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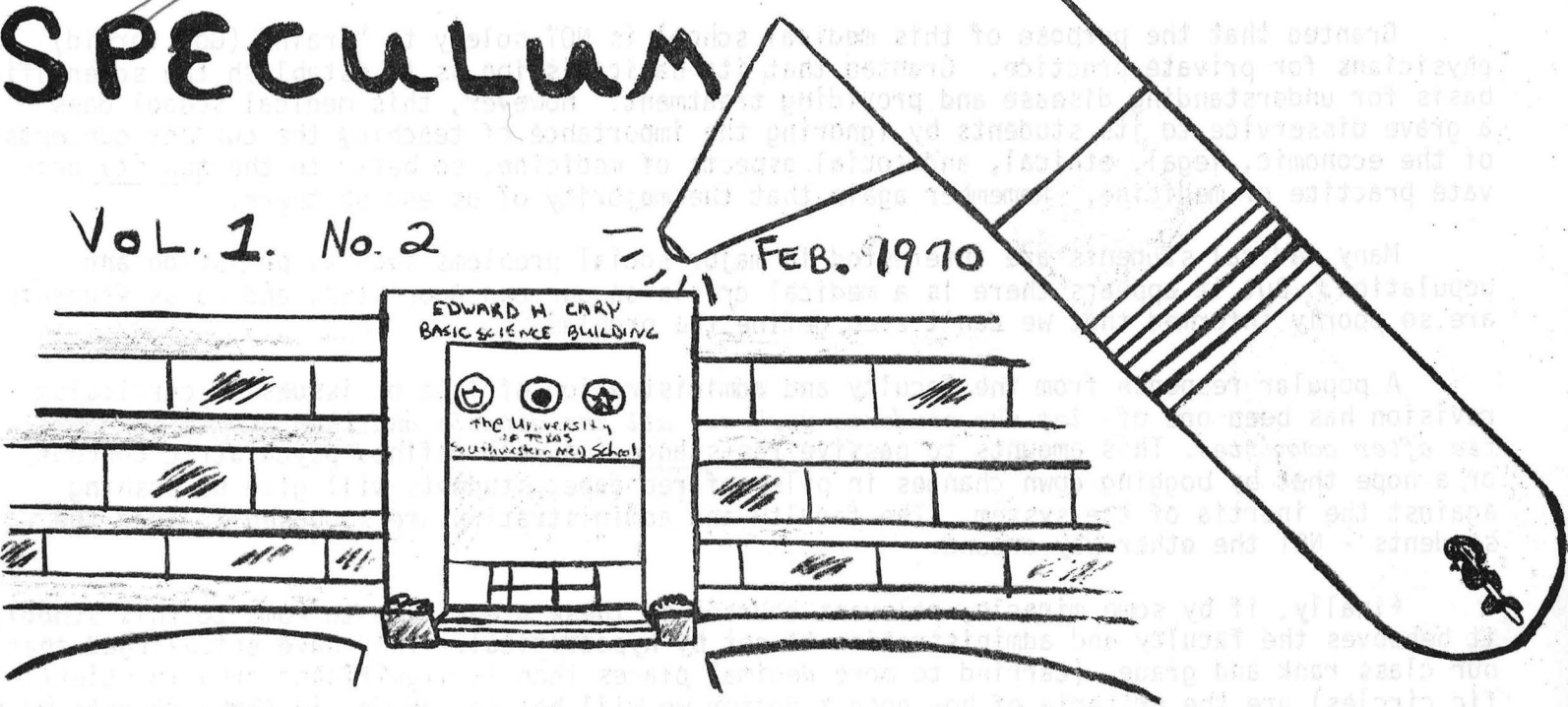
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SAMA SPECULUM

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UNIVERSITY OF TEXAS
SOUTHWESTERN MEDICAL SCHOOL
DALLAS, TEXAS

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Student American Medical Association
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SAMA ELECTIONS TO BE HELD SOON

Jan Vandersloot, MS 3

SAMA general elections, including elections for officers and class representatives for next year will be held Wednesday and Thursday noon March 4 and 5 in the main lobby of the medical school. Nominations for office should be made by notifying Shelton Hopkins, MS 3 from now until February 25. Individuals may nominate themselves. Candidates may, if they wish, publish statements of policy, ideas, and issues in the next SPECULUM issue which will come out just before the elections. These statements must be placed in the SPECULUM mail box prior to February 25. Transition of office will take place on April 15. For full details of election procedure, see the SAMA bulletin board.

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EDUCATION AT SWMS AND IT'S RELEVANCE TO PRIVATE PRACTICE

Bob Raley, MS 2

About 80% of Texas medical students will set up a private practice. With this in mind, try to define U.C.R. (Usual, Customary, and Reasonable) fees. What does "Peer Review" mean?

These terms seem irrelevant in our atmosphere of metabolic pathways and electron microscopes; but these were the hottest issues at the recent (January 18) meeting of the Texas Medical Association. Of course, the TMA is the official organization of all Texas physicians, but in reality, its greatest participation and influence is with the private physicians of Texas. Since full-time faculty are restricted as to the amount of practice they can maintain, they are somewhat protected from the routine problems of the local "doc".

Increasingly, the average physician is dealing with complex problems such as insurance, malpractice judgements, tax law, hospital administration, medicare, etc. Increasingly, the public and the government question if the private practice of medicine provides the best medical care. Yet the training we get in the economic and social aspects of medicine are nil. Why?

Re-examine who is teaching us. These are academic medicine men (and good ones)-not men whose interests and problems are the same as the average physician. Re-examine who administers the school. Deans must politically battle for grants to secure quality faculty and beautiful new facilities. Some haven't seen a patient in years and they are obviously far removed from the realities of the private practice of medicine.

Private Practice Relevancy (continued)

Granted that the purpose of this medical school is NOT solely to "train" (God forbid) physicians for private practice. Granted that its basic mission is to establish the scientific basis for understanding disease and providing treatment. However, this medical school does a grave disservice to its students by ignoring the importance of teaching the current concepts of the economic, legal, ethical, and social aspects of medicine, so basic to the quality private practice of medicine. Remember again that the majority of us end up there.

Many medical students are interested in major social problems such as pollution and population. But it appears there is a medical crisis on our own door step, and we as students are so poorly informed that we can't even define the problem.

A popular response from the faculty and administration of late on issues of curriculum revision has been one of- *let the students work out all the details and then submit to committee after committee*. This amounts to passive resistance (a well defined psychiatric concept) or a hope that by bogging down changes in piles of red tape, students will give up pushing against the inertia of the system. The faculty and administration are supposed to lead the students - NOT the other way around.

Finally, if by some miracle, relevant courses in these areas were to come to this school, it behooves the faculty and administration to not be hypocritical. They have established that our class rank and grade (carried to more decimal places than is significant even in scientific circles) are the criteria of how good a doctor we will be; so, grades in these courses must count in order to assure success of at least the lecture service.

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THE GRADUATE AXE

Harold L. Asch

Noise Pollution

For some graduate students and all medical students the problem of noise pollution has become a very real and immediate concern. The construction on the fourth floor of the medical school has brought with it an almost incessant pounding which reverberates down the halls into the lecture rooms, interfering with the attempts to communicate knowledge to the students. Actually, such intervention might be welcomed by the students during the inevitable dull interludes, but most often the noise seems to coincide frustratingly with the most crucial moments of the lecture so as to obfuscate the message.

A simple solution might be to inform the workers of the hours of heaviest lecturing, and request that they eliminate or at least reduce the amount of pounding during these times. The Office of the Dean has been informed of this by at least one faculty member and many students. A complication in this issue may exist in the potential privilege of the contractors to escape their deadline obligations should their work be interfered with by the school. But why couldn't some provision for this impediment to education have been foreseen and if necessary written into the contract?

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STUDENTS PARTICIPATE IN STUDENT HEALTH SERVICE COMMITTEE

Jan Vandersloot MS 3

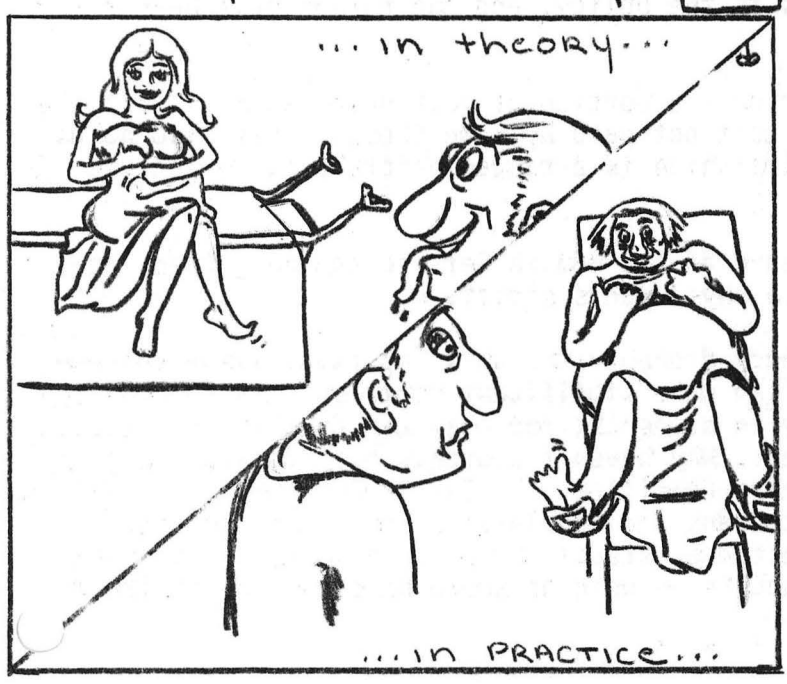
A few weeks ago, a committee was formed by Dean Sprague to study the Student Health Service and to make recommendations concerning improvement of the Health Service. This committee, chaired by Dr. Alan Pierce and consisting of Drs. Reuben Adams, Charles Baxter, James Stuart and Robert Walker, invited the presidents and vice presidents of each class to help with the in depth study of the problems associated with the Health Service. While specific recommendations are still being discussed, some misconceptions concerning the present operation of the Health Service should be cleared up. These include:

- 1). The Student Health Service is designed for student use during the hours of 12 P.M. to 1 P.M. each day. If, however, you feel that you have an acute problem that can't wait until the noon hour that day or the following day, you can still go to the Health Service and the nurse will see to it that you either see a physician in the school, or that arrangements are made for you to be seen in the Parkland Emergency Room. Regardless of

..In a humorous vein

CARTOONISTS - Beach, beherico

The doctor-patient relationship : O.B.



Notice to the Senior Class:
... DR. Bonte is now accepting "notes from mother" for those forced to miss the oncology quiz.....

Lost and Found:

... DR. ANDRES GOTH is offering a \$1000 Reward for information as to the whereabouts of the Sophomore class - last seen Nov. 1969....

THE DEAN: as viewed by --



RECENTLY SEEN BY PAH X-RAY TECHS:

STAND BY ---
--- DR. FALLIS IS
JUST ENTERING THE ROOM!

Student Health Service Committee (continued)

what you may have experienced in the past, this is the policy, and the nurses have been reminded of it.

- 2). Your Blue Cross coverage will indeed cover only a portion of your hospital bill, but the school will pick up the remainder of the cost not paid by Blue Cross. This also holds for elective surgery done in the summertime which is arranged beforehand, during the school year, in the Health Service.
- 3). Anything that pharmaceutical detail men leave at the Health Service can be gotten free, including the PILL. Other drugs require a physician's signature.

Other issues are currently being discussed. Probably the most important issue to come out of this committee is this: Students can make significant contributions to administrative matters that pertain particularly to students, and they can do this as functioning members of an administrative committee. Why haven't students been invited to join the Admissions Committee, the Alumni Affairs Committee, the Curriculum Committee, the Student Awards Committee, and the Student Loans and Scholarship Committee? Direct student input to these committees, manifested as student membership on these committees would be relevant, would be invaluable, and in my opinion would be essential to their proper functioning.

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TMA MEETS WITH STUDENTS

Alan Worth MS 3

In January, as in September 1969, the Texas Medical Association invited the medical students of Texas to attend its meetings in Austin. Several comments on the last meeting might be of general interest.

The speakers at the meeting focused on economical, political and public relations aspects of medical practice. The TMA is conservative but more receptive to expressions of moderate or liberal opinion than might be expected. In the committee meetings the views of students were openly received and even solicited. The committees were considering such topics as sex education format for the Texas public schools, legislative programs, rural health, medical education (both undergraduate and postgraduate), abortion law reform and reorganization of the AMA.

Students were well treated. (That means breakfast, lunch and cocktail hour in the evening with open bar). Each of the four Texas SAMA chapters were awarded \$250.00 as a token of support. Students are invited to attend the TMA meeting and assembly of the House of Delegates next May here in Dallas.

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WORMING FOR LUNKER BASS

Bill Hoot MS 3

The pot-bellied old moss-backs (that you would like to brag about, hanging on your wall) spend their declining years lying close to the bottom amid stumps or other obstructions. This character trait allows them to bushwhack unwary minnows from the shadows of their hiding-hole. A weedless worm is the ideal ticket to snag a bass from the jungle of his underwater home, because it can be fished on the bottom slowly enough to tempt the laziest lunker with a minimum of hang-ups.

The pros rig a bullet-shaped sliding sinker ahead of a large sturdy hook, which is skewered into the plastic worm so that the point of the hook is not exposed and hence snags little. Bass have less color preference in worms than fishermen, who swear by purple, green or black.

In fishing the worm-rig, allow it to sink to bottom after casting it. Then retrieve it at a crawl or "jig" the worm, while feeling through the line for the tap of a bass picking up the worm. When Mr. Bass signals his presence, lower the rod-tip so he will not drop the worm from your unnatural resistance - then sock the hook to him hard. Besides hooking him securely,

Worming for Lunker Bass (continued)

this will budge even a bass from the safety of his lair and disorient him; it is to your advantage to fight him in open water away from stumps. Pros sometimes yank 3 pounders clear out of the water in this gentle maneuver; stiff rods and strong line are a necessity. Worming is a fishing technique in a class by itself, the secret art practiced best by the cult of the true bass-addicts.

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Most common comment from seniors these days, "FYBIGMI - FYBIGMI"

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THE FIRST NATIONAL STUDENT CONFERENCE ON COMMUNITY HEALTH

Jeff Janes MS 3

The First National Student Health Conference on Community Health is to be held on March 14 and 15, 1970 in Kansas City. The problems of maldistribution of services, health statistics, health education, and related topics will be discusses. The conference is sponsored by SAMA but will be an interdisciplinary conference with cooperation by the National Student Nurses Association, Student American Pharmaceutical Association, and the Student American Dental Association through the National Coalition of Student Professional Organizations. The conference will be held at the Kansas University Medical Center for 500 health science students. The registration fee will be \$10 from which expenses for housing and pre-conference mailings will be taken. The format will include two or three background speakers with the bulk of the program consisting of small group workshops with students from medicine, nursing, law, architecture, osteopathy, dentistry, and pharmacy, as well as professionals and consumers participating. A more detailed discussion of the conference's goals and objectives can be found on the SAMA bulletin board. Arrangements for a charter bus for interested Texas students with a total expense of approximately \$15 per person are being investigated. If interested please contact Jeff Janes (phone: 742-5683) by March 1 for further information and application blanks.

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A NATIONAL EXTERNSHIP MATCHING PROGRAM

Charles Cramer MS 2

The National SAMA Committee on Medical Education has begun an Externship Information Project whose goal is to establish a nationwide matching program of externship and preceptorship for medical students along the same lines as the present matching program for internships. The project was begun last fall. At present questionnaires concerning positions available, stipends, possible academic credit, etc. have been mailed to the deans of all medical schools. and the directors of medical education at all teaching hospitals in the United States. To be added to this information is similar information concerning preceptorships sponsored by specialty boards. The completion date for this mammoth program has not yet been set. Sears Roebuck Foundation and the Joint Commission on the Accreditation of Hospitals have agreed to fund a large portion of the project.

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UNICEF ISSUES NEW APPEAL FOR NIGERIAN AID

Reprint from UNICEF Newsletter issued February 1970

The U.S. Committee for UNICEF has issued a nationwide appeal for public contributions to help support a massive rehabilitation program in postwar Nigeria.

Severe malnutrition and the danger of major epidemics constitute a continuing threat to the existence of millions of children in the former civil war zone.

Through last December, the United Nations Children's Fund had shipped well over 100 million pounds of food, drugs, medicines, and other supplies to Nigerian war victims. During the latter stages of the war, it sharply increased the flow of medical supplies and foodstuffs

UNICEF Issues New Appeal for Nigerian Aid (cont'd)

to hospitals, sick bays, and refugee feeding centers. As a result, UNICEF's Nigerian emergency relief funds have been virtually exhausted.

Since the collapse of the rebellion, the Governments of the United States, Canada, France, Norway and Ireland have announced special contributions totaling \$2,404,000 to the Children's Fund. "Much more will be needed to close the aid gap resulting from the departure of many relief dispensing agencies from the former area of Biafra," said Mrs. Pantaleoni, President of the U.S. Committee. "We are asking our millions of UNICEF volunteers and supporters in this country to respond again with the same generosity they showed to our first call for emergency aid in 1968."

Contributions may be sent to UNICEF Nigerian Relief, P. O. Box 1618, Church Street Station, New York, N.Y. 10008.