEAR FINISHED WITH FLOURISH

Auxiliary's year finished with a flourish as our members modeled for a fashion show and we enjoyed lunch with door prizes and a raffle to benefit AMA-ERF. Past presidents were recognized and new officers installed.

We can look back with pride on all the activities of the year as we worked to improve the health and quality of life for all people. Our projects included forty presentations of the Handicapped Acceptance Program, publicity for the Immunization Campaign, many hundreds of hours of volunteer work for Tel-Med, and a similar amount of effort compiling the physicians' directory. Our fund raising efforts for Tel-Med and AMA-ERF were highly successful.

General meetings featured speakers on marriage, widowhood, and lobbyists' activities. We revelled at the opportunity to include in our programs evenings out with our spouses three times, including a dance which supports our Student Recognition Project. The bonds between Auxiliary and the Medical Society seem stronger than ever as our president continues to be a member of the Society's Board of Trustees and we have a representative on the Public Health/School Health Committee. New Medical Society Executive Director, Tom Curry, has been extremely helpful to the Auxiliary and has been instrumental in enhancing this feeling of cooperation between the two groups. We knew when we married them that our spouses were terrific people; and it is exciting to realize how much we can accomplish working together.

As I turn the gavel over to President Jo Roller I can assure her an equally successful experience with at least 226 members willing to contribute their talents in whatever way will be most beneficial. Thanks to each of you for all the enthusiasm and good will put forth this year!

Helen Whitney

Meet your new president

... Jo Roller.



Raised in the midwest, Jo attended the University of North Dakota and the University of Minnesota, becoming an x-ray technologist in 1959. She married Gilbert Roller, radiologist, coming to Tacoma in 1973. Her family now includes three children and five step-children, ages 16-24. In addition to Pierce County Medical Society Auxiliary service, Jo has been active locally in the Tacoma Opera Guild, Pierce County Public Health Association, UPS Choral Society and Emmanuel Lutheran Church Choir. She has served as Washington State AMA-ERF Chairman for the past two years, attending state conventions and national workshops in that capacity. Jo likes to be physically active with snow-skiing, water skiing, dancing, tennis and fishing being her favorites. She is also an avid hockey fan.

AUXILIARY OFFICERS 1978-1979

President	Jo Roller
President-elect	Kit Larson
1st V.P. & Program	Nicole Crowley
2nd V.P. & Membership	Alaire Sheimo
3rd V.P. & Historian & Bylaws	Marge Ritchie
4th V.P. & Arrangements	Sharon Lukens
Recording Secretary	Barrie Mott
Corresponding Secretary	Shirley Bourdeau
Treasurer	Shirley Murphy
Dues Treasurer	Dorothy Truckey

A complete listing of 1978-1979 Auxiliary Committee Chairmen will be published in the July BULLETIN.

in Brief

A summary of AMA, medical & health news

MEDICAL STAFFS URGED TO SUPPORT VOLUNTARY EFFORT

Medical staff chiefs of about 7,000 hospitals were urged in a letter from the AMA to adopt resolutions supporting the Voluntary Effort—the national Voluntary Cost Containment Program organized by the AMA, the American Hospital Assn., and the Federation of American Hospitals. The program seeks to reduce hospital revenue increases by 2% a year over the next two years. “The medical profession’s concern for the patient,” the AMA said, “makes it our responsibility to seek the maximum efficiency and economy in health care delivery which can be achieved without detriment to the quality of that care.” Similar letters were sent by the AHA to hospital chief executive officers.

TASK FORCE TO BE ESTABLISHED

A Task Force on Air Emergency Preparedness will be established by the AMA Commission on Emergency Medical Services. The task force will be composed of commission members and will coordinate AMA activities with other organizations and assist in the development of a national plan for air emergency preparedness.

FRAUD OFFICERS ASKED TO WORK WITH STATE ASSOCIATIONS

The AMA urged fraud and abuse information officers in HEW’s ten regional offices to develop working relationships with state medical associations. At a conference attended by representatives of medicine, federal and state government, and the media, the newly designated officials were briefed on their task of informing the public about enforcement of the new Medicare-Medicaid anti-fraud legislation. Government speakers on the program said a strong fraud and abuse prevention program is being planned.

USP RECEIVES AMA GRANT

An AMA grant of \$300,000 was awarded to the United States pharmacopeia to expand its official compendium to include all drugs marketed in the U.S. The next edition of USP

will contain information on drug use and side effects that can be conveyed to the patient by the pharmacist when instructed to do so by the physician. The AMA will work with USP to assure that dispensing information is medically appropriate.

AMA CME OFFERINGS PUBLISHED

Continuing Medical Education courses being offered this year during AMA meetings have been published in a reference catalog for physicians. The “AMA Continuing Medical Education Catalog” also includes information on Videoclinics for hospital or home study, Hospital Medical Staff Training Seminars, Risk Management Seminars, and Negotiations Seminars and Institutes. For a complimentary copy of the catalog write Dept. of Meeting Services, AMA Headquarters.

TV VIOLENCE DOWN

Television violence dropped sharply last year from the record high reached in 1976, according to a study conducted by researchers at the U. of Pennsylvania, Annenberg School of Communications. The study also showed that NBC was the most violent network in the 1977 fall season, while ABC edged out CBS as the least violent. The study was partially funded by a \$98,438 grant from the AMA allocated over a three-year period and reviewed annually. The grant was renewed this year for a one-year period in the amount of \$32,812.

SEASONAL MEETINGS APPROVED

The Board of Trustees approved the concept of AMA Seasonal Meetings designed to offer a wide variety of educational programs. The proposal, prepared by the Council on Continuing Physician Education, provides for two Seasonal Meetings each year, in addition to the Winter Scientific Meeting and the Regional Meetings. The council is developing plans to work with specialty societies in programming the Seasonal Meetings.

PLANNING LAW UPHELD

The U.S. Supreme Court affirmed without opinion the ruling of a lower court upholding the constitutionality of the 1974 health planning law. A federal court in Raleigh, N.C., last August ruled that the law is constitutional and that Congress can attach any conditions it wants to the distribution of federal funds. The AMA, the states of Nebraska and North Carolina, and the North Carolina Medical Society appealed to the Supreme Court. They argued that the law's requirement that states pass certificate-of-need legislation before receiving federal grants was an unconstitutional violation of states' rights.

AMA-ERF GRANTS AVERAGE \$1,000,000

The nation's medical schools this year will receive \$1,150,000 in AMA-ERF unrestricted grants. The grants are made possible by the con-

tributions of individual physicians and medical societies, the fund-raising efforts of medical wishing to support medical education. AMA-ERF grants to medical schools have averaged more than \$1 million annually for the past 28 years.

GOALS RECEIVE NEW PRIORITY

AMA operating revenues and other income were \$60,924,652 in fiscal 1977 while operating expenses were \$46,096,034. AMA EVP James H. Sammons, MD, said, "The operating gain of \$14,828,618 enabled us to continue to replenish our reserves as directed by the House of Delegates during our 1975 Annual Meeting, and permits the AMA to "look ahead with confidence." Dr. Sammons added that the priority now is "to give more attention to the Associations goals over the next decade."



A.T. NORMAN INTERIORS

COMMERCIAL - RESIDENTIAL
OFFICES - MEDICAL & HEALTH FACILITIES
FULL SERVICE - SPACE PLANNING
COLOR & LIGHTING SPECIALISTS

Design Staff:

RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK

MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936

206/627-3139

DESIGN OFFICE - SHOWROOM
524 TACOMA AVENUE SOUTH - TACOMA, WASHINGTON 98401



*Servicing the Medical Profession
Since 1930*

BIDDLE & CROWTHER Co

Physicians and Hospital Supplies

Home Office

910 North 137th - Seattle 98133
(206) 365-9900

First Hill Branch

(for Retail Sales to Patients)

1018 Summit Avenue - Seattle 98104
329-1668

PACIFIC NORTHWEST ORTHOPEDICS

DIVISION OF BIDDLE & CROWTHER CO.
Prosthetic Implants - Orthopedic Supplies
1216 Madison St. - Seattle 98104 - 622-3700

Call us toll-free from anywhere in the
State of Washington - 1-800-562-6994

RESIDENCY PROGRAM COUNTS DOWN

by Craig Goebbel
Public Affairs Coordinator

With the framework for a residency training program long established, the Family Practice Residency Foundation is finally counting down to the July 1st starting date. Roy Virak, M.D., medical director, is busy managing last minute details necessary for a smooth transition from his private practice to full-scale residency training.

Bill Johnson, who holds a PhD. in Medical Education, has been retained to assist Dr. Virak. Bill was involved with the development and start-up of residency programs at Doctors Hospital in Seattle and in Boise, Idaho. He will collaborate with Dr. Virak on curriculum development, resident scheduling and hospital rotations.

Our eight residents (five are pictured with this report) are looking forward to their residency training. Several have already bought homes in the area and some have moved in. All are qualified, motivated, capable individuals with a strong sense of purpose and commitment to Family Medicine. They will have much to offer the program as it gets under way and starts to grow.

As expected, the development of the residency has not been easy. A major concern for some time has been the position of associate director. Traditionally, residency program associate directors have been hard to find. It was feared we would have to start the residency program with the position unfilled. However, Dr. Virak was introduced to Dr. Stu Farber, an instructor at the Medical College of Wisconsin (formerly the Marquette School of Medicine). Stu grew up in

Lakewood, attended the University of California at Berkley and graduated from the University of Washington School of Medicine. His wife, Jan, will be attending the University of Puget Sound School of Law this fall.

Dr. Farber was a member of the first class through a new residency program at a community hospital and thus has a significant amount of knowledge and first-hand experience to offer. After some discussion and negotiation, Dr. Farber was asked to join the residency as temporary associate director. He accepted, and will start with the residency program in late July. He will act as associate director for at least three months and later plans to practice in the Tacoma area. We look forward to his arrival.

Remodeling for the Family Practice office, largely provided free of charge by the Allenmore Medical Corporation, is progressing smoothly and should be complete with ample time for start-up.

The foundation received a pleasant surprise in May. Judge Bertil Johnson, a member of the Board of Directors of the Allenmore Medical Foundation, notified us that we were awarded a \$15,000 grant for our first operating year. We are most appreciative of this generous contribution to our program. It will be put to good use.

Anyone with comments or questions about the program may call 383-2272, our temporary phone number, (after June 13th the permanent phone number will be 383-5858).

FAMILY PRACTICE RESIDENTS

FIRST YEAR



Jessica Hanford, MD



Sarah Isto, MD



Bill Kintner, MD



Kevin Murry, MD

SECOND YEAR



Jack Dutzar, MD

NOT PICTURED:
Second Year

Jeff Boggess, MD
Rod Vaught, MD
Chris Miller, MD

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people like you 24 hours a day



TELEPHONE ANSWERING

RADIO-TELEPHONE

PAGING

RADIO PAGE
572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day when you must be contacted, you get an actual voice message from your personal Pager

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary

For your total communication needs for your practice, contact Fred McPherson or Tom Brakaw — 24 hour service.

535-0332

This direct dictation number provides you with

- 24 hour service
- Experienced medical steno
- Personalized service
- Full-time, part-time or
- temporary service

For more information contact:
Nancy Lenox/537-3921

LENOX TRANSCRIPTION SERVICE

PUGET SOUND COLLECTIONS, INC.



Washington Building
Suite 1301

11TH & PACIFIC AVE.

SERVING THE
● MEDICAL
● DENTAL
● PROFESSIONAL
Since 1960

Member of
American Collectors Assn
Medical-Dental-Hospital Bureau of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

CLASSIFIED

PROFESSIONAL OPENINGS

SPACE

SPOKANE, WASHINGTON -- CUSTOM DESIGN YOUR office space in esthetic newly completed building. 1880 feet remain on top floor, 630 feet on lower level, with elevator. Prime location, adjacent to Spokane's largest shopping center and near Holy Family Hospital. Northtown Park Medical-Dental Center, North 4803 Atlantic, Spokane WA. 99208. Call (509) 328-7720.

For Lease: Across from Ballard Hospital entrance, Small modern bldg. Lower level 700 sq.ft. Upper 1300 sq.ft. includes x-ray & developing rms. Each have lab facilities & plumbed exam rooms + extras. 5409 17th NW. Call 634-1510 or 365-9530, Seattle.

1,000 sq.ft. brand new office near SEA-TAC Mall, available immediately. 3 exam rooms. Ample parking. Call Mr. Quint, 624-4397 or 454-4591.

EQUIPMENT WANTED

Wanted -- Used exam table, reasonable. 572-4255

MISCELLANEOUS

Add a little life to those plain hall or exam room walls with one or a group of Northwest scenes, black & white mounted photos any size to 16 x 20 (or greater). Reasonable. Contact Clif Johnson, 752-8653.

NEW RENTAL: MAUI CONDO at beautiful Wailea Beach, Golf/Tennis membership, 30 feet from pool. Call 1-275-6576 or 275-6314

168' no bank waterfront, 3 lots, 1.6 acres, close-in Horsehead Bay. 1-bedroom cottage, \$127,500. Owner will carry contract. Contact B. A. Bader, M.D., 272-7995 evenings, 572-9247 days.

Two pre-med students want to paint your house this summer. Reasonable. Contact Clif Johnson, 752-8653.

ASSOCIATE MEDICAL DIRECTOR

needed for expanding health care contractor offering consumers comprehensive prepaid health services. Responsibilities will include assisting the Director of the Medical Review Department, directing the activities of the nursing and consulting staff, assisting in cost containment and utilization review functions and liaison with professional medical association.

Candidates must have licensure in Washington, broad practice experience (office and hospital). We offer an excellent benefit package and salary commensurate with professional accomplishment. Please submit curriculum vitae in confidence to:

Blue Cross of Washington and Alaska
Recruitment Supervisor
PO Box 327, Seattle 98111

GENERAL PRACTICE OPENINGS, full time or locum tenens. Salaried positions, excellent benefits including malpractice insurance, Spokane area. Call collect or write Anders Karlman Associates, Physicians Placement Consultants., 10456 SE 98th Ct., Portland OR 97266, (503) 771-9775.

GLENN G. McBRIDE, M.D.

Effective May 30, 1978, Dr. McBride's office will move from
The Medical Arts Building
to
721 Fawcett Avenue, Suite 204
(next to Doctors Hospital)
Phone number remains the same, 272-5385

CLASSIFIED RATES

Effective with this issue, classified and announcement rates will be billed as follows:

Classified -- \$2.00 per line, \$5.00 minimum.

Approximately 40 letters and spaces per line

Block announcements -- \$25.00 3¼ x 2"

Classified and announcement copy may be mailed to: Journal & Bulletin Agency, Inc.

P.O.Box 9471

Seattle, WA. 98109

or phoned to Seattle -- (206) 284-2460

Deadline 25th of month prior to month of issue



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*



Working together is the best medicine.



Avoiding malpractice is often a matter of knowing ahead of time where the pitfalls are. Aetna Life & Casualty wants to help alert physicians and their employees to malpractice traps. So we offer a variety of services and materials at no charge.

For instance, we offer a free videotape service demonstrating some of the frequent causes of malpractice. Our constantly updated selection of brochures offers common sense tips. We also conduct seminars for doctors to benefit from their collective experience.

Aetna employs the know-how of physicians, medical malpractice lawyers and health and safety experts to prepare these services.

This Loss Control and Education Program has been instrumental in allowing Aetna to provide professional liability coverage to physicians on a continuing basis.

We believe covering you against malpractice is not enough. We want to work with you to help you prevent it. Your Aetna Account Supervisor is there to help. Contact:



Tom Fine
Aetna Life & Casualty
800 Washington Building
1325 Fourth Ave.
Seattle, Washington 98101

MEDICAL SOCIETY OF PIERCE COUNTY

813 South K Street - Suite 200

Tacoma, Washington 98405

ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

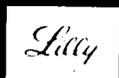
contains no aspirin

tablets

Darvocet-N[®] 100 (IV)

100 mg. Darvon-N[®] (propoxyphene napsylate)
650 mg. acetaminophen

100



700585

Additional information available
to the profession on request from
Eli Lilly and Company
Indianapolis, Indiana 46206

Eli Lilly and Company, Inc.
Carolina, Puerto Rico 00630



TC

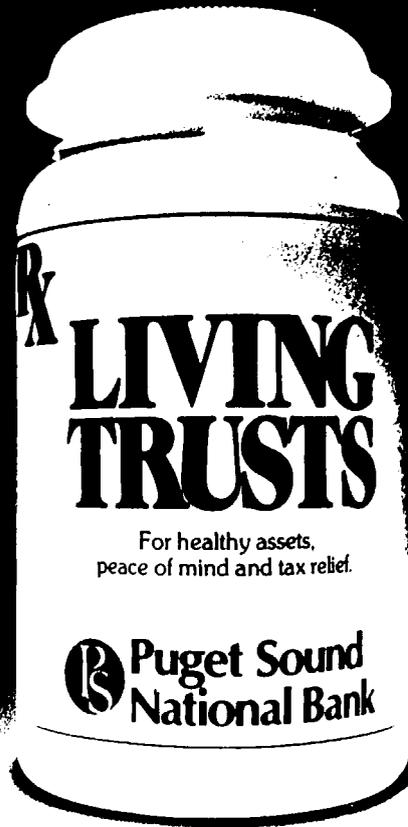
Medical Society of Pierce County

JULY 1978 Vol. XLX, No. 7 Tacoma, Washington



Medication Fears,
DSHS Audits and . . . See page 15

BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

**TRUST DEPARTMENT
(206) 593-3881**

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

Bulletin of the Medical Society of Pierce County



Cover photo courtesy of
Glen G. McBride, M.D.

CONTENTS

page	
5	President's Page
7	Legislative News
8	Health Planning
9	Are You Breaking the Law?
14	Membership - Second Notice
15	Physician-Pharmacy Committee
16	Society News Briefs
18	AMA Briefs
19	Auxiliary
21	Health Department
23	Classified advertising

1978 OFFICERS

LM	President	Ralph A. Johnson, M.D.
	President-elect	Kenneth D. Graham, M.D.
	Vice President	Richard T. Vimont, M.D.
LE	Secretary-Treasurer	Lloyd C. Elmer, M.D.
	Past President	Duncan T. Baer, M.D.
	Executive Director	Thomas J. Curry

TRUSTEES

KG	James M. Blankenship, M.D. (79)
KG	Melvin L. Henry, M.D. (80)
KG	William B. Jackson, M.D. (80)
KG	Richard K. Ohme, M.D. (80)
LE	Charles C. Reberger, M.D. (79)
RAJ	Roy A. Virak, M.D. (80)
	Myra S. Vozenilek, M.D. (79)
	Helen Whitney (78)

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D.
	Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
	<i>Bud Todd - asst</i>

COMMITTEE CHAIRMEN

Budget and Finance	KG	Lloyd C. Elmer, M.D.
Credentials		Richard G. Bowe, M.D.
Editorial		David S. Hopkins, M.D.
Ethics		John Kenman, M.D.
Grievance		D. Ted Baer, M.D.
Legislative		William Jackson, M.D.
Library		Kenneth E. Gross, M.D.
Medical Education		Marcel Malden, M.D.
Physical Fitness		John P. Nagle, M.D.
Program and Entertainment		Richard T. Vimont, M.D.
Public Health/School Health		George A. Tanbara, M.D.
Sunshine		Charles C. Reberger, M.D.
Tel-Med		Robert B. Whitney, M.D.

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

PERSONAL CUSTOMIZED SERVICE

**is available at the
Medical-Dental Placement Service**

*Tired of too many fruitless interviews?
Tired of dealing with staffing problems?*

One Phone Call Can Do It All!

WE WILL ADVERTISE, SCREEN, SEND RESUMES,
AND SCHEDULE A MINIMUM OF INTERVIEWS FOR YOU.

Call Sondra Sakala, Director

MEDICAL-DENTAL PLACEMENT SERVICE

(a membership service of the Medical Society
of Pierce County)

572-3709

"We specialize in matching the right employee and employer."

President's Page

WHAT'S THE PRICE OF A GOOD PHYSICIAN?

The following article, authored by a fellow physician, recently appeared in a Northwest publication. The issues it raises are most timely given the constraints which are increasingly imposed on our profession. I found the article to be thought provoking and hope you do as well.

R.A.J.

In the great debate over rising health-care expenditures, doctors have come under more and more criticism as being the prime movers in bringing on these huge costs. As the argument rages, the doctors themselves have been increasingly attacked as being too rich, accused of profiting at the expense of the sick and the poor and obliquely charged with condoning widespread malpractice and chiseling.

As if to establish their own virtue, many medical leaders obsequiously court the public favor with pronouncements of "Shucks, we don't really care about money and such. All we want is to go on being dedicated doctors."

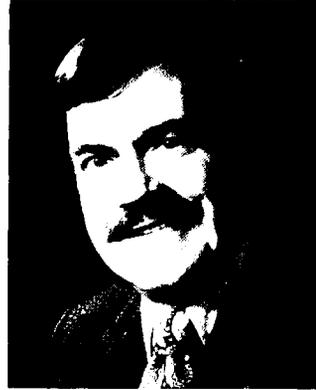
Baloney! While these image-polishers grovel and fawn, the morale of the working doctors throughout the United States continues to reel and fall under the assault from politicians, government regulators and all those who secretly covet a piece of the action in what they perceive as being a lucrative field.

This morale decline is directly tied to a marked diminution in job satisfactions, and these—as with every other working person—are measured by wages, hours and working conditions.

At this moment in history the American doctor is still pretty well-off financially; last year his average earnings were \$53,000. But with the average professional basketball player earning \$113,000, a senior pilot for Delta Airlines earning \$100,000 per year for an 18-hour work week, and a city-employed plumber in San Francisco taking home \$34,000 plus a handsome package of fringe benefits, many doctors are now taking a second look at whether the long years of preparation, the interminable hours, the loss of personal and family freedom, the short earning span, the endless hassles and paperwork, the increased exposure to disease and the rigors of keeping up with new developments, are really worth it when compared with a nice safe 9-to-5 job with security built in.

Yes, I know all about those doctors who reportedly earn a quarter of a million dollars a year, who cheat on Medicare and Medicaid billings and who don't seem to care about their patients any more.

But the majority of my colleagues still work more



Ralph A. Johnson, M.D.

than a 60-hour work week, still get up at night to see their sick patients, and still keep the word "care" in medical care. It is these doctors, far removed from the ivory tower medical centers and from Washington, who bear the brunt of the new "politics of envy" that besets our profession. A decline in their morale can only result in a lessening of the commitment that almost everyone accepts as being the hallmark of the medical profession.

If doctors' wages are momentarily satisfactory, they won't be, just as soon as HEW Secretary Joseph Califano's fee ceilings and treatment "guidelines" are imposed on us.

Locked into a fixed income and bled by inflation, British doctors today earn less than foremen on auto assembly lines, Israeli doctors earn less than stevedores and Russian doctors make less than motorcycle mechanics.

But the public in those countries has simultaneously been conditioned to queue up for hours or days for de-personalized treatment, and for years to obtain necessary surgical operations.

The hours a doctor works must also be computed into his earnings, and must now include the 12 to 15 years of training without an income, the time donated to previously free community and hospital duties and the countless hours spent in preparation for relicensure and recertification now being demanded of us.

But it is in the area of working conditions that American doctors experience their greatest dissatisfaction today. Not in fringe benefits, paid vacations, or retirement plans, but in the right to do for their patients what their training and conscience demand be done—this is the one working condition that attracts and keeps good doctors

Continued →

in the profession, and it is the one being the most eroded by a bevy of cost accountants, insurance actuaries and other sharp-pencil boys whose fiscal decrees are now superseding the medical judgments of the doctors.

It is very well to say we have a health-care crisis in America because we spend \$130 billion annually on all aspects of health. But the doctors get only 17 cents of each of those dollars—before overhead and taxes—yet they are treated as profligate and greedy when these figures are bandied about.

At the same time, however, we spend over \$160 billion annually on recreation and leisure activities in this country, yet no one is damning the golf pros, yacht salesmen or boxing promoters for causing a recreation crisis.

With the rise in affluence and the ravages of inflation, the impetus toward excellence and dedication is becoming harder and harder to find, be it in ribbon clerks, bus drivers, teachers or public servants. At such a time it would seem reasonable there would be a genuine public concern about the need to maintain the morale and dedication of the physicians, even as the quality of other goods and services deteriorates so glaringly.

The eternal enigma, however, is that doctors are traditionally judged by two standards—those of the healthy, who can enjoy the luxury of damning the medical profession in the abstract; and the sick, who want nothing spared in restoring them to the good health to which they are entitled.

My purpose, then, is to suggest that either everyone in our society is entitled to an equal wage commensurate with his or her needs—state socialism—or that doctors are going to have to be given a fresh look by the public, to be assigned a relative value in the labor market when their services are compared with those of day laborers,

plumbers, airline pilots or congressmen in a still-pluralistic society.

The tacit assumption that all doctors are rich, and that they must be expected to lump into the services they render the crushing burden of responsibility for life and death, unlimited overtime, and a long list of chores that are rarely seen by the public, is no longer valid in our time.

Add to these an ever-tightening ring of regulation and restriction, of inspection and increasing demand for accountability, and you rapidly convert a historically conscientious and trustworthy profession into one that is defensive and protectionistic.

It has been said the adversary system compels excellence—this has been the cry of the malpractice attorneys as they nip at our flanks. But as these attorneys, self-seeking politicians, muckraking authors and consumerists rock the pedestal that has traditionally been accorded the healing profession, the automatic trade-off of trust for dedication that has always existed in the doctor-patient relationship has also been weakened. Again, while this is of small concern to the healthy, it can be terrifying to the sick.

There are still many of us doctors who are determined to hold the line on excellence and dedication in our profession, but we know these cannot be imposed by others. We believe there is indeed a price tag on a good doctor, and that society will get what it is willing to pay for.

We are self-conscious and somewhat awkward at the unaccustomed task of bargaining for the worth of our services just like everyone else does, but we are ready to start doing so. What is your opening offer?

Sanford A. Marcus, M.D.
President, Union of American Physicians

NEED TEMPORARY EMPLOYEES?

We have qualified medical personnel who are immediately available for temporary assignments. If there is emergency illness or anticipated vacation time, let us know. Call Sondra, Director, Medical-Dental Placement Service, 572-3709, for Temporary Help.

THE BUREAUCRATIC ETHIC

← face M to page



William B. Jackson, M.D.
Chairman,
Legislative Committee

I recently had the experience of meeting two students at the University of Washington who were majoring in Public Affairs. Like other obscure majors, such as Communications, this academic pursuit was not in vogue in the dark ages of the 1950's when I attended college. As I find myself doing with increasing frequency, I inquired as to the function of this degree in the "real world" and the courses involved. A description followed of a smattering of various disciplines and "decision-making" courses. Upon graduation, one is then prepared for the "real world" as a public servant, ready to tackle the complex problems of society, primarily by legislative regulation. It is with consternation that one considers this growing cadre of "public servants" who are going to save us from ourselves.

In medicine, we encounter these graduate decision-makers as 9 to 5 health planners, health planning staffs, legislative staff, policy analysts, DSHS staff and HEW staff, to name a few. There is a growing suspicion among the legislators and citizens alike, that these entrenched bureaucrats are the real government.

This myriad of "health-planners" direct their efforts primarily toward planning and "problem-solving." The latter process first requires discovering a "problem" and then devising a politically salable solution, frequently a superficial approach to a complicated problem. Fact-finding is limited to compiling data to support the favored "solution" and is rarely used to objectively evaluate the results following implementation of the solution.

I have found that one of the first difficulties encountered when dealing with these bureaucrats is to make the assumption that they adhere to some code of ethics or intellectual honesty such as we have in medicine. In the bureaucratic game, factual data appears to be evaluated primarily for its political use, not for its clarification value.

Three examples, which have recently occurred at various levels of government, are of interest.

1. Jay Constatine, the major staff advisor in health affairs in the U.S. House of Representatives, was recently quoted, "National health insurance is a pumped-up staff issue. There is no groundswell of public support, indeed, congressional mail in support of NHI is almost nonexistent." Yet NHI continues to be presented by the health-planners as the "will of the people."

2. During the last state legislative session, there was consideration of an extension of the Certificate of Need process to physicians' offices. I witnessed the presentation of material by House Committee staff, DSHS, and policy analysts which I was in a position to know was markedly distorted and biased. These health-planners were intentionally presenting biased data to support their favored "solution" to a possible "problem."

3. Last week, bureaucrats at another level of government demonstrated their open hostility to a "solution" by the private sector which was not the government "solution." HEW and congress have been trying to legislate a cap on hospital cost. The private sector, led by the AMA and AHA, have undertaken a Voluntary Effort program of cost containment in response.

Certainly, the government would reward this positive, cooperative action with praise! Wrong again!! The leaders of the Voluntary Effort are asking for an anti-trust exemption from the Justice Department so the nation's hospitals can work together in this effort. HEW has now requested that the exemption be delayed, which would effectively hamstring the private sector's efforts. HEW contends that only mandatory federal controls are the proper "solution" to this problem.

Evidence to the contrary, in the form of a marked slowing of hospital cost increases to a level below the Consumer Price Index increase in the four months since the inception of the Voluntary Effort, will have little effect on their position.

If you are frustrated by the bureaucracy, don't despair. There is good reason for optimism when considering our expanding government. By the year 2000, the conflict between government and the private sector will have ceased to trouble our citizens. At the present rate of government growth, it has been calculated that the private sector will be completely assimilated into the bureaucracy by the end of this century.

In Health Planning

PHYSICIANS RECEIVE SUPPORT

What's the doctor's role in health planning? For approximately 70 physicians in Western Washington, the answer is service on the Puget Sound Health Systems Agency's (HSA) subarea councils and committees. These subarea councils and committees are the grassroots of the many-layered government health planning structure created by the National Health Planning and Resources Development Act of 1974 (Public Law 93-641).

To help physicians serving on the councils and committees, the Washington State Medical Association has added a coordinator of health/medical planning to its staff. The new staff member is Bill Dare, who comes to the WSMA with a master's degree in hospital administration from the University of Washington. Dare, a Seattle native, holds an undergraduate degree from Stanford University, and he also attended the Harvard School of Business.

Dare is based in the Seattle WSMA Central Office, but his territory includes the entire Puget Sound HSA which extends from Whatcom to Pierce Counties and includes Clallam, Jefferson, and Kitsap Counties. There are six subarea councils within that area, each having a majority of consumer representatives on their boards.

PROVIDING INFORMATION

One of the most powerful functions of the subarea councils — through their facilities review panels — is to review and make recommendations on certificates of need. Dare is acting as a resource person for physicians, providing as much information as possible on the process and individual applications. He says, "I am interested in assisting them so that they, in turn, can educate other board members. The CON is obviously very important in shaping the availability and variety of health care services."

In meeting with subarea council members, Dare takes the opportunity to point out why the WSMA is strongly opposed to extension of the CON regulatory process to purchase of expensive equipment in physicians' offices.

Besides being a resource to physicians directly involved in subarea councils, Dare is also providing health planning information to other interested physicians and to county medical societies. He is reporting on the actions of subarea councils, the state hospital commission, certificate of need applications and the WSMA planning priorities. He is also answering questions about PL 93-641, the state Certificate of Need Law, Section 1122 and the divisions within the Department of Social and Health Services dealing with those laws.

REPRESENTING PHYSICIANS' VIEWS

Dare says he frequently attends health planning meetings as a representative of WSMA to follow the planners' action. He commented, "I am spending a lot of time representing the physicians' point of view with health planners. I understand and try to convey that one of the physicians' chief concerns is that quality of care not be jeopardized by health planning." Because subarea council meetings are often set during peak physician practice hours, Dare will sit in for physicians and report back the proceedings.

Dr. Alvin J. Thompson, president of the WSMA, has advocated strong physician involvement in health planning. He said recently, "HSAs will increasingly act as rationers of health care resources, and physicians should have a strong voice in those allocation decisions. That means private initiative in health planning is essential. We must have physician participation in and consultation to the HSA's."

"With Bill Dare on staff at the WSMA, physicians will be able to more effectively influence the subarea councils of the HSA's."

In September, the WSMA Board of Trustees will review the effectiveness of the health planning coordinator program and consider expanding Dare's activities into Southwestern Washington and the hiring of an additional coordinator for Eastern Washington.

**We're your convenient
source for WSMA/AETNA
professional liability
insurance.**

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



**PERSING, DYCKMAN
& TOYNBEE, INC.**
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynbee
Wayne Thronson
Bob Sizer

Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks

Avoid an Unnecessary Lawsuit

ARE YOU BREAKING THE LAW?

Have you or your office staff been unknowingly violating the law? The adjacent quiz will test your knowledge of fair employment practices. The avoidance of a lawsuit may depend upon you, your office manager, nurse or receptionist. If you do any interviewing and hiring/firing in your office, your E.Q. (Employment Quotient) is critical.

Remember, employment regulations concerning fair employment practices are not an option. They are the law. If anyone in a physician's office should inadvertently violate these regulations, the doctor could be liable to a lawsuit. The penalties for discrimination on whatever basis are severe. Know the law.

Here are some key areas where employment regulations are being violated:

APPLICATIONS

Written applications are a major source of illegal employment practices. Review the applications you are presently using in your office. If your application includes questions on marital status, age, spouse's employer, ages of children, height, weight, etc., replace it! These are illegal questions. (NOTE: You may ask for birthdate, but not age.) However, if your application has the caption, in boldface print "THE FOLLOWING REQUESTED INFORMATION IS OPTIONAL" then the applicant may volunteer such information. At the same time, you will be protecting yourself from a charge of asking for discriminatory information.

The importance of updating your applications cannot be overstressed. Illegal applications are being used in many medical offices in Pierce County. They are written documentation of employment discrimination. Don't delay on bringing these forms up to date and into conformity with the law. It only takes one individual who is well-informed as to his or her rights to bring a lawsuit against a doctor whose applications are illegal, usually because of simple negligence or lack of knowledge.

PHONE INQUIRIES

When an applicant calls for an interview, it is illegal to ask the applicant's age, marital status, or place of residence. None of these inquiries are job related. You may prescreen as to job qualifications, i.e., vocational school training, typing speed, clinical skills, previous employment history, etc. Ask the applicant to bring a resume (or an application from the Placement Service) so that some of the information you wish to know can be available as you interview.

INTERVIEWS

Ask only job-related questions in the interview. Specific questions about marital status, spouse's employment, children, contraception, military status, etc., are unrelated to the basic skills or qualifications the applicant possesses for the job. Open-ended questions can sometimes elicit the answers you want or need. You might ask if there is anything which would prevent the person from meeting work schedules or responsibilities. Or you can simply ask the person to tell you something about him or herself. Most individuals will respond and take this opportunity to let you get to know more about them: the person might tell you he/she has grown children and is now looking for a stable job in which he/she can stay for a long time; the person may indicate he/she is expecting to work for a couple of years in order to return to school to complete a degree; or may indicate that satisfactory childcare arrangements have been made. Such responses will help you determine the applicant's reliability and dependability.

A word of caution—avoid overly general inquiries about family, health, handicaps, etc. These are discriminatory. Questions can be framed in such a way as to be job-related and therefore acceptable, such as: "How often were you ill or absent from your previous job?"; or, "Do you have any handicaps or health conditions which would prevent you from carrying out this particular job?" The burden of proof rests upon you as to whether an inquiry is a "bona fide occupational qualification." State law forbids pre-employment inquiries which "convey to the applicant the impression that persons in a protected class will be discriminated against. Inquiries which would convey this impression to a reasonable person are prohibited *whether or not they are made in connection with a discriminatory purpose.*"

HIRING/FIRING

In order to protect yourself from lawsuits, do not fire a person without first giving ample warning that job performance is unsatisfactory. Otherwise, that person might surmise that the discharge is for discriminatory reasons. If you prepared a job description when you hired the person this makes it easier to point to the deficiencies in work performance. Document work performance (tardiness, excessive absences, inability to follow directions, inaccuracy, rudeness to patients, poor attitudes, etc.) with specific examples. If you have adequately documented and reviewed these things with the employee at

established probation or salary review time, then a termination should not be greeted with surprise or a lawsuit.

Most employers find it difficult to do a work performance/salary review when the employee is not performing well and tend to avoid it. But such a review should be done so that the employee is informed of specific failures to measure up to performance expectations. Documentation protects the employer. Then a dismissed employee who files a grievance for discrimination would know that the employer is standing on firm ground if challenged as to reasons for dismissal. In most cases, a lawsuit would never happen if the employee had been adequately prepared for the dismissal.

It costs money to hire the wrong person, to keep him or her for the wrong reasons, or to fire that person for the wrong reasons. Good employment practices and good decisions are economically sound. Having a high E.Q. is the mark of a smart employer.

*Sondra Sakala, Director
Medical-Dental Placement Service*

13. It is best to give a skills-related answer when asked why a person was not hired for a particular position. True__ False__
14. It is acceptable to tell a person that you are looking for an employee who is younger or older than the applicant. True__ False__
15. It is acceptable to tell a person that you cannot consider hiring them because they live in Gig Harbor (or Puyallup). True__ False__
16. It is against the law to ask a woman if she is pregnant. True__ False__
17. It is acceptable to ask a woman if she has made childcare arrangements. True__ False__
18. It is legal to inform a man that you cannot consider hiring him because you prefer to hire a woman. True__ False__
19. It is legal to inquire if a person is a "military wife." True__ False__
20. It is perfectly acceptable to ask a person if they own a car, own their own home, or practice birth control. True__ False__
21. It is good practice to ask general questions about family life, handicaps, health. True__ False__
22. It is legal to ask, on an application, if a person is a citizen. True__ False__
23. It is illegal to ask the names or relationship of persons with whom the applicant resides. True__ False__
24. It is a good policy to tell a person who is not qualified for a position that the job has been filled, even if you are still interviewing. True__ False__
25. It is acceptable to tell an applicant over the phone that your office is no longer accepting applications. True__ False__

TEST YOUR EQ

1. It is illegal to ask for an applicant's birthdate. True__ False__
2. An application should ask for as much personal information about the prospective employee as possible so that the family life can be considered when hiring. True__ False__
3. The protected age group is 40 to 65. True__ False__
4. It is legal to ask for a resume and photograph before employment. True__ False__
5. The legality of applications is important because they have the greatest potential for documentation of discrimination. True__ False__
6. It is permissible in an interview, to ask a person what their spouse does for a living. True__ False__
7. Because doctor's office work is in the health care field, obesity is a valid reason to give for not hiring an otherwise qualified, experienced person. True__ False__
8. It is acceptable to ask for name, address, birthdate, marital status, height and weight and number of children. True__ False__
9. A person who was convicted of a drug offense ten years ago is not required to give this information. True__ False__
10. The safest rule to follow in interviews is to ask only job-related questions. True__ False__
11. It is not wise to ask personal information of an applicant over the telephone, such as age, marital status, where they live. True__ False__
12. It is acceptable to advertise for a Girl Friday or recent graduate. True__ False__

HOW DID YOU SCORE?

- | | | |
|-----------|-----------|--|
| 1. False | 13. True | Give yourself two (2) points for every correct answer. |
| 2. False | 14. False | |
| 3. True | 15. False | 46-50 points—YOU'RE AN EXPERT |
| 4. False | 16. True | |
| 5. True | 17. False | 38-44 points—YOU'RE INFORMED
BUT NEED TO BE MORE SURE OF YOUR FACTS |
| 6. False | 18. False | |
| 7. False | 19. False | 30-36 points—GET A COPY OF THE LAWS AND STUDY! YOU'RE BARELY PASSING |
| 8. False | 20. False | |
| 9. True | 21. False | Under 30 points—YOU FLUNKED!
CALL THE PLACEMENT SERVICE FOR HELP |
| 10. True | 22. False | |
| 11. True | 23. True | |
| 12. False | 24. False | |
| | 25. True | |

If you had trouble with any of the above questions, call or write Medical-Dental Placement Service and ask for a copy of *Employment Regulations*, Vol. II, and "Pre-Employment Inquiries and Screening." Each and every person in your office who does any prescreening, interviewing, hiring or firing needs to be well versed in these laws.

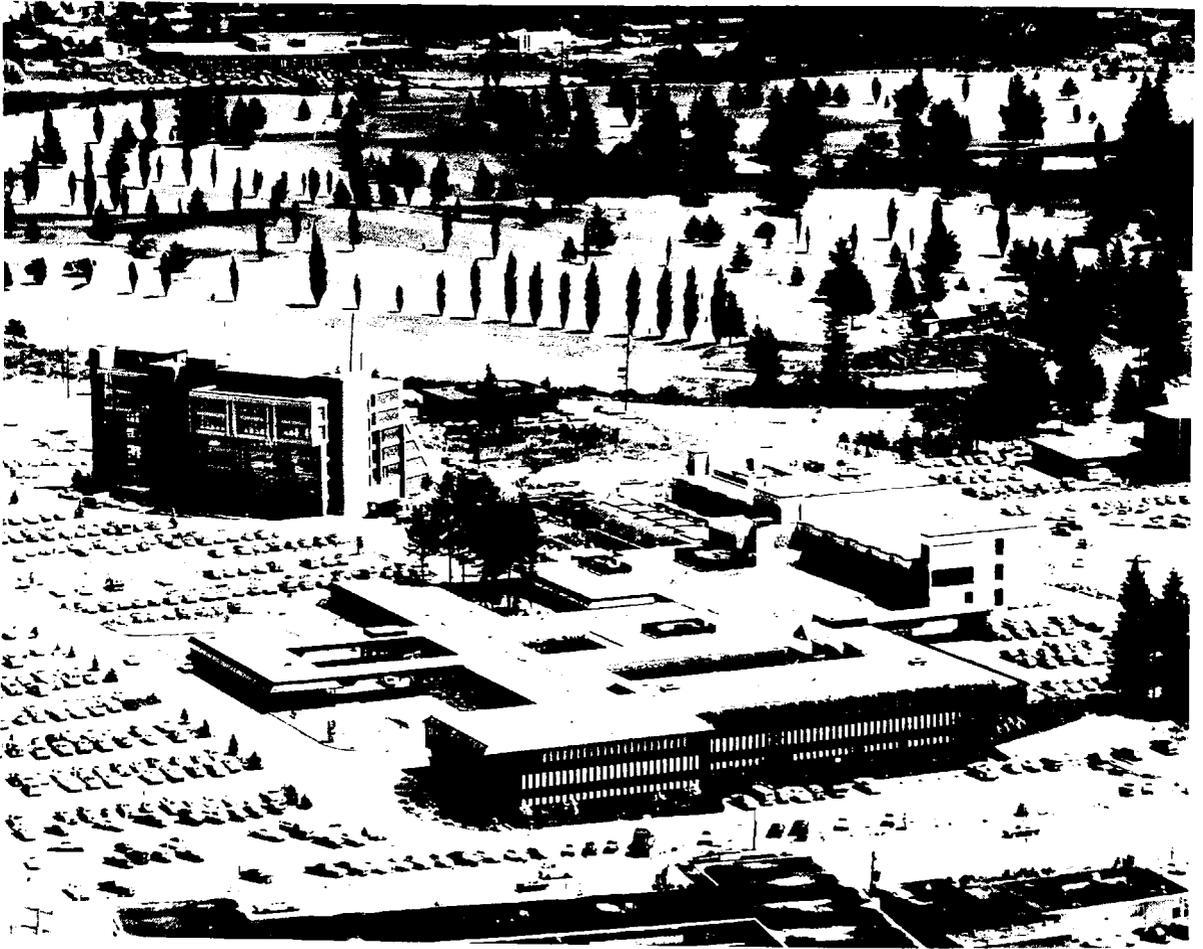
WHAT YOU CAN AND CAN'T ASK (A Sampling)

SUBJECT	FAIR PRE-EMPLOYMENT INQUIRIES	UNFAIR PRE-EMPLOYMENT INQUIRIES
a. Age	Inquiries as to birth date and proof of true age are permitted by RCW 49.44.090.	Any inquiry not in compliance with RCW 49.44.090 which implies a preference for persons under 40 years of age.
	[For age discrimination, RCW 49.44.090 must read in conjunction with RCW 49.60.180 and .200. It limits age discrimination coverage to persons between the ages of 40 and 65, and makes other limitations and exceptions to the age discrimination law.]	
b. Family	Whether applicant can meet specified work schedules or has activities, commitments or responsibilities that may prevent him or her from meeting work attendance requirements.	Specific inquiries concerning spouse, spouse's employment or salary, children, child care arrangements, or dependents.
c. Handicap	Whether applicant has certain specified sensory, mental or physical handicaps which would relate reasonably to fitness to perform the particular job.	Over-general inquiries (e.g. "Do you have any handicaps?") which would tend to divulge handicaps or health conditions which do not relate reasonably to fitness to perform the job.
d. Height and Weight	Inquiries as to ability to perform actual job requirements. Being of a certain height or weight will not be considered to be a job requirement unless the employer can show that no employee with the ineligible height or weight could do the work.	Any inquiry which is not based on actual job requirements.
e. Marital Status	None	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. Whether the applicant is married, single, divorced, separated, engaged, widowed, etc.
f. Photographs	May be requested <i>after</i> hiring for identification purposes.	Request that applicant submit a photograph, mandatorily or optionally, at any time before hiring.
g. Pregnancy (See also Handicap)	Inquiries as to a duration of stay on job or anticipated absences which are made to males and females alike.	All questions as to pregnancy, and medical history concerning pregnancy and related matters.
h. Residence	Inquiries about address to the extent needed to facilitate contacting the applicant.	Names or relationship of persons with whom applicant resides. Whether applicant owns or rents home.



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

Membership

In accordance with Society Bylaws, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of that application is herewith presented to the membership:

SECOND NOTICE



W. GARY BECKER, M.D., Allergy and Respiratory Diseases. Born in Pottstown, Pennsylvania, 8/26/40; medical school at Johns Hopkins, Baltimore, Maryland, 1966; internship at Duke University Medical Center, Durham, N.C., 1966-67; residencies in Pediatrics at Duke University, 1967-68, and Sacramento Medical Center, 1970-71; graduate training in Pediatric Allergy and Immunology, Duke University, 1975-77; licensed to practice medicine in the State of Washington, 1971; Board certified in Pediatrics; also practiced pediatric medicine in Olympia 1971-74. Dr. Becker's office of allergy and respiratory diseases is located at Allenmore Medical Center in Tacoma.



WILLIAM E. BILJAN, M.D., General Practice. Born in Milwaukee, Wisconsin, 8/20/44; medical school at University of Minnesota, Minneapolis, Minn. 1969; internship at LAC USC Medical Center, Los Angeles, CA, 1969-70; residency in Psychiatry at Mendocino State Hospital, Talmadge, CA, 1970-72; graduate training in psychiatry, Langley-Porter Neurophys. Inst., San Francisco, CA, 1972-73; and in general practice at Cottage Hospital, Santa Barbara, CA, 1976-77; licensed to practice medicine in the State of Washington 1978; previously practiced medicine in Minnesota and California. Dr. Biljan practices general medicine in Buckley.



SHIRLEY R. DEEM, M.D., Family Medicine. Born in Chicago, Illinois, 5/27/44; medical school at Washington University, St. Louis, MO, 1970; internship at St. Lukes/St. Louis Children's Hospital, St. Louis, MO, 1970-71; licensed to practice medicine in the State of Washington 1973; also practiced medicine in Missouri, Colorado and Seattle. Dr. Deem's family practice is located at Allenmore Medical Center in Tacoma.



JAMES T. GILLESPIE, M.D., General Surgery. Born in Honolulu, Hawaii, 4/4/31; medical school at Stanford University, Stanford, CA, 1956; internship at Walter Reed Army Hospital, Washington, D.C., 1956-57; residency in general surgery at Walter Reed, 1958-61; graduate training in thoracic surgery at Letterman General Hospital, San Francisco, CA, 1965-67; board certified in general and thoracic surgery; licensed to practice medicine in the State of Washington 1977; also practiced medicine in the military, most recently as Chief of Surgery at Madigan Army Medical Center. Dr. Gillespie's office of general surgery is located at Western Clinic in Tacoma.



WILLIAM H. MARTIN, M.D., General Surgery. Born in Clarinda, Iowa, 3/28/41; medical school at University of Illinois, Chicago, 1967; internship at Fitzsimons Army Medical Center, Denver, 1967-68; residency in General Surgery at Fitzsimons, 1968-72; board certified in general surgery; licensed to practice medicine in the State of Washington, 1976; also practiced medicine in the military, most recently at Madigan Army Medical Center as Assistant Chief of General Surgery. Dr. Martin is now practicing medicine at 34616 - 11th Place South in Federal Way.



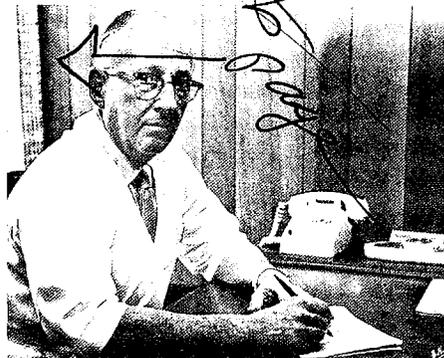
JOSEPH A. ROBINETTE, M.D., Ob-Gyn. Born in LeMars, Iowa, 5/22/46; medical school at University of Iowa, Iowa City, 1971; internship at Tripler Army Medical Center, Honolulu, Hawaii, 1971-72; residency in Ob-Gyn at Madigan Army Medical Center, 1972-75; licensed to practice medicine in the State of Washington 1974; also practiced medicine as Chief of Obstetrics at Madigan 1975-78. Dr. Robinette has recently opened a private office at 1624 South I Street in Tacoma.

Physician—Pharmacy Committee

MEDICATION FEARS, DSHS AUDITS, and PRESCRIPTION PADS

A number of interesting problems common to both the physicians and pharmacists of Pierce County were discussed at the June meeting of the Interprofessional Committee. The non-compliance of some patients because of fear of side effects was one of these problems. It was pointed out by the pharmacists that in some cases the patient just refused to take the medication prescribed because of these fears. In fact, it was agreed by members of the committee that if patients read all that is printed in some of the package inserts, as is advocated by some governmental agencies, the non-compliance rate would be even higher. Certainly lanoxin is a "poison." But is this any reason to deny its use in congestive heart failure? The pharmacist members of the committee agreed that a few of their group tend to go "overboard" in describing these warnings and those who do will be counseled, when possible, by their peers. Physicians are asked to make note of any pharmacy which does tend to overemphasize such warnings. A call to Don Hebert at Rankos Pharmacy or Andy Anderson at A and D Pharmacy should correct the problem.

The Department of Social and Health Services is currently auditing the prescription files of pharmacies in the State of Washington. DSHS has and is trying to go into physicians' offices to examine the records of DSHS patients. **REMEMBER:** The physician is NOT protected for releasing any information about a patient nor the medicine prescribed for that patient unless he, the physician, is provided with a release, signed by the patient, authorizing him to disclose such information. The physician is on solid legal ground to refuse such information without a release and this has been confirmed as recently as May, 1978 by the Superior Court of Thurston County which in effect has ruled that if DSHS wants to obtain such information from a physician it must first have a law enacted to protect the physician in this regard. **REMEMBER ALSO:** DSHS may present you with an "agency subpoena" for such information or to examine your records. This subpoena does not protect you as a physician. Only the subpoena of a court of law will protect you in this regard.



Herman S. Judd, MD

And while we are on this subject of privileged communication, it might be well to point out that unless a patient signs the release of information line at the top of the request for information by the Department of Motor Vehicles for renewal of the driver's license, completion of this form is a violation of privileged communication and the doctor may be liable. The fact that the patient brought or mailed the form to you does not, of itself, constitute authorization for release of information by that patient.

And lastly but not least, don't leave your prescription pads where patients can pick them up. Two doctors have recently lost their pads and had to call the "Hot Line" to stop unauthorized prescriptions from being filled.

Other items of business discussed by your committee will be reported in other issues of the *Bulletin*, such as the dangers in using preprinted prescriptions, contacting physicians after office hours for refills, the problem of the patient who never picks up his prescription or the one who takes two different prescriptions to two different pharmacies, etc.

Your Interprofessional Committee composed, as it is of physicians and pharmacists of Pierce County, is working to point out problems involving the two professions and to suggest solutions to these problems. Any comments, suggestions or questions you have as a member of either profession will be always welcomed. Contact Don Hebert (Rankos Pharmacy), Andy Anderson (A&D Pharmacy), Chuck Zwier (Firs Pay and Save) or your physician members, Del Lambing, Terry Torgenrud or Herman Judd.

SOCIETY NEWS BRIEFS

A summary of Medical Society, and local medical and health news

WSMA PRESIDENT-ELECT TO SPEAK AT SEPTEMBER MEETING

John A. Moyer, M.D., of Spokane, WSMA President-elect, will speak at the Medical Society's General Membership Meeting, Tuesday, September 12. Dr. Moyer will express his views of issues impacting on the profession and receive your input on the eve of the WSMA Annual Meeting. The financial status of the College of Continuing Medical Education also will be discussed. Society members will be asked to consider measures designed to address the College's financial difficulties.

The meeting will be held at the Elks Club, 1965 South Union, with a buffet dinner preceding the business portion of the meeting. Reserve Tuesday, September 12, to attend this important meeting.

PHYSICIAN DESK REFERENCES NEEDED

The Division of Health, Tacoma Public Schools, has requested physician donations of recently outdated PDR's to be used as a reference for school nurses. Many patients of school age are on medications which may affect their school performance, notes Roger Meyer, M.D. The PDR will assist schools in being more alert as your "daily observation post" for children. Current school year budget difficulties preclude purchase of the PDR's.

The School Health/Public Health Committee of the Medical Society will be responsible for distribution to each of the 15 school districts within the county. A copy of the new YOUTH RESOURCE GUIDE for your office use will be made available in exchange for the PDR as long as the supply lasts. Please leave PDR's at the front desk of either Mary Bridge Hospital or Tacoma General Hospital in Dr. Meyer's name for pickup.

YODER MEMORIAL LECTURE SPEAKER SELECTED

Harry W. Buncke, Jr., M.D., will deliver the 1978 Edwin C. Yoder Memorial Lecture at St. Joseph Hospital and Health Care Center. Dr. Buncke, a plastic and reconstructive surgeon, will speak on the state of the art in the field of microsurgical transplantation and re-plantation. The annual lecture is presented jointly by the Edwin C. Yoder Memorial Trust and St. Joseph Hospital. The lecture will be held on November 17.

SOCIETY OFFICE MOVES TO SUMMER HOURS

For the duration of the summer the Medical Society office will open at 8:30 a.m. and close at 4:30 p.m., Monday through Friday. The Society will continue its record-a-message service for member physicians calling the private physicians' line, 572-3667, before 8:30 a.m. or after 4:30 p.m.

CAN YOU SPARE A BAUMANOMETER?

The Family Practice Residency Foundation is seeking equipment for its residency program. Physician and hospital support to date has been commendable, however, more equipment is needed. The residency program will accept any piece of equipment in serviceable condition. All donated equipment will be acknowledged with a letter and inventory of items received to allow itemization of the gift as a legal tax deduction at fair market value. Please contact the Foundation at 383-5858 to arrange for pickup.

WSMA ANNUAL MEETING DATES SET

The WSMA Annual Meeting will be held in Spokane from Wednesday, September 20 through Sunday, September 24. All county society and WSMA members will receive information regarding this important meeting in the near future and an outline of major issues to be considered at the Annual Meeting will be contained in a future issue of the Bulletin. Issues also will be reviewed at the Medical Society's September General Membership Meeting. County Society delegates to the WSMA are listed on page 3 of the *Bulletin*. Make your voice heard. Schedule a free evening for Tuesday, September 12 so you can express your views.

MEDICAL LIBRARY PROVIDES ACCESS

Your access to the medical literature through the network of Biomedical communication—hospital libraries, the Pierce County Medical Library, Pacific Northwest Regional Health Sciences Library, National Library of Medicine, and the British Lending Library—begins in Pierce County through your medical library. Comprehensive library services include literature searches, bibliographies, inter-library loans, and Med-line searches (literature retrieval by computer). The library is open Monday through Friday from 8:00 a.m. to 5:30 p.m. A key is available upon request for library use at other times. For additional information or assistance contact M. VonBruck, librarian, 572-5340.

SOCIETY NEWS BRIEFS continued

LOCAL PUBLICATIONS OF INTEREST

"Sports Medicine II" 1978 . . . A compilation of articles concerning food and sport, exercise and energy, managing athletic emergencies and many other pearls collected from national literature (300 pages). \$5.00 per copy, supplies limited. "Food and Health" . . . a collection of information and articles concerning foods and behavior, diets, health problems related to nutrition, feeding the handicapped child, educational programs and bibliography (200 pages), \$4.00 per copy while they last. "The Child and the Law" . . . a recent publication containing practical details about current state and federal laws concerning child abuse, rights and privacy for children, juvenile justice, PL-94-142/Education of the Handicapped, and a chapter giving important details about teenage pregnancy, complete bibliography included (300 pages), \$5.00 per copy. If you wish to purchase copies of the above, send your check, payable to Tacoma Public Schools, to The Division of Health, c/o Roger J. Meyer, M.D., Tacoma Public Schools, P.O.Box 1357, Tacoma, WA 98401.

DEPARTMENT OF SURGERY RECOGNIZED

The Medical Society's Board of Trustees, at its June meeting, approved a request from the divisions of surgery of Allenmore, Tacoma General, Saint Joseph's and Mary Bridge Childrens hospitals to combine as the Pierce County Department of Surgery (Mary Bridge had not formally agreed to the departmentalization at the time of the Board action). Meetings of the Department of Surgery will rotate on a monthly basis.

Before you next dictate
remember:

LENOX TRANSCRIPTION SERVICE

- Personalized service
- Direct dictation line
- Experienced medical steno
- Full-time, part-time, or temporary service

24 hour dictation line

535-0332

For more information contact:
Nancy Lenox/537-3921

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
 - DENTAL
 - PROFESSIONAL
- Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

in Brief

A summary of AMA, medical & health news

SECOND-OPINION PROGRAM TO START

HEW will inaugurate its surgical second-opinion program this summer. The promotional campaign to encourage patients, especially Medicare and Medicaid patients, to obtain a second opinion before deciding on surgery will include 60-second TV spot announcements, four-to-five minute radio "dramas" and five million leaflets to be enclosed with social security checks in selected areas. A national toll-free "hot line" will also be set up. HEW plans to spend \$460,000 for the leaflets, \$25,000 for the TV and radio promotion, and \$130,000 a year for the hot line.

HEW IGNORES HUMAN COSTS SAYS AMA

In its attempt to find avenues of "cost containment" for the government HEW has again ignored overall human costs, the AMA said in a letter protesting changes in the Medicare Carriers Manual. The changes, announced by Transmittal 628 from the Health Care Financing Administration, require carriers to consider all laboratory services the same in determining reasonable charges and place a \$3 national ceiling on handling charges when specimens are referred to a laboratory. The AMA, calling for withdrawal of Transmittal 628, said HEW's action is misleading to Medicare beneficiaries and is contrary to the spirit and intent of the recently issued Executive Order on rule-making procedures.

JAIL EFFORTS HONORED

Public relations efforts for the AMA's Jail Program were honored with the Publicity Club of Chicago's highest award. Gilbert F. Martin, director of Magazine Relations in the AMA's Office of Public Relations, received the Edwin J. Shaughnessy Award for a campaign that make "the foremost contribution to improvement of the quality of life in our society." Martin also received an honorable mention for the campaign as an "external public relations" effort. The AMA's Program to Improve Medical Care and Health Services in Correctional Institutions, funded by a grant from the federal Law Enforcement Assistance Administration, is developing a national accreditation system for jail medical programs.

AVAILABLE FROM AMA:

Practical guides for rating physical impairment of the various body systems are contained in *Guides to the Evaluation of Permanent Impairment*. Cost of the book, OP 298, is \$10 each for 1-10 copies; \$9 each for 11-49 copies; and \$8 each for 50 or more. Write AMA, P.O.Box 821, Monroe, Wisconsin 53566.

HEW TO APPEAL COURT RULING

HEW representatives told the National Professional Standards Review Council that a U.S. District Court ruling would be appealed. The court ruled recently that a Washington, D.C. PSRO is an agency of the government subject to disclosure provisions of the Freedom of Information Act. The HEW officials said legislation to exempt PSROs from the act's provisions is being prepared. The Ralph Nader Health Research Group had filed suit in April to obtain the PSRO's records.

AMA-ERF LOANS TOTALED

More than 5,000 medical students and physicians-in-training borrowed more than \$7.3 million last year through the American Medical Association Education and Research Foundation. Loans totaled \$7,348,000 for an average of \$1,422 each. Since the programs began in 1962, the AMA-ERF has arranged and guaranteed loans amounting to approximately \$85 million.

BILLS OPPOSED BY AMA

Bills to centralize the evaluation of the use and cost effectiveness of medical technology and practice were opposed by the AMA in testimony before the House Commerce Subcommittee on Health. The AMA said the two bills (HR 4869 and HR 10839) "not only could lead to a stifling of research and other creative initiatives that are necessary to improve the quality of medical services available to patients in the future, but also could serve to regiment and limit physician options in providing treatment to patients on an individualized basis."

CONGRESS URGED TO REVIEW AGENCIES/PROGRAMS

Congress should undertake a broad review of regulatory agencies and programs "to untangle the bureaucratic web which appears to be trapping every American citizen," the AMA told the Senate Committee on Rules and Administration. Commenting in support of the concept of the proposed Sunset Act of 1977 (S 2), which would subject all federal programs to review and budget reauthorization at least once every six years, the Association also urged consideration of the changes suggested in the AMA draft bill on rule-making reform (HR 5633). "We believe," the AMA said, "that a coordinated and comprehensive program to oversee the activities of the regulatory agencies and programs is long overdue and we encourage you to consider appropriate legislation to that end."

Auxiliary

CHAIRMEN NAMED

First of all, thank you Helen Whitney for sailing a smooth course this last year as our very able president.

The final event of the Auxiliary's year was the Fashion Show Luncheon held at Oakbrook Country Club in May. Fashions by Lulu were real swingers and the models were terrific. Thank you, Chairmen Dolores Havlina, Lona LaTona, and Aija Ozolin for an excellent job. Thanks to Barbara Wong for making the neat owl and lovely flower arrangement for the raffle. Also thanks to Maryln Baer and Judy Brachvogel for the beautiful rhododendron decorations. The lunch was delicious, and it was a fun day. It was nice to be able to bring guests.

The physicians' directory is out. Kit Larson and her hard working committee are arranging for delivery. Copies for sale are at the Medical Society office. Spares are available to newcomers and those who failed to order ahead.

Helen Whitney is gathering delegates for the State Auxiliary Convention to be held at the Ridpath Hotel in Spokane on September 21-23. We are eligible for nine delegates and nine alternates (plus our past president) so anyone interested please contact Helen.

Our new Tel-Med Chairman is Glenna Blackett. She needs volunteers and also people to act as substitutes. Please contact Glenna at 752-3970.

Betty Bahn has cookbooks available through the various depots. Call Betty to find the closest depot to you.

A Project Awareness workshop was recently held by Sharon Lukens and Janet Fry, coordinator. They need people to do presentations.

The Big Sister program will be instituted this summer. Debbie McAlexander is chairman. Em Stern is Newcomers Chairman. If you are aware of any new physicians moving into the area please contact Debbie, 588-9797, or Em, 582-2432. People will be called as soon as names are received. The Welcome Potluck is planned for the Fall for newcomers and their big sisters. The big sister will bring the newcomer and a potluck item from our cookbook.

Program possibilities are being explored by Nikki Crowley. If you have any ideas please call Nikki, 565-3767.

Sharon Lukens, Arrangement Chairman, urgently needs help on homes to open for meetings. If you can help please call Sharon, 564-3540.

Immunization Awareness stickers are available through Kay North, 759-8928.

Sunshine Chairman Kathy Miskovsky's summer phone number is 1-265-3370.

The Newsletter should be distributed in July and it will contain an envelope to be mailed to Dottie Truckey for renewing membership. Please return dues promptly.

Joan Sullivan

1978 STUDENT RECOGNITION AWARD WINNERS

Each year an award based on scholarship and leadership is given to the most outstanding graduating son and daughter of a physician in private practice in Pierce County. The Student Recognition Committee of the Medical Society Auxiliary has selected Elizabeth Susanne Pearson and Loren Bryce Betteridge to receive the 1978 recognition awards.

Elizabeth Susanne Pearson, a graduate of Clover Park High School, is the daughter of Dr. and Mrs. Don C. Pearson. She plans to attend Carleton College where she will major in languages and mathematics.



Loren Bryce Betteridge, a graduate of Curtis High School, is the son of Dr. and Mrs. Bryce Betteridge. He plans to attend Brigham Young University majoring in medicine.



AUXILIARY COMMITTEE CHAIRMEN 1978-1979

AMA-ERF	Jan Thiessen, Cindy Hammer
Artist Resource	K. Tanbara, L. Jackson, B. Wong S. Flood, A. Hilger, J. Brachvogel
Auxi-Quad Luncheon	Nancy Spangler Communications
Newsletters	Janet Fry
Bulletin	Joan Sullivan
News Media	Cindy Anderson, Penny Detje
Community Health	Kay North, Elsie Parrot
Cookbook Promotion	Betty Bahn
Finance	Jane Gallucci
Handicapped Awareness Liaison	Janet Fry
Joint Installation Dinner	Marny Weber
Legislative	Donna Roper, JoAnn Johnson
Mailing	Gloria Virak
Newcomers	Em Stern
Big Sister	Debbie McAlexander
Big Sister Coordinators	D. Wickstrom, D. Havlina G. Smith, S. Vitikainen, S. Weiss, L. Bede J. Judd, J. Gillespie, J. Soronen
Nominating	Helen Whitney
Pierce County Health Council	Nadine Kennedy
Project Bank	Kit Larson
Student Recognition	M. Mandeville, J. McDonough
Sunshine	Kathy Miskovsky
Tel-Med Coordinator	Glenna Blackett
Telephone	Shaaron Anderson
Telephone Area Chairmen	V. Smith, N. Bageant, J. Sullivan, B. Graham, J. Iverson

MEDICAL CROSSWORD PUZZLE*

By Mr. Abe A. Brown

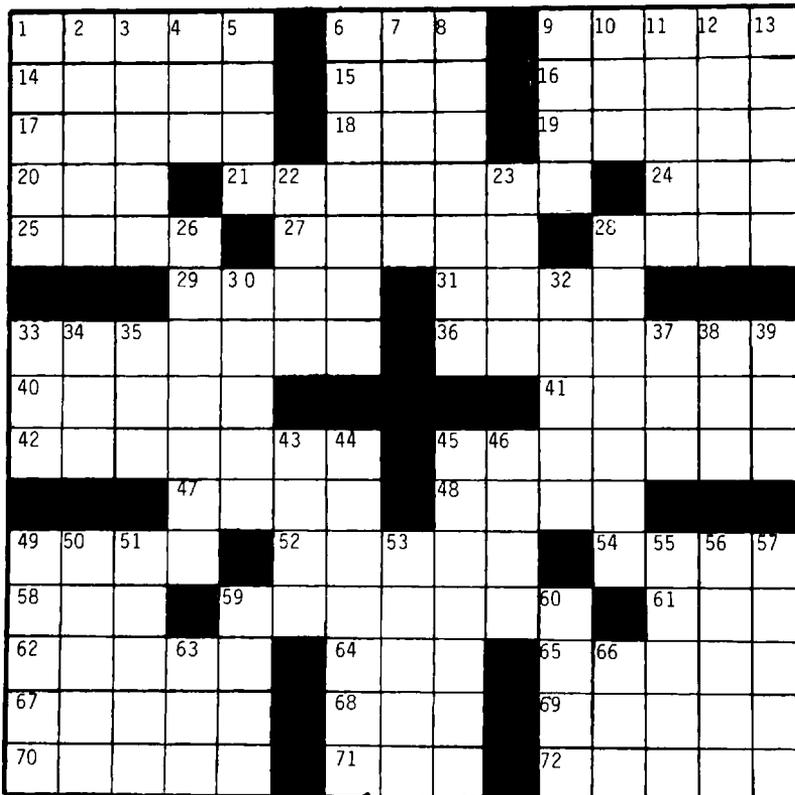
Across

1. Pertaining to the eye
6. Lower extremity
9. Bell's _____
14. Highways
15. A hole in one
16. Ovum within the graafian follicle
17. Fluid secreted by the liver pl.
18. With: prefix
19. Himalayan kingdom
20. Prefix signifying isomeric with
21. Soon
24. Uranium, thallium: symbols
25. Relating to a tendon: comb. form
27. _____ operandi
28. Employs
29. Mineral springs
31. A hideout
33. A secondary protein derivative formed during process of digestion

36. Union of two solids to form a liquid
40. Sign of the zodiac
41. Concurrences
42. Tranquil
45. To make impure
47. Transformation: prefix
48. Imitated
49. Gangrenous stomatitis
52. Guided missile: pl.
54. On the outside: prefix
58. Relating to an egg: comb. form
59. Paralyzed
61. Costa
62. Wash lightly
64. Iodine, molybdenum: symbols
65. Escape
67. Viscid secretion of the mucous membranes
68. Allied Youth League: abbr.
69. Acid fruits
70. An idiot
71. Left sacro-anterior position of the fetus: abbr.
72. Fall into disuse

Down

1. Bony cavity that contains the eyeball
2. Unit of viscosity of a liquid
3. Part of a molar tooth
4. Suffix signifying a binary chemical compound
5. Cesium, antimony: symbols
6. Milk sugar
7. Framework of a red blood corpuscle
8. A reproductive bud
9. Tissue connecting two parts of an organ
10. Hail!
11. _____ vulgaris
12. Blackboard
13. Cries out
22. Unit of radiation emanation in solution
23. Son of Isaac
26. Tumor composed of bone tissue
28. Skin lesion occurring in uremic poisoning
30. An armed band
32. Substance in milk which oxidizes nitrite to nitrate
33. Golf term
34. Sooner
35. One of the spots on dice
37. Xenon, argon: symbols
38. Internal: abbr.
39. Suffix used in forming names of enzymes
43. Feminine name
44. A flower: pl.
45. Smallpox
46. Himself: Lat.
49. Outline which defines aspects of the cranium
50. The mature ovum
51. Chop up
53. Any odor
55. Spasmodic muscular contraction
56. Rise and fall of ocean surface
57. Excessively fat
59. Plague
60. Slight depression or dimple
63. Center of the solar system
66. A way or passage



For answers to this crossword puzzle, see page 23.

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

General Surgeon seeking opportunity in general practice. Residencies at University of Minnesota, Minneapolis, and Veterans' Administration Hospital, Minneapolis, Minnesota (1966-69). Former staff surgeon at North Memorial Hospital and other hospitals in Minneapolis area (1970-75). Surgeon, Fairchild USAF Hospital, near Spokane (1975). Fellow American College of Surgeons. Listing 701.

General Internist available July, 1979. Interested in a group practice near a metropolitan area. Internship at Framingham Union Hospital, Massachusetts, (1975-76). Residency at the Medical College of Wisconsin affiliated hospitals (1976-79). Diplomate of National Board of Medical Examiners, licensed Wisconsin physician, associate member of American College of Physicians. Listing 702.

OB/Gynecologist interested in entering private practice in the Tacoma area in autumn, 1979. Desires private practice in OB/Gyn in a partnership or group. Graduate Baylor College of Medicine, Houston. Now completing 4-year residency in OB/Gyn at Baylor (including one year of varied medical surgical OB/Gyn Pediatric experience, three years of experience in public and private hospitals). Junior fellow American College of Obstetrics-Gynecology. Member, American Fertility Society. Listing 703.

LETTERS

Dear Editor:

I am writing to comment on the article in the latest *Bulletin* by Dr. Malden regarding the activities of the College of Medical Education. The discussion of the need for continuing medical education and the relationship of our College to fulfill this need was extremely well done and little need be added. I would hope that the Society as a whole would endorse the concept of this local endeavor and would willingly subscribe to an assessment to cover the added costs as well as endorse a modest increase in tuition fees.

The College courses have provided a meaningful inexpensive educational opportunity in the past and with continued support will be able to do so in the future. The Committee on Medical Education is to be congratulated as their efforts represent one more attempt to provide a few building blocks in our endeavor to raise the medical activities of Pierce County to the level of a medical center.

G. J. Roller, MD
Chairman, Cancer Committee
Tacoma General Hospital

From the Health Department

NEW VD REPORTING FORM INTRODUCED

The confidential Venereal Disease Case Report Form (DSHS 13-168) has recently been revised and was distributed to local health departments during the latter part of December, 1977. The new comprehensive form expands the diagnostic categories of gonorrhea to include acknowledgement of asymptomatic disease, gonococcal PID and specific disseminated gonococcal infections.

While the case report form used in public facilities will be a two-part document, the form used by private physicians has an additional segment that will provide the reporting physician with specific information that previously was not readily available including: The Washington Administrative Code relating to the reporting of VD; mailing instructions; a list of available supportive services; a current literature section; a special medical alert section on Penicillinase Producing *Neisseria Gonorrhoea* (PPNG); and an enlarged space for diagnostician commentary. Physicians will also be supplied with window envelope mailers designed specifically for the new case report forms.

Health Department field workers are now in the process of contacting all private physicians in Tacoma and Pierce County to deliver new forms and to answer any questions they might have.

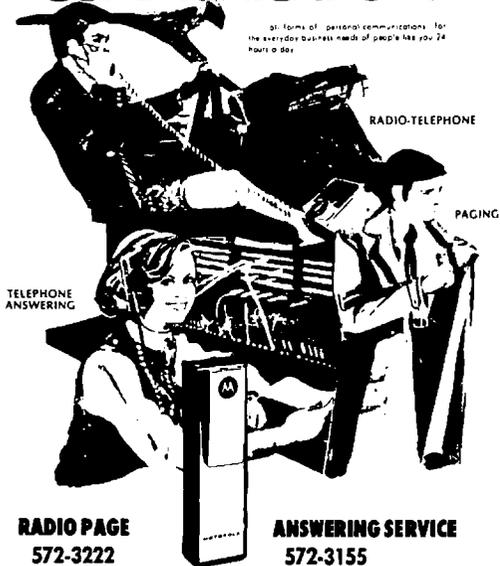
The STD/VD Clinic is open Monday through Friday from 8:00 a.m. to 4:30 p.m. to assist physicians in the following areas: contact tracing, treatments, VDRL's, and darkfield examinations. (Physicians referring patients for darkfield examinations are asked not to pre-treat.) For further information call 593-4063.

J. DANIEL WANWIG, M.D.

Announces the opening of his office
for the practice of Internal Medicine
at Allenmore Medical Center, Suite A303
South 19th and Union Tacoma, Washington 98405
Telephone (206) 272-3031 Exchange: (206) 272-3166

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people who are 24 hours a day.



RADIO-TELEPHONE

PAGING

TELEPHONE ANSWERING

RADIO PAGE 572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day... when you must be contacted, you get an actual voice message from your personal Pager.

ANSWERING SERVICE 572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw — 24 hour service.

UNIVERSITY PLACE MEDICAL CLINIC

Office Space Available For Lease

- 1062 square feet; four examination rooms; two restrooms; waiting room and receptionist/filing area.
- 1,250 square feet; ground level.

Both office spaces offer ample free patient parking and an excellent location. For further information contact:

Clay Anderson or Don Huber
Telephone 564-6069

Huber & Antilla Construction
2607 Bridgeport Way, Suite 2D
Tacoma, WA 98466



A.T. NORMAN INTERIORS

COMMERCIAL · RESIDENTIAL
OFFICES · MEDICAL & HEALTH FACILITIES
FULL SERVICE · SPACE PLANNING
COLOR & LIGHTING SPECIALISTS

Design Staff:

RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK

MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936

206/627-3139

DESIGN OFFICE · SHOWROOM
524 TACOMA AVENUE SOUTH — TACOMA, WASHINGTON 98401



*Servicing the Medical Profession
Since 1930*

BIDDLE & CROWTHER Co

Physicians and Hospital Supplies

Home Office

910 North 137th — Seattle 98133
(206) 365-9900

First Hill Branch

(for Retail Sales to Patients)

1018 Summit Avenue — Seattle 98104
329-1668

PACIFIC NORTHWEST ORTHOPEDICS

DIVISION OF BIDDLE & CROWTHER CO.
Prosthetic Implants — Orthopedic Supplies
1216 Madison St. - Seattle 98104 - 622-3700

Call us toll-free from anywhere in the
State of Washington — 1-800-562-6994

CLASSIFIED

PROFESSIONAL OPPORTUNITY

Primary care physician to serve as medical director, MEDEX Northwest. Responsibilities: oversee teaching of 20 physician assistant students; work with staff on curriculum development and preceptor recruitment; maintain teaching relationships with community hospitals/clinics. Opportunities include clinical teaching in medical school, clinical practice, research, consultation in international manpower development. Qualifications: eligible for medical licensure in Washington. Board eligible or certified in family medicine, pediatrics, or internal medicine. Clinical practice and teaching experience desired. Academic rank dependent upon qualifications. Salary, \$25,000 to \$30,000 commensurate with experience and training. Send resume to Robert Harmon, M.D., MPH., Director MEDEX Northwest, 1107 NE 45th, Room 340, Seattle, WA 98105.

For an unforgettable experience, hike in the Alps of Austria, Switzerland and Italy with Erselle Eade, Sept. 18 - Oct. 2nd. Total cost \$499.00 without air fare. 454-6454 (206) Seattle.

1,000 sq.ft. brand new office near SEA-TAC Mall, available immediately. 3 exam rooms. Ample parking. Call Mr. Quint, 624-4397 or 454-4591.

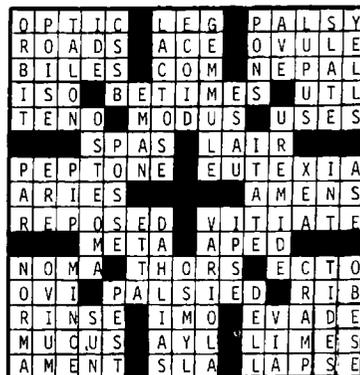
Available for locum tenens starting Sept. 10 Contact Bob Wilson 572-8555 or home, 272-3969.

NEW RENTAL: MAUI CONDO at beautiful Wailea Beach. Golf/Tennis membership, 30 feet from pool. Call 1-275-6576 or 275-6314.

Office space for rent, minimal charges. Central location. Call 383-1717.

Classified and announcement copy may be mailed to: Journal & Bulletin Agency, Inc. P.O.Box 9471, Seattle, WA 98109, or phoned to Seattle (206) 284-2460. Deadline 25th of month prior to month of issue.

ANSWERS



The crossword puzzle on page 20 is reprinted with permission, from the new book, *Medical Crossword Puzzles (and other literary diversions)*, created by A.A. Brown; 100 pages. Copies are available for \$2.95 from Medical Crosswords, P.O.Box 99187, San Francisco, CA 94109.



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*



Today's most thoughtful,
popular and practical
baby gift is



Tacoma 475-1234

Seattle 634-BABY

*Washington's oldest, most trusted
Professional Diaper Service
serving our second generation*

MEDICAL SOCIETY OF PIERCE COUNTY
813 South K Street — Suite 200
Tacoma, Washington 98405
ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

contains no aspirin

tablets
Darvocet-N[®] 100 (IV)

100 mg. Darvon-N[®] (propoxyphene napsylate)
650 mg. acetaminophen

100

Lilly

700565

Additional information available
to the profession on request from
Eli Lilly and Company
Indianapolis, Indiana 46206

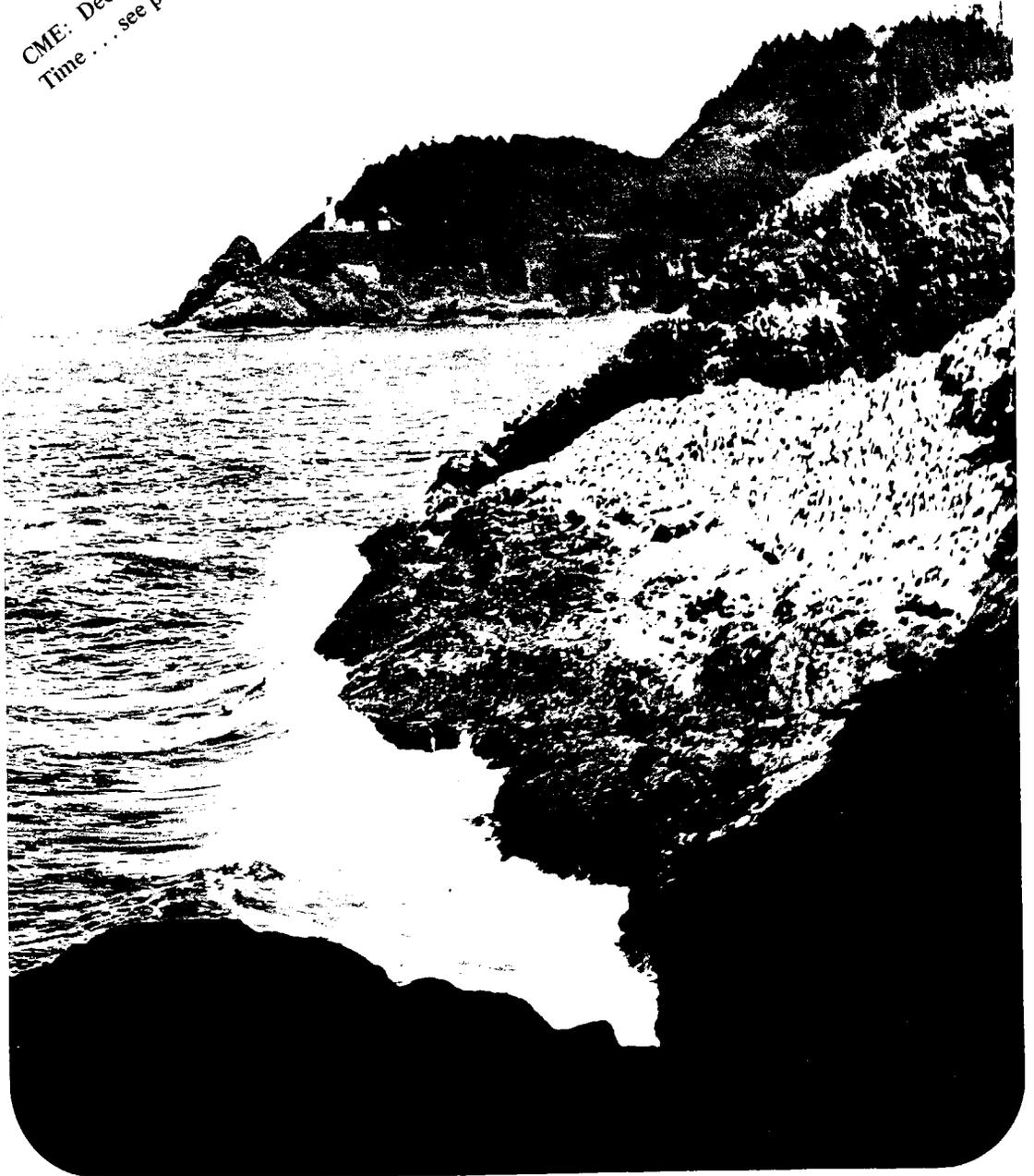
Eli Lilly and Company, Inc.
Carolina, Puerto Rico 00630



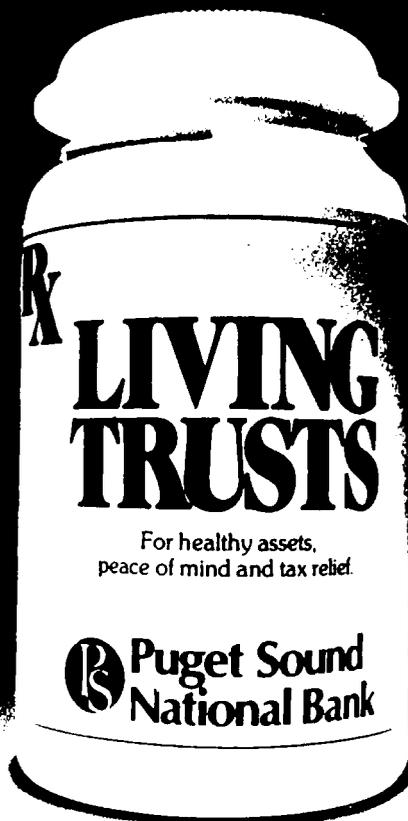
Medical Society of Pierce County

August 1978 Vol. XLX, No. 8 Tacoma, Washington

CME: Decision-Making
Time . . . see page 5



BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

Bulletin of the Medical Society of Pierce County



Cover photo courtesy of
Glen G. McBride, M.D.

CONTENTS

Page	
4	Meeting Notice
5	President's Page
6	"Issues '78"
8	Letters
9	AAMA Page
12	America's Health Care System
20	Society News Briefs
21	Auxiliary
23	Classified

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D. (79)
Melvin L. Henry, M.D. (80)
William B. Jackson, M.D. (80)
Richard K. Ohme, M.D. (80)
Charles C. Reberger, M.D. (79)
Roy A. Virak, M.D. (80)
Myra S. Vozenilek, M.D. (79)
Helen Whitney (78)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Physician-Pharmacy	Herman S. Judd, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

PERSONAL CUSTOMIZED SERVICE

is available at the
Medical-Dental Placement Service

One Phone Call Can Do It All!

WE WILL ADVERTISE, SCREEN, SEND RESUMES,
AND SCHEDULE A MINIMUM OF INTERVIEWS FOR YOU.

Call the

MEDICAL-DENTAL PLACEMENT SERVICE

(a membership service of the Medical Society
of Pierce County)

572-3709

"We specialize in matching the right employee and employer."

GENERAL MEMBERSHIP MEETING NOTICE

— The Program —

"Issues '78"

Guest speaker, John A. Moyer, M.D., president-elect of the Washington State Medical Association.

"Whither the College of Medical Education?"

Members of the Committee on Continuing Medical Education and Society officers will be present to outline the financial problems of the College and the solutions under consideration.

Election of Nominating Committee

The Nominating Committee will meet in October to select a slate of candidates for 1979 officer and trustee positions.

DATE: Tuesday, September 12, 1978
TIME: Social hour, 6:15 pm; dinner, 7:00 pm. program and business meeting, 7:45 pm.
PLACE: The Elks Club, 1965 South Union.
COST: \$8.00 per person for a special buffet dinner preceding the program and business meeting.

Register now. Dinner reservations will be limited. Call the Medical Society, 572-3667 to confirm your attendance. Reservations must be made no later than Thursday, August 31.

President's Page

CME: Decision-Making Time



Ralph A. Johnson, M.D.

The future of the Pierce County College of Medical Education, and specifically the funding of its CME Programs, is a high priority item on the agenda of the September meeting of the Medical Society of Pierce County. A thorough overview of the College's CME program and its problems was presented in the June *Bulletin* by Marcel Malden, M.D., chairman of the society's Continuing Medical Education Committee. Dr. Malden, representing his committee, has met with your Board of Trustees and he has further elaborated in regard to the needs of the program. At its June meeting, the Board of Trustees took decisive steps to formulate a plan for presentation to the membership in September.

The current financial problems of the College of Medical Education can be summarized as follows: while physician participation in college-sponsored courses has strikingly increased, income has not. Furthermore, the College has faced increased competition on nursing courses from other organizations. As of June, a gap of approximately \$3000 existed between income and expenses. The College's secretary was terminated in June, and the College cashed in its remaining \$5000 certificate of deposit. It is obvious that the College needs a firmer financial base.

The Board reviewed a variety of funding options in June and following lengthy discussions it was decided that a commercial loan of up to \$5000 should be obtained by the College of Medical Education, and that this loan would be secured by the Medical Society. The Board also recommended that the College consider an increase in course

fees. In addition, the Board approved a proposal that a \$30 CME assessment plan be presented at the September meeting of the general membership. It is proposed that this \$30 assessment take the form of prepaid course fees. It would seem that this plan is a distinct advantage to both the physicians and the college.

You probably will recall that a questionnaire covering a range of issues was submitted to the membership in April, 1977. Of 186 physicians responding, 69 percent stated that the Board of Trustees should involve the membership more in resolving problems.

Your Board of Trustees now asks you to assert yourself regarding that mandate. I urge you to review Dr. Malden's excellent presentation, "Whither CME?", in the June issue of the *Bulletin*. Please give this problem your considered thought and come to the September membership meeting prepared to discuss this subject and to vote on the assessment plan. The College of Medical Education needs our support, and I believe we need to continue and perhaps even expand the role of our College. □

"Issues '78"

WSMA TO ADDRESS MAJOR ISSUES

The big issues facing the medical profession will receive close scrutiny during the WSMA annual meeting, September 21-24 in Spokane. The major issues all will have an impact on the future practice of medicine, and individual physicians who cannot attend the WSMA meeting to voice their views to the appropriate committees are encouraged to attend the Medical Society's September 12 general membership meeting or to contact the Society's WSMA delegates directly.

Following are brief summaries and delineations of the options on the key topics which will be discussed and debated in September:

COST OF CARE

The cost of medical and health care has been a matter of concern since the creation of Medicare in 1966, but in the past two years the issue has repeatedly been on the front pages. In 1977 the AMA released the recommendations of the National Commission on the Cost of Medical Care, an independent commission made up of representatives from the health care professions, labor, industry and academia. The recommendations have been widely read and are being used as a reference in solving some of the cost of care problems. Last year the AMA also joined with the American Hospital Association and the American Federation of Hospitals in an alliance to voluntarily control the costs of health care. This "Voluntary Effort" is continuing at this time.

While the private sector is making progress in cost containment, Congress continues to consider a mandatory cap on hospital revenue increases. Federally mandated physician fee schedules MAY be proposed in the future.

WSMA options

The key question facing Washington physicians is, "Are physicians individually and collectively going to contain costs?" WSMA officers met with leaders of the county medical societies last spring to seek ideas on cost containment that could be used in this state. Out of those meetings, the WSMA devised a "checklist" of suggested actions. The list is for use at the community level, with primary responsibility for implementation resting with the individual physician.

During the annual meeting, Reference Committee A is handling cost of care questions. Members will discuss the checklist and debate the question, "Is this checklist-program a realistic approach for individual doctors in containing costs?"

Duncan T. Baer, M.D. will chair Reference Committee A.

HEALTH MANPOWER

Shortages of primary care physicians and physician maldistribution have been problems in the past, but significant progress has been made in both areas in the last several years. The University of Washington School of Medicine began a family practice residency in 1972, and the Medical School has encouraged young physicians to settle in rural areas.

The problem of physician maldistribution, however, appears to continue to exist, since five areas in the state have recently been designated "health manpower shortage areas" by HEW. Thus, those areas are eligible for National Health Service Corps physicians.

WSMA options

The WSMA's health planning coordinator is representing the physicians' viewpoint at health planning meetings in western Washington. He is working with one contemplated community clinic to determine if solutions to its manpower shortage can be solved with the private sector. One broad key question is, "What sorts of private sector alternatives should the WSMA offer in response to federally imposed solutions?" to manpower shortages.

Reference Committee B will review health manpower questions.

LEGISLATION

Individuals elected to the state legislature in November will determine health policies and laws when the legislature convenes in 1979. By getting acquainted with candidates and actively supporting them, physicians will have a stronger voice in Olympia.

A number of important issues affecting the practice of medicine will face legislators in 1979. They include:

- extension, certificate of need
- second opinion for surgery
- abortion, payment under Medicaid
- midwifery - lay/nurse practice
- state office of health promotion
- WSMA professional liability package
- mandatory immunization
- tax credit for underwriting state Medicaid program

Reference Committee D will consider these issues and will receive physicians' views on any and all of them during the annual meeting. Committee members will make

recommendations to the House of Delegates on what the WSMA's positions should be.

NURSES

The professional relationship between nurses and physicians underwent some changes in 1973 with the passage of the state Nurse Practice Act. The Board of Nursing was given the authority to expand nurses' role to include such parts of the practice of medicine as authorized by the Board of Nursing after "joint recognition by the medical and nursing professions." In 1977 the legislature further widened that role to include prescribing certain drugs.

In May, 1978 the Washington State Nurses Association brought suit against the State Board of Medical Examiners charging the BME had exceeded its authority in making rules permitting physicians assistants (Medex) to issue medical orders to nurses without prior approval of physicians. The nurses were granted an injunction against following the BME rules until the suit can be tried.

WSMA options

A WSMA ad hoc committee on the implementation of the Nurse Practice Act has been formed for the purpose of compiling pertinent information to present to the state legislature. The key question is, "What should be the WSMA attitude on the expanded role of nurses?"

Reference Committee C is studying the WSMA's stance toward nursing. Committee members include David S. Hopkins, M. D.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Underfunding of DSHS programs and the difficulty of dealing with the bureaucracy are still items of concern, but the WSMA Physician-DSHS Health Care Committee, formed in 1975, has been very valuable in reaching equitable compromises in many situations.

DSHS programs will undoubtedly be affected by Gov. Ray's edict in June to state departments to cut their budgets by 10 percent.

Another area of concern to physicians is DSHS's attempts to perform routine Medicaid audits without obtaining patients' consent to release of their medical records. Olympia's Memorial Clinic successfully challenged that DSHS practice in court, but the legislature could pass legislation to permit DSHS to do such audits without patients' consent.

Finally, action may be taken by the legislature to deny Medicaid payments for abortions.

WSMA options:

The three issues cited above all could greatly affect both the public and the practice of medicine. The question is, "What actions should the WSMA take in helping resolve those issues?"

Members of Reference Committee B are tackling the DSHS issues.

PROFESSIONAL LIABILITY

Professional liability suits first surfaced as a problem in the 1960's; by 1971 the WSMA had endorsed a professional liability program with Aetna to provide continued good coverage for Washington physicians at reasonable rates.

In 1974 and 1975 professional liability claims and insurance rates soared, and for that reason the WSMA instituted a legislative and public education program on the problems of professional liability. In 1976, the legislature responded by passing more reasonable professional liability laws.

While the rate of escalation of claims shows signs of moderating, the dollar value of individual claims is rising more rapidly than the rate of inflation. To further moderate the situation, the WSMA will introduce six bills into the state legislature in 1979. They include legislation pertaining to Mary Carter Agreements, 90 Day Notice of Intent, Contingency Fees, Statute of Limitations, Peer Review Immunity, Self-Insurance and Arbitration.

The WSMA's relationship with the Aetna continues to gain strength through increased involvement of physicians in resolving malpractice claims via the claims review panel process. At the same time, other types of professional liability insurance coverage are being examined, and available alternatives will be considered in September.

WSMA options

Should the WSMA encourage other insurance companies to offer professional liability insurance to Washington physicians? Should the WSMA endorse a program with some other company besides the Aetna?

Reference Committee D is responsible for professional liability questions.

OTHER ISSUES

Other issues to be debated at the annual meeting include:

- Budget/Finance of WSMA (Reference Committee A)
- Continuing Medical Education (Reference Committee C)
- Grievance Amendments/Disciplinary Act (Reference Committee C)
- Health Planning, HSAs, PL 93-641 (Reference Committee B)
- Legal: Anti-Trust considerations (Reference Committee A)
- Congressional Legislation (Reference Committee A)
- Library Services (Reference Committee A)
- Ophthalmology/Optomety (Reference Committee D)
- Prepaid Health Care (Reference Committee B)

Continued on next page

Public Education/Service Programs (Reference Committee A)

Quality/Peer Review, future of PSRO (Reference Committee C)

Specialty Society Representation (Reference Committee A)

Physician Support of WAMPAC/AMPAC (Reference Committee D)

Make your voice heard. If you cannot attend the WSMA annual meeting in Spokane, express your opinions to the Pierce County delegates listed on page 3 of this BULLETIN and attend the September 12 general membership meeting at which John A. Moyer, M. D., WSMA president-elect, will be the guest speaker.

LETTERS

To the Editor:

The Franklin Pierce School District has special services for handicapped children. Our services are available to children, ages 3 through 21 years who are residents of Franklin Pierce District, and include all handicapping conditions. In addition to this regular education program, we include support services from Good Samaritan Hospital, Mary Bridge Children's Hospital, and Greater Lakes Mental Health Center. Our school staff includes public health nurses, psychologists, speech therapists, a teacher for the hard of hearing, and special education teachers and aides.

We are determined to provide as much help as we can for all handicapped children. We are particularly concerned that no child be without service because the parents are unaware of available help. We ask that the Medical Society of Pierce County assist us by disseminating this information and be referring to us parents of handicapped children who live in the Franklin Pierce School District in the Parkland-Midland area.

If physicians have any questions about our program, please call the district number, 537-0211, ext. 272.

Robert J. Haglund

Franklin Pierce School District

To the Editor

Attention of Robert B. Whitney, M.D.

It is encouraging to hear of the wide public acceptance of the Pierce County TEL-MED program and we commend your group for providing this type of education and information.

We have noticed considerable interest by persons of all ages in the TEL-MED brochures distributed through our members' pharmacies and will continue to be an outlet for them.

The Professional Pharmacists of Pierce County are pleased to support this useful public service program and enclose a check for that purpose.

John Galvin, President
Professional Pharmacists of Pierce County

To the Editor:

The Bakke decision—fair or unfair?

It was much chagrin and regret that I learned of the Bakke decision. I really felt that there could only be one decision. I had felt that the big turn-around had been made by our country to extend a helping hand to all Americans to attain equal opportunity and status. For past suppressions a catch-up time is absolutely necessary.

We each draw on personal experience so that I cannot help but feel that over the past 200 years, even 100 years or 50 years, much less 25 years, we have lost the opportunity of having many excellent physicians because of restrictions and unspoken quotas. They may well have taken the places of physicians who showed they were less than qualified during that time. Those segregated persons who never became physicians would more likely have serviced and been more sensitive to the needs of minorities and the medically indigent.

As an American citizen who served in the Army of our country even after being placed in a concentration camp by this country, I have to accept the Supreme Court's decision but my feelings also have to be expressed.

The medical school admissions rat-race is not foreign to me. I have had an opportunity to write many letters of recommendation to admissions committees of many medical schools with over a 75 percent acceptance because of my twelve year association with the Scouting America Medical Explorers Post at Tacoma General Hospital and nine years as medical director of Fastside Clinic.

Does our medical society have feelings? Is it able to express them? We need physicians representative of our total population and physicians willing to serve all segments regardless of finances.

George Tanbara, M.D.

Letters to the Editor are welcome and will be printed as space allows. Letters should be typed and should not exceed one page in length. If necessary, they will be edited or shortened. Letters published in the BULLETIN do not constitute approval or endorsement of the opinions of the authors by the Medical Society of Pierce County.

AAMA Page

DRUG USE TOPIC OF ANNUAL SEMINAR/WORKSHOP

The annual continuing education seminar/workshop of the Pierce County Chapter, American Association of Medical Assistants, will be held on Saturday, September 30, from 9:00 a.m. to 3:00 p.m., at the Rodeway Inn. This year's program is, "Drugs, Their Use and Abuse."

An excellent group of speakers has been lined up and any person involved in the medical field should find this meeting very informative. Daniel J. Thomas, M.D., will serve as moderator. The speakers for the morning segment of the program will be David Stuart, therapist from Good Samaritan Hospital's mental health unit, speaking on "The Emotional, Social and Psychological Aspects of Drug Abuse." John Osborne, staff pharmacist from Puget Sound Hospital, will speak on "Drugs, Their Use, Good and Bad." The program's third session will be presented by Burton Nessett, M.D., professor of chemistry, Pacific Lutheran University. Dr. Nessett will discuss "The Chemical Breakdown and Effects of Drug Abuse."

The program has been approved for continuing education credits by the AMA and Washington State Medical Association. These annual seminars sponsored by the Pierce County AAMA chapter serve two purposes: they provide a source of continuing education for medical personnel in our area; and, they serve as the Chapter's contribution to Ways and Means for the Washington State Society, AAMA.

Registration will be limited to 125. The registration deadline is September 25. Complete programs with registration forms will be provided in the August Pierce County Medical Bureau mailing. Registration fees include luncheon and coffee breaks. The fee for AAMA members is \$17.50, for non-members the fee is \$20.00. Please plan to attend.

REGISTRATION FORM FOR PIERCE COUNTY, AAMA, SEMINAR SATURDAY, SEPTEMBER 20, 1978 RODEWAY INN

Please make check payable to AAMA, Pierce County Chapter, and mail to: Doris Stansell, A-115 Allenmore Medical Center, Tacoma, WA 98405.

NAME _____ MEMBER _____ NON MEMBER _____

ADDRESS _____

DOCTOR'S NAME: _____

STATE PHYSICIAN ADVISOR NOMINATED TO NATIONAL POST

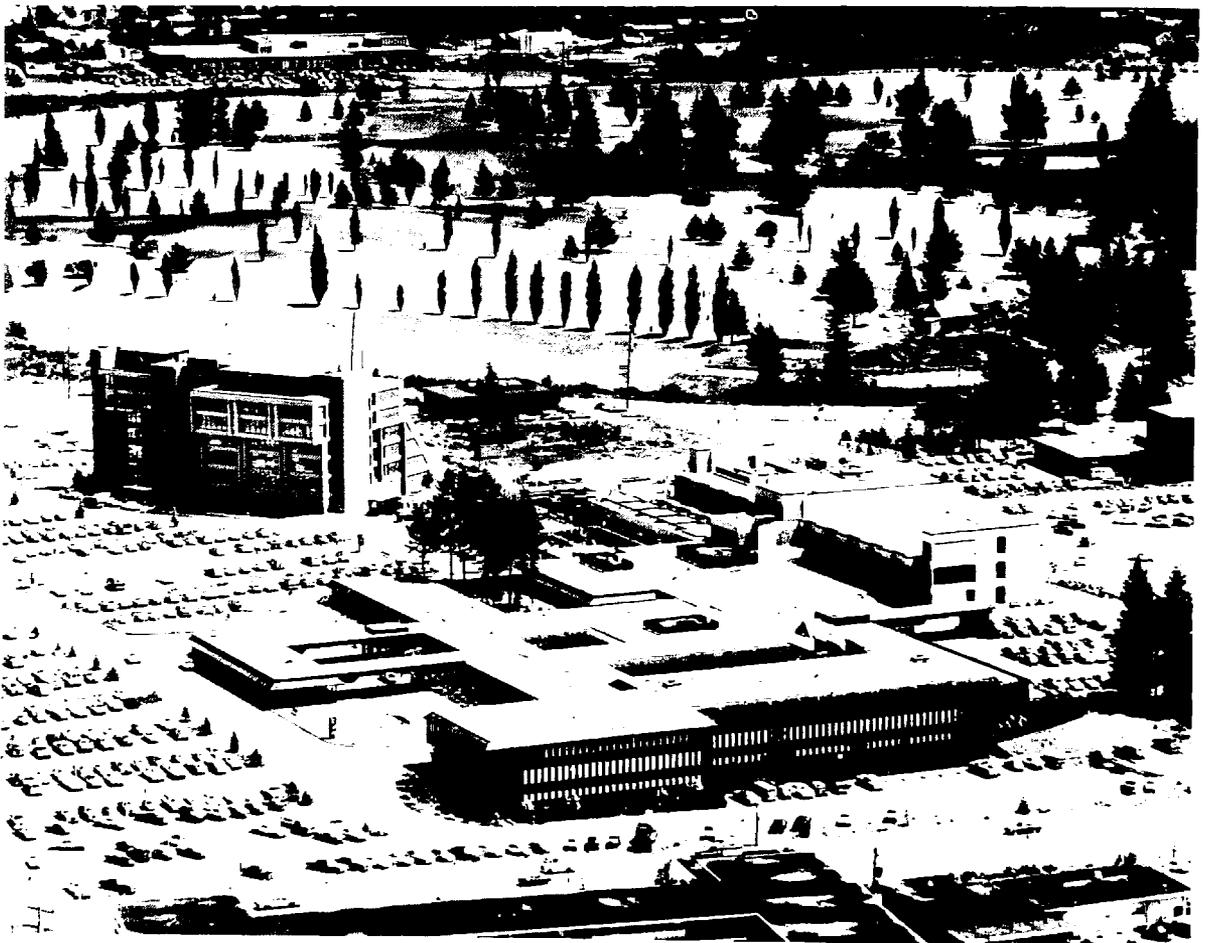
Delegates at the Washington State Society, AAMA, convention in May unanimously voted to nominate Anne Steele, MD, to the position of national physician advisor to AAMA. This election will be held at the AAMA national convention in Boston in late October. Dr. Steele has been a very active, faithful physician advisor at the state level for the past six years. She is an internal medicine specialist in Bremerton and immediate past president of the Kitsap County Medical Society.

Individuals interested in supporting Dr. Steele's campaign may contact either Dee Lundstrom, state president-elect, 383-5351, or Doris Stansell, state treasurer, 383-2413.



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201
South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

America's Health Care System: A Comprehensive Portrait

How the nation's 220,000,000 people obtain their medical care (and what they think about it) is probed in a new survey.

It reveals that barriers are tumbling, most patients are satisfied, but cost remains an overriding concern.

In the world of business, a variety of indicators reflect the ups and downs of economic activity. Selected separate indicators, for example, comprise the Consumer Price Index, Department of Labor employment statistics, Dow Jones stock averages, and others.

Magazines such as *Business Week* and *U.S. News and World Report* each have identified certain indicators which they believe reflect the state of the nation's economy. *Business Weeks's* includes net tons of steel, kilowatt hours of electricity, freight car loadings, board feet of lumber, wheat prices in Kansas City, gold prices in London, the prime interest rate, the Federal Reserve money supply, housing starts, and many others.

For businessmen, government officials, economists, bankers, and investors, such indicators are considered essential to decision making. They tell where the economy of the nation is going, and they guide and influence those who have a hand on the tiller.

In the business of health, too, a variety of specialized statistics show how some parts of the system are performing currently:

- ▶ the infant mortality rate has decreased in the last five years by 19 percent
- ▶ more than 230 million days of care are rendered to 29 million patients admitted to hospitals each year
- ▶ health expenditures total 8.6 percent of the gross national product—\$140 billion annually
- ▶ federal Medicaid payments to states total

almost three-quarters of a billion dollars each month

- ▶ the ratio of doctors to population has increased from 139 per 100,000 in 1960 to 162 in 1976.

Analysis of these statistics, however, only skirts the fringes of a central question: is health care available to those who need it, and what kind of barriers must be overcome to obtain care? In the jargon of health policy analysts, this crucial issue goes by the phrase access to care.

In "people terms," however, access translates into a multitude of factors which together determine whether or not persons obtain the medical care they need. Is a doctor available? How far away is the doctor's office? How long is the trip? How long does it take to get an appointment? How much time does the doctor spend with the patient? How much does the visit cost? How will the bill be paid? Was the patient satisfied with what the doctor did?

There is about to be completed a study which identifies these and other important factors—indicators—bearing on access. One of its purposes is the development of standard means for consistent measurement of these indicators.

The national survey of access to medical care was carried out by the Center for Health Administration Studies of the University of Chicago.¹ The field work was conducted by the University's National Opinion Research

This information was published as "Special Report Number One/1978" by the Robert Wood Johnson Foundation, Office of Information Services, P.O. Box 2316, Princeton, N. J. 08540. It is reprinted here for your information, by permission of Frank Karel, editor.

1. Principals in the study are: Lu Ann Aday, study director; Ronald Andersen, principal investigator, and Gretchen Voorhis Fleming and Grace Chiu, assistant study directors, all of the Center for Health Administration Studies, University of Chicago, 5720 Woodlawn Avenue, Chicago, Illinois 60637. Support included grants from The Robert Wood Johnson Foundation totaling \$1,229,143, and a \$250,000 grant from the National Center for Health Services Research for secondary and special analyses.

Center between September 1975, and February 1976. It is based on a sample of 7,787 persons and is statistically representative of the U. S. population.

The study focuses on many factors believed to affect access for the entire population. Moreover, data for each indicator can be examined for sub-groups of the total population—sub-groups defined by a number of important variables, including age; sex; race; income; region of the country; suburban, urban, and rural residence; and education levels. (For a graphic representation, see chart on pp.14-15.) As a bonus, certain parts of the survey are comparable with other projects carried out in 1963 and 1970, so some trends can be seen.

The survey generated large amounts of data and the analytic task facing the investigators has been formidable. The challenge: out of all the information available, identify those particular indicators which appear to be most significant in determining access for the total population and for sub-groups as well.

In a number-oriented society, nothing makes a problem come alive so much as the measurement of it. Walter Lippman, a half century ago, said: "The printing of comparative statistics of infant mortality is often followed by a reduction of the death rate of babies . . . the statistics make them visible, as visible as if the babies had elected an alderman to air their grievances."²

Grievances, indeed, have been aired about America's health system: its cost, and its accessibility to such groups as minorities, rural and inner city residents, and the aged. Attempts have been made to fix deficiencies. Medicare and Medicaid are examples.

The new University of Chicago study promises to provide abundant information enabling an assessment of the impact of these and newer health initiatives. This information will give new currency to the debates which shape changes in the nation's health laws—ranging from recommendations of seeming minor consequence to the sweeping changes implicit in proposals for national health insurance.

Professional organizations, Congress, state legislatures, and other groups will be able to evaluate the relative needs of population groups believed to have particular problems obtaining medical care. Similarly, over time, these data may define the nature of the so-called crisis in American health care.

The study's principal strength derives from its attempt to go beyond the raw numbers and to interpret and analyze what they mean.

This process is now underway by principal investigator Ronald Andersen, 38-year-old sociologist, and his colleagues at Chicago. Ahead lie many more computer runs and much more analysis. Nevertheless, Andersen declares flatly that the work " . . . provides a comprehensive and timely baseline for informing the current debates over national health policy options intended to impact—directly or indirectly—on access to medical care in the United States."

Traditional Health Indicators in Perspective

Much past analysis of the subject of access has focused on counting doctors (with suggested remedies concentrating on increasing the supply of physicians) and has emphasized mortality and morbidity statistics.

But the first approach is akin to analyzing the energy shortage only by counting corner gas stations. And the latter falls short because traditional mortality and morbidity statistics fail to reflect adequately much that the health system does.

A health care system provides useful outcomes other than prevention and cure—reassurance and encouragement, for example. As Walsh McDermott puts it: "Medicine is . . . not a science but a learned profession that attempts to blend affairs of the spirit and the cold objectivity of science. Everything the physician does, therefore, is a blend of technology and samaritanism. By samaritanism is meant that collection of acts, big and little, that lends reassurance or at least gives support to someone troubled by disease or illness."³

To illustrate, the clinical capability of pinning broken hips among the injured elderly has not changed the nation's gross mortality statistics, but it has increased the utilization of medical services and it contributes substantially to improving the quality of these patients' lives.

Similarly, take the case of a woman visiting a physician because of a lump in her breast. A diagnosis which reveals the lump is benign does not show up in morbidity statistics, but that diagnosis represents a major benefit to the patient.

It is statistical intangibles such as these—

Publication of the final report is expected late in 1978.

2. Lippman, Walter. *Public Opinion*. New York: The Free Press (paperback edition), 1965. p. 239.

3. From: McDermott, Walsh. "Medicine: The Public's Good and One's Own." *Cornell University Medical College Alumni Quarterly*, 40 (1) Winter 1977. pp. 15-24. McDermott is Emeritus Professor of Public Health and Medicine at Cornell.

quality of life, samaritanism, and reassurance—that separate mortality and morbidity statistics from the real world.

The Study: Who Gets What Care

The national survey investigates five principal dimensions impinging on access to care: *source* of care, *convenience* of care, actual *utilization* of care, the *need* for care, and the patient's *satisfaction* with care received. It examines all in considerable detail.

In the 1976 survey year, 76 percent of the population—160,000,000—saw a doctor. The percentage of infants and small children seeing a physician was highest: 87 percent. The percentage declines sharply in the middle and late years of childhood, then climbs slowly through the adult years to a level of 79 percent for those 65 or older.

The report's most significant findings show that the population at large—and every sub-population group studied—has better access to medical services today than in 1970 or 1963.

There are some instances of dramatic change. Chart 1 shows the improvement experienced by blacks since 1963 in one important measure: percentage seeing a physician at least once in the previous year. And Chart 2 shows how the gaps between persons of different income levels have narrowed, though discrepancies continue.

"These trends," says Andersen, "correspond to those which might be expected as a result of the implementation of Medicaid and Medicare in 1966. Medicaid and most health center programs begun since 1963 were designed to serve the low income population of all ages."

The removal of financial barriers appears to have major impact on whether or not various groups have access to care. Whereas physician utilization by low and medium income groups has moved closer to that for the upper income group (Chart 2), the same narrowing of utilization has not occurred for dentist visits (Chart 3). Andersen concludes: "... dental services are least apt to be covered by existing financing mechanisms and it is this service for which the greatest inequities in use by family income and race ... continue to persist."

The study places special emphasis on whether or not persons surveyed indicated they had a regular physician or regular source

of care. Previous studies have shown a strong correlation between having a physician and seeking medical service when illness occurs. More than 78 percent of the population claim to have a physician they see regularly; another 9 plus percent report a regular source of care (e.g., a clinic), but without identifying a particular physician.

That leaves almost 12 percent who have neither a physician nor a regular source of care. Andersen speaks frankly of this group: "Though this may appear to represent a small proportion overall, it means that there are actually an estimated 24 million people who can identify no particular place or provider as their regular point of entry to the health care system."

The survey data reveal that low income groups, urban blacks and Spanish heritage persons in the Southwest were less apt than whites to have their own doctor. And for all races, persons below the poverty level were less likely to have a regular source of care than those above.

Other findings include:

- ▶ 11 percent of the population spent at least one day in the hospital in the survey year
- ▶ 52 percent had a physical exam
- ▶ 49 percent saw a dentist
- ▶ rural farm dwellers were less likely than city residents to see a physician
- ▶ low income Spanish heritage persons were least likely of all ethnic groups to see a physician
- ▶ most persons can reach their regular source of care within 30 minutes
- ▶ blacks, when in their doctor's office, wait longer to see a physician than whites
- ▶ city residents use specialists more frequently than other groups
- ▶ rural residents and farmers make greatest use of general/family practitioners
- ▶ 64 percent of the population can obtain a doctor's appointment within two days; 8 percent have to wait more than 2 weeks.

Moving Toward A Measure of Medical Need

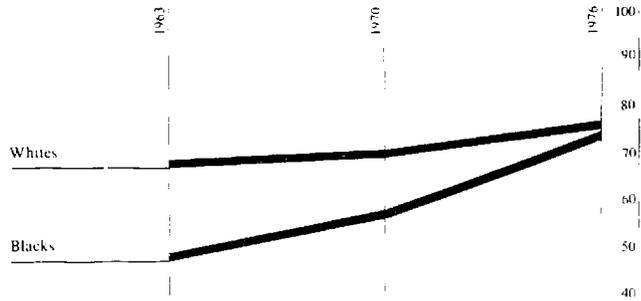
Although the survey's findings clarify the picture of access to health care for different population groups, a central and intriguing question remains: are people really getting the medical care they need?

One of Andersen's colleagues, study direc-

The percentage of the black population seeing a physician has increased substantially since 1963. While a small gap in physician utilization remains between blacks and whites, it has closed dramatically since 1970. The Chicago researchers report that the largest gains were made in areas of the central city.

Chart 1

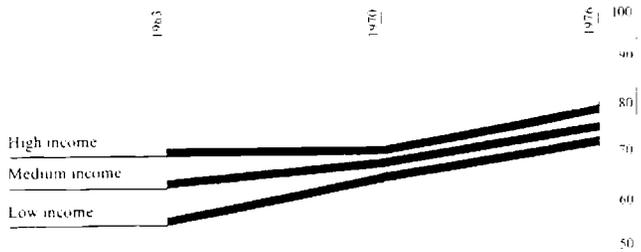
Percentage of Whites and Blacks Seeing a Physician in a 12-Month Period



A comparison by income shows how low income groups have increased their use of physician services. Between 1963 and 1970, both low and middle income groups moved toward the high income group. During the next period, all three groups moved upward together in utilization.

Chart 2

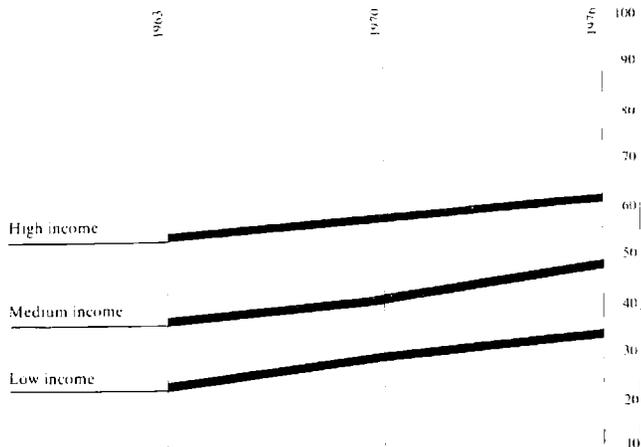
Percentage of High, Medium, and Low Income Groups Seeing a Physician in a 12-Month Period



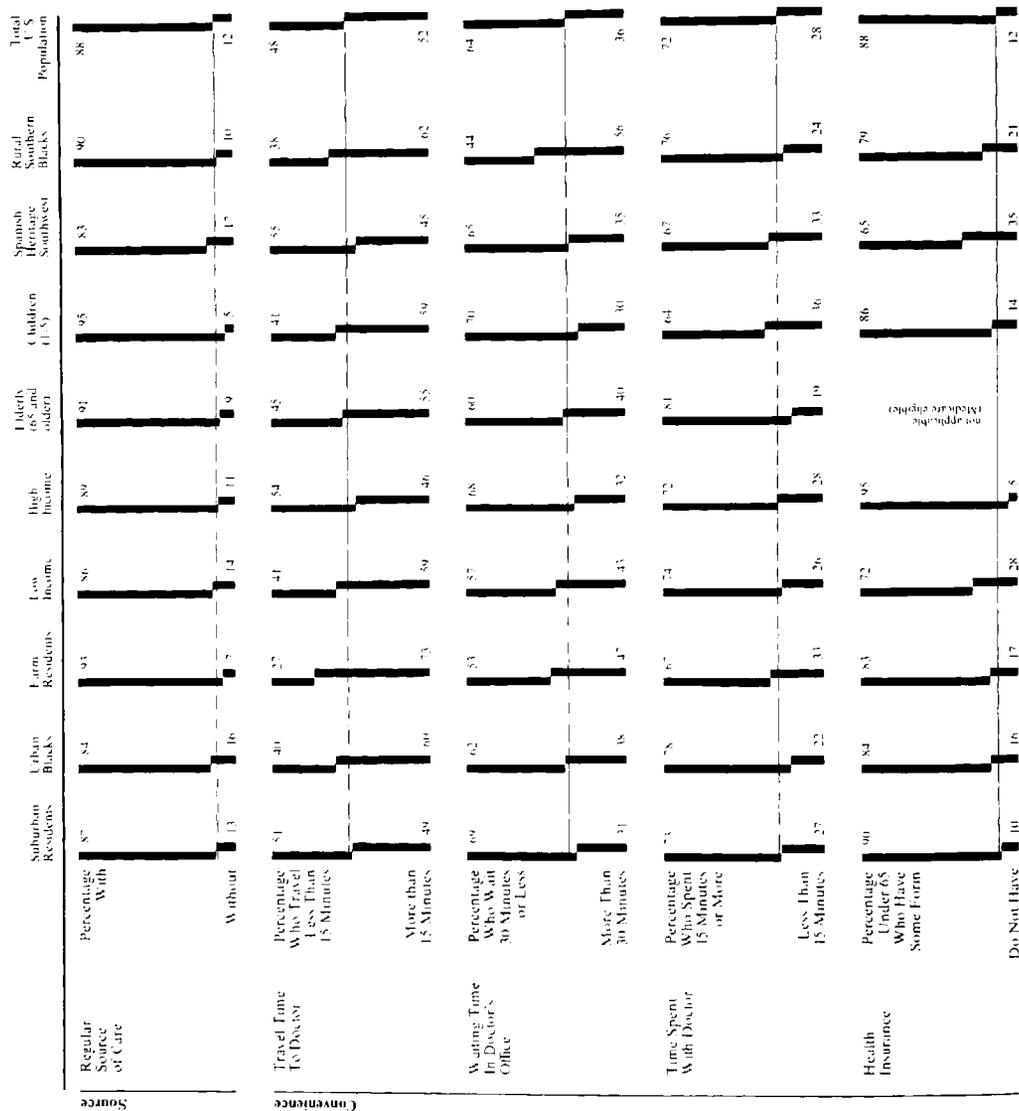
The impact of insurance is revealed in this chart showing the percentage of the population seeing a dentist. For all income levels, the utilization of dentists is lower than for physicians. And the gaps between the high, medium, and low income groups in 1976 are not significantly different from 1963. One reason: 88 per cent of the population have some form of medical insurance; only 18 per cent have dental insurance.

Chart 3

Percentage of High, Medium, and Low Income Groups Seeing a Dentist in a 12-Month Period



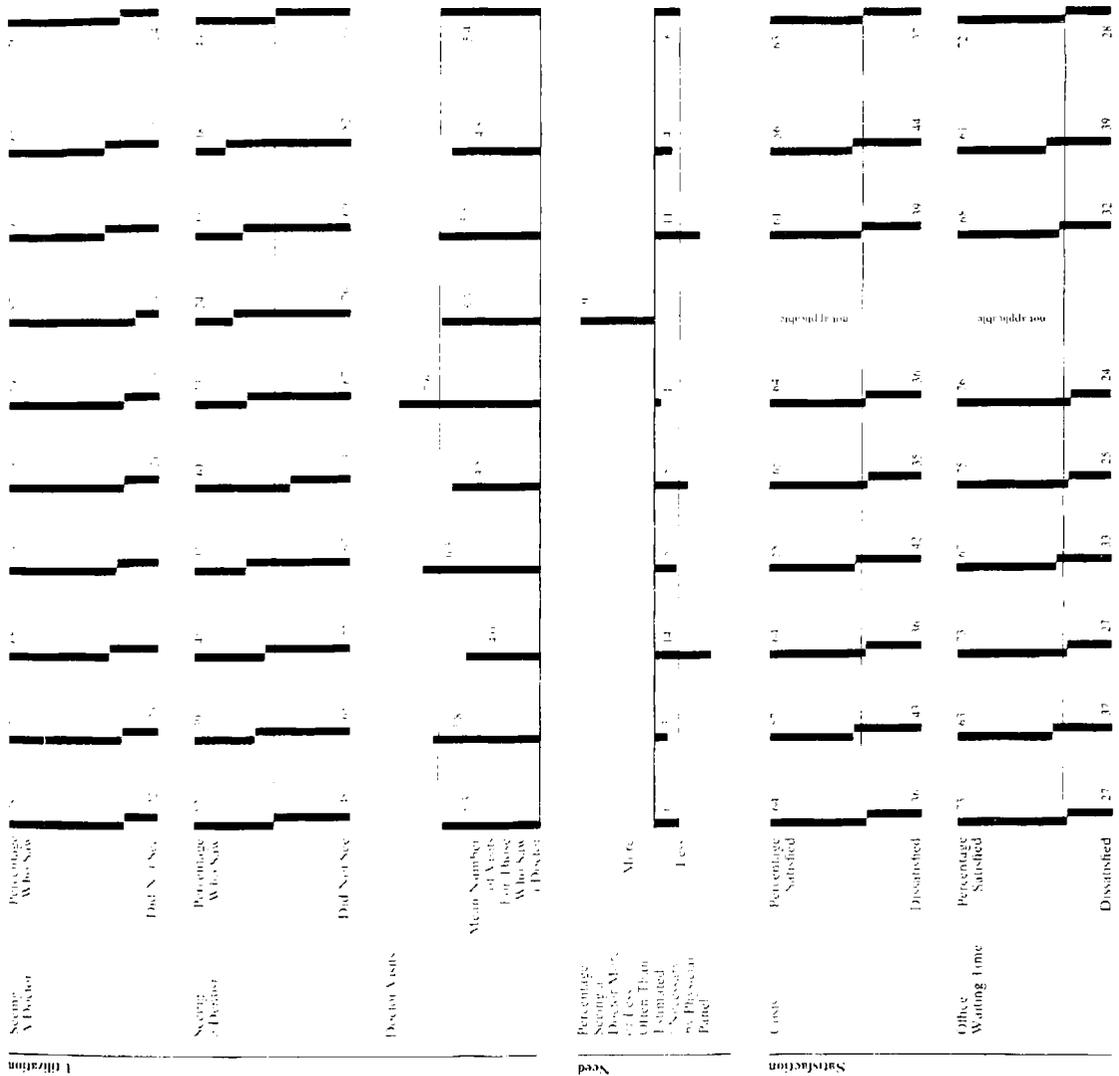
Leading Indicators of Access to Medical Care – A Panoramic View



The conceptual framework developed by the authors emphasizes five principal dimensions which determine access:

- **Source:** do people have a regular source of medical care?
- **Convenience:** what are the problems in obtaining care?
- **Utilization:** what services were actually used?
- **Need:** did people get the medical care they needed?
- **Satisfaction:** was the patient pleased with the experience?

Despite the temptation to seize upon only one or two dramatic indicators, Andersen and his colleagues stress a multidimensional approach. "In examining access," he says, "it is necessary to take into account all relevant factors. If a policy maker were to focus on a single indicator of access, a misleading conclusion could be reached about a particular group. That would be unwarranted and unwise." In the accompanying chart, selected indicators from the Chicago survey are arranged in a matrix format to permit comparisons among various population groups across a range of factors. An expanded version of this chart is available from the Center for Health Administration Studies, University of Chicago, 5720 Woodlawn Avenue, Chicago, Illinois 60637.



tor Lu Ann Aday, puts it this way: "Is the level of access to the system medically appropriate or not?"

To probe this important area, the Chicago researchers have taken their methodology a step beyond some methods already in widespread use and have pursued a new experimental approach which utilizes what is called the symptoms-response ratio. This approach, they say, "reflects the difference between the number of people with a given mix of symptoms who contact a physician at least once for the symptoms and the number that a panel of medical professionals say should contact a doctor for the symptoms."

To develop this measure, the research team asked a panel of medical school physicians to determine for a variety of symptoms an appropriate level of medical care that could be considered standard. They did it this way. Each doctor participating in the panel was asked "to estimate, based on his training and experience, how many people out of 100 manifesting a certain symptom should see a doctor for it." For example, frequent headaches are considered to be a symptom requiring the attention of a physician in nearly all cases for young children, less frequently among adults.

The study group then compared this standard with the actual experiences reported by the total population and specific sub-sets of the population. The result: based on 1976 data, virtually all groups saw doctors more often than the panel of doctors estimated should be the case.

To refine the technique further, a second group of doctors was impaneled consisting this time of community-based, primary care physicians from throughout the nation "... since a non-academic group was thought to be more representative overall of U.S. primary care physicians."⁴

This panel provided the criteria necessary to develop a second symptom index. The doctors analyzed 22 symptoms, including headaches, rash, diarrhea, heart pain, weight loss, and "tired mornings," and, as before, estimated a standard. The community-based panel of physicians recommended that patients see physicians more frequently than the original panel.

Armed with this second index, the research team compared it once again with the actual experiences reported by the population and

several sub-groups. By this measure, the total population sees physicians 6 percent less frequently than recommended. (Results of the second panel are incorporated in the chart showing leading indicators of access, pp.14-15)⁵

Andersen is the first to caution that these data must be interpreted with care, so as to avoid incorrect conclusions. He points out that the physician panels provided judgments only at a general level, not at an individual, patient-specific level. Further, the experiment covers only a segment of an individual's overall medical care needs. Patients undoubtedly visit their doctors at times simply for the reassurance provided. Andersen believes that a special value of this index lies in being able to compare use to need for various population categories.

This phase of the study—still in its early stages of development and refinement—is important and has already proved to be controversial. But Andersen strongly believes that the study of access demands a way to measure need and he and his team intend to continue to pursue this approach.

If, in fact, differences do exist between what patients do and what some doctors think they should do, it perhaps should not be considered surprising. Medicine is an inexact science and wide variations exist in the beliefs, opinions, and perceptions of doctors, as well as patients.

4. The primary care physician panel consisted of 36 physicians from the following specialties: internal medicine, 18; family/general practice, 10; and pediatrics, 8. Physicians from ob-gyn are to be included in future work on this measure. The original panel of physicians included 40 University of Chicago medical faculty from these specialties: internal medicine, 13; surgery, 9; pediatrics, 7; obstetrics-gynecology, 6; psychiatry, 5.

5. Among population sub-groups analyzed thus far, children represent an exception: their utilization pattern is 19 percent above the panel's estimate of need. This finding is for the total population of children, and its interpretation will have to await further data analysis for groups of children described by family income levels and other potentially significant characteristics.

To be continued in September issue

Before you next dictate
remember:

LENOX TRANSCRIPTION SERVICE

- Personalized service
- Direct dictation line
- Experienced medical steno
- Full-time, part-time, or temporary service

24 hour dictation line

535-0332

For more information contact:
Nancy Lenox/537-3921

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
 - DENTAL
 - PROFESSIONAL
- Since 1960

Member of
American Collectors Assn
Medical-Dental Hospital-Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*



Today's most thoughtful,
popular and practical
baby gift is



Tacoma 475-1234

Seattle 634-BABY

*Washington's oldest, most trusted
Professional Diaper Service
serving our second generation*

SOCIETY NEWS BRIEFS

A summary of Medical Society, and local medical and health news

SOCIETY FORMS COMMITTEE TO REVIEW JAIL HEALTH

The Medical Society has established a Committee on Jail Health, chaired by Herbert Kennedy, M.D., to review the health services provided by the county and city jails. The Pierce County Jail has applied for the American Medical Association's jail health accreditation program which will be implemented through the Medical Society and WSMA. The Society offered its assistance to the Jail Review Commission when it met last spring to review a variety of problems faced by the county jail.

In addition to reviewing the health systems of both jails, the new committee will recommend steps necessary for the county jail to qualify for the AMA accreditation program which gives national recognition to those jails providing health services meeting minimum national standards. A thorough review and possible revamping of the county jail's health services was one of the recommendations made by the Jail Review Commission. The Committee's work also will encompass the city jail as a result of a later request made by that institution.

PLACEMENT SERVICE ACCEPTANCE CONTINUES TO GROW

Physician use of the Medical Society's Medical-Dental Placement Service during the first half of 1978 has exceeded projections. Dental office use of the service continues to grow. During the first six months, 114 permanent and 29 temporary employees were placed through the efforts of the Placement Service. Approximately 700 aspiring medical or dental office employees were screened with only qualified applicants referred for actual job interviews. The goal of the service, established by the Medical Society as an exclusive membership benefit, remains unchanged: to match the right employee to employer; and, to provide only high quality and properly qualified candidates. For further information or to secure a new employee, contact the Placement Service, 572-3709.

1978-1979 CME COURSES OUTLINED

The following Category I CME courses have been tentatively scheduled by the College of Medical Education for the coming year:

Date	Topic	Hours of credit
September 16 - Allenmore Hospital	<i>Respiratory Disease</i>	6
October 18 - Tacoma General Hospital	<i>Fluid & Electrolyte/ Acid Base Disorders</i>	6
November 14, 15, 16, 17 - St. Joseph Hospital	<i>Infectious Diseases</i>	8
January 17, 18, 19, 20 - Lakewood General Hospital	<i>Timely Topics</i>	8
February 14, 15, 16, 17 - St. Joseph Hospital	<i>Hematology</i>	8
March 17, 18 - Tacoma General Hospital	<i>Tacoma General Hospital Day</i>	7
March 14, 15, 16, 17 - TBA	<i>Tacoma Academy of Internal Medicine</i>	16
March 21 - Mary Bridge Children's Hospital	<i>A Day of Pediatrics</i>	6

Specific dates, times and additional information have yet to be finalized. Program information will be mailed to physicians prior to each program. Physicians may contact the College's Executive Director, Mrs. Maxine Bailey, 756-3152, for further information.

KAN DU SNAKKE NORSK?

The Medical Society office has received a large number of calls recently requesting assistance in locating physicians who speak a foreign language. If you are able to converse in any foreign language, please let the Society know by calling 572-3667.

CONTINUING EDUCATION PROGRAMS FOR OFFICE ASSISTANTS PLANNED

A special half-day continuing education program for office assistants entitled "You, the Telephone Manager" has been scheduled for Tuesday, September 19. You may register your assistants for either the morning or afternoon session, which will cover patient relations, better communications, and techniques to reduce non-productive calls.

The program will be presented by the American Medical Association training staff. It is sponsored by the College of Medical Education and American Association of Medical Assistants. A mailed announcement regarding this program will be forthcoming. For additional information call the College of Continuing Education, 756-3152.

Also in the planning stages, dates yet to be determined, "Medical Ethics and The Law", "Effective Teamwork Skills-Communications-Getting It All Together."

Auxiliary

Fall Meeting Programs Scheduled

Program Chairman Nikki Crowley has lined up some very interesting programs for this fall's Auxiliary meetings.

The Big Sister-Little Sister potluck luncheon will be held September 15th at Cindy Anderson's home, 8202 Garney Lanes, SW, in Oakbrook.

Local psychologist Dr. Ted Sterling will be the guest speaker at the Auxiliary's October 20th meeting.

On November 17th, Tris McConaghy, airline stewardess, will give travel tips on "how to leave the scene peacefully." She also will demonstrate how to pack a suitcase.

Start thinking about what kind of talent, service or handicraft you can offer for the Auction meeting in March. Perhaps a pie a month, or cookies or banana bread sent to a college student, or a romantic evening cruise, dinner included, for four or six or eight, or baby-sitting, driving, or arranging a birthday party, favors and all, or paint a picture, or knit some booties. Plan ahead now!

Kit Larson reports extra copies of the Medical Society Directories are available. Anyone desiring another copy may pick one up at the Medical Society Office.

Newcomers Chairman Em Stern expects a large number of new members this year. Anyone knowing prospective new members please call Em, 582-2432, or Debbie McAlexander, 588-9779.

Tel-Med could use more volunteers. If you could give a few hours, once a week or once a month, to this worthwhile and fun project please contact Glenna Blackett, 752-3970, or Helen Whitney, 564-4345.

Sharon Lukens is still looking for a large home for the May 18th meeting. If you have one please call Sharon, 1-858-3725.

Handicapped Awareness Chairman Janet Fry, 584-2517, has exciting news. The Snohomish County Auxiliary is instituting Project Awareness this fall. Our members will be training members of the Snohomish Auxiliary. An organizational meeting is planned for September. There always is a need for more volunteers.

Betty Bahn has cookbooks for sale. They are great shower, wedding or birthday gifts. For the depot closest to you call Betty, 565-0527.

Alaire Sheimo is compiling the membership booklets. If you have changed your address or phone number please call Alaire, 588-0134.

The President's letter is in the mail. Please use the enclosed envelope to pay your dues, and be the first to receive the new 1978-79 membership booklet. If you failed to receive the letter notify Gloria Virak, 564-7503.

Joan Sullivan

AUXILIARY COMMITTEE CHAIRMEN 1978-1979

AMA-ERF	Jan Thiessen, Cindy Hammer
Artist Resource	K. Tanbara, L. Jackson, B. Wong S. Flood, A. Hilger, J. Brachvogel
Auxi-Quad Luncheon	Nancy Spangler
Communications	
Newsletters	Janet Fry
Bulletin	Joan Sullivan
News Media	Cindy Anderson, Penny Detje
Community Health	Kay North, Elsie Parrot
Cookbook Promotion	Betty Bahn
Finance	Jane Gallucci
Handicapped Awareness Liaison	Janet Fry
Joint Installation Dinner	Marny Weber
Legislative	Donna Roper, JoAnn Johnson
Mailing	Gloria Virak
Newcomers	Em Stern
Newcomer Coordinators	D. Wickstrom, D. Havlina S. Hansen, S. Vitikainen, S. Wiess, L. Bede J. Judd, L. Stillwell, J. Soronen
Nominating	Helen Whitney
Pierce County Health Council	Nadine Kennedy
Project Bank	Kit Larson
Student Recognition	M. Mandeville, J. McDonough
Sunshine	Kathy Miskovsky
Tel-Med Coordinator	Glenna Blackett
Telephone	Shaaron Anderson
Telephone Area Chairmen	V. Smith, N. Bageant, J. Sullivan, B. Graham, J. Iverson
Welcome Program	Debbie McAlexander



A.T. NORMAN INTERIORS

**COMMERCIAL - RESIDENTIAL
OFFICES - MEDICAL & HEALTH FACILITIES
FULL SERVICE - SPACE PLANNING
COLOR & LIGHTING SPECIALISTS**

Design Staff:

**RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK**

**MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936**

206/627-3139

**DESIGN OFFICE - SHOWROOM
524 TACOMA AVENUE SOUTH - TACOMA, WASHINGTON 98401**

SECOND ANNUAL CANCER SYMPOSIUM PLANNED

"Changing Concepts in Breast Cancer Management" will be the topic of the second annual cancer symposium sponsored by the Tacoma General Hospital Department of Oncology and co-sponsored by the Fred Hutchinson Cancer Research Center and American Cancer Society. The conference will be held on September 30, 1978 at Tacoma General Hospital and will address the issue of appropriate primary treatment for breast cancer and review the latest data concerning radiotherapy and chemotherapy. Application has been made for six hours of Category 1 CME credit for the symposium.

Registration is \$24 per physician, luncheon included. Registration will be limited. For additional information contact the Department of Oncology, Tacoma General Hospital.

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for
the greater business world except the one 24
hour a day.



TELEPHONE
ANSWERING

RADIO-TELEPHONE

PAGING

**RADIO PAGE
572-3222**

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day - when you must be contacted, you get an actual voice message from your personal Pager.

**ANSWERING SERVICE
572-3155**

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact
Fred McPherson or Tom Brokaw - 24 hour service

**We're your convenient
source for WSMA/AETNA
professional liability
insurance.**

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs - pensions, employee benefits, life and disability insurance, property and casualty insurance.



**PERSING, DYCKMAN
& TOYNBEE, INC.
INSURANCE BROKERS**

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynbee
Wayne Thronson
Bob Sizer

*Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks*

Classified

Classified and announcement copy may be mailed to: Journal & Bulletin Agency, Inc. P.O. Box 10747, Winslow, WA 98110, or phoned to Seattle (206) 682-7813. Deadline 25th of month prior to month of issue.

PROFESSIONAL OPPORTUNITY

Primary care physician to serve as medical director, MEDEX Northwest. Responsibilities: oversee teaching of 20 physician assistant students; work with staff on curriculum development and preceptor recruitment; maintain teaching relationships with community hospitals/clinics. Opportunities include clinical teaching in medical school, clinical practice, research, consultation in international manpower development. Qualifications: eligible for medical licensure in Washington. Board eligible or certified in family medicine, pediatrics, or internal medicine. Clinical practice and teaching experience desired. Academic rank dependent upon qualifications. Salary, \$25,000 to \$30,000 commensurate with experience and training. Send resume to Robert Harmon, MD, MPH, Director MEDEX Northwest, 1107 NE Room 340, Seattle, WA 98105.

Golden opportunity for a physician to step into the shoes of a retiring physician with a well established practice of a quarter of a century. Equipment available. Call Benton McCarthy Realty, Inc. Commercial Dept. (206) 455-8360 or Pat Ulrich (206) 747-1299

**GASTROENTEROLOGY ASSOCIATES
OF TACOMA, INC., P.S.**

F. W. Waldron, M.D., R. D. Baerg, M.D., and J. A. Levant, M.D.

ANNOUNCE THE ASSOCIATION OF
JAMES B. WAGONFELD, M.D.
FOR THE PRACTICE OF
GASTROENTEROLOGY
AT
ALLENMORE MEDICAL CENTER B-4006
SOUTH 19th and UNION STREETS TACOMA, WASHINGTON 98405
TELEPHONE (206) 272-5127

Available immediately, well established practice in general surgery. Office equipped, presently staffed and located across from hospital in Port Angeles, Wash. A growing industrial, recreation and retirement community. Inquiries to: Viola M. Nixon, (206) 457-0595 or (206) 457-0486.

KIRKLAND - medical bldg. for lease in a 5 bldg. complex, 1600 sq. ft., includes waiting room, reception room, 4 examination rooms, 2 offices, x-ray and darkroom. 641-5743.

Golden opportunity for a physician to step into the shoes of a retiring physician with a well established practice of a quarter of a century. Equipment available. Call Benton McCarthy Realty, Inc., Commercial Dept. (206) 455-8360 or Pat Ulrich (206) 747-1299

GENERAL PRACTICE OFFICE SPACE available immediately. Purdy, Washington, (a 20 minutes drive from Tacoma) desires two general practice physicians to serve the unattended peninsula's medical needs of over 20,000. This new office building is now available and the community is waiting. Excellent opportunity for a starting physician. For information, call 627 3055.

For an unforgettable experience, hike in the Alps of Austria, Switzerland and Italy with Erselle Eade, Sept. 18 - Oct. 2nd. Total cost \$499.00 without air fare. 454-6454 (206) Seattle.

Wanted—older home in north end with view. Call 565-3519

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

General Surgeon seeking opportunity in general practice. Residencies at University of Minnesota, Minneapolis, and Veterans' Administration Hospital, Minneapolis, Minnesota (1966-69). Former staff surgeon at North Memorial Hospital and other hospitals in Minneapolis area (1970-75). Surgeon, Fairchild USAF Hospital, near Spokane (1975). Fellow American College of Surgeons. Listing 701.

General Internist available July, 1979. Interested in a group practice near a metropolitan area. Internship at Framingham Union Hospital, Massachusetts, (1975-76). Residency at the Medical College of Wisconsin affiliated hospitals (1976-79). Diplomate of National Board of Medical Examiners, licensed Wisconsin physician, associate member of American College of Physicians. Listing 702.

OB/Gynecologist interested in entering private practice in the Tacoma area in autumn, 1979. Desires private practice in OB/Gyn in a partnership or group. Graduate Baylor College of Medicine, Houston. Now completing 4-year residency in OB/Gyn at Baylor (including one year of varied medical surgical OB/Gyn Pediatric experience, three years of experience in public and private hospitals). Junior fellow American College of Obstetrics-Gynecology. Member, American Fertility Society. Listing 703.

General Surgeon certified by the American Board of Surgery, 1978, currently affiliated as a surgical assistant at Crittenton Hospital, Rochester, Michigan. Received medical education at University of St. Thomas School of Medicine, Manila, Philippines, graduating in 1958. Past experience in general surgery and general practice in the Philippines from 1959 to 1970 as a staff member of a government hospital and in private practice. Served rotating internship at Mercy Hospital, Toledo, Ohio, 1971-72, and residency in general surgery at Mt. Carmel Mercy Hospital and Medical Center, Detroit, Michigan, 1972-76. Listing 801.

Internist completing gastroenterology training at University of Washington seeks practice situation in Tacoma area. Desirous of practicing in both internal medicine and gastroenterology. Graduate Pennsylvania State University College of Medicine, 1974. Served internship and residency at Emory, 1974-1977. Now completing two year fellowship in gastroenterology at University of Washington. Board certified by American Board of Internal Medicine and board eligible, as of June 1979, in gastroenterology. Licensed to practice in Washington, member of American College of Physicians and Pacific Northwest Endoscopy Society. Listing 802

MEDICAL SOCIETY OF PIERCE COUNTY
813 South K Street - Suite 200
Tacoma, Washington 98405
ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

contains no aspirin

tablets
Darvocet-N[®] 100 (TV)

100 mg. Darvon-N[®] (propoxyphene napsylate)
650 mg. acetaminophen

100



700565

Additional information available
to the profession on request from
Eli Lilly and Company
Indianapolis, Indiana 46206

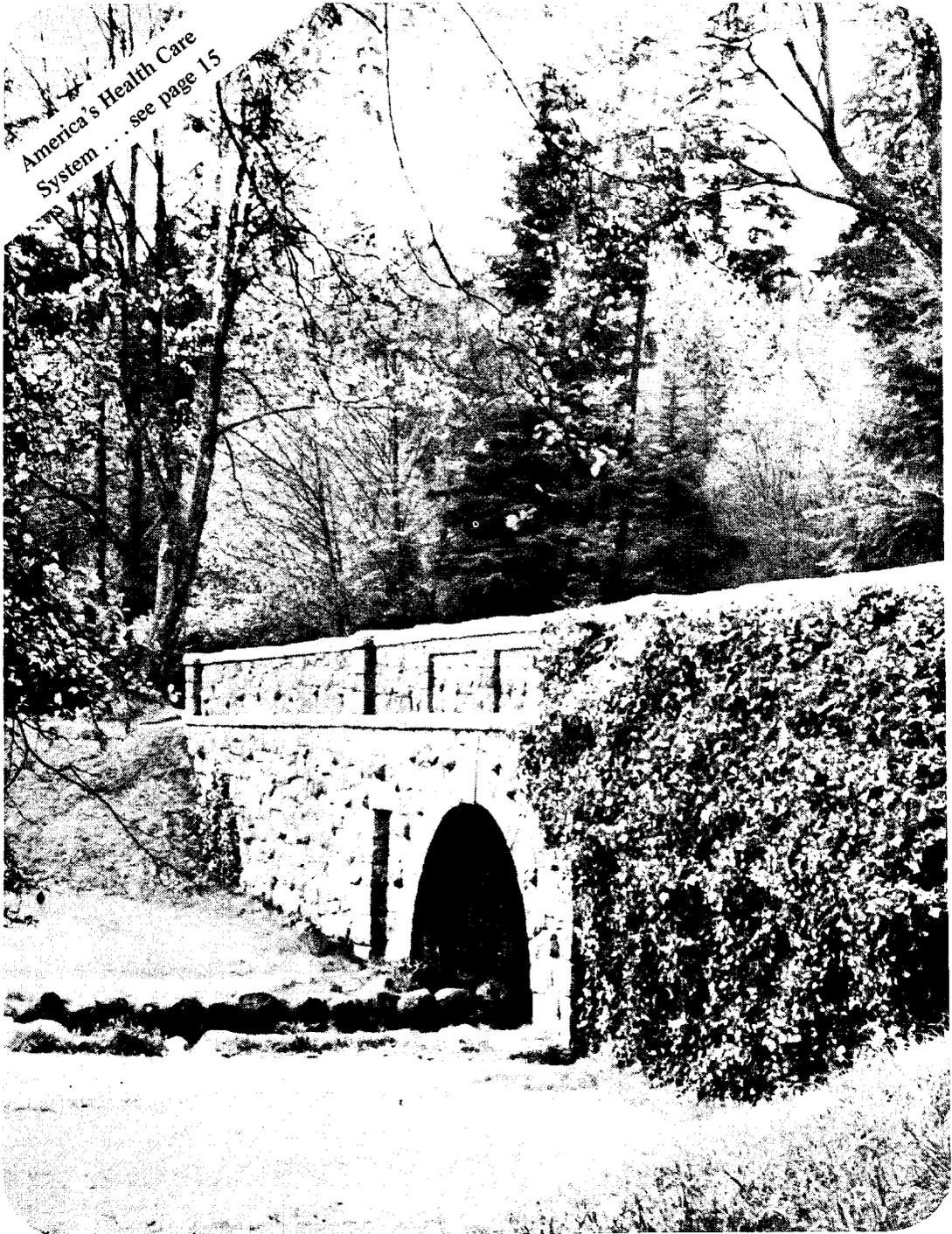
Eli Lilly and Company, Inc.
Carolina, Puerto Rico 00630



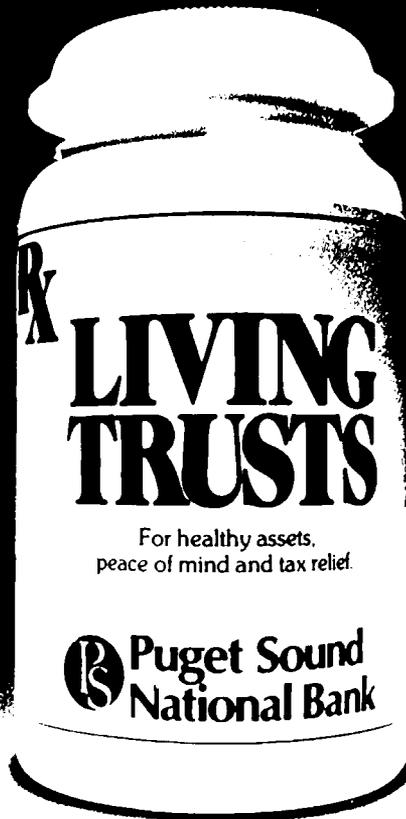
Medical Society of Pierce County

September 1978 Vol. XLX, No. 9 Tacoma, Washington

America's Health Care
System . . . see page 15



BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

Bulletin of the Medical Society of Pierce County



Cover photo courtesy of
D. Shirk

CONTENTS

Page	
5	President's Page
7	Society News Briefs
8	AAMA Page
9	Physician-Pharmacy Committee
10	Membership
11	Tel-Med Donations Received
14	America's Health Care System
19	From the Health Department
21	Auxiliary
23	Classified

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D. (79)
 Melvin L. Henry, M.D. (80)
 William B. Jackson, M.D. (80)
 Richard K. Ohme, M.D. (80)
 Charles C. Reberger, M.D. (79)
 Roy A. Virak, M.D. (80)
 Myra S. Vozenilek, M.D. (79)
 Helen Whitney (78)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D. Roy H. Virak, M.D.

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Jail Health	Herbert C. Kennedy, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Physician-Pharmacy	Herman S. Judd, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

PERSONAL CUSTOMIZED SERVICE

**is available at the
Medical-Dental Placement Service**

Tired of too many fruitless interviews?

Tired of dealing with staffing problems?

One Phone Call Can Do It All!

**WE WILL ADVERTISE, SCREEN, SEND RESUMES,
AND SCHEDULE A MINIMUM OF INTERVIEWS FOR YOU.**

Call Susan Thornton, Director

MEDICAL-DENTAL PLACEMENT SERVICE

(a membership service of the Medical Society
of Pierce County)

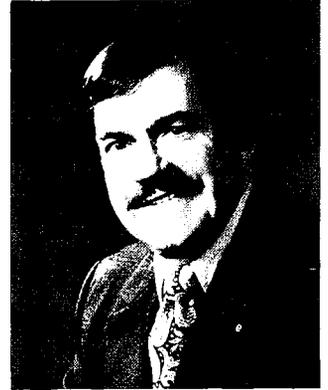
572-3709

"We specialize in matching the right employee and employer."

QUALITY vs COST

Hopefully, the public appreciated the not-so-humorous implications of the cartoon below. The quality of medical care *cannot* be sacrificed in the name of cost containment.

R.A.J.



Ralph A. Johnson, M.D.



Cartoon courtesy of Albuquerque Journal



Working together is the best medicine.



Avoiding malpractice is often a matter of knowing ahead of time where the pitfalls are. Aetna Life & Casualty wants to help alert physicians and their employees to malpractice traps. So we offer a variety of services and materials at no charge.

For instance, we offer a free videotape service demonstrating some of the frequent causes of malpractice. Our constantly updated selection of brochures offers common sense tips. We also conduct seminars for doctors to benefit from their collective experience.

Aetna employs the know-how of physicians, medical malpractice lawyers and health and safety experts to prepare these services.

This Loss Control and Education Program has been instrumental in allowing Aetna to provide professional liability coverage to physicians on a continuing basis.

We believe covering you against malpractice is not enough. We want to work with you to help you prevent it. Your Aetna Account Supervisor is there to help. Contact:



Tom Fine
Aetna Life & Casualty
800 Washington Building
1325 Fourth Ave.
Seattle, Washington 98101

The Aetna Casualty and Surety Company

Standard Fire Insurance Company

SOCIETY NEWS BRIEFS

A summary of Medical Society, and local medical and health news

1978-1979 CME COURSES OUTLINED

The following Category I CME courses have been tentatively scheduled by the College of Medical Education for the coming year:

Date	Topic	Hours of credit
October 18 – Tacoma General Hospital	<i>Fluid & Electrolyte/Acid Base Disorders</i>	6
November 6, 7, 8 – St. Joseph Hospital	<i>Infectious Diseases</i>	8
January 17, 18, 19, 20 – Lakewood General Hospital	<i>Timely Topics</i>	8
February 14, 15, 16, 17 – St. Joseph Hospital	<i>Hematology</i>	8
March 17, 18 – Tacoma General Hospital	<i>Tacoma General Hospital Day</i>	7
March 14, 15, 16, 17 – TBA	<i>Tacoma Academy of Internal Medicine</i>	16
March 21 – Mary Bridge Children's Hospital	<i>A Day of Pediatrics</i>	6

Specific dates, times and additional information have yet to be finalized. Program information will be mailed to physicians prior to each program. Physicians may contact the College's Executive Director, Mrs. Maxine Bailey, 756-3152, for further information.

SURVEY UNDERWAY

The AMA's Center for Health Services Research and Development is conducting its 12th annual Periodic Survey of Physicians. The AMA conducts the study to maintain current and reliable information on the practice of medicine. Survey results are published yearly in *Profile of Medical Practice* ("Red Book"). All responses are handled in strict confidence and only aggregate figures are published.

Continued on page 19

The 1978 EDWIN C. YODER Memorial Lecture

"Clinical Application of Microsurgery" Lecturer

Harry J. Buncke, M.D.
Plastic and Reconstructive Surgery
San Mateo, Calif.

Friday, November 17th 12 Noon St. Joseph Hospital

PRESENTED BY

**Edwin C. Yoder Memorial Lectures
and
St. Joseph Hospital & Health Care Center
Tacoma, Washington**

“COME GROW WITH US”

This has been a growing year for the Pierce County Chapter of the American Association of Medical Assistants (AAMA). Our chapter now has over 40 active, associate, and student members. We hope that many more medical assistants will join us in the coming year.

To help get the coming year off to a good start, the first AAMA Pacific Northwest Regional Conference was held in Vancouver, Washington late in August. The Washington State Society joined the Oregon State Society for a leadership training session for all state and chapter officers.

Pierce County's chapter held its first meeting of the fall on September 11, at the Yukon Mining Company. George Tanbara, M.D., one of our physician advisors, spoke at the meeting. As many of you know, Dr. Tanbara has been very supportive of our chapter and is an inspiration in urging us on towards our goal of continuing education.

While on the subject of “continuing education,” check your August Medical Society *Bulletin* (in case you were on vacation when it arrived) and learn of the Seminar – Workshop on “Drug Use and Abuse” planned for September 30 at the Rodeway Inn. If you have misplaced your *Bulletin*, watch for the Pierce County Bureau mailings which will include information and registration forms for this educational seminar. Remember, CEU's will be awarded those with their CMA-A-C from National. The reservation deadline is September 22, and is limited so pre-registration is a must.

Bosses' Night will be held on October 8. Last year Bosses' Night was such a huge success with so many assistants entertaining their bosses we were kind of cozy. Therefore, this year we have reserved a much larger restaurant, The Poodle Dog in Fife, and a great surprise will be in store for you all. Plan to join us on October 8. Bosses' Night is for all medical assistants and their bosses in the area and is not limited to AAMA members. For reservations call Nancy Blann, 927-1555, Maggie Polwarth, 383-1524, or Doris Stansell, 383-2413. Call before October 5 and join in the fun.

On November 12, the AAMA Chapter will return to the Yukon Mining Company for another educational speaker following supper. The speaker will be announced at a later date.

An important reminder to all individuals paying dues in October: dues paid in October will cover AAMA dues through December, 1979.

The Chapter started a new service to AAMA members in June when a lending library of professional literature was established. Jean Ferguson has graciously agreed to make the library available at her office located at 2607 Bridgeport Way West, Suite 2M. Office hours are from 9:00 a.m. to 5:00 p.m. Library items may be checked out for a period of 30 days. There are many titles now available including: “Primary Care”, “Giving Medications Correctly and Safely”, “How to Calculate Drug Dosages”, “Drug Interactions”, “Medical Practice Management”, and, for those of you working towards your CMA, “Medical Assistants' Examination Review, Volume I”. There is also a cassette tape course entitled “Leaders are Problem Solvers”. We hope to add more books at the library periodically. If you have donations they are most welcome.;

See you at Bosses' Night.

--Maggie Polwarth

Physician-Pharmacy Committee

MINIMIZING COMMON PROBLEMS

A number of steps physicians and pharmacists can take to minimize the problems that may occur after medication is prescribed have been reviewed at recent meetings of the Interprofessional Physician-Pharmacy Committee. As one of your representatives on this committee, I've personally found our discussions very informative. There is a variety of problems that can reduce the anticipated effectiveness of the drugs we prescribe for our patients.

One continuing problem is that of patients receiving two or more prescriptions from different doctors and then going, perhaps, to two different pharmacies and ending up with overdosages or incompatibilities of drugs. An example is the patient taking Butazolidin and then getting a prescription from another physician and having it filled at another pharmacy for Azolid-A. Pharmacist members of the committee agree there is no completely effective way to avoid this problem but point out that pharmacists could ask patients what other medications they are currently taking.

To ensure that our patients take all the medication we prescribe, such as an antibiotic for an infection, we might do well to add "Until Used Up" to the directions on the prescription. If the pharmacist uses the words "Until Gone" instead of "Until Used Up", patients have been known to take their medication only until the symptoms are gone thus leaving the infection not really eradicated. An example of this problem is the disappearance of dysuria and frequency of cystitis. Just because such symptoms disappear does not mean that the infection is cured, and stopping the drug can be followed by a recrudescence of the symptomatology with the result that a cure is much more difficult to effect.



Herman S. Judd, MD

By the way, were you aware that a survey by pharmacists in Pierce County has revealed that ten percent of our patients never pick up their prescriptions? Some of these people go to another pharmacy, but five percent never show up at a pharmacy at all! It makes you wonder why these patients went to their doctor in the first place, doesn't it!

None of us enjoy being called at home after a tiring day in the office – especially when the call is from a pharmacist requesting authority to refill a prescription. We should remember, however, that it isn't the pharmacist's fault that he is calling; it is the patient's fault for not having sought his refill during our office hours (when possible). And, the pharmacist is duty bound if he thinks the prescription is important to the patient's welfare not to wait until the next day. Likewise, it is our duty, as physicians, to support the pharmacist and accept the call. To refuse would be counter to the best interests and welfare of the patient.

Coming next month: **DYNAMITE!** The physician who writes prescriptions for controlled substances without appropriate reason and often without ever having examined the patient (yes, it does happen!). Also, the pharmacist who is absent from his pharmacy and authorizes a nonpharmacist to receive prescriptions and fill them in his absence (this happens too!).

Membership

In accordance with the bylaws of the Medical Society of Pierce County, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of their application is herewith presented to the membership.



FIRST NOTICE

ALBERT L. COOPER, M.D., Physical Medicine and Rehabilitation. Born in Seattle, 7/7/17; medical school at University of Oregon Medical School, 1944; internship at Swedish Hospital, Seattle, 1944-45; residency in physical medicine and rehabilitation, Veterans Hospital, Portland, OR, 1951-53; licensed to practice medicine in the State of Washington, 1945. Dr. Cooper is currently practicing at 1718 South I Street in Tacoma.



CLARK T. MARQUART, M.D., General Practice. Born in Fort Wayne, Indiana, 9/8/47; medical school at Indiana University School of Medicine, 1973; internship at St. Anthony's Hospital Denver, Colorado, 1973-74; previously practiced with the Indian Health Service at Rosebud PHS Hospital, Rosebud, South Dakota, and Seattle Indian Health Board; licensed to practice medicine in the State of Washington, 1977. Dr. Marquart is currently practicing at the Puyallup Indian Clinic.



THOMAS J. RAFOTH, M.D., Radiology. Born in Dubuque, Iowa, 9/18/48; medical school at University of Illinois, College of Medicine, 1974; internship at St. Lukes, Chicago, Illinois, 1973-74; residency at University of Colorado Medical Center, Denver, 1974-77; served as staff radiologist, Denver General Hospital, 1977-78; licensed to practice medicine in the State of Washington, 1978. Dr. Rafoth is currently practicing at Tacoma Radiological Associates.



HENRY C. REITZUG, M.D., Pediatrics. Born in Germany, 12/20/45; medical school at Indiana University School of Medicine, 1972; internship at Indiana, 1972-73; residency at Madigan Army Medical Center, 1976-78; graduate training in pediatric endocrinology, 1977-78; licensed to practice medicine in the State of Washington, 1978. Dr. Reitzug is practicing at 1318-3rd Street SE, Puyallup.

LETTERS

IS THE MEDICAL CARE OF THE PEOPLE OF PIERCE COUNTY A MEDICAL SOCIETY OR GOVERNMENT RESPONSIBILITY?

Member physicians of the Medical Society should decide individually and/or collectively how the issue of medical care should be dealt with in their own practice as well as by the Medical Society as a whole.

My own feeling is that most people prefer a personal physician. To enhance this, physicians should be sure that not only their office staff but they themselves initiate an offer to care for financially handicapped patients on a delayed, lowered or no-fee basis. Physicians who do not care to deal with the government or the inevitable forms for Medicare, Medicaid, etc., may care for those patients on a no-fee basis. Our community is fortunate in having pathologists and radiologists willing to accept fees for patients referred to them on the same basis as the referring physician, especially if notified in advance.

With these feelings, the Family and Eastside Clinics are generally geared to referring patients to private practitioners after social and financial processing. If these patients were to become a part of that physician's regular practice it would provide continuity of care. If all physicians would have low income patients as ten percent of their practice it would lessen the need for the continued scrambling for funds to service low income patients, unwarranted expenditures of time and resources for emergency department utilization for non-emergency conditions, and make available to the residents of Pierce County the type of medical care the membership of the Medical Society feels is the "ideal." This might decrease the "pot-shots" physicians take at the Health Department clinics, community clinics, school clinics, hospital clinics, etc. Many of these clinics have been started because of a need not currently being met by members of the medical society.

Suggestions on how the needs of the medically indigent might be realistically and practically met are welcome.

George Tanbara, M.D., Chairman
Public Health/School Health Committee

MEDICAL LIBRARY PROVIDES ACCESS

Your access to the medical literature through the network of Biomedical communication—hospital libraries, the Pierce County Medical Library, Pacific Northwest Regional Health Sciences Library, National Library of Medicine, and the British Lending Library—begins in Pierce County through your medical library. Comprehensive library services include literature searches, bibliographies, inter-library loans, and Med-line searches (literature retrieval by computer). The library is open Monday through Friday from 8:00 a.m. to 5:30 p.m. A key is available upon request for library use at other times. For additional information or assistance contact M. VonBruck, librarian, 572-5340.

TEL-MED DONATIONS RECEIVED MAY THROUGH AUGUST, 1978

The Pierce County Tel-Med Society extends its sincere appreciation to the following individuals and organizations for their support of Tel-Med, our unique medical information library. Tel-Med continues to provide a much needed public service. Since its inception in April, 1977, Tel-Med has responded to over 89,000 telephone inquiries covering a comprehensive range of taped medical and health related messages.

Toshio J. Akamatsu, M.D.

Allenmore Foundation

Ronald G. Anderson, M.D.

Charles LeR. Anderson, M.D.

Leo Annett, M.D.

D.T. Baer, M.D. and R.G. Bowe, M.D.

Richard F. Barronian, M.D.

Myron Bass, M.D.

David BeMiller, M.D.

Edward Bitseff, M.D.

Milton S. Bleiweiss, M.D.

Robert Bond, M.D.

Wouter J. Bosch, M.D.

Otis E. Bridgeford, M.D.

Kurt Brawand, M.D.

Douglas P. Buttorff, M.D.

John Comfort, M.D.

James Crowley, M.D.

Charles W. Curl, M.D.

Robert L. Detje, M.D.

Dale Doherty, M.D.

Treacy Duerfeldt, M.D.

James F. Early, M.D.

Charles J. Galbraith, M.D.

Gastroenterology Associates

(Drs. Baerg, Levant & Waldron)

Kenneth Graham, M.D.

Gross, Larson, Whitney & Associates

(Drs. Gross, Larson, Whitney, Flood,

Graham, Pliskow, Campbell & Rich)

Orvis A. Harrelson, M.D.

Melvin L. Henry, M.D.

James D. Howard, M.D.

Murry Johnson, M.D.

Robert C. Johnson, M.D.

Edmund A. Kanar, M.D.

James Kenney, M.D.

Peter Kesling, M.D., and Dennis Wight, M.D.

Joseph LaTona, M.D.

David E. Lee, M.D.

Robert J. Martin, M.D.

Thomas J. Miskovsky, M.D.

Stanley Mueller, M.D.

Arthur J. Ozolin, M.D.

Robert Padgett, M.D.

Plastic Surgeons Northwest, Inc.

(Drs. Banfield, Alger, Stilwell

& Irish)

Charles D. Prewitt, M.D.

Professional Pharmacists of Pierce County

Puget Sound Hospital Council

Puyallup Radiological

(Drs. Kramer and Mikkelson)

Gilbert J. Roller, M.D.

Roger M. Roper, D.O.

Paul Schneider, M.D.

Stanton L. Sheimo, M.D.

A.H. Sobul, M.D.

Sound Health Association

Ron Spangler, M.D.

R.V. Stagner, M.D. & R.K. Ohme, M.D.

Kenneth Stern, M.D.

Leo F. Sulkosky, M.D.

Sumner Family Physicians, P.S.

(Drs. Kanda, Kemman & Weber)

George Tanbara, M.D.

Max Thomas, M.D.

S.W. Tuell, M.D.

Mrs. Frank Walton

Dennis F. Waldron, M.D.

Western Clinic

Hobart J. White, M.D.

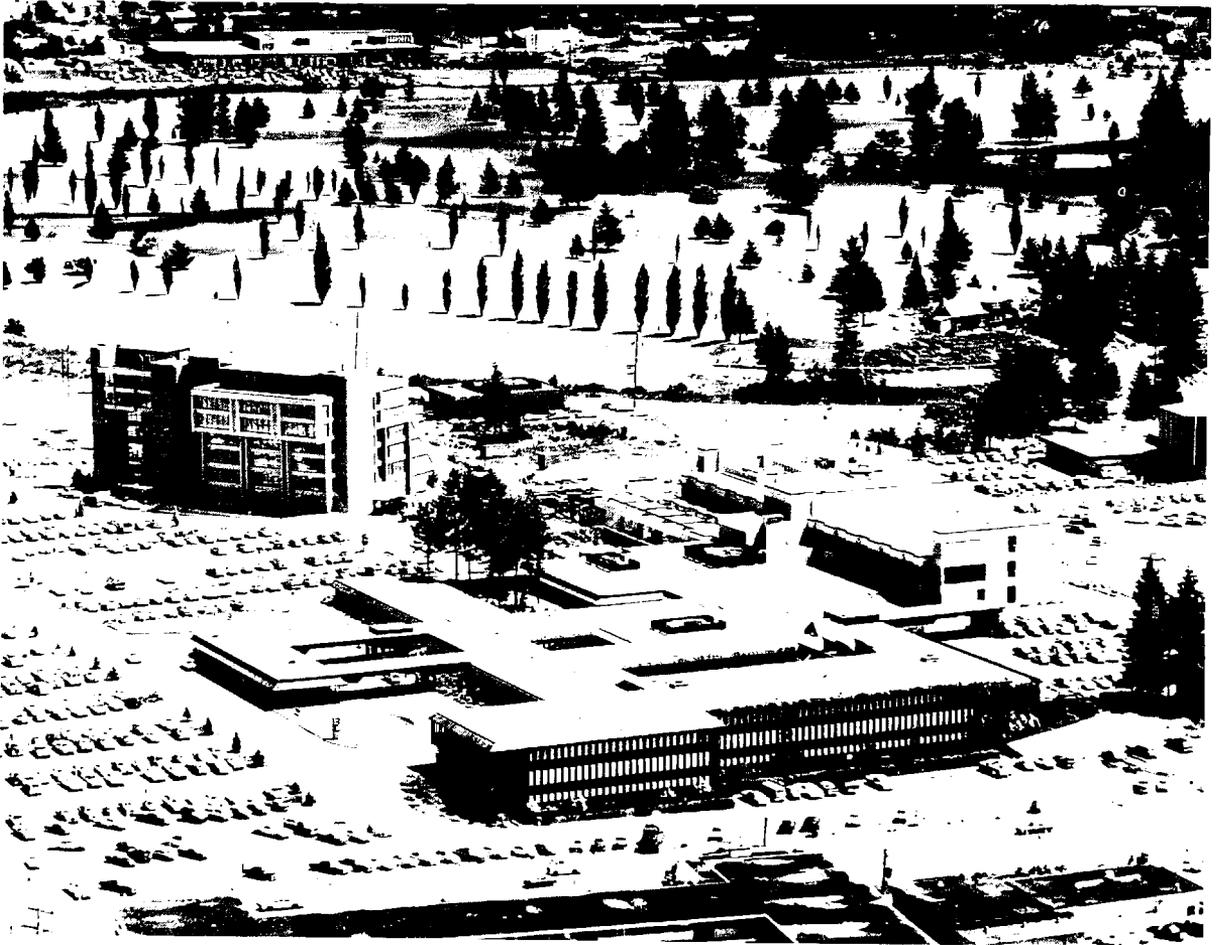
J.H. Winemiller, M.D.

Wayne Zimmerman, M.D.



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

We invite you to investigate the many unique advantages which Allenmore Medical Center offers

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

America's Health Care System: A Comprehensive Portrait

How the nation's 220,000,000 people obtain their medical care (and what they think about it) is probed in a new survey. It reveals that barriers are tumbling, most patients are satisfied, but cost remains an overriding concern.

The following information was published as "Special Report Number One/1978" by the Robert Wood Johnson Foundation, Office of Information Services, P.O. Box 2316, Princeton N.J. 08540. It is reprinted here for your information, by permission of Frank Karel, editor.

PART TWO

See August issue for Part One

Are People Satisfied? What Americans Think About the Care They Obtain

Whether or not people are satisfied with their medical care, the Chicago researchers believe, is an important dimension of access and one part of the survey measures satisfaction: how patients feel about their encounters with the system.

Studies on consumer satisfaction in many areas, including health, have been increasing in recent years. Critics of this approach argue that patients are not appropriate judges of their health experiences because they lack sufficient technical knowledge to make an informed judgment.

The study team does not agree with that contention. Gretchen Fleming, assistant study director, notes: "Querying consumers derives from the very notions on which democracy itself is defended—that it is appropriate for the public to be invited and even urged to voice judgments, and that such opinions should be taken seriously. Should consumers' views appear ill-informed to policy makers or those who possess more technical information on the subject, it is their (the policy makers) prerogative in turn to try to convince the consumers otherwise by making further information available to them."

The study probes in some depth whether patients are satisfied or dissatisfied with the care they receive. Chart 4 summarizes how the U.S. population feels about various aspects of its most recent doctor visit.

Time spent waiting to see a doctor and the amount of information given to the patient by the doctor are major areas of dissatisfaction.

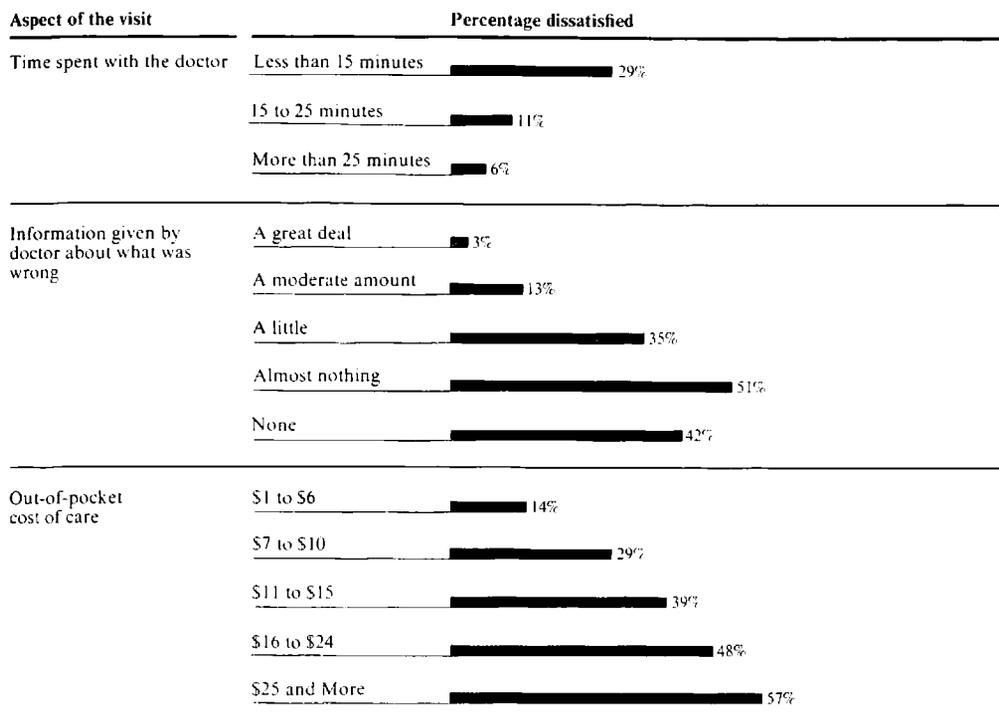
But no factor rivals cost as a cause of dissatisfaction.⁶

As with all aspects of the study, each factor has been analyzed by income, age, race, region, sex and other variables, and the following generalizations can be made:

- ▶ satisfaction with care received increases with age
- ▶ persons in the South are least satisfied
- ▶ persons with higher income and more education are the most satisfied
- ▶ blacks are less satisfied than whites
- ▶ persons who see their own doctor regularly are more satisfied than persons who see different doctors in a series of visits
- ▶ rural blacks in the South are least satisfied of all groups
- ▶ people of Spanish origin in the Southwest are less satisfied than other whites.

The study team has carried its analysis of satisfaction and dissatisfaction an important step further. Chart 5 illustrates how they analyze different variables. The chart shows a range of actual experiences reported by patients, together with the percentage of patients who are dissatisfied with various aspects of that experience. For example, dissatisfaction with the amount of time it takes to get to the

6. Cost and utilization both are being probed in a new study being conducted by the federal government's National Center for Health Statistics (NCHS) which carries out extensive research on many aspects of the nation's health system. The study, which is collecting 1977 data from a national sample of 11,500 households, is being jointly conducted with the National Center for Health Services Research.



doctor's office ranges from a low percentage of 4 percent for those who required less than 15 minutes to a high of 37 percent dissatisfied if the trip took over 30 minutes.

"It is very clear that the kinds of events that surround delivery of care strongly affect people's levels of satisfaction," the study team concludes. "Consumers in general are not inclined to be highly critical of their medical care."

The Paradox of Personal Satisfaction and Perceived Crisis

But then comes a paradox. Despite the survey data which show, generally, a high level of satisfaction, as well as increased access to the health system for Americans of all ages and races, the study also shows that 61 percent of the population—125,000,000 people—believe there is a crisis in health care in the U.S. And another 26 percent are so uncertain they

cannot deny it.⁷

Why this paradox exists is a mystery still to be probed—not only by the Chicago team, but by other investigators as well.

It could be a product of the human propensity to seek reassurance and support when in need. When people contemplate their own medical care (i.e., "Were you satisfied with what your doctor did for you?"), the response is from the perspective of a patient—each individual is then a statistic of only one and answers are shaped accordingly.

It is quite another matter to respond to questions about health in the abstract, simply as a part of the aggregate (i.e., "Is there a crisis in health care?").

In spite of these mixed perceptions about what goes on in America's health care system, the national survey of access to medical care provides important new insight into the how and why of the system and is a study of importance likely to be analyzed for years.

Health Opinions of the U.S. Population⁸

Some things people say about health care, doctors, and hospitals.

	Agree	Uncertain	Disagree
There is a crisis in health care today in the United States.	61%	26%	13%
A person understands his own health better than most doctors do.	29%	15%	56%
If I have a medical question, I can reach someone for help without any problem.	70%	13%	17%
Without proof that you can pay, it's almost impossible to get admitted to the hospital.	56%	25%	19%
Doctors always do their best to keep the patient from worrying.	60%	24%	16%
In an emergency, it's very hard to get medical care quickly.	38%	15%	47%
More hospitals are needed in this area.	39%	26%	35%
Sometimes doctors take unnecessary risks in treating their patients.	22%	41%	36%
Doctors always treat their patients with respect.	67%	16%	17%
Medical insurance coverage should pay for more expenses than it does.	63%	24%	13%
Doctors cause people to worry a lot because they don't explain medical problems to patients.	40%	20%	40%
Most people receive medical care that could be better.	48%	35%	17%
Doctors ask what foods patients eat and explain why certain foods are best.	40%	26%	34%
If more than one family member needs medical care, we have to go to different doctors.	35%	11%	54%
There is a big shortage of family doctors around here.	51%	26%	23%

Opinions about nurse practitioners and physician's assistants doing some of the tasks traditionally performed by doctors.

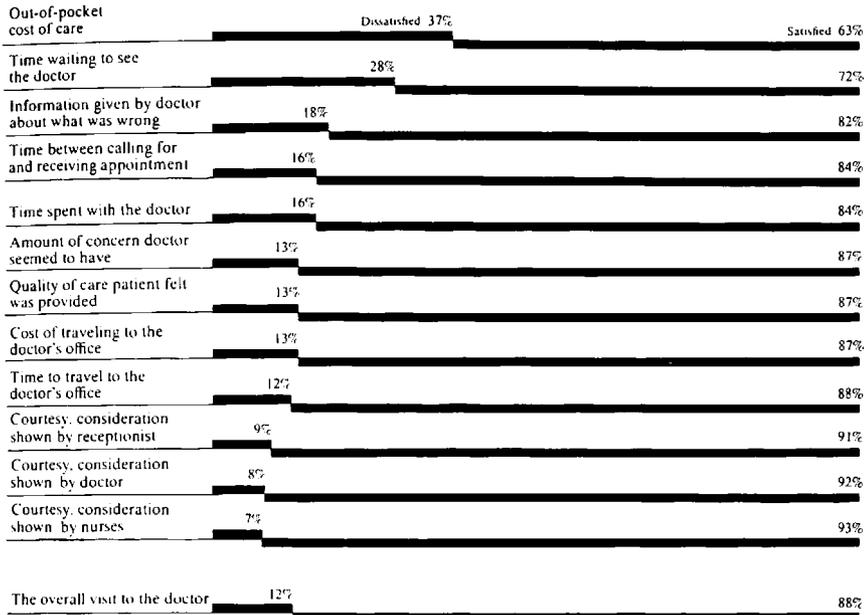
	Yes	No	Uncertain
Do the preliminaries of a medical examination before the doctor comes in, including medical history taking, blood pressure, and so on?	84%	10%	6%
Decide whether or not you need a doctor when you go to a clinic or a doctor's office when you are not feeling well?	31%	58%	11%
Provide follow-up care and treatment after a physician has diagnosed your condition and prescribed treatment?	58%	31%	11%
See pregnant women and babies on their regular visits when nothing seems to be wrong?	46%	36%	18%

8. A Health Opinions questionnaire was an integral part of the national survey. Emphasizing to the respondents that there were no "right" or "wrong" answers, it probed their views on a wide variety of health and personal issues. Much of the data collected in the national survey have been incorporated

into various indices and scales, but in this particular section the raw responses themselves reveal interesting information about what the U.S. population thinks about health in the broadest sense. Some examples are presented here. All percentages have been rounded to equal 100 percent across each item.

Chart 4

Among Those Who Saw a Physician in a 12-Month Period, Percentage Dissatisfied/Satisfied with Various Aspects of the Visit

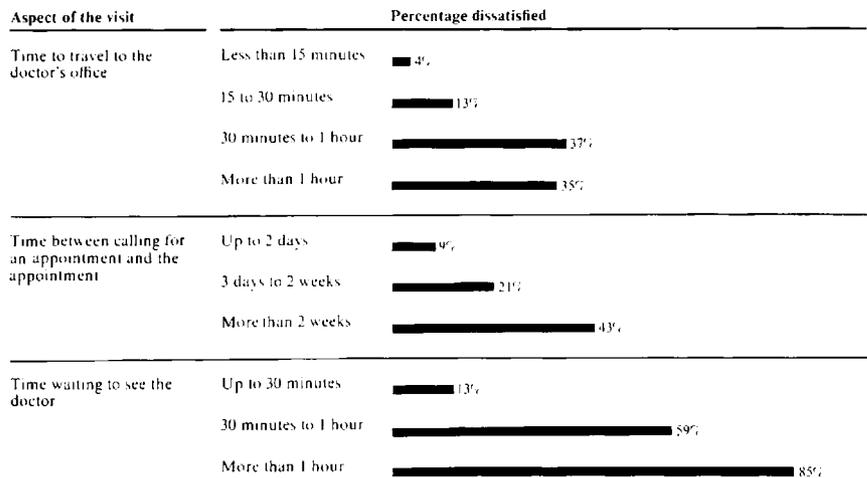


To determine whether people are satisfied or dissatisfied with their medical care, the research group asked questions of all persons who had visited a doctor during the past year. The questions probed impressions of specific aspects of the visit. "Responses were very skewed toward the positive end of the scale," the group reports. For the total population, cost is the greatest cause of dissatisfaction. Overall, the chart reveals the U.S. population is generally satisfied.

Chart 5

Among Those Who Saw a Physician in a 12-Month Period, Percentage Dissatisfied with Various Aspects of the Visit Classified by the Nature of the Experience

While people generally express satisfaction with most aspects of their medical experiences, there comes a time for most when they cross a threshold of tolerance. At that point, satisfaction turns to dissatisfaction. Each variable—travel time, cost, amount of time spent with the doctor, appointment waiting time—has its special threshold. This chart matches a range of experiences with a set of variables and shows levels of dissatisfaction. Overall, it captures some sense of the dynamics of the doctor-patient relationship.



When the pill, the IUD, or the diaphragm is not the answer.



Now there's Semicid.™

New Semicid (nonoxynol-9) Vaginal Contraceptive Suppository solves many problems of modern birth control alternatives: the pill can have systemic side effects, the IUD may cause discomfort and side effects, the diaphragm is often inconvenient. The fuss and mess of foams, creams and jellies, plus the minor irritations sometimes caused by the other vaginal suppository often discourage compliance.

Now there's a sensible alternative: Semicid. It's a medically tested, non-hormonal vaginal suppository that is both safe and effective. In fact, Semicid contains the maximum recommended 100 mg. level of nonoxynol-9, the long-recognized standard of spermicidal efficacy.

U.S. Clinical Study Proves Semicid Safe and Effective.

In a recent U.S. clinical study,* 326 women were monitored for a total of 4890 women-months. This study was conducted by a gynecologist and was carefully reviewed by independent gynecological groups at two major universities. In comparing the findings of these groups with published reports of other contraceptive methods, Semicid is shown to be effective in the prevention of pregnancy.

Patient acceptance was also very high. In fact, 85% of those clinically evaluated were so satisfied, they planned to continue to use



Semicid after the study was completed. The clinicians evaluating the data have suggested that the minimized irritation and exceptional convenience of the new delivery system helped enhance compliance and, therefore, efficacy.

Simple and Gentle Enough To Assure Compliance.

Semicid delivers this potent spermicide in a convenient, gadget-free, one-inch vaginal suppository that maximizes compliance. Your patient can use it simply, unobtrusively, and only when it is needed. Once it is digitally inserted, Semicid forms an effective spermicidal barrier within 15 minutes. Women using the product found Semicid non-irritating. Semicid is non-staining and has no unpleasant taste or odor.

When you consider all that — the safety, efficacy, and convenience of this new contraceptive — you can see why your patients will continue to use Semicid once they have tried it. Use only as directed.

Semicid Vaginal Contraceptive Suppositories

For Additional information
 Product Samples Both
 Fill in Below and Mail to:
 Whitehall Laboratories,
 685 Third Ave., New York, N.Y. 10017.
 Attn: Medical Director

Name _____

Address _____

City _____ State _____ Zip _____

*Data on file, Whitehall Laboratories

From the Health Department

NOTIFIABLE DISEASE REPORTING SYSTEM CHANGED

Beginning in September, each issue of the "Target" mailed to Pierce County physicians includes the necessary number of notifiable disease report forms for that month. The form is on a postage-paid business reply card. Diseases are listed alphabetically and space is provided for comments or other diseases physicians may wish the Health Department to compile. An asterisk precedes those diseases for which the state or Center for Disease Control requires additional information. Physicians are asked to include their name and phone number on the reporting form. Physicians will retain the option of calling the Health Department with the information at the time of the initial report, if it is more convenient.

The department realizes, appreciating the demands on physicians' time, that the office nurse or other staff may be delegated responsibility for completing the report form. In such cases, the department asks physicians to

reassure their staff that reporting is an important responsibility of each practitioner in the health field; regular reporting improves the accuracy of statistics the Health Department provides the following month; the department wants suspected diseases reported; and, reporting does not imply a non-physician is diagnosing.

It is a responsibility of the department's Communicable Disease Coordinator to compile communicable disease statistics and to provide that data to the reporting source on a timely basis. The department has provided a means of doing this through its monthly publication, the "Target." The department, in turn, asks that physicians make every effort to establish a system for regular reporting of such statistics.

--Evelyn Peterson, R.N., B.S.N.
Communicable Disease Coordinator

SOCIETY NEWS BRIEFS continued

OUT OF TEL-MED BROCHURES?

If so, just call Tel-Med. 627-6181, and one of the hardworking Tel-Med volunteers will see that your order is delivered as quickly as possible. Tel-Med phone volume remains high . . . 43,694 calls were answered in the first seven months of 1978. This valuable and highly regarded public service needs your support.

CONTEMPLATING RETIREMENT?

For physicians who are retired, are about to retire, or want to know how to retire, there is an association whose members have identical interests and concerns. The American Retired Physicians Association (ARPA) was founded three years ago with encouragement and financial assistance from the AMA. ARPA assists its members in adjusting to retirement and provides information on all aspects of retirement, including the social, physical, psychological, and economic aspects of retirement. Dues are \$20 for physicians and \$15 for spouses of deceased physicians. For more information, write ARPA, 536 North State St., Chicago, Illinois 60610.

ADDITIONAL ROSTERS AVAILABLE

Additional copies of the 1978-1979 Directory of Pierce County Physicians and Surgeons are available at the Medical Society office. For additional copies, at a charge of \$4.00 per copy, contact the Medical Society office, 572-3667.

PLACEMENT SERVICE DIRECTOR NAMED

Susan Thornton, CMA, has joined the staff of the Medical Society as director of the Medical-Dental Placement Service. Thornton is past president of the Washington State Society, American Association of Medical Assistants and has been active in local and state AAMA affairs. She has worked for several physicians during her career in the medical field. To discuss your office's personnel needs with an individual familiar with front- and back-office responsibilities, call Susan Thornton, CMA, at the Society's Medical-Dental Placement Service, 572-3709.

DUES CUT FOR FIRST YEAR PHYSICIANS

AMA Membership dues will be cut in half for one year for physicians first entering practice. The action by the House of Delegates followed extensive research by the Board of Trustees on the financial and membership impact of the proposal.

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people like you 24 hours a day



RADIO-TELEPHONE

PAGING

TELEPHONE ANSWERING

RADIO PAGE 572-3222

PERSONAL PAGING is like having a telephone in your pocket! 24 hours a day... when you must be contacted, you get an actual voice message from your personal Pager.

ANSWERING SERVICE 572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw - 24 hour service.

We're your convenient source for WSMA/AETNA professional liability insurance.

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



PERSING, DYCKMAN & TOYNBEE, INC.
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynbee
Wayne Thronson
Bob Sizer

Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks

Before you next dictate
remember:

LENOX TRANSCRIPTION SERVICE

- Personalized service
- Direct dictation line
- Experienced medical steno
- Full-time, part-time, or temporary service

24 hour dictation line

535-0332

For more information contact:
Nancy Lenox/537-3921

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
 - DENTAL
 - PROFESSIONAL
- Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

Auxiliary Page

BIG SISTERS, COOKBOOKS, AMA-ERF GREETING CARDS ALL PART OF AUXILIARY'S YEAR

Any volunteers to be a Big Sister? Debbie McAlexander, big sister program chairman, expects more new medical families moving into the area. More volunteers will be needed to act as special friends, taking new auxiliary members to meetings and being helpful in any way. If you are interested in providing a very tangible service, call Debbie, 588-9779.

Betty Bahn reports cookbook depots are ready for distribution. The Auxiliary's cookbooks sell for \$4.00 each, paid on receipt. Cookbooks are available at the following locations:

Gig Harbor (Lee Jackson, 1-857-4390)
West End (Betty Bahn, 565-0527)
Lakewood (Kit Larsen, 584-3802)
North End (Glenna Blackett, 752-3970)
Stadium (Jane McDonough, 572-6840)
Fircrest (Nikki Crowley, 565-3767)
Browns Point (Bev Harrelson, 927-6144)
Puyallup (Deva Vaught, 845-6215)
Puyallup (Lorraine Sulkowsky, 845-8264)

Need a break from your regular schedule? Donate a morning to Tel-Med, once a month, once a week or as a substitute. Glenna Blackett, 572-3970, coordinates this important service and gladly accepts volunteers.

Once again, Auxiliary plans to participate in AMA-ERF Holiday Greeting Cards. Last year we raised over \$6,000.00, primarily from funds received from the Holiday Sharing Card. We hope to continue this great support or even top it this year. A letter providing more details will be mailed to all members later in October. Donations will be sent to Jan Thiessen, AMA-ERF Chairman.

The "Experience Auction" is planned for Auxiliary's March meeting. Nikki Crowley reports ideas are in the works for this meeting. You will be hearing more about this meeting later.

Last but not least - there has been very good response to the dues envelope enclosed in the President's Newsletter. Keep them coming in (to Dottie Truckey).

-Joan Sullivan

AUXILIARY OFFICERS 1978-1979

President Jo Roller
President-elect Kit Larson
1st V.P. & Program Nicole Crowley
2nd V.P. & Membership Alaire Sheimo
3rd V.P. & Historian & Bylaws Marge Ritchie
4th V.P. & Arrangements Sharon Lukens
Recording Secretary Barrie Mott
Corresponding Secretary Shirley Bourdeau
Treasurer Shirley Murphy
Dues Treasurer Dorothy Truckey

AUXILIARY COMMITTEE CHAIRMEN 1978-1979

AMA-ERF Jan Thiessen, Cindy Hammer
Artist Resource K. Tanbara, L. Jackson, B. Wong
S. Flood, A. Hilger, J. Brachvogel
Auxi-Quad Luncheon Nancy Spangler
Communications
Newsletters Janet Fry
Bulletin Joan Sullivan
News Media Cindy Anderson, Penny Detje
Community Health Kay North, Elsie Parrot
Cookbook Promotion Betty Bahn
Finance Jane Gallucci
Handicapped Awareness Liaison Janet Fry
Joint Installation Dinner Marny Weber
Legislative Donna Roper, JoAnn Johnson
Mailing Gloria Virak
Newcomers Em Stern
Newcomer Coordinators D. Wickstrom, D. Havlina
S. Hansen, S. Vitikainen, S. Wiess, L. Bede
J. Judd, L. Stillwell, J. Soronen
Nominating Helen Whitney
Pierce County Health Council Nadine Kennedy
Project Bank Kit Larson
Student Recognition M. Mandeville, J. McDonough
Sunshine Kathy Miskovsky
Tel-Med Coordinator Glenna Blackett
Telephone Shaaron Anderson
Telephone Area Chairmen V. Smith, N. Bageant,
J. Sullivan, B. Graham, J. Iverson
Welcome Program Debbie McAlexander



A.T. NORMAN INTERIORS

COMMERCIAL - RESIDENTIAL
OFFICES - MEDICAL & HEALTH FACILITIES
FULL SERVICE - SPACE PLANNING
COLOR & LIGHTING SPECIALISTS

Design Staff:

RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK

MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936

206/627-3139

DESIGN OFFICE - SHOWROOM
524 TACOMA AVENUE SOUTH - TACOMA, WASHINGTON 98401



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*

**UNIVERSITY PLACE
MEDICAL CLINIC**

Office Space Available For Lease

- 1062 square feet; four examination rooms; two restrooms; waiting room and receptionist/filing area.
- 1,250 square feet; ground level.

Both office spaces offer ample free patient parking and an excellent location. For further information contact:

Clay Anderson or Don Huber
Telephone 564-6069

Huber & Antilla Construction
2607 Bridgeport Way, Suite 2D
Tacoma, WA 98466



*Servicing the Medical Profession
Since 1930*

BIDDLE & CROWTHER Co

Physicians and Hospital Supplies

Home Office

910 North 137th - Seattle 98133
(206) 365-9900

First Hill Branch

(for Retail Sales to Patients)

1018 Summit Avenue - Seattle 98104
329-1668

PACIFIC NORTHWEST ORTHOPEDICS

DIVISION OF BIDDLE & CROWTHER CO.
Prosthetic Implants - Orthopedic Supplies
1216 Madison St. - Seattle 98104 - 622-3700

Call us toll-free from anywhere in the
State of Washington - 1-800-562-6994

Classified

Classified and announcement copy may be mailed to: Journal & Bulletin Agency, Inc. P.O. Box 10747, Winslow, WA 98110, or phoned to Seattle (206) 682-7813. Deadline 25th of month prior to month of issue.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T.G. Contact Richard Huish, M.D., 572-4664.

Golden opportunity for a physician to step into the shoes of a retiring physician with a well established practice of a quarter of a century. Equipment available. Call Benton McCarthy Realty, Inc. Commercial Dept. (206)455-8360 or Pat Ulrich (206)747-1299

KIRKLAND - medical bldg. for lease in a 5 bldg. complex 1600 sq. ft., includes -waiting room, reception room, 4 examination rooms, 2 offices, x-ray and darkroom. 641-5743.

AKC German Sheperd puppies for sale. 383-2691.

HAWAII!!!

Furnished Condos all islands—reasonable—studio 1 and 2 BR. Mostly ocean front (206) 454-1431.

AMERICAN ACADEMY OF FAMILY PRACTICE MONTHLY MEETING

ALLENMORE HOSPITAL
TUESDAY, OCTOBER 12, 1978

6:00 p.m. Complimentary Cocktail Hour

7:00 p.m. No Host Dinner Meeting

TOPIC: *"The Doctor and the Local Press"*

SPEAKER: Don Pugnetti, Editor, TNT

A Special Invitation To All Pierce County Family Practice Physicians; All Family Practice Residents, Their Spouses and Friends.

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

General Surgeon certified by the American Board of Surgery, 1978, currently affiliated as a surgical assistant at Crittenton Hospital, Rochester, Michigan. Received medical education at University of St. Thomas School of Medicine, Manila, Philippines, graduating in 1958. Past experience in general surgery and general practice in the Philippines from 1959 to 1970 as a staff member of a government hospital and in private practice. Served rotating internship at Mercy Hospital, Toledo, Ohio, 1971-72, and residency in general surgery at Mt. Carmel Mercy Hospital and Medical Center, Detroit, Michigan, 1972-76. Listing 801.

Internist completing gastroenterology training at University of Washington seeks practice situation in Tacoma area. Desirous of practicing in both internal medicine and gastroenterology. Graduate Pennsylvania State University College of Medicine, 1974. Served internship and residency at Emory, 1974-1977. Now completing two year fellowship in gastroenterology at University of Washington. Board certified by American Board of Internal Medicine and board eligible, as of June 1979, in gastroenterology. Licensed to practice in Washington, member of American College of Physicians and Pacific Northwest Endoscopy Society. Listing 802

Family Physician expects to separate from military mid-1979. Diplomate, American Board of Family Practice; member, AMA and American Academy of Family Practice. Licensed to practice in Commonwealth of Virginia. Completed residency training at Madigan Army Medical Center. Listing 902.

Orthopedic Surgeon interested in joining established practice. Currently completing third year as orthopedic resident. Fort Wayne Medical Education Program. Engaged in Family Practice in Seattle, 1972-1975; internship, Harbor General Hospital, Los Angeles, 1971-1972. Graduate, University of Washington School of Medicine. Listing 901.

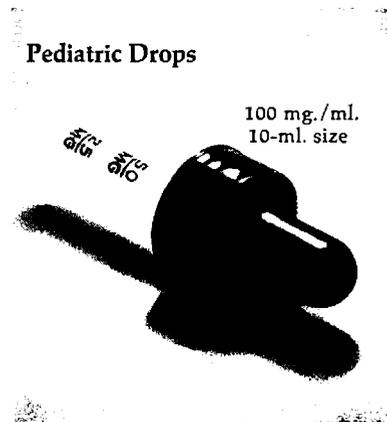
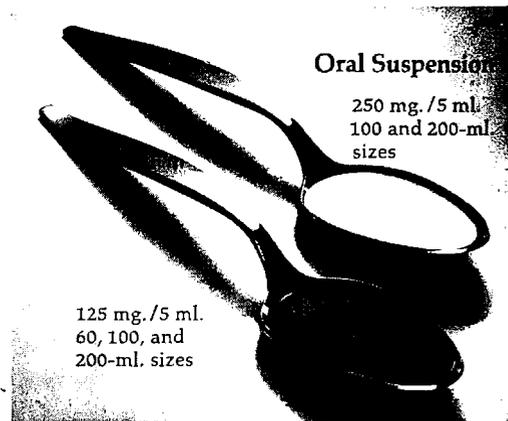
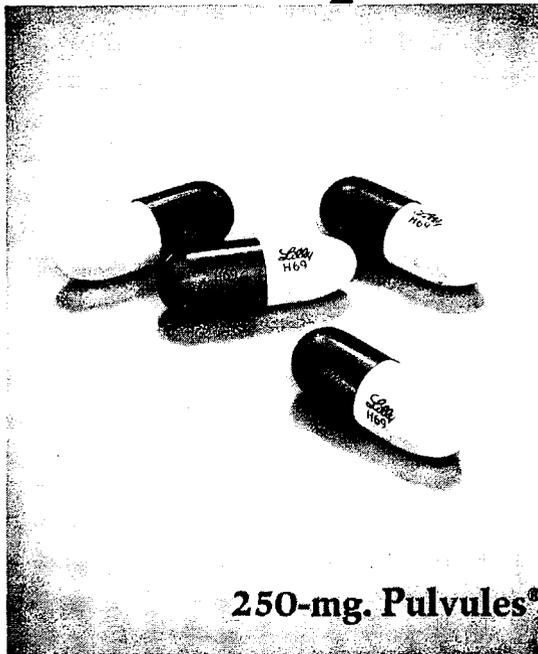
Urologist interested in solo or group practice. New York State medical license. Resident in urology, Albert Einstein College of Medicine. 1975-1977; served as senior resident in urology, Sloan-Kettering Memorial Hospital for cancer and allied diseases, 1976. Chief resident in urology, Albert Einstein College of Medicine, 1977-1978. ECFMG Standard Certificate, 1974. Listing 903.

Gastroenterologist available July, 1979. Trained in all endoscopic procedures including ERCP, laparoscopy, and colonoscopic polypectomy. Certified, American Board of Internal Medicine, 1976. Member, American College of Physicians; associate, American Society for Gastrointestinal Endoscopy. Licensed in Indiana, California, Oregon; graduate, University of Cincinnati Medical School. 1973; internship, Harkness Community Hospital, San Francisco, 1973-1974; residency, Presbyterian Hospital of Pacific Medical Center, San Francisco, 1974-1976. Fellowship, University of California, Veterans Administration Hospital, gastroenterology, 1977-1979. Listing 904.

MEDICAL SOCIETY OF PIERCE COUNTY
813 South K Street — Suite 200
Tacoma, Washington 98405
ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

easy to take



Keflex®

cephalexin



Additional information available to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206



Medical Society of Pierce County

October 1978 Vol XLX, No. 10 Tacoma, Washington



DSHS, Libraries
and . . . see page 7

BULLETIN

IN NEED OF GOOD HELP?

THE MEDICAL DENTAL PLACEMENT SERVICE

(a membership service of the Medical Society of Pierce County)

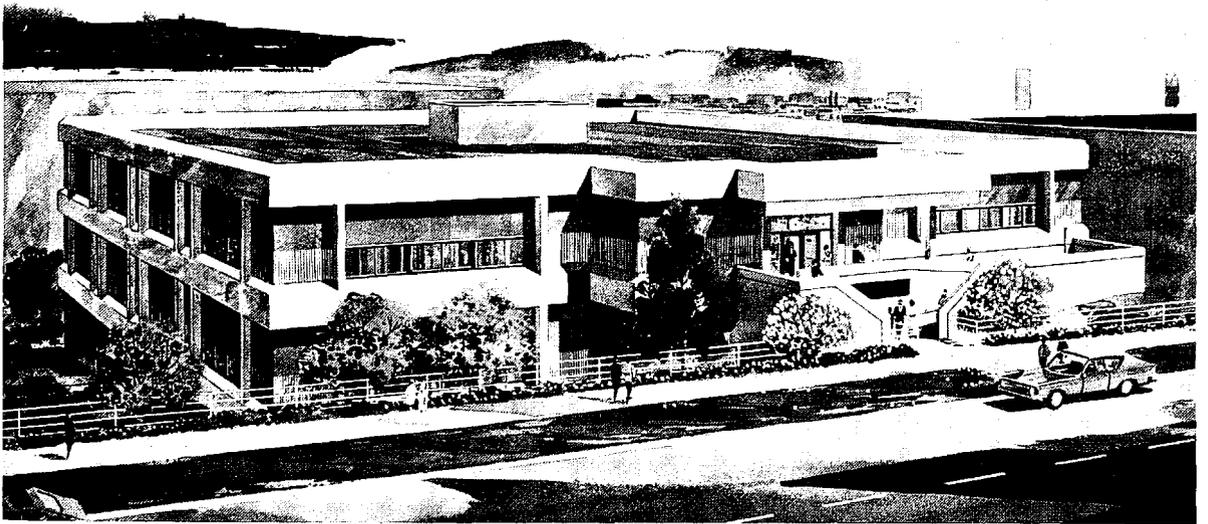
can provide you with front and back office personnel who are qualified, experienced, and immediately available for full-time part-time, and temporary assignments at no cost to the employer.

CALL 572-3709

“We specialize in matching the right employee and employer.”

DOCTORS PROFESSIONAL BUILDING

721 Fawcett Avenue – Tacoma, Washington 98402



- Personal suite design
- Moderate rates include utilities and maintenance
- Covered access to adjacent Doctors Hospital
- Within one mile of Tacoma General, Mary Bridge and St. Joseph's
- Generous interior allowance and design time
- Total environment air conditioning
- Ample patient parking
- Covered physician tenant parking
- Athletic facilities adjacent



For leasing information: Fred A. Pritchard – (206) 627-8111

The Doctors Hospital Of Tacoma
737 Fawcett Avenue – Tacoma, WA 98402

The 1978
Edwin C. Yoder
Memorial Lecture

“Clinical Application of Microsurgery”

Lecturer

Harry J. Buncke, M.D.
Plastic and Reconstructive Surgery
San Mateo, Calif.

Friday, November 17th
12 Noon St. Joseph Hospital

PRESENTED BY

Edwin C. Yoder Memorial Lectures
and
St. Joseph Hospital &
Health Care Center
Tacoma, Washington

Bulletin of the Medical Society of Pierce County

CONTENTS

Page

6	WSMA Annual Meeting
7	President's Page
8	AAMA Page
9	AMA News Briefs
10	Report from Redding
11	Membership
15	Crossword Puzzle
16	Society News Briefs
18	Auxiliary
19	Classified



Cover photo courtesy of
Glen McBride, MD

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D. (79)
Melvin L. Henry, M.D. (80)
William B. Jackson, M.D. (80)
Richard K. Ohme, M.D. (80)
Charles C. Reberger, M.D. (79)
Roy A. Virak, M.D. (80)
Myra S. Vozenilek, M.D. (79)
Helen Whitney (78)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Jail Health	Herbert C. Kennedy, M.D.
Legislative	William S. Judd, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Physician-Pharmacy	Herman S. Judd, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D.
	Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

WSMA PRESIDENT CALLS FOR MORE PERSONAL PHYSICIAN INVOLVEMENT

The quality of Washington State citizens' health can be improved if physicians become more personally involved in leading community health efforts, Dr. John A. Moyer, president of the Washington State Medical Association, said in his inaugural address in Spokane at the WSMA Annual Meeting.

Dr. Moyer called on physicians to take a leadership role in favor of preventive health measures and to speak out against violence, alcohol and drug abuse, and cigarette smoking.

Dr. Moyer cited violence in the community as an issue that physicians could particularly influence. He singled out television violence, automobile accidents in which drugs or alcohol are involved, and abuse to women and children as areas urgently in need of more attention from the medical profession.

He pointed out that violence contributes to the high cost of medical care, not to mention the anguish it can cause to families and the community, and urged doctors



Medical Society President Ralph Johnson, MD (left), confers with WSMA President John A. Moyer, MD, Spokane, regarding the delegation's proposed resolution calling for legal action against DSHS.

to "take a strong and immediate approach to this problem in every community." He added, "Those who directly or indirectly sponsor violence need to be told. Money spent on violence can be turned to acceptable alternatives by the synergy of providers and consumers in an action oriented coalition."

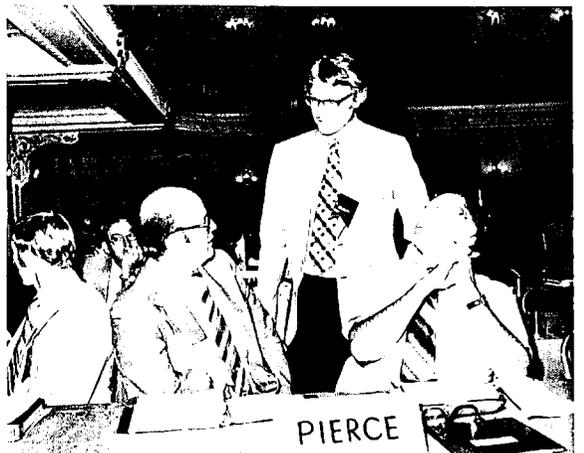
While acknowledging that such changes won't be easy, Dr. Moyer ended his speech with the quote: "Perhaps we are simply asked to make gentle our bruised world: to tame its savageness; to be compassionate of all including oneself. Then with the time left over to repeat the ancient tale and go the way of God's foolish ones."



Pierce County physicians (left to right) Drs. Roy Virak, Jim Early, Ralph Johnson and Dave Hopkins discuss the issues prior to a meeting of the House of Delegates.

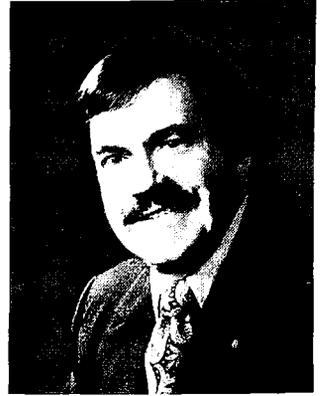


Drs. Bob Thiessen, Dick Bowe and Dick Ohme (left to right) review a committee report before Sunday morning's final House of Delegates meeting.



Drs. Virak, Larson and Early (left to right) during a pause on the floor of the House of Delegates.

CHALLENGING ISSUES ADDRESSED AT WSMA ANNUAL MEETING



Ralph A. Johnson, M.D.

Delegates to the 1978 WSMA annual meeting faced a number of challenging problems. Your Pierce County delegation was in the thick of the action in Spokane and I believe we contributed significantly to the proceedings in a number of areas.

DSHS Subpoenas

There is, of course, increasing concern regarding growing government intervention in the practice of medicine. In this regard you are probably well aware that the Department of Social Health Services has attempted to use agency subpoenas to scrutinize the records of a number of Pierce County physicians as well as physicians elsewhere in the state. These DSHS agency subpoenas have been used for "witch hunts" in which there has been a uniform lack of specific charges, and the subpoenas have not been accompanied by patients' authorization for release of their medical information. The actions of DSHS have been nothing short of harassment.

Prior to going to the Spokane meeting your Medical Society officers and delegates reviewed this problem and determined to introduce a petition to protect our patients as well as physicians from such tactics. On behalf of our delegation, I proposed a resolution guaranteeing confidentiality of patient records. Our resolution, as passed unanimously by the WSMA House of Delegates, reads as follows:

"BE IT RESOLVED, that the Washington State Medical Association initiate whatever legal action may be necessary on behalf of those patients whose medical care is paid for in whole or in part by the state of Washington to prohibit the Department of Social and Health Services from examination of medical records of those patients without the informed written authorization of the patients involved."

Medical Libraries Outside Pierce County

The state supported library program also was a matter of considerable controversy and discussion. On December 31, 1977, on the basis of a state-wide referendum, the WSMA library services were discontinued. At that time the WSMA Board of Trustees encouraged the King

County Medical Society to provide library services to physicians from other counties at reasonable cost. In Pierce County we have been extremely fortunate in having a Medical Society-Hospital Consortia which has provided excellent library services and which, in our opinion, obviates the need to rely on a state-wide library system. Spokane County and King County also have strong local libraries, but many smaller counties are unable to support a strong library system and thus must rely on some type of central service.

In view of its increasing financial commitments, the King County Medical Society delegation was prepared to present a resolution calling for a \$12.00 assessment for each WSMA member. Primarily through the action of your Pierce County delegation in reference committee this resolution never came to the floor of the House of Delegates, but a much watered-down proposal calling for a one dollar annual WSMA library assessment was passed. In our opinion, support to this extent is justified as the KCMS library does provide back-up services to our own library as well as state-wide coverage to physicians in smaller counties who are unable to fund a comprehensive library system.

Nurse-Practice Act

The report of the Ad-Hoc Committee on Nursing generated lively discussion. This committee had been charged with the task of making recommendations to the WSMA House of Delegates regarding options available to the medical profession to deal with the perceived impact of the Nurse-Practice Act on present and future physician-nurse intraprofessional and legal relationships. I urge each of you to become thoroughly familiar with the Nurse Practice Act of 1973 which expanded the definition of nursing practice to allow certain qualified nurses to perform "additional acts" (customarily and by law reserved to physicians) without physician supervision, provided that there was "joint recognition" of such "acts" by the medical and nursing profession. I believe you all have received a mailing from the Washington State Nursing Association regarding that organization's statement on quality nursing practice. The WSNA states this is nursing's pursuit of improved care for the

continued on page 17

“CHATTER, CHATTER AND NEWS”

Following a “slack summer” our fall schedule is really shaping up. During our recent State Board Meeting, we “stuck our necks out” and voted to bid for the 1985 National AAMA Convention to be held in Seattle. Plans also have been made to hold a professional advancement seminar in March, 1979 either in Yakima or Spokane. The House of Delegates packet was reviewed and our delegates to the national convention, State President, Catherine Luchino, CMA-A; State President - Elect, Dee Lunstrum, CMA; and, Barbara Webber, elected delegate from the Thurston/Mason Chapter, have been instructed on voting on several important issues.

The estimated ten or twelve Washington State Society members planning to attend the Boston meeting, the week of October 23, will be busy with all of our planned “extra curricular” activities. There will be the Advisory Board to woo with Ste. Michele wine and other “goodies” from Washington in support of Dr. Anne Steele, of Bremerton, in her nomination for national physician advisor. To back up our bid for the 1985 national convention, we also need to provide “goodies” to the House of Delegates. Boston sounds like a great meeting and we will have a report on it in a future issue of the BULLETIN.

Congratulations from all of us to Susan Thornton, CMA-C, who has recently assumed the position of Placement Service Director of the Medical Society of Pierce County. Susan certainly has the practical experience, “clout” and knowledge to function extremely well in this capacity and I am sure the Service will grow with her ability. Susan worked very hard to get our Pierce County Chapter chartered, and she served as our first chapter president, then as State president-elect in 1976 and president in 1977.

We are all saddened by the death of Dr. Ernest Banfield, co-employer of three of our chapter members. Dr. Banfield had provided one of our educational programs and attended the Bosses' Night Program last year. We express our sincere sympathy not only to his family but to his associates and office personnel.

Susan Thornton, Dee Lunstrum and myself, along with several representatives from the King County AAMA Chapter, traveled to Spokane in September to participate at the information booth at the Annual Washington State Medical Association meeting. The booth was well received by WSMA physician delegates at the meeting.

In our latest PMA publication, AAMA President Jeanne D. Green, CMA-A, sent us a very important memo concerning our continuing need to be recognized

as a bonafide career category by the Department of Labor and Industries. We have finally been listed by the Department of Health, Education and Welfare, and we now need to persuade labor and industries to do the same. All reference to medical assisting was deleted in the 1978-1979 Labor and Industries Occupational Outlook Handbook. The reasons cited were: “the occupation is loosely defined and job duties vary considerably among employers,” and “medical assistants are grouped together with ambulance attendants, clinical laboratory aides, dietary workers and many other miscellaneous help occupations in the category of ‘health aids, except nursing’.” Since this handbook is used by many high school counseling offices, reference libraries and other agencies, it is extremely important that medical assisting be listed as a distinct career category.

We can each help by identifying ourselves as a “medical assistant” every time we are asked what we do. You may wish to elaborate on your specific role and duties but first use that important term. Then, ask the physicians and all other medical assistants you know to do the same.

Doris Stansell

THE REGISTERED NURSE

What will be the entry level?

In June 1978 the American Nurses Association adopted a position that there be two categories of nurses. The two categories are to be defined by 1980, and implemented in 1985.

A Special Forum
to discuss these and related issues
will be held at
Tacoma's Sherwood Inn
Thursday, November 2

The forums will be repeated at these times
8:00 to 10:30 a.m. Noon to 2:30 p.m.
3:30 to 6:00 p.m.

in Brief

A summary of AMA, medical & health news

PRIVATE SECTOR INVOLVEMENT URGED

The AMA urged the private sector to "continue to work to expand private health insurance availability and coverage, to maintain quality of care, and to voluntarily restrain the cost of care." In a statement to the press following the announcement of President Carter's NHI principles in July, AMA EVP James H. Sammons, MD, said that "many of the NHI principles announced by the President seem to be consistent in whole or in part with similar principles that have been endorsed by the American Medical Association." But, he added, "We have reservations about a reference to the need for a major reform to the health system without a better understanding of the details of that reform. We agree with the need to restrain increases in the cost of care. . . In such program care must be taken that quality and access to care are not adversely affected."

BLUES AIM TO INCREASE MARKET SHARE

Blue Cross and Blue Shield Assn. approved a three-year plan aimed at improving their share of the health insurance market. The priority recommendation is a redesigned national master contract, a Blues official said, with serious consideration to be given to cost-sharing features.

CHAMBER PLANS NATIONAL PROGRAM

The Chamber of Commerce of the United States will launch a national action program on health, designed to help employers contain costs in their own communities. The basis for the program will be the National Chamber Foundation's health care study.

PROVIDERS MORE HIGHLY REGARDED

Health care providers and hospitals are widely respected and much more highly regarded than all other major private sector and governmental institutions, a Harris poll conducted for Hospital Affiliates International—the nation's largest hospital management firm—has found. The Harris study included interviews with a national cross-section of 1,503 adults and representative samplings of physicians, hospital administrators and trustees, executives of health insurance companies, and congressmen on health-related committees. Of those polled, some 60% indicated more money should be spent on health care—even at the expense of welfare and defense.

AMA SUPPORTS PAYMENT PLAN

The AMA supported legislation which would extend for one year special payment to eligible physicians and dentists in the VA health care system. In a letter to the House Subcommittee on Medical Facilities and Benefits, the Association urged congressional efforts "to provide more adequate and equitable compensation" for physicians and dentists in the program.

PHYSICIANS AND SPOUSES SERVE

Physicians and their spouses are serving in state legislatures across the country. To date 36 medical family members in 24 states hold state house or senate seats.

FTC AUTHORITY CHALLENGED

Six state governments in Indiana, Kentucky, Nebraska, Oklahoma, Texas and Wyoming filed suits challenging the FTC's authority to preempt state laws restricting the advertising of prices for eyeglasses and eye examinations. Similar suits were filed by the AMA and the American Optometric Assn.

HEALTH INFORMATION AVAILABLE

Available from AMA: *Let's Talk About Health Insurance*, contains information on individual and group health insurance policies for physicians and the public. Single copies of the booklet (MP-1) are free from the AMA Dept. of Professional Review . . . *Why Health Education in Your School?* (OP 331) examines the benefits of a school health education program. Cost is 45 cents each for 1-99 copies; 25 cents each for 100-499 copies; and 23 cents each for 500 or more . . . *Smoking: Facts You Should Know* (OP 42) weighs the hazards of smoking. Cost is 50 cents each for 1-99 copies; 40 cents each for 100-499 copies; 30 cents each for 500-999 copies; and 29 cents each for 1,000 or more. Write AMA, PO Box 821, Monroe, Wis. 53566.

Report from Redding

WHAT AM I PRACTICING MEDICINE FOR?

Immediately following the September meeting of the Interprofessional Committee, Herman S. Judd, M.D., left town – to travel to the annual national meeting of the American Academy of Family Physicians in San Francisco. Dr. Judd paused to visit his grandchildren in Redding, California long enough to file the following special report.

At its first meeting following the summer holidays, your Interprofessional Committee, composed of members of the Medical Society and the Pierce County Pharmacy Association, discussed a number of problem areas important to the members of both professions.

As you know, State law now requires that a physician's prescription must provide two signature spaces, one labeled "dispense as written" and the other labeled "substitution allowed." Some physicians have expressed concern that "substitution allowed" might give the pharmacist license to dispense a different drug—for example, Ampicillin in lieu of Tetracycline. Rest assured this is not so. The pharmacist must, by law, dispense the same drug prescribed although he may use a different brand, such as Sumycin in lieu of Mysteclin. The objective is, of course, to encourage the use of generic drugs to save the patient money. The physician must decide which route he wants to go. It is interesting to note, however, that when pharmacists' files are inspected by the State Board of Pharmacy, the prescriptions on file must have the two signature spaces. If not, the inspector can call any such prescription invalid and charge that the pharmacist should not have filled it.

Did you know that a pharmacist can refuse to fill any prescription at any time? And that the law specifically protects him and provides that he does not have to specify a reason for so doing? At first bite, this tastes like group favoritism, but when you think more about it the taste turns decidedly palatable. There are physicians in Pierce County, and elsewhere, who have apparently been writing prescriptions for controlled substances out of all proportion to what is commonly considered appropriate. Suffice it to say that this type of prescription is not being filled by most pharmacies in our area.

We all need the right to prescribe and dispense controlled substances, including opiates, when appropriate to relieve our patients' pain. But who needs a prescription for one hundred dilaudid tablets when he is not dying of cancer? Did you know that one tablet of dilaudid, 8 mgm, is now worth \$36 on the street market? A prescription for one hundred would be worth \$3,600! As one physi-

cian on the committee jocularly asked, "What am I practicing medicine for?"

Pharmacists face a real problem in refilling prescriptions during evening hours and on holidays or weekends. Most pharmacists will know the patient or have a prescription profile and will automatically know from the drug that a refill is justifiable (for lanoxin or orinase, for example). But if he does not know the patient or has no profile, and particularly if the pharmacy where the patient first obtained the prescription is closed, the pharmacist is in a bind.

Under these circumstances, the pharmacist has several choices. He can refuse to fill the prescription, not knowing for sure what it is (as I mentioned earlier he has legal backing to do so), or, the pharmacist can call a doctor for authority to refill. If he gets hold of the patient's physician, all well and good. But if the patient's physician is unavailable, the pharmacist can call the alternate physician taking that doctor's calls. The covering physician may or may not know the patient and here is where the problems sometimes start. If the patient is known by the covering physician, or in his judgment the refill request sounds legitimate, he can order the refill. In so doing, however, the physician should remember he is taking the responsibility for this patient receiving that drug. Especially in the case of a prescription for a controlled substance, the physician called is well advised to order only enough of the medication to last until the patient's own doctor is available. If the absence is lengthy, the physician is best advised to order only enough medication until the patient, or at least his record, can be reviewed in order to ascertain the need for such a controlled substance.

Remember, the pharmacist is as much on the spot as we are in such a situation and by working together we can reduce many of our problems to insignificance—and maybe even solve some! Incidentally, when a pharmacist receives a request from a patient for a refill, especially on the telephone, of a prescription supposedly originally filled at a drugstore now closed, he can request the patient to bring in the old medicine container. In many instances this will show the medication is actually needed. When requested to bring in the old container, it is surprising how many patients just don't show up!

Your Interprofessional Committee will continue to meet on a quarterly basis. If you have any problems that involve the two professions please do not hesitate to contact us. You may call Chuck Zwier at the Green Firs Pay 'n Save Pharmacy or call me at my office or home.

Herman S. Judd, M.D.

Membership

In accordance with the bylaws of the Medical Society of Pierce County, Chapter 7, Section A, MEMBERSHIP, the following physicians have made application for membership, and notice of their application is herewith presented to the membership.

FIRST NOTICE



WILLIAM G. MARSH, M.D., Family Practice. Born in Waltham, Mass., 4/9/46; medical school at University of Oregon, 1972; internship at Great Lakes Naval Hospital, Illinois, 1972-73; residency at Wright - Patterson Air Force Base Medical Center, Dayton, Ohio, 1973-75; licensed to practice medicine in the State of Washington, 1979. Dr. Marsh is practicing at 1109 Canyon Road East, Puyallup.



EILEEN R. TOTH, M.D., Internal Medicine. Born in Easton, PA, 10/18/46; medical school at Harvard Medical School, 1972; internship and residency at Harlem Hospital, New York, 1972-75; licensed to practice medicine in the State of Washington, 1975. Dr. Toth is practicing at A-211, Allenmore Medical Center.



WALTER SCHUMACHER, M.D., Anesthesiology. Born in Zurick, Switzerland, 4/28/47; medical school at the University of Zurick, 1973; internship at LAC-USC Medical Center, 1973-74; residency at University of Washington, 1974-76; licensed to practice medicine in the State of Washington, 1975. Dr. Schumacher is currently practicing at St. Joseph's Hospital.

SECOND NOTICE



ALBERT L. COOPER, M.D., Physical Medicine and Rehabilitation. Born in Seattle, 7/7/17; medical school at University of Oregon Medical School, 1944; internship at Swedish Hospital, Seattle, 1944-45; residency in physical medicine and rehabilitation, Veterans Hospital, Portland, OR, 1951-53; licensed to practice medicine in the State of Washington, 1945. Dr. Cooper is currently practicing at 1718 South I Street in Tacoma.



CLARK T. MARQUART, M.D., General Practice. Born in Fort Wayne, Indiana, 9/8/47; medical school at Indiana University School of Medicine, 1973; internship at St. Anthony's Hospital Denver, Colorado, 1973-74; previously practiced with the Indian Health Service at Rosebud PHS Hospital, Rosebud, South Dakota, and Seattle Indian Health Board; licensed to practice medicine in the State of Washington, 1977. Dr. Marquart is currently practicing at the Puyallup Indian Clinic.



THOMAS J. RAFOTH, M.D., Radiology. Born in Dubuque, Iowa, 9/18/48; medical school at University of Illinois, College of Medicine, 1974; internship at St. Lukes, Chicago, Illinois, 1973-74; residency at University of Colorado Medical Center, Denver, 1974-77; served as staff radiologist, Denver General Hospital, 1977-78; licensed to practice medicine in the State of Washington, 1978. Dr. Rafoth is currently practicing at Tacoma Radiological Associates.

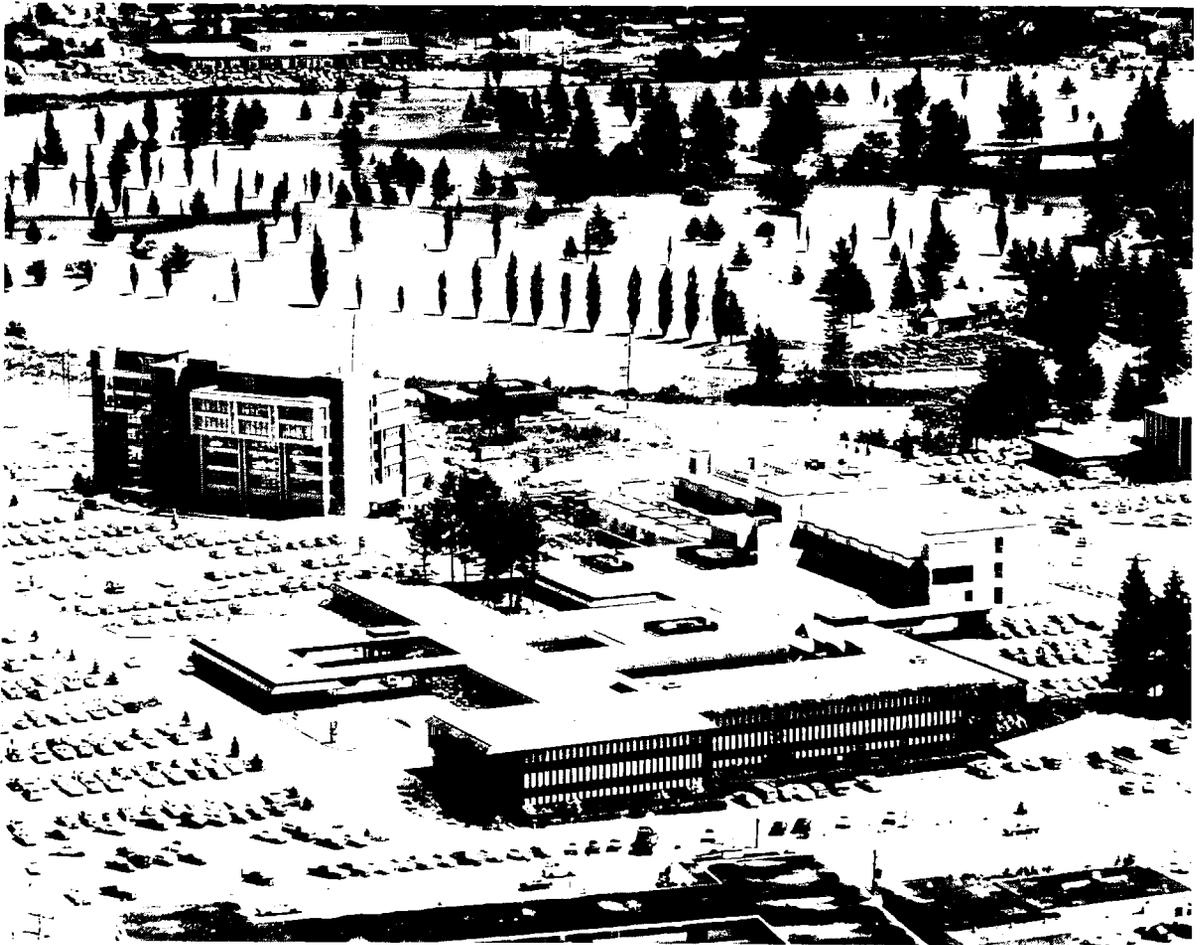


HENRY C. REITZUG, M.D., Pediatrics. Born in Germany, 12/20/45; medical school at Indiana University School of Medicine, 1972; internship at Indiana, 1972-73; residency at Madigan Army Medical Center, 1976-78; graduate training in pediatric endocrinology, 1977-78; licensed to practice medicine in the State of Washington, 1978. Dr. Reitzug is practicing at 1318-3rd Street SE, Puyallup.



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

In the Navy, all you practice is medicine

If there's one thing medical school doesn't prepare you for, it's paperwork. Lots of it. From Medicare insurance forms to administrative overhead, the list is long, involved and time-consuming.

In fact, if you're in private practice right now, we don't have to tell you how many hours of every day you spend on non-medical duties. It's considerable.

If you think it's an incredible waste of *your* time, so do we.

We're the U.S.Navy. And we can offer the kind of practice you studied so hard for. Devoting your time solely to the practice of medicine.

The Navy physician.

In the Navy, we feel a physician's time is too valuable to spend on administrative details. So they're kept to a bare minimum. Instead, a highly trained staff of professionals attends to almost all the paperwork. The end result is that almost all your time is spent practicing medicine.

A challenging practice.

And the practice you'll be given is as varied and challenging as any you'll find in a civilian setting. And, contrary to what many doctors now believe, your patients will not all be 23-year-old males. You'll be treating the gamut of Navy dependents—from infant care to geriatrics.

Insurance.

A recent Act of Congress now makes it unnecessary

for federally employed physicians to carry high cost insurance. As a practicing Navy physician, you will receive professional liability protection under the Federal Tort Claims Act.

Responsibility.

The practice you'll be given will be yours and yours alone. There'll be no one looking over your shoulder offering second guesses or opinions. But when needed, professional consultation is always available.

Medical equipment & facilities.

You'll also be working with the most modern, most sophisticated medical equipment in the world. And just some of the clinical facilities you can find at a Naval Regional Medical Center include: A Cardiac Catheterization Laboratory. Special Hematology Laboratory. A Fetal Heart Monitoring System. Even a Linear Accelerator.

Other benefits.

The hours are long, but regular, so you'll have time to spend with your family. As well as associate with other physicians as highly motivated as you. For a starting salary, you'll earn \$30,000 a year or more, depending on your experience. You'll also receive 30 days'

paid vacation a year. Plus all the privileges and family benefits attendant upon being a commissioned officer.

The bottom line.

When you compare salaries, remember one important thing: The \$30,000 you'll earn as a Navy physician is not subject to overhead, administrative or insurance costs. With this in mind, you'll find that \$30,000 suddenly becomes a very impressive figure.

Questions.

We know you have a lot of questions. Like what are my Navy obligations? Do I have a choice of assignments? Duty stations? What are the opportunities for graduate medical education? Advancement opportunities?

Well, we have all the answers to these questions, as well as any others you might have. And the quickest way to get them answered is to call the Medical Representative at (206) 442-5700, collect if necessary.

You owe it to yourself to get all the facts on a great way to practice medicine.

Be the doctor you want to be. In the Navy



MEDICAL CROSSWORD PUZZLE*

By Mr. Abe A. Brown

Across

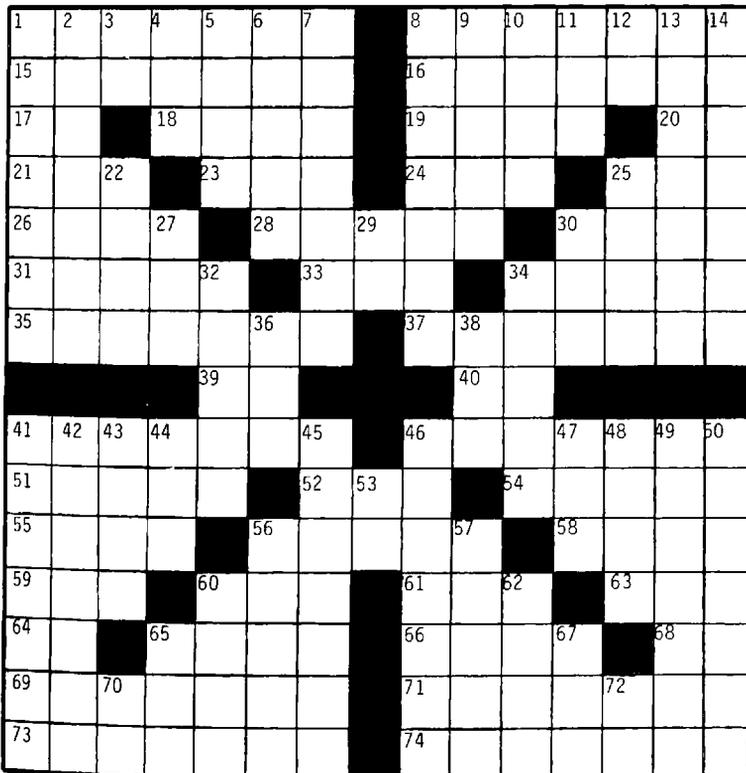
1. Resembling skin
8. Deep fold in the cerebral cortex
15. Sudden driving force
16. Narrow passage connecting two larger parts of an organ
17. Spiritus: abbr.
18. Girl's name
19. Cyanotic
20. Platinum: symbol
21. Pink _____
23. Gold, iodine: symbols
24. _____ mobilus, movable kidney
25. Where parents and teachers get together
26. Relating to gas or air: comb. form
28. Fungus found on wheat grass, rye, etc.
30. Racetrack habitue
31. Strike forcefully
33. Extraocular movement: abbr.
34. Prop up

35. Animal I.D. tags
37. Sticks to
39. Lieutenant: abbr.
40. Where surgery is performed: abbr.
41. Atomic fallout
46. Copper sulfate, e.g.
51. _____ cordis (heart beat)
52. Goal
54. A body area where a drug, e.g., can be accumulated
55. Removable anchor for orthodontic appliances
56. Corpus callosum
58. Finished
59. Where Hippocrates was born
60. Local excitatory state: abbr.
61. Hospital org.
63. Hydrogen, iridium: symbols
64. Symbol for ethyl group
65. Girl's name
66. Yearn after
68. Dibucaine number: abbr.
69. Instrument used for extracting bullets
71. _____ medica

73. Dermatitis accompanied with intense itching
74. Resembling antimony

Down

1. Sickness
2. Accumulation of pus in a cavity
3. Regius Professor: abbr.
4. Mongrel dog
5. Oil: pl.
6. A discharge of pus or other matter
7. Covets
8. An encapsulated tumor
9. A cluster of cells
10. Knock senseless
11. Pronoun
12. Latin suffix
13. Hernia
14. Large properties
22. Erbium, argon: symbols
25. Indigent
27. Suffix reflecting one's doctrines, e.g.
29. Proceed
30. Definite article
32. Luminous circles, such as experienced with glaucoma
34. Tear up
36. British thermal unit: abbr.
38. A street hallucinogen: init.
41. Vitamin D deficiency disease
42. Marked by great weakness of the pulse
43. Suffix indicating inflammation
44. Gist
45. Bones of the tarsus
46. Preserves a cadaver
47. Threshold erythema dose: abbr.
48. Malaysian city
49. Exospores of certain fungi
50. Relating to the breast bone
53. Suffix indicating state or condition
56. Weblike tissues
57. Young pig
60. More or less well-defined portions of any organ
62. Against
65. Bird's beak
67. Germanium, boron: symbols
70. Radium: symbol
72. New England state: abbr.



*For answers to this crossword puzzle see p.17.

SOCIETY NEWS BRIEFS

A summary of Medical Society, and local medical and health news

SECOND OPINION SURGICAL CONSULTATION POLICY ESTABLISHED

The following policy recommendation from the Society's Ad Hoc Committee on Second Opinion Surgical Consultation has been approved by the Board of Trustees. The Board recommends that participation by members of the Medical Society of Pierce County in any second opinion consultation program conform to the following principles:

Recognizing that the advisability of surgery or other specific therapy can be a matter of opinion, the Medical Society of Pierce County:

1. Affirms the right of a patient or physician to seek consultation freely with any consultant of his or her choice;
2. Opposes the concept of mandatory consultation when required by a third party payor;
3. Supports the concept that when consultation is required by a third party payor, the consultation should be at no cost to the patient, and the usual and customary fee should be paid to the consultant by the carrier requesting the consultation;
4. Opposes the concept of closed panels of consultants;
5. Supports the concept that any consultant used for a second opinion should be a recognized specialist actually participating in the appropriate field; and
6. Supports the concept that if consultation is required by a third party payor, the patient should be allowed to choose a physician of his or her choice.

The above policy was recommended following a thorough discussion of the problem and a study of resolutions from the American Medical Association, Washington State Medical Association, American College of Surgeons and the Council of Medical Specialty Societies. Drs. Robert Florence (chairman), Ben Blackett, and Thomas Murphy served on the Society's ad hoc committee.

MEMBERSHIP VOTES CME SUPPORT

A proposal to support the financially troubled College of Medical Education by means of a one-year \$30 prepaid tuition assessment was passed unanimously at the September general membership meeting of the Medical Society. The approved proposal specifies that each physician will receive a \$30 credit toward tuition expense of college sponsored CME courses taken after January 1, 1979. One hundred and thirty-seven members of the Medical Society attended the meeting to discuss local physician sponsored and controlled continuing medical education and to vote on the assistance proposal.

"Approval of the plan by the membership is a vote of confidence in the work of the Society's CME Committee and the College," said Marcel Malden, M.D., committee chairman. "With this assistance, the College can continue to provide local physician controlled courses designed to meet the needs of our own medical community," he added. The Society's Board of Trustees is required by the plan to review the tuition program prior to the September 1979 general membership meeting and to prepare a recommendation regarding its continuation. The assessment can be continued in future years only with approval of the Society membership.

HOSPITALS RESPOND TO SOCIETY PROPOSAL

The Pierce County Hospital Council has responded positively to a Medical Society proposal that a Medical Society-Hospital Liaison Council be established. Initially, administrators of St. Joseph, Lakewood and Good Samaritan hospitals will represent hospitals on the council. The Medical Society of Pierce County will be represented by the Society's president, president-elect, immediate past-president, and chairmen of the Library and Continuing Medical Education committees. The purpose of the liaison council, as outlined in Dr. Ralph Johnson's letter of proposal, is to "improve communication and cooperation between the Medical Society and local hospitals in areas where both share a great many common concerns."

SOCIETY PRESIDENT ELECTED TO BOARD

Society President, Ralph A. Johnson, M.D., has been elected by his fellow physicians to serve on the Washington State Medical Disciplinary Board. Dr. Johnson will represent the 6th Congressional District. His term on the Board runs from October 1, 1978 through September 30, 1980. Dr. Johnson joins six other physicians and one public representative appointed by the Governor on the state-wide panel.

PRESIDENT'S PAGE continued

health consumer. All physicians should carefully read this document and consider its implications.

While the Washington State Medical Association steadfastly supports the continuation of our pluralistic health care delivery system, we are of the strong opinion that nurse training (current or planned) does not prepare the nurse to function as an independent "medical" practitioner as the term "medical" is defined to include either the prescribing of legend drugs or the performance of any form of surgery, or both.

Following much debate, the final action of the House of Delegates was to direct the WSMA Board of Trustees task force to meet with WSNA officers to deal directly with the problem and to implement and/or secure "joint recognition" by the medical and nursing profession of "additional acts" (such as prescriptive authority and levels of practice) as is required by law.

Media Coverage Poor

These are only a few of the highlights of the annual meeting. After five days of concentrated efforts directed to the above issues as well as cost containment, quality

of medical care, and self-regulatory disciplinary action, I was disheartened to note that the only apparent media-coverage in either the Tacoma News Tribune or the Seattle P-I was a small article entitled "Doctor Warns Medicos." In this release from "TNT News Services" several statements unfavorable to medicine were lifted out of context from a report on an AMA study of the British health system.

Additional information regarding the meeting can be obtained from the WSMA Medical Memo (mailed to you earlier in October) and from those physicians who represented Pierce County in the House of Delegates: Drs. Dick Bowe, Tom Clark, Ken Graham, Ted Haley, Bill Jackson, Vern Larson, Dick Ohme, Bob Thiessen (on Sunday), and Roy Virak. Drs. Jim Early, Dave Hopkins, and Stan Tuell provided valuable additional assistance to the delegation by virtue of their involvement on the WSMA Board of Trustees level.

I wish to thank these physicians for their dedication to the medical profession and our Medical Society.

R.A.J.

ANSWERS



The crossword puzzle on page 15 is reprinted with permission, from the new book, *Medical Crossword Puzzles (and other literary diversions)*, created by A.A. Brown; 100 pages. Copies are available for \$2.95 (plus 19 cents CA sales tax) from Medical Crosswords, PO Box 99187, San Francisco, CA 94109.

STAFF PHYSICIANS

Boeing has immediate and challenging career opportunities for three full-time staff physicians familiar with Occupational and Clinical Medicine. Experience with maximal treadmill testing and cardiac rehabilitation is required.

Call Dennis Lencioni collect at 655-5464 Monday through Friday between 9 a.m. and 4 p.m. Or, send your resumé to The Boeing Company, P.O. Box 3707-VKY, Seattle, WA. 98124.

An equal opportunity employer.

BOEING
Getting people together

WATCH FOR AMA-ERF HOLIDAY CARD LETTER

Watch your mail for a letter explaining the AMA-ERF Holiday Card Project. Cindy Hammer and Jan Thiessen are in the process of selecting a suitable card. An appeals letter is being sent to every physician in the county and also to each physician's home. A donation to the Education Research Foundation entitles you to have your name included in this traditional holiday sharing card.

The Auxiliary's Newcomers Luncheon was held September 15 at Cindy Anderson's home. Anne Katterhagen, chairman, was assisted by Ellie Barnes, Florence Dean, Judy Sales, Nancy Spangler and Nikki Crowley. Approximately 80 ladies attended. The welcoming program was organized by Em Stern and Debbie McAlexander. All of the community health projects in which Auxiliary is involved were depicted by posters in the meeting room. The various chairmen for these projects wore identifying badges, explained their projects and made themselves available for questions. Em Stern organized an activities mixer that was very effective as well as fun.

Cook books were promoted and sold by Betty Bahn. The beautifully compiled Newcomer Packets were displayed by Em Stern. Membership booklets were available to all who paid their dues and the 1978 (blue) Medical Society Directory was available at a cost of \$4.00 each. By the way, rosters may also be purchased at Auxiliary meetings and through the Medical Society office.

Immunization goals for Pierce County call for complete immunization of 90 percent of children upon entering school. Kay North is our Community Health chairman and Elsie Parrot is co-chairman.

Auxiliary by-laws are being altered to include spouses of resident doctors and medical students in a special membership category. The Board has accepted the proposed revision. Gloria Virak, mailing chairman, reports that two mailings were sent in July and August—the President's Newsletter and Janet Fry's Newsletter. If you failed to receive your copy, you know who to call.

Auxiliary volunteers are now wearing volunteer pins which were made by Nancy Spangler and family. Our thanks to the Spangler family.

Profits from the Medical Society Directory continue to accrue and a donation has been made to the Pierce County Tel-Med Society. Speaking of Tel-Med and volunteers—we could use more volunteers, of course. Also, **ATTENTION PRESENT VOLUNTEERS:** Please check your calendars to make sure you appear on your designated day.

Plan ahead—"Your specialty auction" is coming up on St. Patrick's Day, March 17. Plan on bringing your husband and your friends, but most of all, plan on what you will bring to auction! More ideas will be forthcoming in the next *Bulletin*.

The following Auxiliary meetings and programs, arranged by Nikki Crowley and homes provided thanks to Sharon Lukens, have been scheduled for 1978-79. All meetings will be held on the third Friday of the month except in December and March. Luncheon meetings begin at 11:30 a.m.

<i>Date</i>	<i>Program</i>	<i>Location</i>
Friday, Nov. 17	Travel Tips—Tris McConaghy	Judy Baerg's home
Tuesday, Dec. 5	Joint Dinner, Medical Society Installation of Officers	Tacoma Golf and Country Club
Tuesday, Dec. 12	Holiday Children's Party	Jo Roller's home (3:30 p.m.—5:30 p.m.)
Friday, Jan. 19	Auxi-Quad Luncheon	To be announced
Friday, Feb. 16	Rape Relief Program Officer Nominations	Linda Stilwell's home
Saturday, March 17	"Your Specialty Auction"	Oppelt Student Center, Ft. Steilacoom Community College
Friday, April 20	Heimlich Maneuver/Elections	Susie Duffy's home
Friday, May 18	Final General Meeting/Installation of Officers Panel Discussion: Survival of the Spouses Moderator, Adele Durkin	Susan Wiese's home

Joan Sullivan

Classified

Classified and announcement copy may be mailed to: Journal & Bulletin Agency, Inc. 1011 Lloyd Bldg, 603 Stewart, Seattle 98101 or phoned to Seattle (206) 682-7813. Deadline 25th of month prior to month of issue.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T.G. Contact Richard Huish, M.D., 572-4664.

Golden opportunity for a physician to step into the shoes of a retiring physician with a well established practice of a quarter of a century. Equipment available. Call Benton McCarthy Realty, Inc. Commercial Dept. (206)455-8360 or Pat Ulrich (206)747-1299

KIRKLAND - medical bldg. for lease in a 5 bldg. complex 1600 sq. ft., includes - waiting room, reception room, 4 examination rooms, 2 offices, x-ray and darkroom. 641-5743.

AKC German Sheperd puppies for sale. 383-2691.

HAWAII!!!

Furnished Condos all islands—reasonable—studio 1 and 2 BR. Mostly ocean front (206) 454-1431.

KATHRYN E. RICHERT-BOE, M.D.

ANNOUNCES THE OPENING OF HER OFFICE
FOR THE PRACTICE OF
HEMATOLOGY AND INTERNAL MEDICINE

AT

PHYSICIANS MEDICAL CENTER

1624 SOUTH "I" STREET TACOMA, WASHINGTON 98405
TELEPHONE (206) 272-3133

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

Family Physician expects to separate from military mid-1979. Diplomate, American Board of Family Practice; member, AMA and American Academy of Family Practice. Licensed to practice in Commonwealth of Virginia. Completed residency training at Madigan Army Medical Center. Listing 902.

Orthopedic Surgeon interested in joining established practice. Currently completing third year as orthopedic resident, Fort Wayne Medical Education Program. Engaged in Family Practice in Seattle, 1972-1975; internship, Harbor General Hospital, Los Angeles, 1971-1972. Graduate, University of Washington School of Medicine. Listing 901.

Urologist interested in solo or group practice. New York State medical license. Resident in urology, Albert Einstein College of Medicine, 1975-1977; served as senior resident in urology, Sloan-Kettering Memorial Hospital for cancer and allied diseases, 1976. Chief resident in urology, Albert Einstein College of Medicine, 1977-1978. ECFMG Standard Certificate, 1974. Listing 903.

Gastroenterologist available July, 1979. Trained in all endoscopic procedures including ERCP, laparoscopy, and colonoscopic polypectomy. Certified, American Board of Internal Medicine, 1976. Member, American College of Physicians; associate, American Society for Gastrointestinal Endoscopy. Licensed in Indiana, California, Oregon; graduate, University of Cincinnati Medical School, 1973; internship, Harkness Community Hospital, San Francisco, 1973-1974; residency, Presbyterian Hospital of Pacific Medical Center, San Francisco, 1974-1976. Fellowship, University of California, Veterans Administration Hospital, gastroenterology, 1977-1979. Listing 904.

Cardiovascular Surgeon scheduled to finish cardiothoracic residency at the University of Wisconsin in June, 1979, seeks to join a group or partnership in the Tacoma area. Thirty-four years of age, has completed military obligations, is board certified in general surgery, will be board eligible in cardio-thoracic and peripheral vascular surgery in 1979. Listing 1001.

Family Physician interested in group practice or emergency room position. Available after October 15, 1978. Diplomate, American Board of Family Practice; member, American Academy of Family Practice. Graduate, University of Vermont College of Medicine; internship at US Public Health Service Hospital, San Francisco; service experience with Alaska Native Health Clinic, Ketchikan, 1973-75. Has maintained private practice since 1975. Listing 1002.

Internist currently completing residency in internal medicine at the Medical College of Wisconsin, Affiliated Hospitals, Milwaukee. Graduate, University of Illinois College of Medicine; internship, Medical College of Wisconsin, 1977. Diplomate, National Board of Medical Examiners. Listing 1003.

Family Physician will complete family medicine residency at University of Colorado Medical Center, July 1979. Graduate, University of Oregon Medical School, 1974; internship at San Bernardino County Medical Center, California, 1974-75; served as National Health Service Corps Physician, 1975-77. Diplomate, National Board of Medical Examiners. Available September 1, 1979. Listing 1004.



A.T. NORMAN INTERIORS

COMMERCIAL - RESIDENTIAL
OFFICES - MEDICAL & HEALTH FACILITIES
FULL SERVICE - SPACE PLANNING
COLOR & LIGHTING SPECIALISTS

Design Staff:

RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK

MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936

206/627-3139

DESIGN OFFICE - SHOWROOM
524 TACOMA AVENUE SOUTH - TACOMA, WASHINGTON 98401



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*



Today's most thoughtful,
popular and practical
baby gift is



Tacoma 475-1234

Seattle 634-BABY

*Washington's oldest, most trusted
Professional Diaper Service
serving our second generation*



*Servicing the Medical Profession
Since 1930*

BIDDLE & CROWTHER Co

Physicians and Hospital Supplies

Home Office

910 North 137th - Seattle 98133
(206) 365-9900

First Hill Branch

(for Retail Sales to Patients)

1018 Summit Avenue - Seattle 98104
329-1668

PACIFIC NORTHWEST ORTHOPEDICS

DIVISION OF BIDDLE & CROWTHER CO.

Prosthetic Implants - Orthopedic Supplies

1216 Madison St. - Seattle 98104 - 622-3700

Call us toll-free from anywhere in the
State of Washington - 1-800-562-6994

When the pill, the IUD, or the diaphragm is not the answer.



Now there's Semicid.™

The alternative in non-systemic contraception.

New Semicid (nonoxynol-9) Vaginal Contraceptive Suppository solves many problems of modern birth control alternatives: the pill can have systemic side effects, the IUD may cause discomfort and side effects, the diaphragm is often inconvenient. The fuss and mess of foams, creams and jellies, plus the minor irritations sometimes caused by the other vaginal suppository often discourage compliance.

Now there's a sensible alternative: Semicid. It's a medically tested, non-hormonal vaginal suppository that is both safe and effective. In fact, Semicid contains the maximum recommended 100 mg. level of nonoxynol-9, the long-recognized standard of spermicidal efficacy.

U.S. Clinical Study Proves Semicid Safe and Effective.

In a recent U.S. clinical study,* 326 women were monitored for a total of 4890 women-months. This study was conducted by a gynecologist and was carefully reviewed by independent gynecological groups at two major universities. In comparing the findings of these groups with published reports of other contraceptive methods, Semicid is shown to be effective in the prevention of pregnancy.

Patient acceptance was also very high. In fact, 85% of those clinically evaluated were so satisfied, they planned to continue to use



Semicid after the study was completed. The clinicians evaluating the data have suggested that the minimized irritation and exceptional convenience of the new delivery system helped enhance compliance and, therefore, efficacy.

Simple and Gentle Enough To Assure Compliance.

Semicid delivers this potent spermicide in a convenient, gadget-free, one-inch vaginal suppository that maximizes compliance. Your patient can use it simply, unobtrusively, and only when it is needed. Once it is digitally inserted, Semicid forms an effective spermicidal barrier within 15 minutes. Women using the product found Semicid non-irritating. Semicid is non-staining and has no unpleasant taste or odor.

When you consider all that — the safety, efficacy, and convenience of this new contraceptive — you can see why your patients will continue to use Semicid once they have tried it. Use only as directed.

Semicid Vaginal Contraceptive Suppositories

For Additional information

Product Samples Both

Fill in Below and Mail to:

Whitehall Laboratories,

685 Third Ave., New York, N.Y. 10017.

Att: Medical Director

Name _____

Address _____

City _____ State _____ Zip _____

*Data on file, Whitehall Laboratories

LENOX TRANSCRIPTION SERVICE

Your 24 hour medical secretary offers these benefits:

- Direct dictation line
- Experienced medical steno
- Personalized service
- Full-time, part-time or temporary service

24 HOUR DICTATION LINE
535-0332

For more information contact:
Nancy Lenox/537-3921

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
 - DENTAL
 - PROFESSIONAL
- Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people like you 24 hours a day.



RADIO-TELEPHONE

PAGING

TELEPHONE ANSWERING

RADIO PAGE 572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day... when you must be contacted, you get an actual voice message from your personal "Pager."

For your total communication needs for your practice, contact
Fred McPherson or Tom Brokaw — 24 hour service.

ANSWERING SERVICE 572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

We're your convenient source for **WSMA/AETNA** professional liability insurance.

We're also much more.

Persing, Dyckman & Toyne can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.

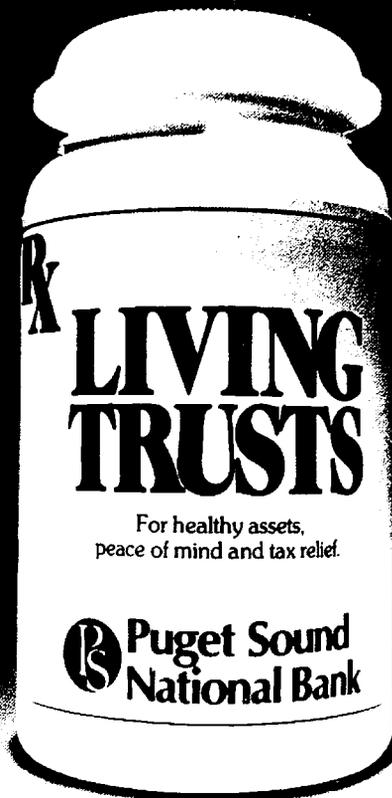


PERSING, DYCKMAN & TOYNBEE, INC.
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynebee
Wayne Thronson
Bob Sizer

Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

**TRUST DEPARTMENT
(206) 593-3881**

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

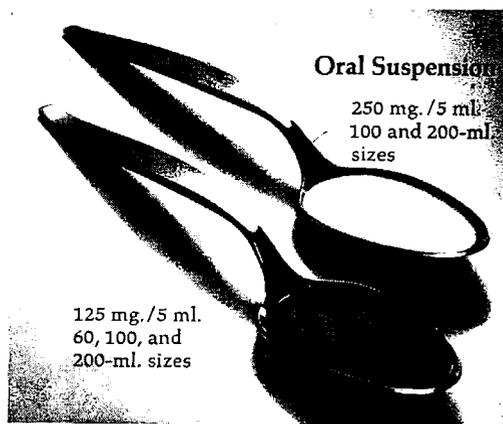
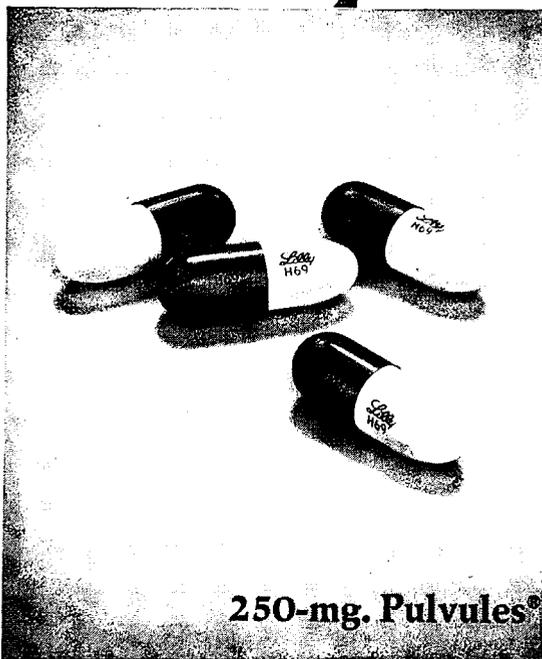
After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

MEDICAL SOCIETY OF PIERCE COUNTY
813 South K Street - Suite 200
Tacoma, Washington 98405
ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

easy to take



Keflex®
cephalexin



500738

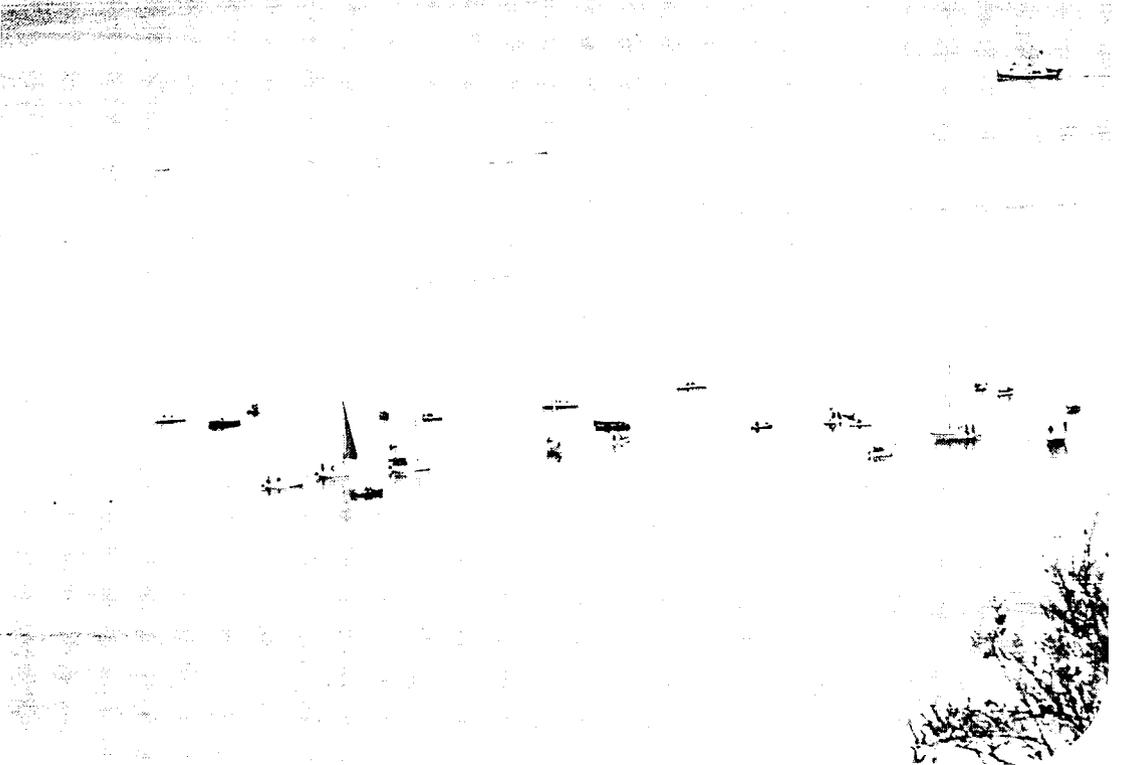
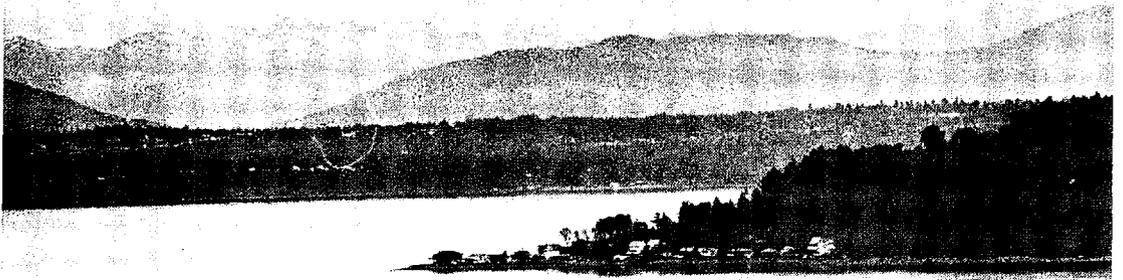
Additional information available to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206



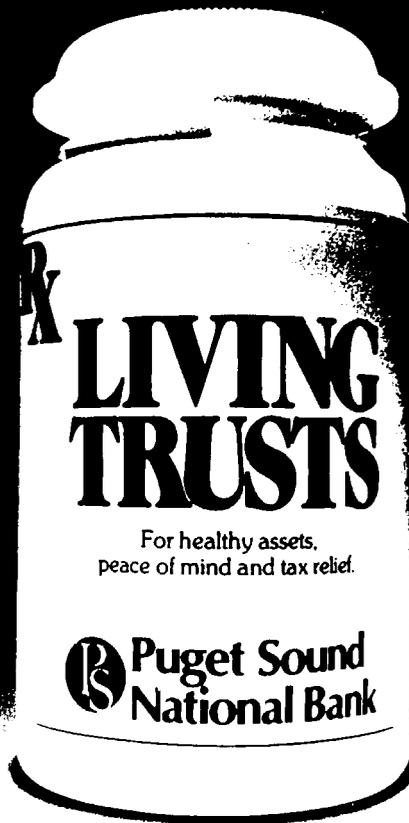
Medical Society of Pierce County

November 1978 Vol. XLX, No. 11 Tacoma, Washington

Living With The New
CME Regulations . . . See page 8



BULLETIN



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another. And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

**TRUST DEPARTMENT
(206) 593-3881**

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

Bulletin of the Medical Society of Pierce County

CONTENTS

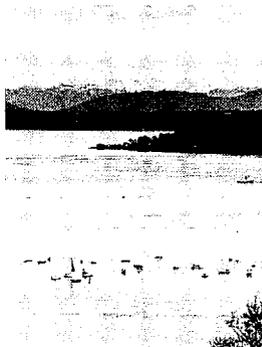
Page

4	Guest Editorial
5	President's Page
6	AAMA Page
7	AMA In Brief
8	Continuing Medical Education
11-17	In Memoriam
14	Membership
16	Society News Briefs
18	Auxiliary
21	Classified

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D. Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.



"Before the Race—
Commencement Bay."
Photo by Marcel Mal-
den, M.D.

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D. (79)
Melvin L. Henry, M.D. (80)
William B. Jackson, M.D. (80)
Richard K. Ohme, M.D. (80)
Charles C. Reberger, M.D. (79)
Roy A. Virak, M.D. (80)
Myra S. Vozenilek, M.D. (79)
Jo Roller (79)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Jail Health	Herbert C. Kennedy, M.D.
Legislative	William Jackson, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Physician-Pharmacy	Herman S. Judd, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

PHONE CALLS TO NET OVER \$500,000?

Editor's note: Lloyd C. Elmer, M.D., is a former member of the Board of Trustees of the Pierce County Health Council and currently serves on the HSA Region I Board.

For the first time in history the federal government is about to declare a geographic area as medically underserved, not on the basis of the number of people in ratio to the number of physicians, but rather on the basis that "medical care is not available through private sources to certain population groups in Tacoma and Pierce County."

The Tacoma-Pierce County Health Department has applied for a \$599,855 federal grant to obtain physicians and "physician extenders" because we are a "medically underserved" community. The Health Department grant application has been made possible by a concurrent application by the Family and Eastside clinics, with the assistance of the Pierce County Health Council, for designation of the low income population of the county as "medically underserved." The Health Systems Agency in Seattle agrees, as it has approved both the designation request and grant application. No one will argue that there is poverty in Pierce County, but I take issue with the next premise--that the poor have "no access to medical care." The basis of the applications rests greatly on a telephone survey of primary care physicians in our community. The survey, conducted earlier this summer, raises some meaningful questions and brings me to the issue of my concern.

It is not the objective of the grant application per se that disturbs me, but rather the realization that over one-half million tax dollars very well may be spent based on a statistically inaccurate, contrived survey. Is there no one to challenge such nonsense? Is it really possible to receive over one-half million dollars from the government on the basis of a few phone calls? The grant application states that the accuracy of the survey was verified by the HSA; but what this means is that the HSA checked the numbers and found them arithmetically correct. When the Medical Society of Pierce County

requested the survey data in order to verify responses, it was flatly refused by the Pierce County Health Council.

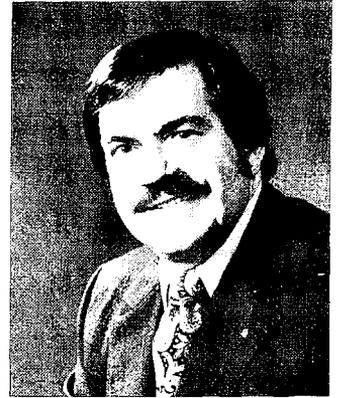
The survey was to have been a random survey of primary care physicians in the community. Several questions immediately surface. Did the responding physicians know to what purpose the responses were to be put? Was the sample size (34 physicians) large enough to establish statistical validity? Probably not. Thirty-four physicians do not represent 20 percent of practicing internists, pediatricians, obstetricians-gynecologists, and general and family practice physicians in Pierce County. Those conducting the survey also employed inaccurate factors in the calculations, such as an average physician work week of 40 hours, whereas established studies place the average number of hours worked per week for the five primary care specialties at 56.5 hours.

How often was the survey answered by the physician's receptionist rather than the physician? We know this was the case in at least some of the responses. Were the survey questions contrived to achieve the results the Health Council and clinics desired? The answer here is an unequivocal yes. For example, the survey supposedly questions how many reduced fee or no fee patients are seen per week, but it asks how many new patients are seen per week where there has been a prearrangement for reduced fee or no fee. It is obvious to any practicing physician that these arrangements are almost always made after the patient comes to the office. It is usually discussed with the doctor, and not when the patient calls the receptionist for an appointment. Therefore, because of the wording of the question, most doctors who do see reduced fee patients were forced to answer that they did not. This approach was used in every survey question regarding patient fees.

Is there no legal authority to investigate possible irregularities and inaccurate statistics that result in a drain of the federal treasury of vast sums of taxpayers' dollars? Are the self-serving health planning bureaucrats above all the usual checks and balances of our democratic system?

—Lloyd C. Elmer, M.D.

President's Page



Ralph A. Johnson, M.D.

1979 DUES

As we approach the end of the year, your society along with many other corporations must face the problem of proposing a balanced budget for the forthcoming year. A considerable amount of time and effort has been expended by your executive director, officers and trustees in attempting to provide maximum services to members, and yet to hold society dues at a reasonable level in the face of continued inflation and despite other factors contributing to increased costs. Those of us involved in this process are pleased to announce that the only increase necessary in dues of the Medical Society of Pierce County for 1979 will be an \$8 increase in the library assessment. This means that library dues per member will be adjusted from \$42 to \$50 per year.

Why must library dues be changed at this time? Simply stated, the increase is required because of increased costs of operation and expanded services provided to our membership. The average percentage increase in the cost of a medical library book from 1975 to 1977 was 20.8 percent and during the same period the average journal subscription rose 18.3 percent. Other factors such as restrictions in the copyright laws have increased the cost of reproducing written material. Examples of expanded services include the increasing use of audio-cassettes and development of a visual-aid system in our library.

For those who are new to the society, let me point out that the Pierce County Medical Library Consortium, with the main library facilities housed at Tacoma General Hospital, was established in 1974 as a joint effort between the society and participating hospitals. Today the operations are guided by a combined Hospital Library

Committee with representation from the society, eight hospitals, and the librarian, Ms. Marion von Bruck. Dr. Kenneth Gross, who heads the society representation, serves as chairman of the combined committee. Dr. Gross is to be commended for his dedication to this service and for his foresight in planning for the future of our library system.

The 1979 library budget is \$61,277, of which \$22,400 is provided by the Medical Society of Pierce County. The remainder, in varying amounts, comes from the eight participating hospitals. Upon reviewing this budget, I feel assured that it is sound and that the committee has done its best to hold down increased expenditures to a minimum.

When I served on the Washington State Medical Association Library Committee last year, it was apparent to me that our Pierce County Library is held in esteem and is envied by the other library programs in our state. We still enjoy our satellite libraries in the individual hospitals, but I think few of us would want to return to pre-consortium days when each of the libraries were essentially autonomous and where each of these libraries levied a yearly assessment on staff physicians.

Certainly we all should be very cost conscious in relation to our society's dues structure. In the near future we all will be receiving our 1979 dues statement. I believe that if we honestly and carefully examine what we are receiving for our dollars spent, it will be apparent that we are supporting a strong and worthwhile program at a reasonable cost.

—R.A.J.

WHAT IS A MEDICAL ASSISTANT?

Quite frequently I am questioned about my profession and my reply of "I'm a medical assistant" usually solicits the response of "Oh. What is a medical assistant?" My answer to that is usually a long one as I am quite capable of verbalizing for an hour or more on my favorite subject.

Medical assistants can best be explained in the following paragraph from the March - April issue of The Professional Medical Assistant publication:

"Medical assistants are allied health workers who are prepared to work in ambulatory health care settings. As a member of the health care team, the medical assistant is prepared to perform a broad range of administrative and clinical tasks delegated by and under the supervision of the physician. Medical assistants are employed primarily by physicians in solo or group practices; however, their services may also be utilized in clinics, community and neighborhood clinics, health centers, medical schools and departmental units within hospitals. Medical assisting encompasses knowledge and skills utilized by many of the health disciplines and adds its own unique personality, enabling the medical assistant to reach out and touch each patient with respect, dignity and compassion."

Today's role of the medical assistant is usually divided into two categories: Administrative, which includes clerical, secretarial and managerial skills and knowledge; and clinical, which includes technical and communication skills and knowledge. Housekeeping skills can also be useful to the medical assistant in preparing and maintaining the office. Occasionally a medical assistant will be employed in a "one person" office in which both administrative and clinical duties are performed by that one person.

The medical assistants working in an administrative role are usually the first and last contact a patient has while in the physician's office. A variety of tasks are performed by the administrative assistant. Some of these are:

- Reception
- Appointment scheduling
- Patient file preparation and maintenance
- Telephones
- Correspondence
- Insurance billing
- Filing
- Financial records, both patient and office
- Supply ordering and maintenance
- Personnel supervision

Medical assistants working in the clinical setting require a high level of technical knowledge and skills, and good communication skills. They are involved in direct patient care and must develop and maintain a continuing patient relationship for maximum success in diagnostic and therapeutic procedures. Some of the many tasks are:

- Patient history and medical data
- Blood pressures, pulse
- Diagnostic screening procedures (vision, hearing, EKG, lab)
- First aid and emergency care
- Prepare patient for examination and assist physician
- Dressing changes and applications of new dressings
- Patient education
- Sterilizing equipment and preparation of special procedure trays
- Order and maintain medications, clinical and lab supplies

There are three very essential components of a proficient medical assistant. These are:

1. **APPEARANCE** – Appearance creates the first and quite often lasting impression of the physician's office and practice. It is the medical assistant's responsibility to be well dressed and neatly groomed at all times.

2. **PERSONALITY** – The medical assistant should have a flexible personality and very strong interest in people and a willingness to work closely with them. The assistant must show warmth, consideration, understanding and compassion.

3. **EDUCATIONAL REQUIREMENTS** – The medical assistant must assist in providing safe and complete health care for the patient. Administrative and clinical knowledge and skills are required. It is possible to obtain some of this through on-the-job training, but due to increased medical knowledge, heavy patient load and rapidly changing technology, complete on-the-job training is difficult. Educational programs are available in colleges, vocational schools and private institutions. It is the responsibility of the medical assistant to continually increase his or her knowledge and skills through continuing education.

In summary, the medical assistant is an important member of the health support team who is prepared through on-the-job training and educational programs to perform administrative and clinical tasks delegated by and under the supervision of the physician to aid in giving total and complete health care to the patient.

Susan Thornton, CMA-C

SECOND OPINION COUNTERPRODUCTIVE?

In a statement to the press issued shortly after HEW formally announced the start of its surgical second-opinion program, AMA Executive Vice President James H. Sammons, MD, warned that the program "promises to increase utilization of physician services as Medicare and Medicaid patients across the country are urged to seek a second-opinion before all nonemergency surgery." Dr. Sammons refuted HEW's claim that its national second-opinion program would be cost reducing. Short-term results of several experimental second-opinion programs "have not provided clear evidence," he said, "that a national program of this type will either improve the quality of care or reduce health cost."

REGIONAL MEETINGS HOSTED

Four state health legislation regional meetings have been sponsored by the AMA during the past two years. The meetings examine current issues and developments in state and federal health legislation and their impact upon medical practice. The fifth state health legislation regional meeting will be held January 4-6 in Ft. Lauderdale, Fla.

WITHDRAW PROPOSAL AMA URGES

A proposal to regulate the composition of boards and committees of carriers, intermediaries, and fiscal agents participating in Medicare and Medicaid, should be withdrawn, the AMA told HEW. The proposal, the Association pointed out, "is based on the false notion that by the mere fact of being a member of the medical profession one would be motivated by self-interest to oppose cost effective health care." HEW said it was concerned that the influence of persons with a financial interest in health care delivery "may" compromise the carriers and agents.

SELF-STUDY PROGRAM DEVELOPED

Three new self-study video clinicals are being developed by the AMA for introduction late this year or early next year. The programs combine two-to-four hours of televised viewing with reading material and three self assessment tests. The new programs "Neurological Examination," "The Multiply Tramatized Patient," and "The Unconscious Patient," will be available for use on any video type player in the home or in a hospital or clinic setting.

HEW GUIDE ANNOUNCED

Two studies should be made before the *Guide to Drug Prices* becomes a permanent federal publication, the AMA said of HEW's proposed drug price catalog. When announcing plans for the *Guide*, HEW Secretary Joseph Califano said it "should allow doctors and pharmacists to take costs into account when prescribing and ordering prescription drugs." The AMA recommended a study to determine the correlation of pharmacy acquisition costs with retail prices and the relationship of pharmacy location and acquisition costs. It also recommended that criteria be established and a study conducted to determine the effectiveness of the *Guide* in reducing drug costs consistent with quality care.

AMA-ERF TO FUND FORUMS

The AMA Education and Research Foundation will fund and cosponsor four student research forums next year. The AMA-ERF Board of Directors granted \$44,162 to the U. of Texas Medical Branch in Galveston to finance three regional forums in Miami, Ann Arbor, Michigan, and Carmel, California, and a national forum in Galveston. The forums have been held in the past to encourage research among medical students.

RATE OF INCREASE DROPS

Based on figures in *Profile of Medical Practice 1978* the average U.S. physician in office practice in 1976 was 46 years of age, worked 52.2 hours per week, and averaged \$59,544 in income. The new seventh edition of the book also shows that the rate of increase in physician's fees has declined since 1975, to 9.2%, as measured by the consumer price index. Information in the book is based in large part on results from the 11th Periodic Survey of Physicians, an AMA study conducted last year in which a cross-section of physicians was asked questions regarding office finances, working hours and other aspects of medical management. *Profile* is a companion book to the AMA's *Socioeconomic Issues of Health 1978*. Copies of the books are \$5 each. The set sells for \$8.50. Write AMA Order Dept., P.O. Box 821, Monroe, Wisconsin 53566.

CONTINUING MEDICAL EDUCATION AND RELICENSURE REQUIREMENTS

As a result of laws passed by the Washington State Legislature, all physicians in our state are obliged to provide evidence of 150 hours of Continuing Medical Education every three years. This law is administered by the Washington State Board of Medical Examiners and the rules of the board thus have the effect of law.

The avowed purpose of the law is to provide the public with assurance that physicians are keeping abreast of advances in medical knowledge. It can be easily shown that "knowledge is essential to competence and acceptable performance, but not necessarily the guarantor of either." So far nobody seems to know of a reliable method of measurement of competence and performance by physicians, but the measurable requirement of 150 hours of CME seems to provide some reassurance that physicians are doing the utmost to maintain and improve their competence and performance. Many arguments have been presented in favor or against these views or their modifications, but all are insignificant as these are the requirements of the law. Unless the physician can provide evidence of having engaged in CME in the prescribed manner, he will not be able to renew his license. Practicing without a license is a gross misdemeanor. Without a license a physician would be deprived of hospital privileges, liability insurance, membership in the medical society or the right to reimbursement from various insurance carriers.

The Washington State Medical Association has been able to cooperate closely with the Board of Medical Examiners and hopefully resulting regulations will be as understandable and as simple as possible.

Reporting Methods

Physicians are required to report their involvement in CME to the board on their birthday every third year. There are three methods available for the reporting and physicians need use only one.

Starting in 1979 approximately two months before his birthday each physician will receive from the board a prepared computer card. By filling it out in the prescribed manner the physician will provide the board with documentation of his CME requirements. The card is reproduced below.

The three methods of completing the card are:

Method 1

This method is for those physicians who wish to report their CME hours directly to the board.

The physicians should check the number of hours they claim in each category. They must claim hours in at least three categories. No more than sixty hours may be claimed in any one category except that ninety hours may be claimed in Category I. If a physician has more

CONTINUING MEDICAL EDUCATION AFFIDAVIT OF COMPLIANCE

NAME _____ REFERENCE NO. _____

Please Type or Print

I am reporting 150 CME hours.
No. of Hours

Category I _____

Category II _____

Category III _____

Category IV _____

Category V _____

I possess a current Board-approved CME certificate.

I possess a current recertification by a specialty board.

I certify the report made above is accurate and that I have documentation which I will furnish to the Board of Medical Examiners if requested to do so.

_____ Date

_____ Signature

than ninety hours in Category I, according to the present regulations, he can not claim these in another category. If a physician uses this method of recording, he must be able to provide documentation for his claims if he is audited. The board will perform some audits. The method of choosing physicians to be audited and the number of physicians to be chosen are at the present not known.

In relation to the above let me mention that Category I hours are those offered by organizations accredited for that purpose by the WSMA or programs sponsored by nationally accredited organizations such as universities, specialty groups, etc. A detailed listing of organizations accredited for Category I is available from the WSMA office or from Mrs. Bailey at the office of the College of Medical Education. It should be added that the latter is formally accredited for a period of four years as an organization which can provide Category I programs.

Category II. Category II programs are those that are not designated as Category I but are provided in a relatively formal setting by whoever has the ability to present such programs. This usually refers, at least in Pierce County, to the various grand rounds, conferences, etc. For example, Tuesday morning grand rounds at Mary Bridge, Wednesday morning meetings at Tacoma General Hospital, Thursday morning meetings at St. Joseph's Hospital, Friday morning meetings at Good Samaritan Hospital and Tacoma General Hospital, and meetings at Allenmore Hospital, Lakewood General Hospital, etc., all qualify under Category II.

Category III. Category III hours refer to time spent teaching physicians, medical students, and allied health personnel within a formal training program at a hospital or another institution.

Category IV. Category IV refers to the time spent in writing books, papers, publications, and preparing exhibits, etc. Details of the regulations indicate that, for example, ten credit hours may be claimed for a paper published in a recognized medical journal or presented at a meeting. Credit for one article may be claimed only once for the publication of an article or its presentation at a meeting.

Category V. Category V refers to time spent in non-supervised CME. Here can be listed self-assessment programs, independent reading of medical or scientific journals and books, preparation for specialty board examinations or work within a quality care or utilization review committee.

Method II

The physicians who have earned a currently valid Certificate of CME from a CME program approved by the Board of Medical Examiners for the State of Washington or by a CME program of a national medical specialty society may use this method. If a physician uses this method, he only needs to check the appropriate box on the report card presented above. The physician must be

able to present the proper certificate from an approved organization or suitable letter of certification if required. At present the following organizations qualify under these rules:

- American Medical Association
- Physician Recognition Award
- American College of Obstetrician and Gynecologists Award
- American Academy of Family Physicians
- American Academy of Dermatology
- American Association of Neurological Surgeons—Congress of Neurological Surgeons
- American College of Emergency Physicians
- American College of Urology
- American Society of Clinical Pathologists—College of American Pathologists
- American Society of Colon and Rectal Surgeons

Method III

This method can be used by physicians who possess a current recertification by a specialty board (and again it is only necessary to check the appropriate box on the report card). Again, the physician must be in a position to present suitable documentation if requested. At present the following specialty boards provide recertification:

- American Board of Ology and Immunology
- American Board of Dermatology
- American Board of Family Practice
- American Board of Internal Medicine
- American Board of Obstetricians and Gynecologists
- American Board of Physical Medicine and Rehabilitation
- American Board of Plastic Surgery

Good News and Bad News

As I looked at these requirements when they were first described in detail, I thought they provided evidence of both good news and bad news. The good news was that there was a large number of ways in which a physician could collect his necessary CME hours. If a physician in Pierce County attended only the various offerings available each day in one hospital or another and attended some of the courses provided by the College of Medical Education and then did some additional reading on his own, he would have no difficulty in fulfilling all the requirements. Actually for the requirements of the Board of Medical Examiners, a physician need not even provide Category I hours as he may satisfactorily provide evidence of all 150 hours distributed amongst the three of the four remaining categories.

Under Category II, in addition to the various hospital meetings, attendance at a staff meeting where some scientific program is presented or a county society meeting in which a scientific program is presented would also qualify. The annual state association meetings also provide scientific programs and Mrs. Bailey, at the College

Continued on page 19

Medical Society / Medical Auxiliary
DECEMBER JOINT DINNER

Join the Medical Society and Auxiliary for a prime rib dinner and festive evening at the Tacoma Country and Golf Club on Tuesday, December 5, 1978.

- PROGRAM:**
- Installation of 1979 Medical Society officers.
 - A special performance by Ballet Tacoma.

DATE: Tuesday, December 5, 1978.

TIME: No host cocktails — 6:30 P.M.
Dinner — 7:15 P.M.
Program — 8:30 P.M.

COST: \$25.00 per couple, \$12.50 per person (includes wine, tax and gratuities).

Register now. Space will be limited. Please complete the attached reservation form and mail it, with a check for the appropriate amount, to the Medical Society office. Or, call the Medical Society, 572-3667, to confirm your attendance.

Due to the special arrangements necessary for the meeting, reservations must be returned to the Medical Society by no later than Monday, November 27.

REGISTRATION

Yes, I (we) have set aside the evening of December 5 to join my fellow Society and Auxiliary members at the Medical Society's Annual Meeting and Installation of Officers.

_____ Please reserve _____ dinner(s) at \$25.00 per couple, \$12.50 per person (wine, tax and gratuity included). Enclosed is my check for \$_____.

Dr: _____
(Please Print)

Make check payable to Medical Society of Pierce County.

Return to the Medical Society by no later than Monday, November 27.



IN MEMORIAM
JAMES W. CHAPPELL, M.D.
1924-1978

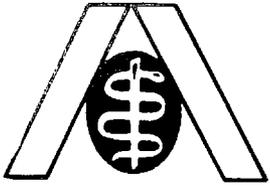
When Jim Chappell entered private practice and joined the staff of Lakewood General Hospital in 1973, I soon realized, with great satisfaction, that I had found a new friend. We had met earlier, occasionally, during his tenure at Western State Hospital, where he worked from 1958 until 1972, first on the staff and towards the end in charge of the entire medical service. But it was only when we began to meet almost daily at Lakewood Hospital, while talking shop or while discussing our families, interests, or hobbies, that I learned to appreciate his fine qualities both as a physician and as a fellow human being. Jim was deeply concerned about the welfare of his patients, who loved him. Eager to keep up with medicine, he attended many courses. A devoted family man, he adored his wife, Katherine, an art teacher, and their four children. His hobby, photography, in which he excelled, enriched his own life and those of others. His fine sense of humor and quick, subtle wit added greatly to his charm.

Jim was born in Lincoln, Nebraska, on February 15, 1924. He graduated cum laude from the Nebraska College of Medicine in 1949, and was elected to the Alpha Omega Alpha Honor Medical Society the same year. After internship and a two-year residency he spent two years, 1954-56, in the Navy. The year 1957 saw him in general practice in Darrington, Washington. From 1958 until 1972 he belonged to the staff of Western State Hospital. After leaving Western State, he took his family on a six-month camping trip through Mexico, and upon returning entered private family practice in Lakewood, but during the following years he maintained his interest in mental health and worked as a volunteer physician with various mental health groups. He also found time to teach courses in photography.

Jim was returning from a vacation with his family late last August, when he fell ill with a relentlessly progressing, highly malignant lymphoma, of which he died, at the Virginia Mason Hospital in Seattle, on October 12, 1978.

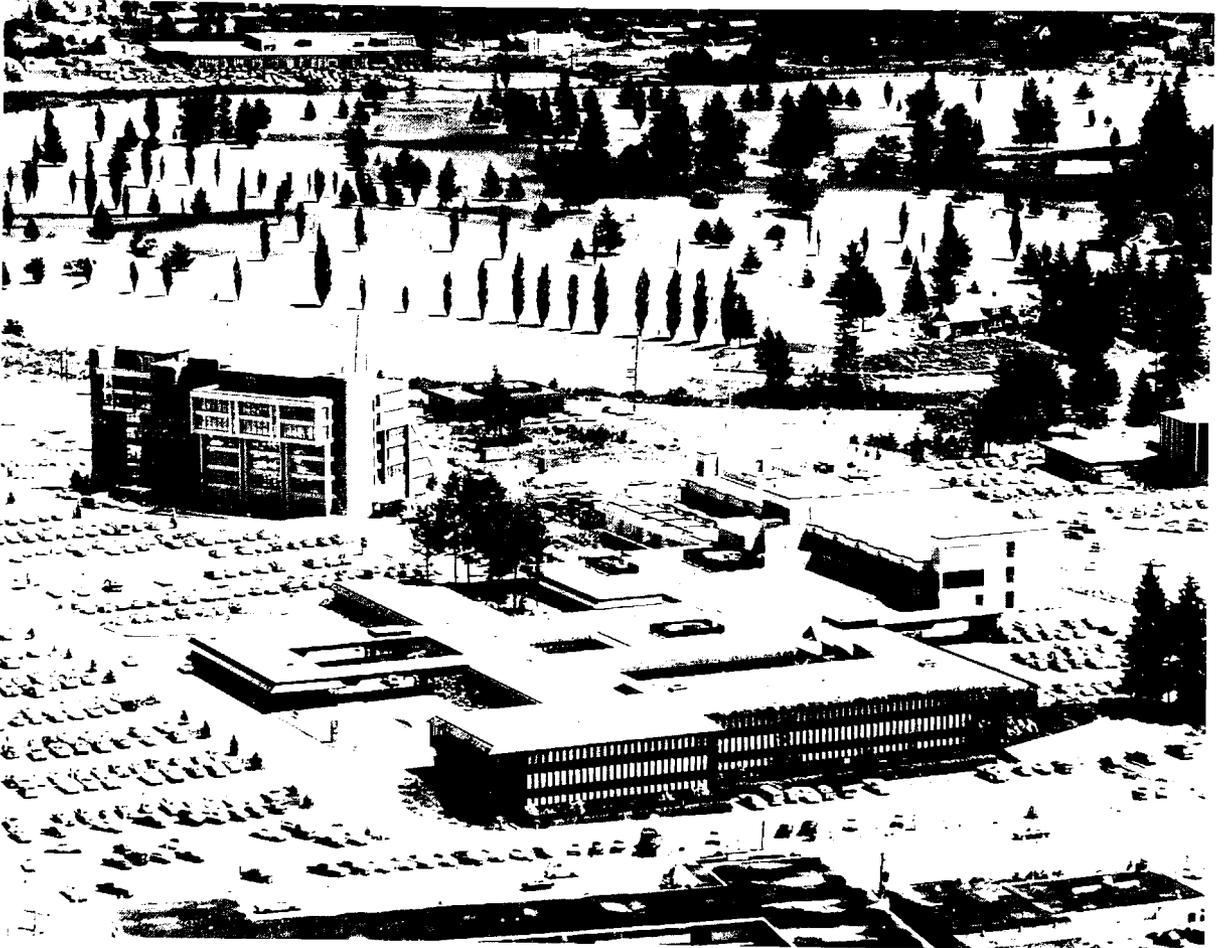
At Jim's memorial service, held in the Bellarmine chapel on October 16 and attended by nearly 300 persons, Father Ted Kestler said: "Let us not speak of Death but of Life, of Jim's life, which was filled with devotion to his fellow human beings and to his family. Let us thank God for Jim's life and work, and for the privilege of having known this wonderful man."

Gerhart A. Drucker, M.D.



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

Membership

In accordance with the Bylaws of the Medical Society of Pierce County, Chapter Seven, Section A, MEMBERSHIP, the following physicians have applied for membership, and notice of their application is herewith presented. As outlined in the Bylaws, any member who has information of a derogatory nature concerning an applicant's moral or ethical conduct, medical qualifications or other such requisites for membership, shall assume the responsibility of conveying that information to the Credentials Committee or Board of Trustees of the society.

FIRST NOTICE



WILLIAM W. BRAND, M.D., Internal Medicine. Born in Wellington, Kansas, 12/18/43; medical school at University of Kansas, 1969; internship at University of Kansas, 1969-70; residency at Mary Imogene Bassett Hospital, Dartmouth Medical School, 1970-73; licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Good Samaritan, Puget Sound, St. Joseph, Tacoma General. Dr. Brand is practicing at 521 South K Street, Tacoma.



ROBERT KELTIE BURT, M.D., Obstetrics and Gynecology. Born in Glasgow, Scotland, 11/03/26; medical school at Glasgow, 1949; internship at Glasgow Royal Infirmary, 1949-50; residency at Royal Samaritan Hospital, Glasgow, 1951-53; licensed to practice medicine in the State of Washington, 1977. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Good Samaritan, Lakewood, Puget Sound, St. Joseph, Tacoma General. Dr. Burt is practicing at 10109 Plaza Drive S.W., Tacoma.



DAVID I. CRAMER, D.O., Obstetrics and Gynecology. Born in Brooklyn, NY, 12/17/43; medical school at College of Osteopathic Medicine and Surgery, Des Moines, Iowa, 1968; internship at Zieger Osteopathic Hospital, Detroit, 1968-69; residency at Kings County-State University Hospital, Brooklyn, 1970-74 (chief resident, 1973-74). Previous practice in obstetrics and gynecology, Brooklyn, 1974-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Doctors, St. Joseph, Tacoma General. Dr. Cramer is practicing at 1112 S. Cushman Ave., Tacoma.



STUART J. FARBER, M.D., Family Practice. Born in Tacoma, 11/13/47; medical school at the University of Washington, 1974; three-year family practice residency at Medical College of Wisconsin-Deaconess Hospital, Milwaukee, 1974-77. Instructor, Department of Family Practice, Medical College of Wisconsin, 1977-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Mary Bridge, St. Joseph, Tacoma General. Dr. Farber is currently assistant director at the Tacoma Family Medicine-Family Practice Residency Program.



WAYNE E. LARSON, M.D., Emergency Medicine. Born in Mason City, Iowa, 3/14/48; medical school at the University of Iowa, 1975; residency at Family Practice Residency, Rockford, Illinois, 1975-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Lakewood, Tacoma General. Dr. Larson is practicing at Lakewood and Tacoma General Hospitals.



PHILIP K. LIND, M.D., General Surgery. Born in Lincoln, Nebraska, 4/18/49; medical school at University of Nebraska, 1973; internship at Wilson Hospital, Johnson City, New York, 1974-75; residency at Wilson Hospital, 1974-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Good Samaritan, Lakewood, Puget Sound. Dr. Lind is practicing at 1112 S. Cushman, Tacoma.



RICHARD J. ROBINSON, M.D., Internal Medicine. Born in Cedar Rapids, Iowa, 3/31/46; medical school at Creighton University, Omaha, Nebraska, 1972; internship at Madigan Army Medical Center, 1972-73; residency at Madigan, 1975-77. Licensed to practice medicine in the State of Washington, 1974. General medical officer, Ft. Lewis, 1973-75. Has applied for membership on the medical staffs of the following hospitals: Lakewood, St. Joseph, Tacoma General. Dr. Robinson is practicing at 9875 Bridgeport Way S.W., Tacoma.



SUSAN J. SALO, M.D., Family Practice. Born in Seattle, 8/13/49; medical school at University of Washington, 1975; family practice residency at St. Joseph Hospital, Flint, Michigan, 1975-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Good Samaritan, Mary Bridge, Tacoma General. Dr. Salo is practicing medicine at 1725 - 22nd Way N.E., Auburn.



JON RODNEY SCHMIDT, M.D., Internal Medicine/Gastroenterology. Born in Ft. Worth, Texas, 8/10/45; medical school at Ohio State University, 1971; internship at Madigan Army Medical Center, 1971-72; residency at Madigan, 1972-74; graduate training at Madigan in gastroenterology, 1974-75. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Lakewood, St. Joseph, Tacoma General. Dr. Schmidt is practicing at 9875 Bridgeport Way, Tacoma.



CLAIRE E. TRECOTT, M.D., Pediatrics. Born in Detroit, Michigan, 9/28/48; medical school at Wayne State University, Detroit, 1976; internship at William Beaumont Hospital, Royal Oak, Michigan, 1976-77; residency at Childrens Hospital of Michigan, Detroit, 1977-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Doctors, Mary Bridge, St. Joseph, Tacoma General. Dr. Trescott is practicing at 1112 S. Cushman, Tacoma.



DANIEL J. WANWIG, M.D., Internal Medicine/Psychiatry. Born in Seattle, 7/8/45; medical school at University of Washington, 1971; internship, U of W, 1971-72; residency in psychiatry at University of Vermont, 1972-75; residency in internal medicine at San Junquin General Hospital, California, 1975-78. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Lakewood, St. Joseph, Tacoma General. Dr. Wanwig is practicing at Allenmore Medical Center.



GLORIA A. WEINSTEIN, M.D., Pediatrics. Born in New York, NY, 11/22/49; medical school at Medical College of Pennsylvania, 1975; internship at Long Island Jewish Hillside Medical Center, 1975-76; residency at Long Island Jewish Hillside Medical Center and the Roosevelt Hospital, NY, 1976-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Lakewood, Mary Bridge, St. Joseph, Tacoma General. Dr. Weinstein is practicing at 1112 S. Cushman, Tacoma.

SECOND NOTICE



WILLIAM G. MARSH, M.D., Family Practicer. Born in Waltham, Mass., 4/9/46; medical school at University of Oregon, 1972; internship at Great Lakes Naval Hospital, Illinois, 1972-73; residency at Wright - Patterson Air Force Base Medical Center, Dayton, Ohio, 1973-75; licensed to practice medicine in the State of Washington, 1979. Dr. Marsh is practicing at 1109 Canyon Road East, Puyallup.



EILEEN R. TOTH, M.D., Internal Medicine. Born in Easton, PA, 10/18/46; medical school at Harvard Medical School, 1972; internship and residency at Harlem Hospital, New York, 1972-75; licensed to practice medicine in the State of Washington, 1975. Dr. Toth is practicing at A-211, Allenmore Medical Center.



WALTER SCHUMACHER, M.D., Anesthesiology. Born in Zurich, Switzerland, 4/28/47; medical school at the University of Zurich, 1973; internship at LAC-USC Medical Center, 1973-74; residency at University of Washington, 1974-76; licensed to practice medicine in the State of Washington, 1975. Dr. Schumacher is currently practicing at St. Joseph's Hospital.

SOCIETY NEWS BRIEFS

A summary of Medical Society, and local medical and health news

BALLOTS DUE DECEMBER 1

Voting members of the society have received ballots for election of society officers and three trustees for 1979. Deadline for return of the ballots to the society office is Friday, December 1. Election winners will be announced at the December 5 General Membership Meeting. If you are an active or honorary member of the society and did not receive a ballot, contact the society office, 572-3667.

WAMPAC: MEDICINE'S CHANCE TO INCREASE ITS POLITICAL IMPACT

Physicians practicing in Washington State have a mechanism to effectively impact on the political process, WAMPAC. WAMPAC, the Washington Medical Political Action Committee, is a twenty-eight member board representing each of the state's seven congressional districts. Each congressional district is represented by three physicians and one medical auxiliary member. WAMPAC is a voluntary, non-profit, non-partisan association of physicians, their spouses and others.

The WSMA and your county society support WAMPAC's educational activities and WAMPAC's only source of candidate support money is the voluntary contributions from physicians and their spouses. The American Medical Political Action Committee, AMPAC, supports U.S. Congressional candidates while WAMPAC supports primarily state candidates. Physicians and auxiliary members can have a meaningful impact on the political process through collective action. Your 1979 medical society dues statement will include a WAMPAC contribution. Please keep in mind the impact your participation can achieve through WAMPAC in 1979.

RESERVE TUESDAY, DECEMBER 5

The medical society will hold its annual meeting, with spouses, on Tuesday, December 5, at the Tacoma Golf and Country Club. The program for this gala dinner event will include announcement of newly elected society officers and trustees, inauguration of the society's 1979 president, and a performance by Ballet Tacoma. Space is limited, please return your reservation form to the medical society office as soon as possible, or call 572-3666 to reserve your dinner.

HAVE YOU BEEN ASKED?

Physicians who have received requests to provide information for the "U.S. Medical Directory" should be aware that this is a commercial solicitation, reminds the WSMA.

FAMILY PRACTICE LUNCH HOUR LECTURES

Tacoma Family Medicine is presenting a series of lunch hour lectures for credit in December. Each noon lecture is acceptable for one prescribed hour by the American Academy of Family Physicians. The series is also recommended as a review course for the American Board of Family Practice certifying exam.

The schedule of lectures for December is:

Initial Evaluation and Stabilization of Head and Cervical Spine Injuries by the Primary Care Physician, M. Wiese, MD, Neurosurgeon.

Evaluation and Treatment of Otitis Media and Otitis Externa by the Primary Care Physician, Dr. Weinstein, Pediatrician.

Fluid and Electrolyte Balance with Special Emphasis on K+Dynamics, John Kennedy, MD, Nephrology/Cardiology.
Eye Emergencies Requiring Immediate Attention by the Primary Care Physician and Possible Immediate Referral, Clark Deem, MD, Ophthalmology.

Each lecture will be held in the doctor's lounge on the second floor of Building "A" at the Allenmore Medical Center. There is no charge. Sandwiches and coffee will be provided. Reservations are not required. Simply drop in.

MEDICAL LIBRARY PROVIDES ACCESS

Your access to the medical literature through the network of Biomedical communication—hospital libraries, the Pierce County Medical Library, Pacific Northwest Regional Health Sciences Library, National Library of Medicine, and the British Lending Library—begins in Pierce County through your medical library. Comprehensive library services include literature searches, bibliographies, inter-library loans, and Med-Line searches (literature retrieval by computer). The library is open Monday through Friday from 8:00 a.m. to 5:30 p.m. A Key is available upon request for library use at other times. For additional information or assistance contact M. von Bruck, librarian, 572-5340.



IN MEMORIAM
ERNEST E. BANFIELD
1916-1978

On Monday, September 11, 1978 my partner and longtime friend, Bud Banfield, died of a ruptured aortic aneurysm. Bud was the senior plastic surgeon in the Tacoma area, having practiced for over 28 years. His sudden death was a tragedy to his many friends and to his fellow citizens.

Bud was one of the most capably efficient people I have ever met. He exercised a certain rare sense of economy of time and motion in accomplishing just about everything he undertook. Consistently and dependably conservative in his political inclinations, he lived the same conservative philosophy in his general approach to life.

Bud's interest in horticulture probably led him to his association with the Metropolitan Park Board with whom he had served since 1962, having been elected president four times.

He received the Sertoma Club's Service to Mankind Award in 1973 for having been one of the founders of the Cleft Palate Rehabilitation Clinic at Mary Bridge Children's Hospital.

His interest in boats was lifelong. He was on the crew in college and was an active member of the Tacoma Yacht Club, serving as commodore in 1967. He was a skilled and enthusiastic yachtsman and built the major portion of his well-known yacht, the "Becky B," himself.

I know most of you share the pride and satisfaction that comes from knowing such a man with the sense of sadness that follows being deprived of his company.

John R. Alger, M.D.

A GREAT UNTAPPED RESOURCE

The October board meeting was held at Debbie Mc-Alexander's home. Debbie and Nadine Kennedy, meeting chairman, hosted a lovely luncheon. Our thanks to them both. Jo Roller introduced our very important visitors: State President Carolyn Vaughn Smith, State Legislative Chairman Vicki McNeill, and Southwest Regional Vice-President our own Nancy Spangler. The various committee chairmen gave reports on their jobs. The thrust of the state officers' pep talks was health and legislative issues, advising us to be fairly visible as spouses of physicians and to strive for more cooperation with health projects. Carolyn is working the hardest reviewing and upgrading the health education system and new approaches to preventative health. Vicki McNeill stated auxiliary is a great "untapped resource" and stressed the importance of keeping in touch with our local legislators.

The October 20th meeting was held at Karen Benveniste's home. Chairman Em Stern and her committee—Karen Benveniste, Glenna Blackett, Lynn Gifford and Debbie McAlexander—provided a delectable luncheon. Thank you, ladies! Nikki Crowley conducted the meeting in the absence of President Jo Roller. Several members introduced their 'lil sisters, and two new members introduced themselves. Our speaker, Dr. Ted Sterling from UPS was very humorous. His talk dispelled the so-called "myths of aging." His advice to "use it or lose it!" was well stated. In other words, keep exercising mentally, physically, and sexually to stay "with it." He also picked up a few new ideas from our members during the question session.

Nancy Spangler informed us the Auxili-Quad Luncheon date has been changed to January 12th (the 2nd Friday of the month). It will be held at the Sherwood Inn at 11:30. The Sherwood will hold 400 so there's plenty of room for all. Tickets will be on sale at the November and December meetings, and must be purchased no later than January 5th. The Curtis High School Swing Choir will entertain us. We do encourage you all to come as this is a great opportunity to meet and visit with the physicians', dentists', lawyers' and pharmacists' wives. If you have any questions you may call Nancy at 564-5535.

The Specialty Auction, March 17th (St. Patrick's Day) will be held at Fort Steilacoom College from 7:00 to 11:00 p.m. The cost is \$3.00 per person—prepaid. Some of the talents volunteered by our brave members are as follows: a neck and back massage plus teaching the spouse how to perform this procedure (with spouse in attendance), a boat cruise, pottery to please, sailing lessons by a seasoned sailor, tennis lessons from two of our "pros," and a cocktail party for 50 (WOW!). Plans are shaping up for a really fun evening. So be brave, volunteer your talents and join in the fun. Anyone desiring to help with this exciting venture may call Nikki Crowley at 565-3767. The Auction is open to all so bring your friends.

Remember the Holiday Children's party to be held at Jo Roller's home, Tuesday, December 12th, from 3:30 to 5:30 p.m. You will be hearing more details about this from the phone committee.

Joan Sullivan

CONVENTION REPORT

The 47th Annual Convention of the Washington State Medical Auxiliary was held at the Ridpath Hotel in Spokane, September 21-23.

The medical auxiliary has accomplished much throughout our state. County auxiliaries have helped with school programs, immunization, scoliosis detection and many health orientated programs in the community. A total of \$27,092 was raised for AMA-ERF by the county auxiliaries. Pierce County received an award for raising the most money for AMA-ERF, thanks to many of our members.

After listening to some dynamic speakers and meeting some delightful people, I went out and bought a hat and a new tea cup so I could attend auxiliary meetings when I returned home. The very next convention speaker told us we do not join the auxiliary to wear hats and drink tea! We join because we need each other, because the medical society needs us, because volunteers' time costs less, people in the community need us, and we can do more together. Oh well, I hated the hat anyway.

A Loyalty Pledge of the Convention: "I pledge my loyalty and devotion to the American Medical Association Auxiliary. I will support its activities, protect its reputation, and ever sustain its high ideals."

Washington State Auxiliary President is Mrs. Wm. Vaughn Smith, and we wish her well.

Our auxiliary was well represented at the convention. The following delegates attended: Helen Whitney, Kit Larson, Nikki Crowley, Cindy Anderson, Alaire Sheimo, Martia Ohme, Bev Graham, Gloria Virak, Carol Hopkins, Stephanie Tuell and Jan Thiessen (alternate). Past State President JoAnn Johnson, Past Communications Chairman and newly elected Southwest Regional Vice-president Nancy Spangler, Past State AMA-ERF Chairman Jo Roller, also attended. Good work, ladies!

A delightful time was had by all and we are looking forward to next year's convention which will be held in Seattle. See you there.

Kit Larson

CONTINUING MEDICAL EDUCATION *continued*

of Medical Education, has a list of all of the scientific programs presented at the WSMA meetings in 1976, 1977 and 1978, with indication of the number of hours and category under which they qualify.

Under Category III we can list all the time spent in teaching of medical students or medical residents or nurses or emergency medical technicians and others. Possibly many physicians in Pierce County may qualify under this heading.

Category IV may apply only to a relatively small number of physicians, but all those who publish papers, prepare exhibits, etc. can utilize it.

Category V offers the largest variety of activities that may qualify. Thus, listening to tapes, reading medical journals, other scientific journals, scientific books and text books in any reasonable form would qualify. Attendance at meetings, peer review, medical and chart audits, case conferences, and tissue review committees may qualify for appropriate credit. Many of us have taken self-assessment examinations and spent a considerable amount of time with them and this time would qualify.

Thus, although we are expected to fulfill specific requirements we seem to have been given an opportunity to fulfill these requirements with the kind of activities that most of us as physicians perform anyway.

As regards to the bad news, in relation to CME I would mention the need for keeping a record of these activities. The actual regulations do not specify that we must keep records, but they do indicate that a number of us may be audited and those who are audited have to provide documentation. The board does not specify what this documentation should be. This documentation could be provided by notes and certificates of attendance, copies of programs, computer printouts or a collection of handouts. I personally use a log method. My receptionist has one of those relatively small daily attendance/daily organizer books which we have received as an annual gift from one organization or another. Whenever I am involved in an activity that in my opinion qualifies for CME credit, my receptionist makes a note of the date, type of activity involved, and the amount of time spent on it. Under my instructions she also indicates the category into which such activity falls. Kept on a regular daily basis this does not seem to provide her or me with any problem. I may never be required to produce this but if I am, it will be ready.

Our medical society, the WSMA, and College of Medical Education all would be glad to assist further if any questions exist.

Marcel Malden, MD
Chairman, CME Committee

AUXI-QUAD SEMI-ANNUAL LUNCHEON FRIDAY — JANUARY 12, 1979 SHERWOOD INN

11:00 a.m.

12:00 Noon

1:00 p.m.

Price: \$5.00

Send checks to:

No Host Cocktails

Lunch

Entertainment

"Curtis Swing Choir"

— Checks payable to PCMSA

Must be received by January 4, 1979.

No reservations or cancellations after this date.

Nancy Spangler

3620 Soundview Dr. W.

Tacoma, WA 98466

LENOX TRANSCRIPTION SERVICE

Your 24 hour medical secretary offers these benefits:

- Direct dictation line
- Experienced medical steno
- Personalized service
- Full-time, part-time or temporary service

24 HOUR DICTATION LINE
535-0332

For more information contact:
Nancy Lenox/537-3921

PUGET SOUND COLLECTIONS, INC.

Washington Building
Suite 1301

11TH & PACIFIC AVE.



SERVING THE

- MEDICAL
 - DENTAL
 - PROFESSIONAL
- Since 1960

Member of
American Collectors Assn.
Medical-Dental-Hospital Bureaus
of America

Complete Collection Agency Services

383-5011

FRANK ROSSITER, Owner-Manager

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people 24 hours a day.



TELEPHONE ANSWERING

RADIO-TELEPHONE

PAGING

RADIO PAGE
572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day... when you must be contacted, you get an actual voice message from your personal Pager.

ANSWERING SERVICE
572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw - 24 hour service.

We're your convenient source for WSMA/AETNA professional liability insurance.

We're also much more.

Persing, Dyckman & Toynebee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



PERSING, DYCKMAN & TOYNEBEE, INC.
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynebee
Wayne Thronson
Bob Sizer

Thom Comfort
Life Department
B. Dennis Schmidt, CLU
Mark Hanks

Classified

Classified and announcement copy may be mailed to: Journal & Bulletin Agency, Inc. 1011 Lloyd Bldg, 603 Stewart, Seattle 98101 or phoned to Seattle (206) 682-7813. Deadline 25th of month prior to month of issue.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T.G. Contact Richard Huish, M.D., 572-4664.

Developing small prof. bldg., 6 offices, in fast growing Federal Way—NE Tacoma area. Need physicians and/or dentists interested in locating in area. Ph. (206) 927-4405 or write Gregg Lawrence, 2914 60th Ave. NE, Tacoma, 98422.

Office available. Near Tacoma General Hospital. 6 rooms plus reception room, dressing room and dispensary. Room for dark room. \$375 a month or lease. Call 1-572-2131 before 2 p.m.

KIRKLAND - medical bldg. for lease in a 5 bldg. complex 1600 sq. ft., includes - waiting room, reception room, 4 examination rooms, 2 offices, x-ray and darkroom. 641-5743.

HAWAII!!!

Furnished Condos all islands—reasonable—studio 1 and 2 BR. Mostly ocean front (206) 454-1431.

MT. RAINIER SURGICAL ASSOCIATES, P.S. GENERAL AND COLORECTAL SURGERY WILLIAM H. MARTIN, M.D. GORDON R. KLATT, M.D.

34616 11th Place South

Federal Way, Washington 98003

announce

the opening of an additional office

PHYSICIANS MEDICAL CENTER

1624 South I. Street, Suite 403

Tacoma, Washington 98405

Telephone: 383-5949

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

Cardiovascular Surgeon scheduled to finish cardiothoracic residency at the University of Wisconsin in June, 1979, seeks to join a group or partnership in the Tacoma area. Thirty-four years of age, has completed military obligations, is board certified in general surgery, will be board eligible in cardio-thoracic and peripheral vascular surgery in 1979. Listing 1001.

Internist currently completing residency in internal medicine at the Medical College of Wisconsin, Affiliated Hospitals, Milwaukee. Graduate, University of Illinois College of Medicine; internship, Medical College of Wisconsin, 1977. Diplomate, National Board of Medical Examiners. Listing 1003.

Family Physician will complete family medicine residency at University of Colorado Medical Center, July 1979. Graduate, University of Oregon Medical School, 1974; internship at San Bernardino County Medical Center, California, 1974-75; served as National Health Service Corps Physician, 1975-77. Diplomate, National Board of Medical Examiners. Available September 1, 1979. Listing 1004.

Cardiologist available in July, 1979. Graduate, King George Medical College, Lucknow, India, 1972; Flex, 1975; Diplomate, American Board of Internal Medicine, 1977. Associate member, American College of Physicians and American College of Cardiology. Listing 1102.

Board Certified Internist interested in group practice or full-time hospital position as director of critical care. Has been in practice two years with a combined consultative private practice and ICU/CCU directorship in Davis, California. Graduate, Stanford University School of Medicine, 1973; internship, San Fernando Valley—UCLA Medical Program, 1973-74; residency, San Fernando Valley—UCLA Medical Program, 1974-76 (served as chief resident, 1976). Certified 1976, American Board of Internal Medicine. Listing 1101.

Psychiatrist available after January, 1979. Graduate, University of Alberta, 1962; internship, Holy Cross Hospital, Alberta, 1963; residency, Baylor College of Medicine, 1963-66. Private practice in Texas and New Mexico, 1963-78. Clinical experience in individual, group and family therapy, and consultation experience in forensic, geriatric, and CMH areas. Listing 1103.

Family Physician interested in group practice or emergency room position. Available after October 15, 1978. Diplomate, American Board of Family Practice; member, American Academy of Family Practice. Graduate, University of Vermont College of Medicine; internship at US Public Health Service Hospital, San Francisco; service experience with Alaska Native Health Clinic, Ketchikan, 1973-75. Has maintained private practice since 1975. Listing 1002.



A.T. NORMAN INTERIORS

COMMERCIAL - RESIDENTIAL
OFFICES - MEDICAL & HEALTH FACILITIES
FULL SERVICE - SPACE PLANNING
COLOR & LIGHTING SPECIALISTS

Design Staff:

RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK

MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936

206/627-3139

DESIGN OFFICE - SHOWROOM
524 TACOMA AVENUE SOUTH - TACOMA, WASHINGTON 98401



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*



Today's most thoughtful,
popular and practical
baby gift is



Tacoma 475-1234

Seattle 634-BABY

*Washington's oldest, most trusted
Professional Diaper Service
serving our second generation*



*Servicing the Medical Profession
Since 1930*

BIDDLE & CROWTHER Co

Physicians and Hospital Supplies

Home Office

910 North 137th - Seattle 98133
(206) 365-9900

First Hill Branch

(for Retail Sales to Patients)

1018 Summit Avenue - Seattle 98104
329-1668

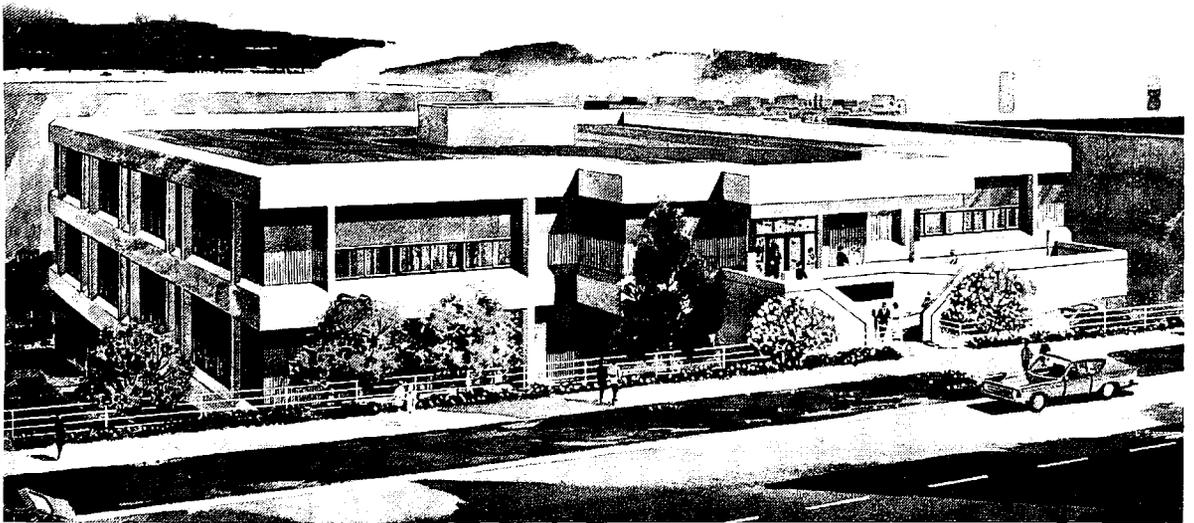
PACIFIC NORTHWEST ORTHOPEDICS

DIVISION OF BIDDLE & CROWTHER CO.
Prosthetic Implants - Orthopedic Supplies
1216 Madison St. - Seattle 98104 - 622-3700

Call us toll-free from anywhere in the
State of Washington - 1-800-562-6994

DOCTORS PROFESSIONAL BUILDING

721 Fawcett Avenue – Tacoma, Washington 98402



- Personal suite design
- Moderate rates include utilities and maintenance
- Covered access to adjacent Doctors Hospital
- Within one mile of Tacoma General, Mary Bridge and St. Joseph's
- Generous interior allowance and design time
- Total environment air conditioning
- Ample patient parking
- Covered physician tenant parking
- Athletic facilities adjacent



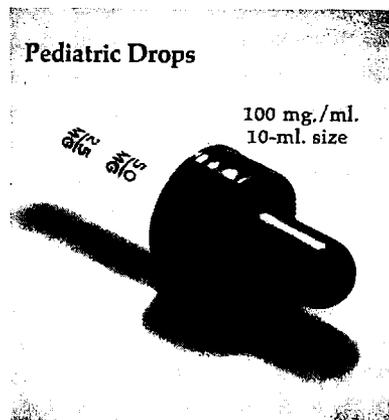
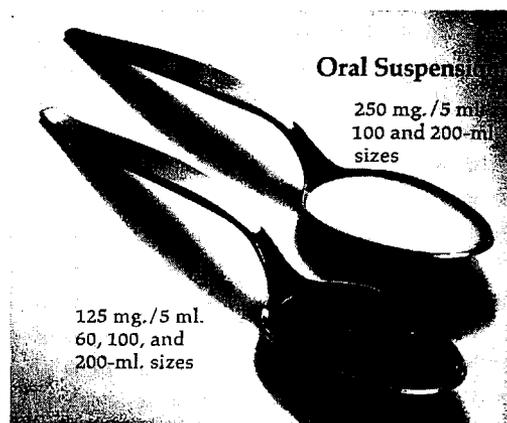
For leasing information: Fred A. Pritchard – (206) 627-8111

The Doctors Hospital Of Tacoma
737 Fawcett Avenue – Tacoma, WA 98402

MEDICAL SOCIETY OF PIERCE COUNTY
813 South K Street - Suite 200
Tacoma, Washington 98405
ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

easy to take



Keflex[®]

cephalexin



Additional information available to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206

506730



Medical Society of Pierce County

DECEMBER 1978 • Vol. XLX, No. 12 • Tacoma, Washington

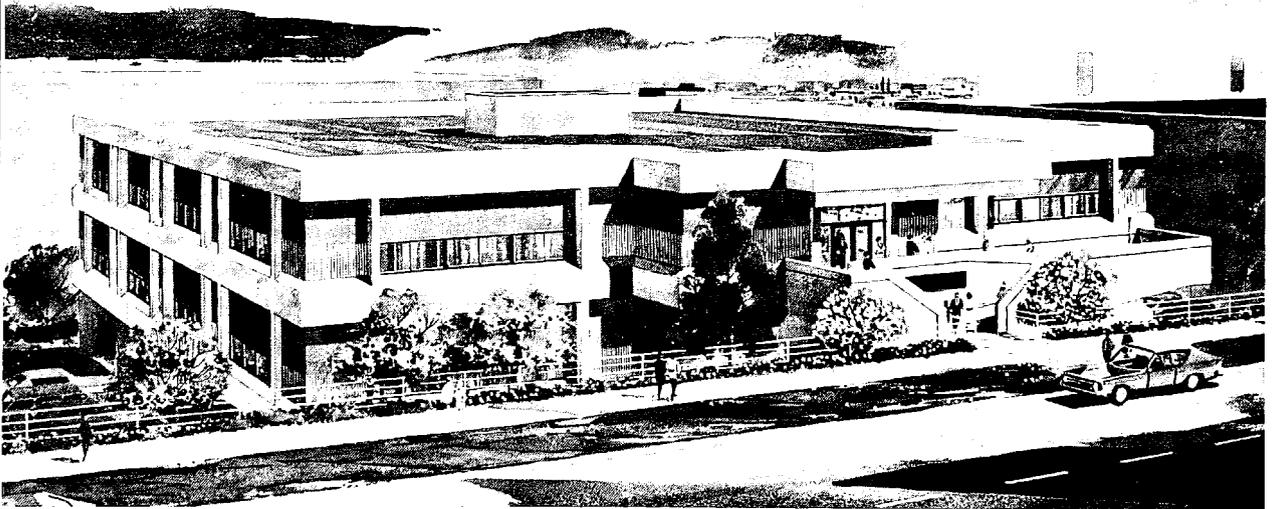


*Looking Ahead To Olympia,
See page 8*

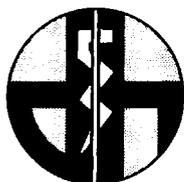
BULLETIN

DOCTORS PROFESSIONAL BUILDING

721 Fawcett Avenue – Tacoma, Washington 98402



- Personal suite design
- Moderate rates include utilities and maintenance
- Covered access to adjacent Doctors Hospital
- Within one mile of Tacoma General, Mary Bridge and St. Joseph's
- Generous interior allowance and design time
- Total environment air conditioning
- Ample patient parking
- Covered physician tenant parking
- Athletic facilities adjacent



For leasing information: Fred A. Pritchard – (206) 627-8111

The Doctors Hospital Of Tacoma
737 Fawcett Avenue – Tacoma, WA 98402

Bulletin of the Medical Society of Pierce County



Photo by
Mrs. Chris Reynolds

CONTENTS

Page	
5	President's Page
7	AMA In Brief
8	Numerous Health Issues to be Considered
10	Demonstration Projects Termed Effective
11	Convention 1978 Highlights
14	Library Committee Expresses Appreciation
14	Letters
16	Membership
19	Auxiliary Page
21	Classified

1978 OFFICERS

President	Ralph A. Johnson, M.D.
President-elect	Kenneth D. Graham, M.D.
Vice President	Richard T. Vimont, M.D.
Secretary-Treasurer	Lloyd C. Elmer, M.D.
Past President	Duncan T. Baer, M.D.
Executive Director	Thomas J. Curry

TRUSTEES

James M. Blankenship, M.D. (79)
Melvin L. Henry, M.D. (80)
William B. Jackson, M.D. (80)
Richard K. Ohme, M.D. (80)
Charles C. Reberger, M.D. (79)
Roy A. Virak, M.D. (80)
Myra S. Vozenilek, M.D. (79)
Jo Roller (79)

DELEGATES

Ralph A. Johnson, M.D.	Charles C. Reberger, M.D.
Richard T. Vimont, M.D.	James M. Blankenship, M.D.
Kenneth D. Graham, M.D.	Myra S. Vozenilek, M.D.
Lloyd C. Elmer, M.D.	Richard K. Ohme, M.D.
Duncan T. Baer, M.D.	William B. Jackson, M.D.

ALTERNATE DELEGATES

Melvin L. Henry, M.D.	Roy H. Virak, M.D.
-----------------------	--------------------

COMMITTEE CHAIRMEN

Budget and Finance	Lloyd C. Elmer, M.D.
Credentials	Richard G. Bowe, M.D.
Editorial	David S. Hopkins, M.D.
Ethics	John Kemman, M.D.
Grievance	D. Ted Baer, M.D.
Jail Health	Herbert C. Kennedy, M.D.
Legislative	William S. Judd, M.D.
Library	Kenneth E. Gross, M.D.
Medical Education	Marcel Malden, M.D.
Physical Fitness	John P. Nagle, M.D.
Physician-Pharmacy	Herman S. Judd, M.D.
Program and Entertainment	Richard T. Vimont, M.D.
Public Health/School Health	George A. Tanbara, M.D.
Sunshine	Charles C. Reberger, M.D.
Tel-Med	Robert B. Whitney, M.D.

STAFF

Editor	David S. Hopkins, M.D.
Managing Editor	Tom Curry
Editorial Board	W. Ben Blackett, M.D.
	Stanley W. Tuell, M.D.
Legislative Editor	William B. Jackson, M.D.
Pictorial Editor	Glen G. McBride, M.D.
Contributing Editor	Mavis Kallsen

Published monthly by the Medical Society of Pierce County, 813 South K Street, Suite 200, Tacoma, Washington 98405. Telephone: (206) 572-3666. Bulk Rate U.S. Postage Paid at Tacoma, Washington. The BULLETIN is published in the interest of medicine and allied professions. The opinions herein are those of the individual contributor and do not necessarily reflect the official position of the Society unless so stated. Acceptance of advertising in no way constitutes professional approval or endorsement of products or services advertised. Advertising rates may be secured from Journal and Bulletin Agency, Inc., P.O. Box 9471, Seattle, Washington 98109. Annual subscription rate for members of the Society is \$10.00, which is included in the dues. Non-member subscription, \$15.00 per year. Single copy \$2.00.

A NEW BENEFIT OF MEMBERSHIP

MEDICAL-DENTAL CREDIT BUREAU ESTABLISHED

The Board of Trustees has reviewed the tangible benefits physician members will realize from a medical society sponsored Medical-Dental Credit Bureau. The Board has approved the formation of this service and encourages your participation.

Your Medical-Dental Credit Bureau will:

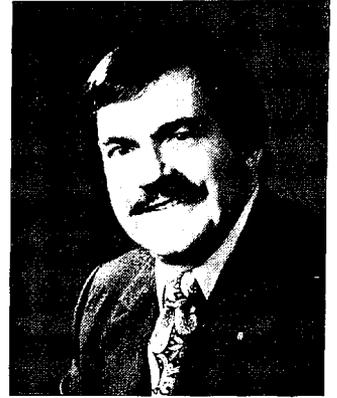
- Return to you a greater portion of each dollar collected compared to commercial collection agencies.
- Place you in control of your own local collection service.
- Maintain your image of professionalism.
- Provide counseling services to your office staff to help them improve office collection procedures.
- Provide your staff with credit references for new patients.

We are pleased to offer you this new service. Call 572-3709 today for further information and assistance in bringing this new benefit of membership to your office.

MEDICAL-DENTAL CREDIT BUREAU

A Division of:

**MEDICAL SOCIETY OF PIERCE COUNTY,
MEMBERSHIP BENEFITS, INC.**



Ralph A. Johnson, M.D.

REFLECTIONS AND ADMONITIONS

We have again elected new officers to represent us and now the time has come for the orderly transfer of leadership of this entity we know as the Medical Society of Pierce County. My initial reaction to this event is a startled realization of how quickly the past year has elapsed, raising the somewhat haunting question of whether or not the goals set a year ago have been achieved. Perhaps one's goals are never fully realized but I do sense that in the past year there has been an increasing sense of involvement by our membership in society activities and, in turn, an expanding role of the society in meeting the many opportunities that challenge us.

Let the past speak for itself . . . we now must face the future which promises to present increasing demands and problems for our profession. Without equivocation I can say that my year as president of our medical society has made me keenly aware of the dilemma facing the medical profession, and I am truly uneasy regarding a number of relationships which involve us. I would like to share my concerns with you: I see a continuing and enlarging threat to our traditional role as primary consultants in the delivery of health care. A few years ago, when agency health planning was in its infancy, I heard one of the neophyte, so-called health-planning experts expound on this matter. On a blackboard he drew a large circle and proceeded to divide the circle into a number of pie-shaped segments, each representing a local, regional, area, or national health-planning agency. Finally, he drew a small circle adjacent to but completely removed from the large circle—the small circle represented the medical profession. Make no mistake about it, my fellow physicians, the health-planning agencies neither consider you a part of their planning scheme nor do they welcome your input into the planning process.

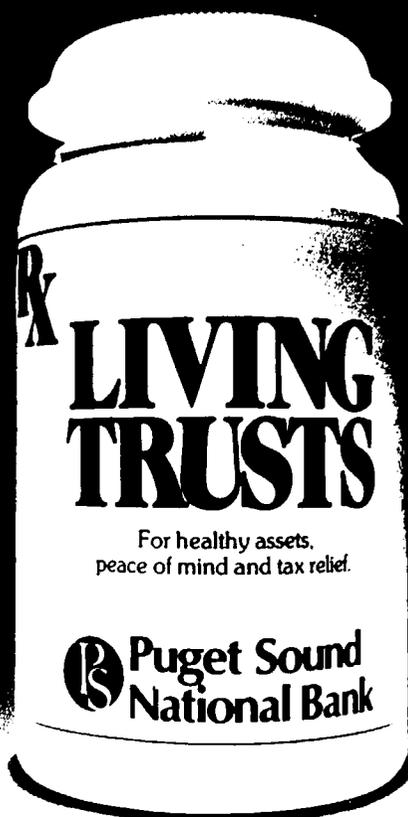
I am also concerned with increasing pressure by agencies and planners to equate as equals all "providers"

in the health care field. The degree of training, the depth of knowledge and the complex scope of practice of a physician cannot and should not be equated with those with inferior training and less rigid standards, and whose contribution to health care is, more often than not, a mechanistic approach to the treatment of a fragmentary part of the total patient. All of you will remember the admonition of your medical school professors to "treat the patient as a whole." It is my contention that only a physician possesses the necessary tools and training to do so. I realize that to some degree we are responsible for our dilemma inasmuch as by default we have often allowed outside organizations of many types to dictate their policies to us. Too often we have failed to take a unified stand on important issues. On some occasions rather than act, we have reacted, often weakly, to adverse situations. Particularly in the field of public relations are we to be faulted. We have failed to establish a credible public forum and thus have allowed ourselves to fall prey to an oft-times slanderous media eager to dispense sensational editorializing on a gullible public equally eager to devour such iconoclastic rantings.

I am concerned that both apathy and fragmentation within our ranks can be our downfall. I applaud and encourage physicians who are actively involved in their respective specialty organizations, but I do not believe this should be done while ignoring the central cohesive bond that we all share, namely, our medical societies—county, state, and national. Even though the cost of belonging to these organizations may seem prohibitive to some, I believe the dues represent a must in terms of investing in the preservation of the medical profession which we know and revere.

I fully realize that at times the actions of our leaders at all levels may not satisfy us or that their actions may seem "too slow" or "not enough." From firsthand experience this past year I know that there are often

Continued on page 20



Take as directed and call us in the morning.

Making money is one thing. Keeping it is another.

And passing it on to your family is certainly something else again.

That's what a good living trust is all about—a plan for both today and tomorrow.

It's one part investment counselor. One part tax shelter. One part financial administrator.

While you're still here, a living trust will see that your es-

tate is expertly managed. So you won't have to bog yourself down with paperwork, safe-keeping responsibilities, capital growth.

And, after you're gone, a living trust will help your family thread their way through the labyrinth of will probate. Re-

duce estate settlement expenses and delays. Minimize estate taxes. Provide continued professional investment management.

After all, a living trust keeps living. Always. Repeat: always.

So, if you haven't found out what a living trust can do for a busy physician, give us a call any time, morning or afternoon.

**TRUST DEPARTMENT
(206) 593-3881**

AMA TESTIFIES ON NHI

AMA witnesses told the Senate Human Resources Subcommittee on Health that the national health insurance plan developed by Sen. Edward Kennedy (D-Mass.) and organized labor would result in a "federal takeover" of the health care system and would "not be in the interest of the citizens of this country." Speaking for the AMA were James H. Sammons, MD, executive vice president, and William C. Felch, MD, chairman of the AMA Council on Legislation. "We do not think the American public will want its health care directed and controlled by the federal government," Dr. Felch said. "The history of federally run programs does not instill such trust and confidence as to support such action." Another witness, HEW Secretary Joseph Califano, said the plan was too costly, pointing to the \$30.8 billion it would add to the federal budget by 1983. Any program, Califano said, "must be phased in with singular care and sensitivity to the economy, governmental budget, and the administrative complexity of the health care system."

ASA AGREES TO CONSENT ORDER

Members who choose to work under contract to hospitals rather than practice on a fee-for-service basis will not be penalized, the American Society of Anesthesiologists agreed in a consent order. A Federal Trade Commission complaint charged that the society's "Guidelines for the Ethical Practice of Anesthesiology" and a "Statement of Policy" advised members that they should be compensated only on a fee-for-service basis and should not practice as salaried employees of hospitals or other organizations. The FTC said the consent agreement does not constitute an admission by the society of any law violation. Under the order, the FTC said, the ASA must delete from its files "any record of censure" against members for past failure to comply with the policy.

MED-ED THEME SET

"Medicine—A Global Discipline," will be the theme for the 75th Congress on Medical Education, May 9-13, at the Washington Hilton Hotel, Washington, D.C. The meeting is cosponsored by the AMA's Council on Medical Education, the Assn. for Hospital Medical Education, the Federation of State Medical Boards of the U.S., the AMA Resident Physicians Section, the AMA Student Business Section, and the AMA Section on Medical Schools.

REVISIONS AVAILABLE

Revisions to the physician's *Current Procedural Terminology* are available. The new update to the book, published by the AMA, includes changes and additions to the terminology in the fields of surgery, vascular studies, and medical service procedures. Also added are terms for bio-feedback training. Updates may be obtained by using a prepaid mailer in the back of the book.

VOLUNTARY EFFORT PRAISED

"The design of the voluntary effort addresses the unique problems of its own field better than any other effort the Council on Wage and Price Stability has seen," COWPS chairman Barry Bosworth told a meeting of the Voluntary Effort Steering Committee last week in Washington, D.C. The VE was organized by the American Hospital Assn., the Federation of American Hospitals, and the AMA late last year with a goal of reducing the rate of increase in hospital expenditures by 2% a year for the next two years. During the first seven months of 1978, the rate of growth of hospital expenditures was the lowest since 1974. "Hospitals are one of the very few industries in which deceleration has succeeded," Bosworth said, "and this is significant considering the rate of inflation in the rest of the economy."

MEETINGS FOCUS ON COST/PHYSICIANS' ROLE

Discussions between AMA officials and top management of 28 major corporations have taken place under the Association's Corporate Visitation Program. The meetings, which are held at the corporations' headquarters, center on the cost of health care, employers' health care benefits packages, and the physician's role in cost containment. Since the program began on June 5, AMA representatives have met with corporate leaders in the automobile, steel, aerospace, oil, food, and communications industries.

COST CHECK LIST PREPARED

A cost containment checklist has been prepared for physicians. The checklist, in brochure form, lists more than 30 suggestions for physicians to consider in attempting to hold down the cost of health care in both the hospital and office setting. There is no charge for the brochure. Write AMA Order Dept., P.O. Box 821, Monroe, Wis. 53566.

Looking Ahead To Olympia

NUMEROUS HEALTH ISSUES TO BE CONSIDERED

The 46th session of the Washington State Legislature will convene January 8, 1979 in Olympia. Since the legislature has not met since 1977, legislators will have a more than full slate of bills to consider.

There will be numerous health issues under consideration and some, if enacted, will significantly affect physicians' practices.

THE FOLLOWING ARE KEY ISSUES IN WHICH THE WSMA WILL BE ACTIVELY INVOLVED:*

Certificate of Need

Legislation will be introduced to extend the certificate of need regulatory process to physicians' offices for medical therapeutic/diagnostic equipment costing in excess of \$150,000. This legislation, modeled after pending federal legislation, will have the support of Blue Cross, hospitals, Group Health, labor, the Hospital Commission, the Nursing Association and the Health Systems Agencies. WSMA will continue to strongly oppose extension.

Professional Liability

WSMA will again pursue enactment of professional liability legislation to further improve the malpractice situation in this state. Bills to be introduced by the WSMA include:

Improved peer review immunity—right now, peer review committees are subject to pretrial discovery.

Limitation on attorneys' contingency fees—WSMA will ask for flat fee schedules, similar to New Jersey legislation which has been upheld by the New Jersey Supreme Court.

Reduction in the statute of limitations from eight years to two years for adults and for minors from age six on, two years after the alleged malpractice.

Elimination of "Mary Carter" agreements—in such agreements, a person who is suing more than one party may secretly settle with one of the parties without the other parties knowing of the settlement, and the settlement does not have to be disclosed to a jury.

Ninety day notice of intent to file suit—would provide a "cooling off" period during which attempts could be made to resolve differences without going to court.

Require disclosure of private collateral sources of benefit. For example, a patient may allege that malpractice has taken place and sue a physician for the medical bill, even though medical insurance has already paid the bill. Right now, disclosure of that fact to a jury is not required. Only public sources of benefit (such as disability income from the state) must be disclosed to a jury.

Simplify self insurance requirements for physicians. Hospitals have already been granted this privilege.

Continue study of arbitration and prearbitration screening panels. Right now the House Judiciary is involved in such a study, as is the WSMA Task Force on Professional Liability.

Medical Discipline

Legislation will be introduced to update the Washington State Medical Disciplinary Act. WSMA strongly supports such legislation provided it meets the following criteria:

a) Continue present system for physicians' election and service on the Medical Disciplinary Board.

b) Provide adequate staff assistance to the board, under the direction of a full-time executive director, selected by the board, whose position would be exempt from civil service. Director's investigations would be directly supervised by the board.

c) Develop a data base for use by the board in decision making. If required by the board, reports would be made by county medical societies, hospital medical staffs/trustees, third parties and professional liability insurance carriers.

d) Prompt response to complaints and inquiries; due process and confidentiality for all parties.

e) Immunity from liability for reports, reviews and disciplining activities.

f) Public notice of final disciplinary actions taken by the board, unless action exonerates and subject physician requests no public notice.

Mandatory Immunization

Governor Ray will probably introduce mandatory immunization legislation as part of her executive request legislative package. One of the key questions with this legislation is funding. WSMA strongly supports the concept of mandatory immunization and will continue to work with the Governor's office to perfect the legislation.

Emergency Medical Services

Federal grants funding emergency medical service programs in this state may be terminated. Legislation will

*Questions or comments on WSMA's Positions on proposed legislation should be directed to WSMA president Dr. John A. Moyer, 900 United Airlines Building, 2033 Sixth Avenue, Seattle 98121.

be introduced providing for local financing to ensure continued funding of local emergency medical services. WSMA strongly supports such legislation.

THE FOLLOWING PROPOSED PIECES OF LEGISLATION WILL BE OPPOSED BY THE WSMA:

Midwifery

Legislation will be introduced to permit lay midwives to use drugs, perform minor surgery and draw blood while assisting at natural childbirth. WSMA opposes this legislation because: there are no recognized lay midwifery schools to qualify an applicant for licensure under the proposed legislation; nursing schools are graduating an increasing number of nurse midwives and patient safety would be seriously jeopardized.

Optometry

Legislation may be introduced to allow optometrists to use drugs for diagnosis and treatment of eye disorders. WSMA will join the ophthalmologic profession in opposing this legislation.

Patient Bill of Rights

The American Civil Liberties Union will reintroduce legislation mandating 21 patient rights. WSMA will oppose this legislation based on WSMA legal advice that such legislation would aggravate the malpractice situation in Washington.

Natural Death Act

Legislation will again be introduced permitting an adult to write a "living will" instructing attending health personnel to terminate "artificial life support system" in instances of terminal illness. WSMA supports the concept of the "living will" but opposes a legislated definition of "death."

ISSUES UNDER WSMA REVIEW

The following issues are under review by the WSMA Legislative Committee, and recommendations for support or opposition will be made prior to the opening of the 1979 Legislature:

Drug Substitution

In 1976 legislation was enacted permitting pharmacists to make generic drug substitutions with a physician's written authorization. The law contains language which if enforced would hold the pharmacist legally liable for the quality and performance of the substituted drug. Since pharmacists do not have the laboratory facilities to test quality and performance, they have proposed that clarifying amendments be enacted.

Mental Health

Amendments will be introduced to update the

Washington Involuntary Treatment Act of 1975. The amendments will broaden the definition of "gravely disabled" and provide for physician review of mental health professionals' decisions to release patients who should be held for "medical" observation.

Health Planning

Legislation will be introduced to bring Washington into conformity with federal law 93-641. The legislation will include certificate of need provisions for hospitals and nursing homes, and identification of the state's responsibilities in health planning. This legislation must be operational by 1980, or the state will risk losing federal matching funds.

Chiropractic

In spring 1978 the Washington State Supreme Court declared the method of selecting Chiropractic Examining and Disciplinary Board members to be unconstitutional. Legislation will be introduced to reinstate both boards through a more democratic process.

Marijuana, Therapeutic Use

Legislation will be introduced to permit the use of marijuana by physicians under controlled circumstances to treat the "nausea and ill effects of cancer chemotherapy and glaucoma."

Nursing Homes

Legislation will be introduced to attempt to resolve conflict between DSHS and the nursing home industry over cost reimbursements. Legislation will also be introduced addressing patient care issues which have received relatively little attention because of the funding controversy.

Abortion

While federal funds for most kinds of abortions have been eliminated, the state has continued to pay for abortions billed through Medicaid. Legislation will probably be introduced to cut off such state funding.

Board of Health

The State Board of Health is scheduled to be disbanded in 1983, under provisions of recently enacted "sunset" legislation. Legislation will probably be introduced to re-define the role and purpose of the board and exempt it from termination in 1983.

WSMA LEGISLATION COMMITTEE

Rick L. Johnson, MD, Seattle, Chairman
Angela J. Bowen, MD, Olympia
George J. Dechet, MD, Vancouver
William R. Gillanders, MD, White Salmon
Theodore R. Haley, MD, Tacoma
Gary T. Hannon, MD, Wenatchee
James T. Kilduff, MD, Bremerton
Arthur F. Lertz, MD, Spokane
William O. Robertson, MD, Seattle

Trustee liaison: Robert W. Burroughs, MD, Spokane

DEMONSTRATION PROJECT TERMED EFFECTIVE

The Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Demonstration Project in Pierce County is just concluding the second year of a three-year project period. The project was initiated by the Department of Social and Health Services in 1976 in an effort to obtain information which would lay the groundwork for improvements in the State's ongoing EPSDT program which provides health screening and treatment for Medicaid-eligible children between the ages of 0 and 21. To date, the project has effectively accomplished its primary purpose of demonstrating the effectiveness of a follow-up system in assuring that children found to have problems during screening receive diagnosis and treatment (according to an initial evaluation report prepared by the University of Texas Health Services Research Institute).

Since its inception, the project has followed several broad objectives and has made considerable progress toward their achievement. These objectives include: introducing a specifically designed case monitoring system from point of screening to maximize the number of children brought through prescribed diagnosis and treatment to problem resolution; examining the impact of this system on the rate of treatment completion, case conversion and problem resolution; and, collecting program and cost information on the existing EPSDT program.

Part of the project's success may be attributed to the cooperation of health care providers in Pierce County. During its first year, a total of 27 physicians and clinics have provided EPSDT screens, and have signed contracts to complete data forms and cooperate with case monitoring activities.

Between June, 1977 and April 30, 1978, project personnel collected data on 3,288 screens and on 2,548 individuals. The number of screens has averaged 296 per month. Sixty-three percent of these screens reported at least one problem, excluding immunizations. Virtually all of these problems were either treated or referred for treatment; fewer than 3.1 percent of abnormal conditions were noted with "treatment not advised or warranted." The mean number of problems found per screen has been 1.06.

A review of the types of problems found shows that acute conditions like respiratory and skin problems have been very common while dental, vision and hearing problems have been detected with far less frequency. Twenty-one percent of screens have found nose and throat problems and 18.7%, skin conditions. Dental, vision and hearing problems have each been reported from 2.5% or fewer of screens. Finally, regarding immuni-

zation status, project results show that 46.2% of children enter their screen with complete immunizations, while 53.8% require additional shots, either at the screen or later.

Children enter the project's case monitoring system as soon as they appear for their first screen, as a result of which 66.3% are referred and receive treatment follow-up. Between September 1, 1977 and April 30, 1978, the project's community health workers were assigned a total of 1,384 problems, or an average of 165 new problems per month. The number of cases followed has been 855, or an average of 100 per month. (All of the problems found at a single screen are considered to be a case.) The largest proportion of problems followed-up have involved: (1) nervous system and sense organs; (2) the respiratory system; and, (3) immunizations. These categories have accounted for 43.5% of problems followed.

Results to-date indicate that the project case monitoring system has been extremely effective in assuring that children found to have problems during screening receive diagnosis and treatment. Case monitoring has improved the case conversion ratio (unwell to well cases) from 37.0% in the control group to 70.1% in the experimental group. Additionally, 29.4% of problems in the control group were closed with treatment completed while 34.2% were closed because of treatment refusal or repeated appointment failure. Results for the experimental group which was case monitored are much different; 62.4% of problems were completely treated and only 3.9% were closed because of refusals or appointment failure. Case monitoring increased the proportion of referred problems that were resolved from 41.9% in the control group to 76.2% in the experimental group. Case monitoring also significantly improved the proportion of problems ever reaching treatment from 54.2% in the control group to 77.6% in the experimental group. Finally, case monitoring increased case retention from 52.3% in the control group to 74.3% in the experimental group.

During its third and final year, the project will develop and present to DSHS a series of detailed and formal recommendations for improving the EPSDT program statewide. These recommendations will be based on the results of the research undertaken over the life of the project, and on the experience of other states with successful EPSDT programs.

Adriene Alexander
Planner, Tacoma-Pierce County
Health Department

CONVENTION 1978 HIGHLIGHTS

More than 800 delegates from all across the United States, including Alaska and Hawaii, gathered in Boston the week of October 23-27 for the 22nd annual convention of the American Association of Medical Assistants. Washington State was represented by six members, including two from Pierce County, Doris Stansell, state treasurer, and Dee Lunstrum, CMA, president-elect for the Washington state society.

The theme "Historic Past-Dynamic Future" merged the history of medicine with the historical setting of Boston and the future of our organization with the forthcoming changes in the health care industry. The keynote address was delivered by Hoyt D. Gardner, M.D., of Louisville, Kentucky, president-elect of the American Medical Association, who has been a staunch supporter of AAMA for many years.

Identity and professional status have long been sought by our national organization for its members. Last April the Department of Health, Education and Welfare notified the AAMA that the medical-assisting profession and its educational concerns had become eligible for federal grants. This new ruling means, specifically, that the AAMA and medical-assisting programs will have competitive access to grants for research, training, planning and a variety of other educational endeavors. This will open many new opportunities for students as well as practicing medical assistants who desire to further their education. Our congratulations to the officers and trustees of our AAMA who have worked tirelessly for recognition and support. The American Association of Medical Assistants remains the only area of the health care delivery system that supplies its own educational programs, its own certifying and accreditation programs and has its own process for continuing education. It also is the only medical-assisting organization approved and supported by the AMA, and this year the AMA again provided financial assistance for our endeavors. We are truly proud of what our organization has accomplished in its 22 years.

In 1977 the American Association of Medical Assistants named the National Board of Medical Examiners (NBME) as educational consultant for the AAMA Certification Program. The Philadelphia-based NBME is a voluntary, non-profit testing organization which provides examination and testing services in three major categories:

1. The examination for physicians' National Board certification;

2. Examinations developed from National Board test material for state medical boards and foreign medical graduates; and

3. Examination services to other agencies . . . such services include specialty board certification, in-training examination, and self-assessment of continuing education.

An expansion of this latter category occurred in 1976, when the NBME extended its services to include allied health groups whose educational programs and/or certification process have medical profession participation. AAMA is the third allied health association to work with the prestigious NBME, the others being physicians' assistants and pediatric nurse practitioners.

Your Washington state society was active and well represented on the national scene in Boston. Your delegates put in a bid for a national convention to be held in Washington in 1984. In addition, we nominated Dr. Ann Steele of Bremerton for a position on the National Physicians Advisory Board. Dr. Steele, who is past president of the Kitsap County Medical Society and a state advisor for AAMA, was appointed the physician advisor for the newly formed Continuing Education Board of AAMA.

In the field of continuing education, a new guided study course, "The Humanistic Medical Assistant," was unveiled in Boston and offered to the membership for the first time. This study course joins the previously published "Anatomy and Physiology" and "Medical Terminology." By next year, your association hopes to have the long awaited "Medical Ethics and Law" ready for publication. As education is the cornerstone of our organization, self-advancement and self-study will always be encouraged. By providing accredited schools, guided study courses for the individual and educational seminars in various sections of the country, the AAMA continues to offer opportunities and assistance to the professional medical assistant.

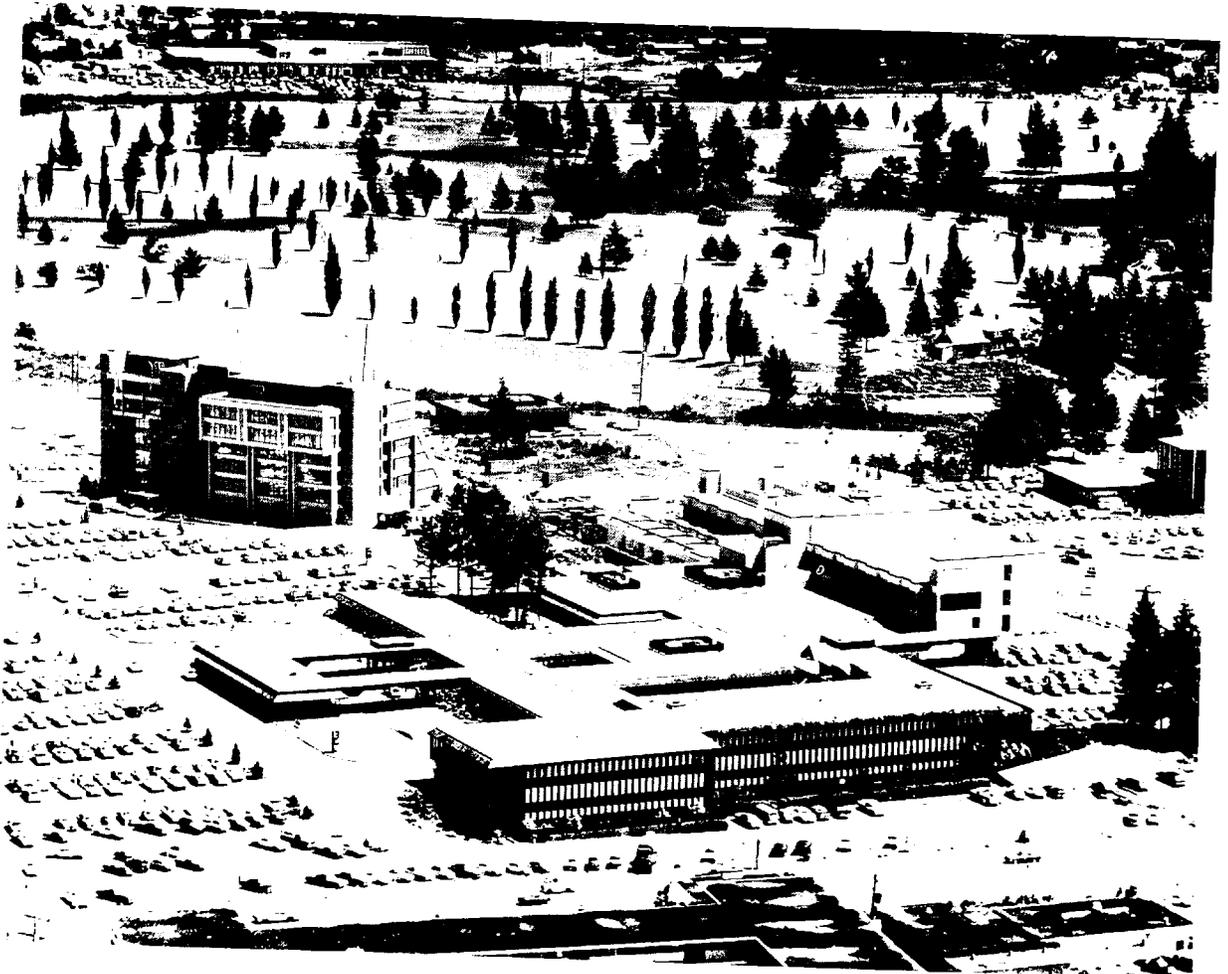
We of the Pierce County Chapter of AAMA urge you to become a part of our organization. As individuals we are medical assistants . . . together we are a profession.

*Dee Lunstrum, CMA
President-Elect WSS:AAMA
383-5351*



allenmore

medical center



**SERVING THE HEALTH CARE PROFESSIONAL
AND THE TACOMA-PIERCE COUNTY COMMUNITY**

Whether you are establishing a new practice —

Or are considering a change of environment for your existing practice —

**We invite you to investigate the many unique advantages which
Allenmore Medical Center offers**

✓ **THE AREA'S FINEST MEDICAL OFFICE FACILITIES**

- * 150,000 square feet of the most modern office space
- * Distinctively and functionally designed for exclusive use by physicians, dentists, and related health care professionals
- * Complete central building support systems
- * Fully climate controlled

✓ **SITUATED ON A 22 ACRE PLANNED MEDICAL CAMPUS**

- * The largest and most comprehensive health care campus in the area
- * With over 120 health care professionals representing all major specialties and services presently officing on campus
- * Immediately adjacent to the services of the 156 bed Allenmore Community Hospital located on the campus
- * Plenty of free parking

✓ **CONVENIENTLY LOCATED IN THE GEOGRAPHIC CENTER OF TACOMA**

- * Tacoma's most convenient location — both for you and for your patients
- * Immediate access from freeways and major crosstown arterials
- * City bus service on campus
- * Centrally situated among the area's hospitals

✓ **WITH PROFESSIONAL MANAGEMENT WHICH IS COMMITTED TO HELPING YOU IDENTIFY AND SATISFY YOUR INDIVIDUAL PRACTICE NEEDS AND GOALS**

- * Our emphasis is on providing personal service of lasting value to you
- * We are prepared to provide you free of charge personal consultation and complete information necessary for establishing your practice

Our facilities and services have been designed to provide the greatest degree of flexibility and value to meet your individual requirements.

We would appreciate the opportunity of discussing with you in confidence the potential for satisfying your practice needs at Allenmore Medical Center.

For an appointment or further information, please contact:

JOHN WOLFE, EXECUTIVE DIRECTOR
ALLENMORE MEDICAL CENTER

(206) 383-2201

South 19th Street & Union Avenue
Tacoma, Washington 98405



**allenmore
medical
center**

LIBRARY COMMITTEE EXPRESSES APPRECIATION TO PIERCE COUNTY PHYSICIANS

Since the establishment, in January of 1974, of the Pierce County Medical Library as the central resources facility for the eight participating hospitals and members of the Medical Society of Pierce County, many physicians have donated most generously to help develop and enhance the collection, reports the Library Committee. This has not only greatly benefited all users of the medical library, it has also made it possible for the library to operate within its budget and at the same time sustain a high-level clinical working collection.

In appreciation of this steadfast support, the Library Committee wishes to thank the following physician benefactors for their individual support in the form of textbooks, journals, audio tapes, or monies:

Clarence L. Anderson, M.D.	Thomas R. Elder, M.D.	Woodward A. Niethammer,
Leonidas NA Annest, M.D.	Robert Ferguson, M.D.	M.D. (deceased)
Phillip H. Backup, M.D.	John R. Glynn, M.D.	Maurice L. Origenes, M.D.
Duncan T. Baer, M.D.	Robert H. Gibson, M.D.	William D. Overfield, M.D.
Cordell H. Bahn, M.D.	Kenneth E. Gross, M.D.	Clinton A. Piper, M.D.
Lester S. Baskins, M.D. (deceased)	John M. Havlina, M.D.	Charles C. Reberger, M.D.
Myron A. Bass, M.D.	James E. Hazelrigg, M.D.	Frank J. Rigos, M.D.
John O. Beahrs, M.D.	W. R. Herron, M.D.	Bernard R. Rowen, M.D.
David L. BeMiller, M.D.	Doug Howe, M.D.	Harvey N. Sales, M.D.
James M. Blankenship, M.D.	Dudley W. Houtz, M.D.	Albert A. Sames, M.D. (deceased)
Charles R. Bogue, M.D.	Murray L. Johnson, M.D.	John M. Shaw, M.D.
J. W. Bowen, M.D. (deceased)	Edmund A. Kanar, M.D.	H. Klaus Siebold, M.D.
Lawrence N. Brigham,	Robert F. Kapelowitz, M.D.	Alan K. Sobul, M.D.
M.D. (deceased)	J. Gale Katterhagen, M.D.	Max S. Thomas, M.D.
Thomas H. Clark, M.D.	George S. Kittredge, M.D.	James L. Vadheim, M.D.
Charles W. Curl, M.D.	Gerald C. Kohl, M.D.	Sidney F. Whaley, M.D.
H. James Davidson, M.D.	D. G. Kohler, M.D.	Arthur P. Wickstrom, M.D. (deceased)
J. Edmund Deming, M.D.	Charles P. Larson, M.D.	Don G. Willard, M.D.
Stevens Dimant, M.D.	Thomas B. Lawley, M.D.	Herbert Zimmerman, Jr., M.D.
Dale D. Doherty, M.D.	Marcel Malden, M.D.	
Treacy Duerfeldt, M.D.	Roger J. Meyer, M.D.	

LETTERS

LOCAL HOSPICE SEEKS AID

To The Editor:

Hospice of Tacoma is a tax-deductible organization whose purpose is to assist the dying and their families through a program of medically directed care. This innovative approach to the treatment of the needs of the terminally ill is available through the services of a multidisciplinary team which includes the referring physician, nurses, social workers, medical director, therapists and volunteers. At the present time all of the people involved in this program are donating their time and talents.

In the past we have been given operating space in the offices of some local physicians; however, this has had certain drawbacks. We are initiating planning toward moving to our own offices in the near future in order to expand services to meet the growing need.

We are writing at this time to solicit assistance through

the donation of office space and/or office equipment to Hospice of Tacoma. Such things as typewriters, telephone answering equipment, transcribing equipment, and files to mention a few, would be greatly appreciated. Of course, any donation to Hospice of Tacoma can be deducted on your tax return. Please call me at 383-4153 if you have any questions and/or donations.

Your assistance and support is greatly appreciated.

Sincerely,
Anne M. Katterhagen, R.N.
Home Care Coordinator

NURSING HOME ADMISSIONS

To The Editor:

I would like to bring up a problem which I am sure is of interest to all of us who are interested in the economics of medicine.

I refer to the "rule" that nursing homes will not, or do not, or in some way avoid, admitting patients on a Saturday or Sunday even though admission has been

arranged for the patient, or worse yet if a patient has already been registered and at the nursing home (for some times as long as a year or two) and is at the hospital for a short term illness or a diagnostic procedure and is returned without any loss of registration at the nursing home. This rule often necessitates an unnecessary hospitalization for a Saturday or a Sunday and, of course, results in increased expense to Medicare or whatever insurance coverage is concerned.

I find it difficult to reconcile this or to know why the nursing homes feel they cannot accept patients under these circumstances, on Saturday or Sunday. I do know however, that if proper pressure is used, admission can be obtained. For instance, recently a relative became very adamant in having her mother readmitted to a nursing home and in spite of great reluctance on the part of the home, they finally were able to accomplish this.

I think this demands an open and frank discussion and investigation, and certainly is of importance to us as physicians who are attempting to cooperate in reducing hospital care and expense.

I find it impossible to get satisfactory answers from the administrators of these nursing homes and certainly the nursing home nurses and supervisors seem at a loss to explain why this cannot be accomplished.

Although this is controversial, I hope it will be published so that a more frank and, as I explained, open controversy may be engendered that will be of benefit to all concerned. By this I mean actually it's of help to the nursing homes. They would get a day or two extra fee for the patient and it would be of benefit for the insurance carrier (Medicare or whoever) because it would result in a reduction in hospital stays for a day or two in many cases.

With hope for a better understanding.

Yours truly,
Rodger S. Dille, M.D.

NEW CORONARY PROGRAM OFFERED

To The Editor:

During 1977 there were 3416 resident deaths in Pierce County of which 1255 were due to coronary disease, and of this number approximately 770 were sudden unexpected coronary deaths. With the emergence of cardiovascular risk factor data from the Framingham epidemiologic study, and numerous other studies, it now should be possible to identify individuals at undue risk for sudden coronary death or myocardial infarction before the event. With a profile of the known risk factors, individuals at high risk can be advised as to behavior modification needed to reduce or eliminate risk factors, and thereby, hopefully, to reduce the chances of sudden coronary death and myocardial infarction.

Most of us who engage in the practice of medicine give most of our time and effort to the diagnosis and management of disease, with little or no attention to prevention.

In order to alleviate this deficiency in my own practice, a program is being developed which will utilize my office space, personnel, and equipment when the office is not ordinarily open for patient services. Initially this will be on Thursday. Individuals, free of apparent disease but suspected to be at high risk, will be scheduled for a cardiovascular risk factor survey to include a brief questionnaire, fasting blood glucose, triglyceride, and cholesterol, blood pressure measurement, 12-lead electrocardiogram, and a Bruce multistage exercise treadmill test. A composite quantitative risk factor profile will be constructed and the individual advised as to what hygienic changes (smoking, diet, exercise) should be made to reduce risk factors, specifically and in aggregate. Individuals possessing risk factors requiring medical treatment (drug therapy of hypertension, arrhythmia, hyperlipidemia, angina) will be referred to their private physicians for this management. Private physicians will receive a copy of the risk factor profile with recommendations in all cases where individuals specify a private physician on the questionnaire. Individuals entered into this program will be encouraged to use local facilities such as the exercise programs at the new Tacoma YMCA.

It is well known that physicians are remiss in dealing with their own personal health problems. To encourage physician participation, this program is being offered without charge to all physicians in Pierce County (and near environs). An appointment can be scheduled simply by calling my office any time after December 1, 1978.

I will appreciate your publication of this letter in the *Bulletin*, and welcome inquiries concerning any aspect of this program.

Very sincerely,
John R. McDonough, MD

SUBJECTS SOUGHT

To The Editor:

Pierce County physicians are requested to refer normal and hypertensive volunteer Japanese-American patients between 20 and 50 years of age who are not presently on hypertension medication. A study of personality styles and hypertension in Caucasian and Japanese-Americans is being conducted. Blood pressure will be measured and a series of personality tests will be given. This should take no more than 30 minutes.

This project has been discussed with Drs. John Kanda and George Tanbara, who endorse the project and who have suggested this means of soliciting subjects for the project.

Your much needed assistance in referring subjects will be greatly appreciated. Please contact me at 531-6900, extension 210.

Respectfully submitted,

John Moritsugu,
Assistant Professor of Psychology
Pacific Lutheran University

Continued on page 20

Membership

In accordance with the Bylaws of the Medical Society of Pierce County, Chapter Seven, Section A, MEMBERSHIP, the following physicians have applied for membership, and notice of their application is herewith presented. As outlined in the Bylaws, any member who has information of a derogatory nature concerning an applicant's moral or ethical conduct, medical qualifications or other such requisites for membership, shall assume the responsibility of conveying that information to the Credentials Committee or Board of Trustees of the society.

FIRST NOTICE



MICHAEL R. COLPITTS, M.D., Anesthesiology. Born in Spokane, 8/3/45; medical school at Duke University, 1971; internship, University of Washington, 1971-72; residency, University of Washington, 1974-76; graduate training, U of W, Pain Fellowship, 1976-77. Served on faculty of U of W, Department of Anesthesiology, 1977-78. Licensed to practice medicine in the State of Washington, 1972. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Puget Sound. Dr. Colpitts is practicing at St. Joseph Hospital.



ROBERT E. ETTLINGER, M.D., Rheumatology. Born in New York City, 8/14/47; medical school at Upstate Medical Center, State University of New York, 1972; internship, University of Oregon, 1972-73; residency, University of Oregon, 1973-75; graduate training, Mayo Graduate School (fellowship in rheumatology), 1975-77. Served as associate consultant, Mayo Clinic, 1977-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Good Samaritan, Lakewood General, Mary Bridge, Puget Sound, St. Joseph, Tacoma General. Dr. Ettlenger is practicing at 1624 South I Street, Tacoma.



RAYMOND D. DILWORTH, M.D., Family Practice. Born in Syracuse, N.Y., 2/16/39; medical school at Boston University, 1965; internship, U.S. Naval Hospital, Massachusetts, 1965-66; residency, Contra Costa County Hospital, Martinez, California, 1969-70. Previously maintained a solo practice in Alton, Massachusetts. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Mary Bridge, St. Joseph, Tacoma General. Dr. Dilworth is practicing at 721 Fawcett Avenue, Tacoma.



GORDON R. KLATT, M.D., General Surgery. Born in St. Paul, Minnesota, 12/1/42; medical school at University of Minnesota, 1968; internship, Fitzsimons Army Medical Center, Denver, 1968-69; residency, Madigan Army Medical Center, Tacoma, 1969-73; graduate training, University of Minnesota, Fellowship in Colon and Rectal Surgery, July 1977-78. Licensed to practice medicine in the State of Washington, 1977. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Good Samaritan, Lakewood General, Mary Bridge, Puget Sound, St. Joseph, Tacoma General. Dr. Klatt is practicing at 34616 11th Place South, Federal Way.



CLYDE H. KOONTZ, M.D., Pulmonary Disease. Born in Washington D.C., 1/23/45; medical school at University of Washington, 1971; internship, Tripler Army Medical Center, Honolulu, 1971-72; residency, Fitzsimons Army Medical Center, Denver, 1972-74; graduate training, Pulmonary Diseases Fellowship, Fitzsimons Army Medical Center, 1974-76. Licensed to practice medicine in the State of Washington, 1975. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Good Samaritan, Lakewood General, Mary Bridge, Puget Sound, St. Joseph, Tacoma General. Dr. Koontz is practicing at Allenmore Medical Center, Tacoma.



CHARLES W. RANCE, M.D., Ophthalmology. Born in Jamaica, N.Y., 5/6/45; medical school at Cornell University, 1971; internship, Roosevelt Hospital, New York, 1971-72; residency, Roosevelt Hospital, 1972-73, and Albany Medical Center, N.Y., 1975-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the staffs of the following hospitals: Doctors, St. Joseph, Tacoma General. Dr. Rance is practicing at 907 Medical Arts Building, Tacoma.



RONALD G. TAYLOR, M.D., General Surgery/Emergency Medicine. Born in Ft. Benning, Georgia, 3/24/43; medical school at Bowman Gray, 1968; internship, Tripler Army Medical Center, Honolulu, 1968-69; residency, Madigan Army Medical Center, Tacoma, 1969-73. Licensed to practice medicine in the State of Washington, 1970. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Lakewood General, St. Joseph, Tacoma General. Dr. Taylor is practicing at Allenmore Medical Center, Tacoma.



WILLIAM F. TAYLOR, M.D., Emergency Medicine. Born in Port Chester, N.Y., 11/15/47; medical school at Cornell University, 1973; internship, University of Washington, 1973-74; residency, University of Washington, 1974-78. Licensed to practice medicine in the State of Washington, 1974. Has applied for membership on the medical staffs of the following hospitals: Lakewood General, Puget Sound, Tacoma General. Dr. Taylor is practicing at Tacoma General and Lakewood General Hospital.



JAMES B. WAGONFELD, M.D., Gastroenterology. Born in New York, N.Y., 1/30/46; medical school at Chicago Medical School, 1970; internship, Gastro, Duke University, 1970-71; residency, University of Chicago, 1971-73; graduate training, Gastroenterology, University of Chicago, 1973-75. Previously served as assistant professor and instructor, University of Oregon and University of Chicago. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Good Samaritan, Lakewood General, Mary Bridge, Puget Sound, St. Joseph, Tacoma General. Dr. Wagonfeld is practicing at Allenmore Medical Center, Tacoma.



NORMAN M. WOLK, M.D., Family Practice. Born in New York, N.Y., 9/26/50; medical school at University of Southern California, 1976; internship, University of Colorado, 1976-77. Licensed to practice medicine in the State of Washington, 1977. Has applied for membership on the medical staffs of the following hospitals: Doctors, Mary Bridge, St. Joseph, Tacoma General. Dr. Wolk is practicing at 1950 Pottery Avenue, Port Orchard.

SECOND NOTICE



WILLIAM W. BRAND, M.D., Internal Medicine. Born in Wellington, Kansas, 12/18/43; medical school at University of Kansas, 1969; internship at University of Kansas, 1969-70; residency at Mary Imogene Bassett Hospital, Dartmouth Medical School, 1970-73; licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Good Samaritan, Puget Sound, St. Joseph, Tacoma General. Dr. Brand is practicing at 521 South K Street, Tacoma.



ROBERT KELTIE BURT, M.D., Obstetrics and Gynecology. Born in Glasgow, Scotland, 11/03/26; medical school at Glasgow, 1949; internship at Glasgow Royal Infirmary, 1949-50; residency at Royal Samaritan Hospital, Glasgow, 1951-53; licensed to practice medicine in the State of Washington, 1977. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Good Samaritan, Lakewood, Puget Sound, St. Joseph, Tacoma General. Dr. Burt is practicing at 10109 Plaza Drive S.W., Tacoma.



DAVID I. CRAMER, D.O., Obstetrics and Gynecology. Born in Brooklyn, NY, 12/17/43; medical school at College of Osteopathic Medicine and Surgery, Des Moines, Iowa, 1968; internship at Zieger Osteopathic Hospital, Detroit, 1968-69; residency at Kings County-State University Hospital, Brooklyn, 1970-74 (chief resident, 1973-74). Previous practice in obstetrics and gynecology, Brooklyn, 1974-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Doctors, St. Joseph, Tacoma General. Dr. Cramer is practicing at 1112 S. Cushman Ave., Tacoma.



STUART J. FARBER, M.D., Family Practice. Born in Tacoma, 11/13/47; medical school at the University of Washington, 1974; three-year family practice residency at Medical College of Wisconsin-Deaconess Hospital, Milwaukee, 1974-77. Instructor, Department of Family Practice, Medical College of Wisconsin, 1977-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Mary Bridge, St. Joseph, Tacoma General. Dr. Farber is currently assistant director at the Tacoma Family Medicine-Family Practice Residency Program.



WAYNE E. LARSON, M.D., Emergency Medicine. Born in Mason City, Iowa, 3/14/48; medical school at the University of Iowa, 1975; residency at Family Practice Residency, Rockford, Illinois, 1975-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Lakewood, Tacoma General. Dr. Larson is practicing at Lakewood and Tacoma General Hospitals.



PHILIP K. LIND, M.D., General Surgery. Born in Lincoln, Nebraska, 4/18/49; medical school at University of Nebraska, 1973; internship at Wilson Hospital, Johnson City, New York, 1974-75; residency at Wilson Hospital, 1974-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Good Samaritan, Lakewood, Puget Sound. Dr. Lind is practicing at 1112 S. Cushman, Tacoma.



RICHARD J. ROBINSON, M.D., Internal Medicine. Born in Cedar Rapids, Iowa, 3/31/46; medical school at Creighton University, Omaha, Nebraska, 1972; internship at Madigan Army Medical Center, 1972-73; residency at Madigan, 1975-77. Licensed to practice medicine in the State of Washington, 1974. General medical officer, Ft. Lewis, 1973-75. Has applied for membership on the medical staffs of the following hospitals: Lakewood, St. Joseph, Tacoma General. Dr. Robinson is practicing at 9875 Bridgeport Way S.W., Tacoma.



SUSAN J. SALO, M.D., Family Practice. Born in Seattle, 8/13/49; medical school at University of Washington, 1975; family practice residency at St. Joseph Hospital, Flint, Michigan, 1975-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Good Samaritan, Mary Bridge, Tacoma General. Dr. Salo is practicing medicine at 1725 - 22nd Way N.E., Auburn.



JON RODNEY SCHMIDT, M.D., Internal Medicine/Gastroenterology. Born in Ft. Worth, Texas, 8/10/45; medical school at Ohio State University, 1971; internship at Madigan Army Medical Center, 1971-72; residency at Madigan, 1972-74; graduate training at Madigan in gastroenterology, 1974-75. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Lakewood, St. Joseph, Tacoma General. Dr. Schmidt is practicing at 9875 Bridgeport Way, Tacoma.



CLAIRE E. TRESMOTT, M.D., Pediatrics. Born in Detroit, Michigan, 9/28/48; medical school at Wayne State University, Detroit, 1976; internship at William Beaumont Hospital, Royal Oak, Michigan, 1976-77; residency at Childrens Hospital of Michigan, Detroit, 1977-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Doctors, Mary Bridge, St. Joseph, Tacoma General. Dr. Trescott is practicing at 1112 S. Cushman, Tacoma.



DANIEL J. WANWIG, M.D., Internal Medicine/Psychiatry. Born in Seattle, 7/8/45; medical school at University of Washington, 1971; internship, U of W, 1971-72; residency in psychiatry at University of Vermont, 1972-75; residency in internal medicine at San Junquin General Hospital, California, 1975-78. Has applied for membership on the medical staffs of the following hospitals: Allenmore, Doctors, Lakewood, St. Joseph, Tacoma General. Dr. Wanwig is practicing at Allenmore Medical Center.



GLORIA A. WEINSTEIN, M.D., Pediatrics. Born in New York, NY, 11/22/49; medical school at Medical College of Pennsylvania, 1975; internship at Long Island Jewish Hillside Medical Center, 1975-76; residency at Long Island Jewish Hillside Medical Center and the Roosevelt Hospital, NY, 1976-78. Licensed to practice medicine in the State of Washington, 1978. Has applied for membership on the medical staffs of the following hospitals: Lakewood, Mary Bridge, St. Joseph, Tacoma General. Dr. Weinstein is practicing at 1112 S. Cushman, Tacoma.

MEDICINE RELATED SURVEYS

Recommendation from your Board of Trustees

From time to time surveys are taken which appear to be designed to prove a point which may not be in our best interest, rather than to obtain unbiased information from which logical conclusions can be drawn.

It is therefore recommended that you and those acting for you as employees only reply to surveys related to

medical practice which are approved or distributed by your own organizations (AMA, WSMA, MSPC, or your specialty organizations).

This suggestion was stimulated by comments to the Board of Trustees from several members of our society concerning a recent local survey.

POTPOURRI

The November 17th general meeting held at Judy Baerg's home was well attended. The Hostess Committee prepared a delicious Mexican luncheon. Are we going "international" this year? Many thanks to Chairman Martia Ohme, and her hostesses: Judy Wagonfeld, Lee Jackson, Jan Thiessen, Sara Bowe, Sharon Lukens and Peggy Padgett. The program, "Travel Tips or How to Depart Peacefully," was of special interest. Tris McConaghy, a United Airlines stewardess, gave a delightful presentation along with some helpful tips on how to pack. She normally travels with *one* suitcase (medium size) that she can stow under the seat.

Dottie Truckey, our Dues Treasurer, was pleased to announce that we have over 200 paid members this year. Now, if you do not have this year's "sublime-lime" PCMSA membership booklet, mail your dues check to Dottie, 634 Vista Drive, Tacoma, 98465.

Address changes for our membership books are printed and available from Jo Roller or Dottie Truckey. However, they will be mailed with the January Newsletter.

Barbara Wong designed a clever poster with the Wee Green Leprechauns pointing out the Talent Auction on St. Patrick's Day, March 17th, 7:00 p.m., \$3.00 per person, prepaid. The auction will be held at Oppelt Student Center, Fort Steilacoom Community College. The poster was on display at the meeting. Thank you, Barbara. Plans

are rolling right along for the auction. Look for the latest developments in next month's bulletin.

AUXI-QUAD LUNCHEON—The date and time have been changed to January 12th 11:00 a.m., at the Sherwood Inn. The cost is \$5.00 (which is most reasonable). There is advanced ticket sales because of the large number anticipated. Please make your check payable to Pierce County Medical Auxiliary and send it to Nance Spangler, 3620 Soundview Drive West, Tacoma, 98466. Reservations must be in before January 4th. No cancellations after January 4th. If you have any questions you may call Nancy at 564-5535.

Jan Thiessen, AMA-ERF Chairman, received over 200 responses to the Holiday Sharing Card project. The expected tremendous total should be close to \$7,000.00. Thank you all for your great generosity!

Our next general luncheon meeting will be held Friday, February 16th, at Linda Stilwell's home. The program is Rape Relief presented by Susan McQuire. There will also be an open forum to discuss meeting needs of auxiliary members. Small special interest groups may be formed depending on you and your ideas—so do come and share.

We wish you all a joyful and peaceful Christmas.

Merry Christmas!

Joan Sullivan

AUXI-QUAD SEMI-ANNUAL LUNCHEON FRIDAY — JANUARY 12, 1979 SHERWOOD INN

11:00 a.m.

12:00 Noon

1:00 p.m.

Price: \$5.00

Send checks to:

No Host Cocktails

Lunch

Entertainment

"Curtis Swing Choir"

— Checks payable to PCMSA

Must be received by January 4, 1979.

No reservations or cancellations after this date.

Nancy Spangler

3620 Soundview Dr. W.

Tacoma, WA 98466

President's Page

Continued from page 5

subtle, unapparent reasons that dictate certain unpopular decisions which may in the long run be best for the profession. I also know, firsthand, that we have dedicated representatives at all levels in our organizations who are diligent in their endeavors on behalf of the medical profession.

My final plea from this office is for all of us to put our respective shoulders to the wheel in support of our profession. Let us show everyone that we are proud to be physicians and that we are deserving of the trust and esteem that traditionally has been accorded our profession.

My heartfelt thanks to those many persons who have helped me so very much during my year as president. My congratulations to all those who now assume a role as society officers and trustees. Finally, my very best wishes for a great year to my successor, Dr. Kenneth Graham. Good Luck, Ken!

— R.A.J.

Letters

Continued from page 15

REFUGEE MENTAL HEALTH PROGRAM ESTABLISHED

To The Editor:

Tacoma Community House, in association with Comprehensive Mental Health Center, has implemented a mental health program for Indochinese refugees. Professional help is now available for treatment of mental health disorders occurring as a result of the resettlement process. Depression is the most evident problem evidenced by frequent complaints of anxiety, grief reactions and psychosomatic presentations. Therapy is provided free of charge. For referrals, or more information, please contact Roger Soukup, Project Coordinator, at 383-3951.

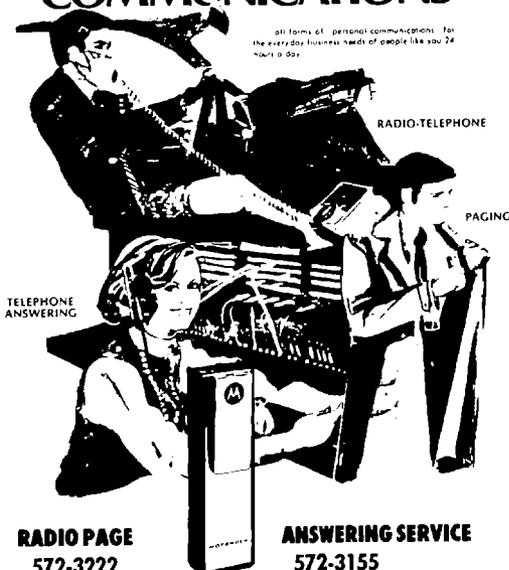
Sincerely,

Roger Soukup, Projects Coordinator
Tacoma Community House

Letters to the Editor are welcome and will be printed as space permits. Letters should be typed and not more than one page long. If necessary, they will be edited or shortened. Letters which appear in the BULLETIN do not reflect Medical Society of Pierce County policy.

INSTANT...TOTAL COMMUNICATIONS

all forms of personal communications for the everyday business needs of people like you 24 hours a day.



RADIO PAGE 572-3222

PERSONAL PAGING is like having a telephone in your pocket 24 hours a day. When you must be contacted, you get an actual voice message from your personal Pager.

For your total communication needs for your practice, contact Fred McPherson or Tom Brokaw — 24 hour service.

ANSWERING SERVICE 572-3155

TELEPHONE ANSWERING SERVICE fills in when you must be away from your office. No matter what the hour, your phone is answered by your own personal telephone secretary.

We're your convenient source for WSMA/AETNA professional liability insurance.

We're also much more.

Persing, Dyckman & Toynbee can provide you with a full range of insurance coverage to meet all of your personal and professional needs — pensions, employee benefits, life and disability insurance, property and casualty insurance.



**PERSING, DYCKMAN
& TOYNBEE, INC.**
INSURANCE BROKERS

705 South Ninth, Tacoma WA 98405 / 627-7183

Property and Casualty
Doug Dyckman, Jr.
John Toynbee
Wayne Thronson
Bob Sizer

Life Department
B. Dennis Schmidt, CLU
Mark Hanks

Classified

Classified and announcement copy may be mailed to: **Journal & Bulletin Agency, Inc.** 1011 Lloyd Bldg, 603 Stewart, Seattle 98101 or phoned to Seattle (206) 682-7813. Deadline 25th of month prior to month of issue.

SITE AVAILABLE for one to two physicians' offices adjacent to established medical office, near T.G. Contact Richard Huish, M.D., 572-4664.

Developing small prof. bldg., 6 offices, in fast growing Federal Way—NE Tacoma area. Need physicians and/or dentists interested in locating in area. Ph. (206) 927-4405 or write Gregg Lawrence, 2914 60th Ave. NE, Tacoma, 98422.

Family practitioner, 32 years of age. Board certified. Interested in joining practice in Pierce County. Prefer Puyallup Valley location. No OB. Reply No. 1020, Lloyd Bldg., Seattle 98101.

Family practitioner, 32 years of age. Board certified. Interested in joining practice in Pierce County. Prefer Puyallup Valley location. No OB. Reply No. 1020, Lloyd Bldg., Seattle 98101.

PUGET SOUND COLLECTIONS INC.

Member, American Collectors Association;
Medical/Dental Hospital Bureaus of America

**Professional collection services
to the medical community since 1960.**

Frank B. Rossiter, President

(206) 383-5011

**OUR NEW MAILING ADDRESS IS
P.O. BOX 1213
TACOMA WA 98401**

PHYSICIANS INTERESTED IN PRACTICE OPPORTUNITIES IN PIERCE COUNTY

The following physicians have indicated an interest in moving to Pierce County to practice. Anyone wishing to contact these doctors may do so by writing the Society office. Be sure to include the listing number.

Board Certified Internist interested in group practice or full-time hospital position as director of critical care. Has been in practice two years with a combined consultative private practice and ICU/CCU directorship in Davis, California. Graduate, Stanford University School of Medicine, 1973; internship, San Fernando Valley—UCLA Medical Program, 1973-74; residency, San Fernando Valley—UCLA Medical Program, 1974-76 (served as chief resident, 1976). Certified 1976, American Board of Internal Medicine. Listing 1101.

Cardiologist available in July, 1979. Graduate, King George Medical College, Lucknow, India, 1972; Flex, 1975; Diplomate, American Board of Internal Medicine, 1977. Associate member, American College of Physicians and American College of Cardiology. Listing 1102.

Psychiatrist available after January, 1979. Graduate, University of Alberta, 1962; internship, Holy Cross Hospital, Alberta, 1963; residency, Baylor College of Medicine, 1963-66. Private practice in Texas and New Mexico, 1963-78. Clinical experience in individual, group and family therapy, and consultation experience in forensic, geriatric, and CMH areas. Listing 1103.

General Surgeon, currently Chief Resident in General Surgery, The Bronx Lebanon Hospital Center, affiliate, Albert Einstein School of Medicine, New York. Graduate, Madras Medical College, India, 1973 (Master of Surgery). Flex, New York, 1978. Available immediately. Listing 1205.

Internist, scheduled to complete an Infectious Disease Fellowship at Baylor College of Medicine September, 1979. Training includes extensive clinic experience in adult and pediatric infectious diseases, clinical microbiology, hospital infection control, and clinical and laboratory research. Graduate, Baylor College of Medicine, 1971. Associate, American College of Physicians, American Board of Internal Medicine, June, 1977. Listing 1201.

Anesthesiologist, board eligible, member, American Society of Anesthesiologists. Graduate, China Medical College, June, 1968. ECFMC, 1969. Staff anesthesiologist, VA Hospital, Fort Wayne, Indiana, July, 1974 to present. Listing 1202.

Gastroenterologist, available, July, 1979. Seeking a gastroenterology private practice. Would prefer single or multi-specialty group. Board certified, graduate, Washington University School of Medicine, St. Louis, 1972; internal medicine internship and residency, University of Minnesota, 1972-75. Gastroenterology Fellowship, University of Minnesota, 1975-77. Currently on active naval duty. Listing 1203.

Obstetrician/Gynecologist, staff member, Ob/Gyn Department, St. Mary's Hospital Catholic Medical Center, New York. Also, independent practice since 1977. Graduate, Madras Medical College, India, 1971; Flex, New York, 1975. Available January, 1979. Listing 1204.

Internist, seeks emergency room or general practice. Available July, 1979. Graduate, University of South Alabama Medical School, 1978. Scheduled to complete internship at University of South Alabama, June 1979. Listing 1206.

Internist, currently completing pulmonary subspecialty in June, 1979. Interested in group practice. Board eligible, graduate, Kasturba Medical College, South India, 1968. Internship and residency at Columbus Hospital, New York, 1972-76. Flex, 1975. ECFMG, 1972. Listing 1207.



A.T. NORMAN INTERIORS

COMMERCIAL - RESIDENTIAL
OFFICES - MEDICAL & HEALTH FACILITIES
FULL SERVICE - SPACE PLANNING
COLOR & LIGHTING SPECIALISTS

Design Staff:

RICHARD ROBERTS ASID
BETTE LOVGREN NWSID
BRENDA L. FICK

MAJOR SUPPLIER OF QUALITY FURNISHING
SINCE 1936

206/627-3139

DESIGN OFFICE - SHOWROOM
524 TACOMA AVENUE SOUTH - TACOMA, WASHINGTON 98401



Northwest Medical Consultants

Suite 200
911 Pacific Avenue
Tacoma, Washington 98402
(206) 383-3779

*Productivity and
Practice Management Consultants*



Today's most thoughtful,
popular and practical
baby gift is



Tacoma 475-1234

Seattle 634-BABY

*Washington's oldest, most trusted
Professional Diaper Service
serving our second generation*



*Servicing the Medical Profession
Since 1930*

BIDDLE & CROWTHER Co

Physicians and Hospital Supplies

Home Office

910 North 137th - Seattle 98133
(206) 365-9900

First Hill Branch

(for Retail Sales to Patients)

1018 Summit Avenue - Seattle 98104
329-1668

PACIFIC NORTHWEST ORTHOPEDICS

DIVISION OF BIDDLE & CROWTHER CO.

Prosthetic Implants - Orthopedic Supplies

1216 Madison St. - Seattle 98104 - 622-3700

Call us toll-free from anywhere in the
State of Washington - 1-800-562-6994

Accept no substitute for your professional judgment

As a physician, you have the right to prescribe the drug which you believe will most benefit your patients. Now, substitution laws make it more difficult to exercise that right. In many states, unless you specifically direct pharmacists to dispense your brand-name prescription as written, they may be required by law to substitute another drug for your brand-name prescription.

This means that the ultimate drug selection is no longer yours; its source is left to the pharmacist's discretion. You will have forfeited your right to prescribe as you see fit. Preserve your rights. Specify that you will accept no substitution.

When you accept no substitutes...

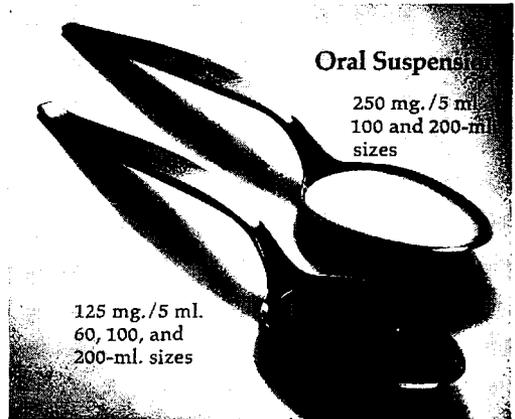
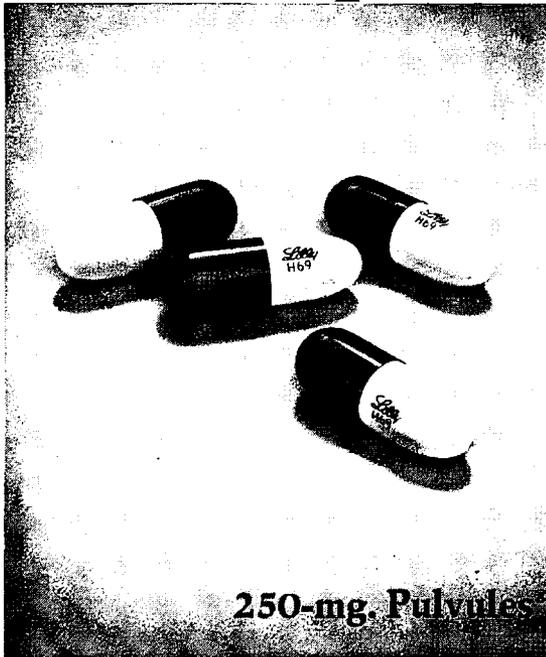
- You ensure that your patient receives exactly that product you have specified on your prescription
- You choose the quality of the product dispensed to your patient
- You can exercise the right to select a product based upon its proven therapeutic performance and to select a manufacturer that stands behind its brand name or generic product
- You can support the kinds of research programs that are vital to new drug discovery and development
- You can help sustain important physician, pharmacist and patient education services supported by innovative, research-oriented firms

For complete information on the drug substitution law effective in your state, please consult your local Pfizer Representative.

MEDICAL SOCIETY OF PIERCE COUNTY
813 South K Street — Suite 200
Tacoma, Washington 98405
ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
TACOMA, WASH.
PERMIT NO. 605

easy to take



Keflex[®]

cephalexin



Additional information available to the profession on request.
Eli Lilly and Company
Indianapolis, Indiana 46206