

# TEXAS OSTEOPATHIC PHYSICIANS JOURNAL

August, 1970



## *PIONEER IN PEER REVIEW*

*Dr. Phil R. Russell of Fort Worth receives plaque from Dell Morgan of Mutual of Omaha at Southwest Insurance Association convention in Austin in recognition of Dr. Phil's work in establishing peer review committees within the Texas Association of Osteopathic Physicians and Surgeons and in liaison with the insurance industry.*

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to Citizens of Mathis*

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# TEXAS OSTEOPATHIC PHYSICIANS JOURNAL

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# Dr. Logan Is Martyr to Mathis Citizens

Dr. Fred E. Logan, Jr., (KCCOS '65) of Mathis died July 11 from a bullet fired point blank into his heart by a deputy sheriff.

Across Texas the newspapers and news wire services carried extensive coverage of the shooting death of the 31-year-old D.O. who was family physician to a predominantly Mexican-American population. The AP story of the funeral July 15 is reprinted herewith, below.

He is survived by his wife, Carol Elizabeth; a daughter, Kathleen Lorraine; a son, Fred Earl Logan, III; and father, Dr. Fred E. Logan, Sr., who was president of TAOP&S in 1966 when his son joined the association.

Dr. Logan received his premedical education at Del Mar College and the University of Texas at Austin, served two years in the army before entering KCCOS. He interned at Corpus Christi Osteopathic Hospital and opened his practice in Mathis in the fall of 1966. On August 22, 1969, his new \$100,000 clinic was dedicated.

Local State and federal investigations of the death are in progress.

From the Associated Press news wires:

**by Paul Recer**

MATHIS, Tex. (AP)—It rained the day they buried Dr. Fred E. Logan, Jr., and almost 1,000 of this town's Mexican-Americans stood in the South Texas summer downpour to say goodbye to their beloved doctor.

The mayor stood at the head. Mil-

itant Mexican-Americans were there, flying banners proclaiming Logan a fallen hero and wearing their brown berets like badges.

But most of all, the average resident of Mathis, the 65 to 75 per cent who are Mexican-American, came to the funeral and to the graveside. The farm worker, the laborer, the poor who are the core of this South Texas town near Corpus Christi, Tex., came to the weed- and mud-choked cemetery to bury "the Anglo who cared."

"He was a good man," said one, "so they killed him."

*"He used to ask if you had enough to pay him and still buy medicine," recalls a young chicano. "If you didn't he would say, 'Just forget me and buy the medicine.' Sometimes he would even loan you four or five dollars for the medicine."*

Logan was 31, an osteopath, an admitted militant liberal. He was a Missouri native who grew up in Corpus Christi and loved the dark-skinned "chicanos" who labor under its hot sun.

Here, he built a clinic and treated all who asked for help. Many he treated for a pittance or for free. A few walked out with some of his money in their pockets.

For an Anglo in Mathis, Logan shattered the pattern in his treatment of the poor chicano.

The city council, in an official resolution, said the shooting of Dr. Logan during a struggle with a deputy sheriff, "suggests the possibility of a political murder."

"I've heard Anglos say (of Logan), 'We ought to kill that s.o.b.," said Mathis Mayor Winston F. Bott.

Bott and most of the Mathis City Council regard Logan's death as another example of the discrimination and brutality they say is always displayed by Anglo lawmen toward Mexican-Americans or toward Anglos who try to change the pattern of life for the Mexican-American in San Patricio County. Many in Mathis feel the same way. And to many militant chicanos, such as members of the Mexican-American Youth Organization (MAYO), Logan is a martyr to the cause of the Mexican-American.

Bott is an Anglo himself, but he says other Anglos in Mathis regard him as a traitor "to the system of discrimination" because he sought the Mexican-American vote and was elected as a chicano candidate.

Bott, a civil engineer, came to Mathis in 1958 and soon was elected president of the Chamber of Commerce.

Bott and the Mexican-Americans on the city council have fought "the system" with resolutions, paper bullets which have turned into blanks.

As for the poor in Mathis, they wonder most about who will treat their illnesses now.

(Please turn to Page 10)



# Texas College of Osteopathic Medicine Opens

Four full-time faculty members have signed contracts with the Texas College of Osteopathic Medicine, announced Dr. Henry B. Hardt, acting dean.

The new instructors will be joined in September by three additional members who are yet to be named, the dean added.

October 5 is the date set for TCOM to open in the Fort Worth Osteopathic Hospital with its first class of 21 students. Temporary partitioning and lab equipment were to be installed in mid-August, Dr. Hardt said.

The faculty members are: Elizabeth Harris, Ph.D., associate professor of microbiology; Tom Graham, Ph.D., associate professor of physiology; Charles J. Rudolph, Ph.D., associate professor of biochemistry; and Mr. Robert G. Tucker, associate professor of anatomy.

First named to the faculty was Dr. Harris, a graduate of Southwestern Medical School, Dallas. She was employed in May and is a member of the admissions committee. Dr. Harris, a former instructor at L.S.U. Medical School in New Orleans, earned her bachelor's degree from Texas Wesleyan College and her Master's from Texas Christian University. She is a native of Kilgore, married and the mother of three children.

Dr. Graham, 33, a native of Paducah, Kentucky, taught physiology and microbiology at the University of Alabama for six years before joining TCOM. He earned his B.S. degree at Florence State University, his Master's and doctorate from the University of Alabama. Single, Dr. Graham is an apartment dweller in Euless.

Dr. Rudolph, who received his doctorate in August from Oklahoma State University, is embarking upon his first teaching assignment following his graduation. He was awarded his bachelor's and Master's at Austin College, Sherman, Texas, and O.S.U., Stillwater, respectively. Dr. Rudolph, a 6' 4", 240 pounder, had a 4.0 grade point average in college.

Mr. Tucker, 33, who expects to earn his Ph.D. this month, will move to Fort Worth from his home in Tuscaloosa, where he attended the University of Alabama. Born in Montgomery, Alabama, he is married and has three children.

Ten D.O.s are committed to serve on the faculty in clinical and other special categories, Dr. Hardt concluded.

They are: Drs. Raymond Beck, Edward A. Becka, Catherine Carlton, Virginia Ellis, Roy Fisher, John C. Kemplin, George J. Luibel, Robert H. Nobles, Phil R. Russell, and Tom Whittle.

Drs. Ellis, Fisher, Kemplin and Nobles also serve on TCOM's admission committee.

(Firm but Incomplete)

## TEXAS COLLEGE OF OSTEOPATHIC MEDICINE 1970-71 Faculty

Associate Dean	Henry B. Hardt, Ph.D.
Gross Anatomy	George F. Pease, D.O. William R. Jenkins, D.O.
Histology	Gerald Bennett, D.O. Myron Skinner, D.O.
Embryology	Elizabeth F. Harris, Ph.D.
Biochemistry	Charles Rudolph, Ph.D.
Physiology	Tom M. Graham, Ph.D. Constance Jenkins, D.O.
Microbiology	Elizabeth F. Harris, Ph.D.
Medical Psychology	Tom Whittle, D.O.
History of Medicine	Virginia Ellis, D.O. Catherine Carleton, D.O. George J. Luibel, D.O. Phil Russell, D.O.
Radiology (Anatomy)	Raymond Beck, D.O. John C. Kemplin, D.O.
Physical Diagnosis	Robert H. Nobles, D.O.
E.E.N.T. (Anatomy of Eye)	Edward A. Becka, D.O.
Surgery	Roy Fisher, D.O.



# 21 Students in First Class

A dentist, pharmacist and a registered nurse are numbered among the first freshman class of the Texas College of Osteopathic Medicine, reports Dr. Henry B. Hardt, acting dean.

The beginning class of 20 students was selected from about 50 applications, the dean added. All except three are from Texas. Other states represented are Georgia, Maryland and Oklahoma.

George H. Jurek, D.D.S., who has practiced for several years in Waco, said a long time interest in osteopathy prompted him to make his decision when he learned TCOM was opening.

Dr. Hardt said that AOA has granted a special dispensation regarding Dr. Jurek. In addition to full participation as a student, he will serve as part-time instructor in anatomy of head and neck. An additional student—totaling 21—will be selected this week from four alternates, the dean said.

A Fort Worth RN, Mrs. Nelda N. Cuniff, is the woman listed in the initial class.

James E. Delaney, Atlanta, Georgia, has his B.S. degree in Pharmacy, but has not entered that field except as an intern pharmacist at an Atlanta hospital.

The following members of the first class include:

## CLASS OF '74

### TEXAS COLLEGE OF OSTEOPATHIC MEDICINE

Name	Hometown	College
Lee W. Beeville, Jr.	Oklahoma City	Oklahoma State
Robert J. Breckenridge	Mesquite	Texas Tech
Kenneth J. Brock	Port Arthur	Central State
Jobey D. Claborn	Amarillo	Southwestern State
Nelda N. Cuniff	Fort Worth	TWC
Ronald L. Daniels	Fort Worth	TWC
James E. Delaney	Atlanta, Ga.	Southern School of Pharmacy
Gilbert E. Greene	Sweetwater	Missouri Southern
Mike A. Houghton	Arlington	UTA
Shelley M. Howell	League City	Southwestern U.
George H. Jurek	Waco	Baylor
Sterling F. Lewis	New Market, Md.	Baylor
Ronald P. Livingston	Comanche	Tarleton State
Terry L. Parvin	Cleburne	Tarleton State
Jesse R. Ramsey	Fort Worth	TWC
David A. Ray	Bridgeport	TWC
John L. Sessions	Mansfield	UTA
Ronald D. Sherbert	Van	Stephen F. Austin
Charles D. Vogler	Hurst	Univ. of Alabama
Thomas W. Wiman	Brenham	Hardin Simmons

## Dr. Phil Honored by Insurance Industry

Dr. Phil R. Russell (ASO '16) of Fort Worth, recently was honored for his many years work in establishing the Texas Osteopathic Insurance Liaison Committee (TOIL) and the Hospitals and Insurance Committee of the Texas Association of Osteopathic Physicians and Surgeons. He received a plaque from the Southwest Insurance Association at their convention in Austin.

Dr. Phil insists that the honor was really bestowed upon the profession for its efforts in Texas over the past 20 years to equitably solve problems arising out of delivering health care to people.

The TOIL Committee is one of the oldest and most respected peer review mechanisms operating in America today. The membership is composed of Texas D.O.s and osteopathic hospitals, Texas Association of Health Underwriters, Dallas Society of Claimsmen, Southwest Insurance Association and Blue Cross-Blue Shield of Texas.

Dr. G. W. Thompson of Houston recently was re-elected chairman of the TOIL committee and has been active for many years in its deliberations and those of the TAOP&S Hospitals and Insurance committee. Cur-

rent chairman of H&I is Dr. Joseph E. Wolpmann of Houston.

Any controversy involving mostly D.O.s and osteopathic hospitals is settled by the TAOP&S Hospitals and Insurance Committee but where the carrier is involved to a heavy degree cases are referred to TOIL.

On the other side of the picture the insurance industry in Texas, in dealing with the osteopathic profession, has its committee to settle problems if it is primarily an insurance carrier involvement but it refers its cases to TOIL where TAOP&S has representation.

Dr. Phil's recognition by the insurance industry points up the acceptance in the industry of the sincerity of his work and the work of the profession in Texas in protecting the rights of doctor, hospital, patient and carrier.

He is currently serving as chairman of the Board of Fort Worth Osteopathic Hospital where a 100-bed addition has just been completed and he is probably one of the busiest retired D.O.s still serving the profession. He is a long time member of the KCOS 750

(Please see page 15)



# L'Arte Medica

By Michael A. Calabrese, D.O.

There is something that has been bugging me for some time which I have been mulling over in my mind for several months now—well, years in fact. It's this family doctor stuff. For years now, one of our biggest arguments for the continued justification of the osteopathic profession has been that up to 75 percent of our graduates after internship go into general practice. We point to the M.D.s and say only 22 percent of their doctors go into general practice after internship. Has anybody checked the latest statistics? I venture to say that barely 60 percent of this year's graduates of D.O.s will enter general practice. It won't be long before we will have to give up this breast beating about our family doctor D.O.s.

It's the same old story. We speak loudly and boldly that we are different from the M.D.s and then we follow right in their footsteps, using them as a guide in forming our organizations, societies and affiliated associations. These past 20 years I have seen affiliated organizations formed in our profession always *after* the allopathic formed theirs. No wonder the M.D.s—that is those that bother watching our actions—have the impression that our sole objective is to be an M.D.

Having never visited an M.D. medical school, been a patient in an M.D. hospital during my adult life, and having entered an M.D. hospital only as a visitor, I can only presume that our colleges and hospitals are administered and supervised along similar lines. It seems that these institutions over a period of years, as technical advances developed by leaps and bounds, became dominated by specialists to supervise, teach and instruct.

Twenty-five or 30 years ago our profession had few specialists and fewer hospitals that required them. Our hospitals until just a few short years ago were practically all started by some enterprising, courageous and dedicated D.O. who wanted to give a more complete service to his patients. In the post World War II years the sudden growth of our profession was coincident with the sudden availability of federal funds for construction of hospitals. Standards were set for the dispensing of these funds. It was only natural that the government agencies turned to the largest and what they thought were the most qualified medical agencies for advice, the

AMA and its affiliated organizations. The government could not afford to set up two standards of qualifications, one for the allopathic and one for the osteopathic profession. Thus in order to secure funds we had to conform to the requirements suggested and recommended by the majority group, which I think is quite practical as far as the government is concerned.

This financial boost benefited our profession in many ways. It gave our institutions and hospitals opportunity to purchase and use equipment they could not otherwise afford. It caused our hospitals to expand to such a degree that they solicited the services of more specialists which encouraged more and more young interns to go into residency training. Unfortunately, we are still a small group trying to play in the big leagues. We either play by their rules or we don't play at all. Our institutions must conform if we want some of that big "money". Our smaller hospitals, which have been giving a vast public service, have been forced to close because they have not been able to keep up with the strict government rules and regulations. Now I ask, was it worth it? Are we being like Faust, "selling our souls"?

This is just one phase of the vicious cycle which will eventually deplete our profession of general practitioners. Another phase I believe is in our schools themselves. Let's briefly and quickly follow the bright-eyed, idealistic student doctor. His first two years are what we call "basic science" years taught by Ph.D.s who undoubtedly are well-qualified in their particular fields. The second two years are what we call "clinical" years in which the student sees and takes care of patients under supervision of clinicians and department heads.

This is the way it has been for the past quarter of a century. How much longer will it continue? Everyone is aware of the shortage of doctors and with each graduating class there is an increasingly larger gap between the populace and the available physician, but still we continue to raise the requirements for admission in our schools and keep adding more and more to the curricula of the colleges. To me this reeks of "me tooism". Here is an area where we can really do something on our own.

(Please see next page)



# In the Middle Of Nowhere?

Back to our student doctors in osteopathic medical schools. During the course of his final year, or externship, his life is almost completely dominated by the specialist and the resident with some guidance by the intern. Following graduation and subsequent internship in an approved hospital he comes under total influence of the resident and the heads of the departments who are specialists in their fields. His only apparent contact with a family doctor or general practitioner is during staff meetings or in a delivery room, apparently the last stronghold of the G.P. Here he learns, according to the OB-Gyn. resident how he is not supposed to deliver a baby. Sometimes he hears about G.P.s through history reports of a "goof" and reads that a specialist had to be called in to rectify the error or make a more definitive or accurate diagnosis.

Now, after all this indoctrination and supervision by Ph.D.s and specialists the intern is released onto the unsuspecting public as a full-fledged doctor, ready to rid humanity of all its ills. But rather than make this young doctor feel confident and eager to set out on this mercy mission, his whole training has had a continuous unspoken undertone emphasizing his ignorance; how much he doesn't know and how much more he has yet to learn.

Thus, upon completion of his internship, does he dash off to some little remote spot and start from scratch or answer one of the many ads from small towns begging for a doctor? Of course not! He knows he's got a lot more to learn so he takes up three more years of residency training or if he does set up practice it will be in a large metropolitan area with a large hospital where there is an abundance of specialists he can call on.

Thus the gap between populace and general practitioners continues to widen. Here is another realm where we as a profession can do something positive to alleviate the family doctor shortage. We must devise some means to encourage and inspire young doctors to want to go out and do general practice.

How about the College of G.P.s setting up programs in the approved intern hospitals showing the interns the advantages and the true service that a G.P. can give? So now we've made the full circle: unless we do something soon we will no longer be able to boast of so many of our young doctors going into general practice. If we continue our "me tooism" we will eventually do away with ourselves and become part of the majority and not have anymore to "me to," about.

As an after thought, I think there is another facet

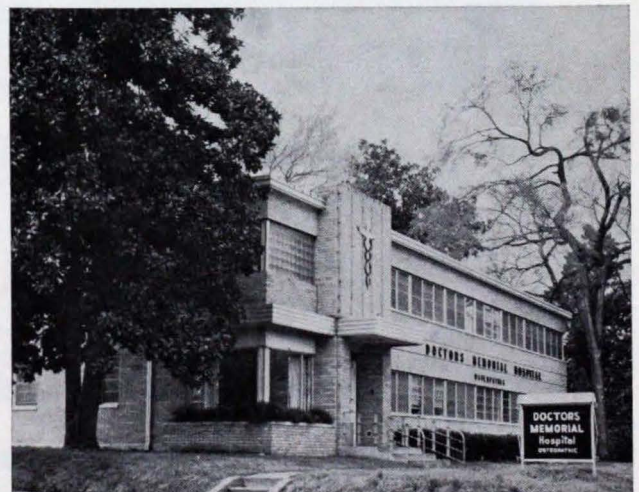
in this cycle which bears mentioning as a contributing factor towards the disappearance of general practice physicians. This is the general public. Ask any one and almost all will tell you that we need more and more G.P.s but only on occasion. That is, when he can't get his "heart" doctor or his "baby" doctor or his "lung" doctor or his "head" doctor or his wife can't get her "female" doctor or it's a Wednesday afternoon or it's after his regular doctor's office hours or when his next appointment with his "regular" doctor is six weeks hence and he doesn't want to wait that long because it will interfere with his (the patient's) golf day.

Why then should a young doctor want to start up a practice in the middle of nowhere to sit around waiting for these people to call him when he could become one of those exclusive doctors that in two or three years no one can find or afford?

Obviously, we need to reappraise our part in the health industry and change the thrust of our education and training.

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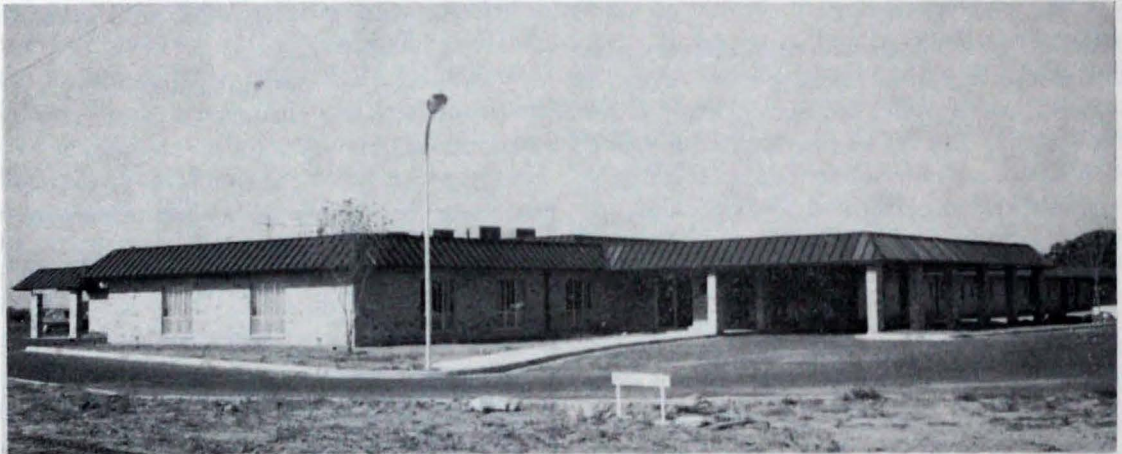
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Administrator



# New Hospital In Euless

The all new Doctors Community Hospital, 2219 W. Euless Blvd., in Euless, is holding open house on the afternoons of August 29 and 30, it is announced by Richard G. Cochran, administrator.

Doctors, paramedical and professionals are especially invited to tour the facility, 2 to 5 p.m. on Saturday afternoon, August 29, and the public at the same hours on Sunday the 30th.

Capacity of the hospital is 100 beds with ancillary facilities for 250 beds eventually. Fifty-five beds are now open.

Cost of the new hospital is approximately \$1,700,000. It has two major and one minor operating suites.

Board of directors of the hospital include: J. W. Burke, Jr., D.O., chairman of the board; E. J. Sachse, D.O., president; J. H. Miles, D.O., vice president; M. J. Maughan, D.O., secretary; and R. J. Morris, D.S.C., treasurer.

The hospital is an osteopathic, joint staff proprietary institution.

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## Calendar

### OCTOBER

#### AOA 75th Annual Convention and Scientific Seminar

Oct. 5-8

Mark Hopkins, Fairmont,  
Sheraton-Palace,  
Del Webb's Townhouse  
San Francisco

#### ACOS 43rd Clinical Assembly

Oct. 25-29

Shamrock Hilton  
Houston

# Dr. Logan Respected By Colleagues in Corpus Christi

(Continued from Page 3)

Logan's father, a Corpus Christi osteopath, said he may take over his son's clinic.

"It was a cause for which he gave his life," says the elder Logan. "I just couldn't let it fall. In all probability, I'll go over there."

#### From the Houston Chronicle:

On last Aug. 22, 1969, he enjoyed his great day, the dedication of a building constructed according to his specifications, as a headquarters for the Mathis operation.

Dr. Logan's wife, a tiny 4 feet, 11 inches, trim at just under 100 pounds, admits he had a temper and was a "very demanding man" to live with but she added that despite his fast pace of life "there is no way people could be closer than we were."

"We borrowed \$75,000," said Mrs. Logan, "and the building without equipment, cost \$100,000. Later he added a small bedroom and library so that he could stay overnight when he had an obstetrical case he couldn't leave."

In Corpus Christi, Dr. Logan was relatively unknown except among the professional people and here, his reputation was high, both among medical doctors and doctors of osteopathy.

Dr. Thomas W. Williams on the staff of Corpus Christi Osteopathic Hospital, described Logan "one of the smartest general practitioners I have ever met."

A urologist and member of the medical fraternity who declined to be named has the same opinion and stressed that he never discovered Logan in a faulty diagnosis.

Logan also is reported never to have lost a baby at the Mathis clinic where sometimes deliveries would reach more than one a day for periods.

Dr. William Lilly remembers Logan for his zest for the practice of medicine and an interest in languages.

The man who ended Dr. Logan's life is in seclusion on orders from the sheriff.

# Dr. Luibel Re-Elected As Trustee of AOA

Dr. George J. Luibel of Fort Worth chairman of the board of the Texas College of Osteopathic Medicine, was reelected to a four-year term on the board of the American Osteopathic Association.

The AOA House of Delegates met this summer in Atlanta.

He is a former President of TAOP&S and AAO, president of the board and member of the active staff of Fort Worth Osteopathic Hospital.

(Elsewhere in this issue see stories on TCOM opening this fall).

# Dr. Ganz Is Elected AOA Vice Speaker

Dr. Samuel B. Ganz of Corpus Christi was elected vice speaker of the AOA House of Delegates at its recent meeting in Atlanta.

He has been speaker of the TAOP&S House for the past five years and on the professional staff of Corpus Christi Osteopathic Hospital for 18 years.

Dr. Ganz is on the board of TCOM and vice chairman of the public health committee of TAOP&S this year.

# Hurst General Breaks Ground

Hurst General Hospital broke ground recently for expansion of ancillary facilities that precede adding new beds later, according to Walter Dolbee, administrator.

Two new emergency rooms, quadrupling the X-ray space and doubling the lab area are included in the present construction program.

One new X-ray machine is being added along with other equipment. Hurst is an accredited AOA hospital.



# Texas Delegates Report on Atlanta

by C. E. Dickey, D.O.

Matters considered by the AOA Reference Committee on Professional Affairs:

1. Department of general practice of hospitals approved for intern and/or residency training (RES. 803)

Action: Adopted by the House of Delegates as recommended by the Board of Trustees of the AOA.

2. Proposed basic documents for affiliation of the American College of Preventive Medicine.

Action: Denied by the Board of Trustees of the AOA with the concurrence of the House of Delegates.

3. Proposed basic documents for affiliation of the Association of Osteopathic Specialty Organizations.

Action: Denied by the Board of Trustees of the AOA with the concurrence of the House of Delegates.

4. National Health Insurance program. (RES. 811)

Action: The House of Delegates voted to go on record as favoring a National Health Insurance program.

5. Designation of the Department of Medicine in osteopathic teaching hospitals. (RES. 812)

Action: The House of Delegates voted to change the name of the Department of Osteopathic Medicine to the Department of Internal Medicine.

6. AOA health insurance programs. (RES. 830)

Action: The House of Delegates and the Board of the AOA agreed that the membership of the Bureau of Insurance be increased by two (2) members, and that these two members be appointed from the House of Delegates.

7. Internships in osteopathic hospitals. (Pertaining to rotating and non-rotating internships.)

(RES. 831)

Action: Disapproved.

Explanatory Statement: This resolution would probably be detrimental to the present training programs.

by Glen Kumm, D.O.

The committee on Colleges, a subcommittee of the Bureau of Professional Education meeting in Atlanta, Georgia, on July 7, 1970, approved the Texas College of Osteopathic Medicine for pre-accreditation status for the academic year of 1970-71. The resolution number 208 was subsequently passed unanimously July 9, 1970, by the Board of Trustees of the AOA, the resolution reads as follows:

**RESOLVED:** That the Texas College of Osteopathic Medicine be granted pre-accreditation status for the year 1970-71 provided that the college complies with the following stipulations.

1. That there is full compliance of the college to educational standards for osteopathic colleges.

2. That there be the availability of a minimum of \$500,000 in assets, of which \$400,000 should be in cash reserves, which would be necessary to meet any reasonable budget for the year 1970-71.

3. That the entering class for the first year be limited to twenty students.

The Board of Trustees also approved full accreditation for the other five colleges with a provisional approval to the Michigan College of Osteopathic Medicine.

## Dr. Dickey Elected National OPF Chairman

Dr. Clifford E. Dickey of Fort Worth was elected by the AOA House of Delegates to be national chairman of the Osteopathic Progress Fund for the coming year.

He has served as a TAOP&S trustee, active in association affairs both here and in Oklahoma and is on the professional staff of Fort Worth Osteopathic Hospital.

## Dr. Steve Davis in Groom

Dr. and Mrs. Steve Davis and daughter, Pamela Jo, 2½, moved to Groom recently from Tulsa where Dr. Davis interned at Oklahoma Osteopathic Hospital.

Dr. Davis is a graduate of KCOS and will be associated with Dr. Richard M. Hall, Dr. John L. Witt and Dr. David J. Levy in the Groom Osteopathic Clinic.

He attended high school in Turkey.

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# Texas Delegates Report on Atlanta Meeting

by Samuel S. Ganz, D.O.

The total income of the A.O.A. for fiscal 1969-70 was \$2,948,727 which represents an increase of \$46,764 over last year. The total expense was \$2,923,499 which represents an increase of \$316,996. The total income over expense was \$35,228 which is a decrease of \$270,231 from last year. Federal and Illinois income tax amounted to \$100,000 which resulted in a net loss of \$64,771 for the fiscal year.

The budget for 1970-71 was presented by Mr. Kenneth Ettenson and approved by the House of Delegates. The budget predicts a deficit of \$226,170 for the fiscal year. This projected deficit will reduce our surplus cash to \$15,000 by May 31, 1971.

In light of the financial report, the Board of Trustees passed the following resolution:

Resolved that the Bureau of Finance conduct a study of the financial structure of the A.O.A. and report to the Board of Trustees in January, 1971, and, that unless there is a change in the financial picture of the A.O.A., the Board of Trustees may find it necessary to propose a dues increase to the July, 1971, House of Delegates.

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by Elmer C. Baum, D.O.

There are several hundred measures pending before the National Congress relating to delivery of health care. The Council, through the Washington office, is carefully watching all measures. Some of the important ones at this time are amendments to the Social Security Act relating to Medicare and Medicaid.

Another measure our profession is interested in is S.3418. This bill would provide grants to medical schools to provide instruction and teaching in all phases of family practice as a specialty. It appears at this time that this measure has a good chance to be enacted.

The National Congress at this stage is still deliberating the issues as mentioned above and will not take definite action until fall. The chairman of this committee has a current report in most of our journals.

**GEORGE E. MILLER, D.O.**  
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by Richard M. Hall, D.O.

The following delegates were seated representing the State of Texas: Dr. Sam Ganz, chairman, Dr. Clifford Dickey, Dr. David Armbruster, Dr. Elmer Baum, Dr. Richard Hall, Dr. Eugene Brown, Dr. Gus Kumm, Dr. Russ Jenkins, Dr. Claude Lewis, alternate, was present in the gallery.

Dr. Sam Ganz was elected Vice Speaker of the House. Dr. George Luibel to a four year term on Board of Trustees of American Osteopathic Association. Dr. Clifford Dickey was elected national chairman of the Osteopathic Progress Fund. Dr. Dickey a member of the professional affairs reference committee. The Texas Osteopathic Association small hospital resolution was passed by the house.

All delegates attended meeting of the professional affairs reference, public affairs, Ad Hoc, on constitutions and by-laws committee.

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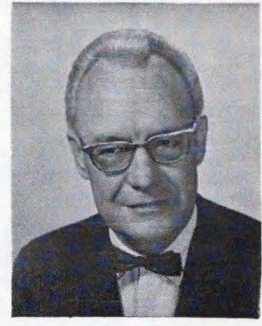
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# ABOUT TEXAS!



By the Executive Director

Someone said the other day the chances are you haven't done any new, original and fundamental thinking about political medicine since you got your degree.

But while you have been busy launching your professional career, the ball game has changed drastically and the main thrust of more changes to come will be from the people—not the AMA or the AOA.

It's the taxpayer who builds most of the hospitals, pre-professional and medical schools and foots the bill for the care of the aged and poor. John Q. Public is, or will be soon, calling the shots on facilities, joint staffs, internships and residencies. He is the one screaming for better delivery of health care at a cost that won't bankrupt his family. He is the one crying for a family doctor.

Less than half of the physicians in America are card-carrying members of AMA. Daily the AMA boat springs more leaks. The opportunity for pointing new directions in health care were never better for the D.O. Let's close ranks, quit bickering and move ahead.

\* \* \* \* \*

Here's something else for you to mull. Someone up there needs to tell Washington that they are shrinking health care services; that there is a shortage of paramedical people like R.N.s; that they need to slow the push for National Health Insurance until facilities and manpower catch up to the job.

Also, the fact is that R.N.s are stuck with more paper work than nursing duties. Furthermore, why close a hospital because an R.N. isn't sitting there 24 hours a day? How about a licensed physician in the house at all times. That can be done easier and the safety of the patient would be enhanced.

\* \* \* \* \*

TAOP&S has been doing Peer Review for a long time, but the Feds haven't heard about it. Missouri solved the Peer Review dilemma in a unique way: D.O.s, M.D.s and insurance companies formed a Peer Review Foundation and let the government fund it!

\* \* \* \* \*

"Pathways of communication have been hampered." Everybody's hollering that lately, but the above note comes from a group you may not have heard from this week.

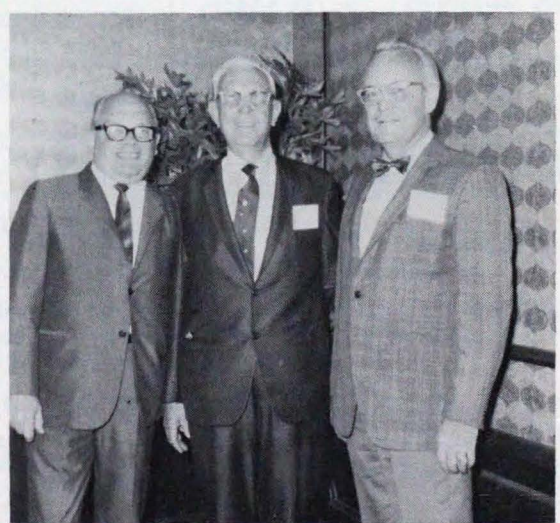
It is from a talk by Student Doctor James Lapcevic of Michigan College of Osteopathic Medicine, given at the state executive directors' meeting in Atlanta last month.

He is program chairman for the convention next year of the Student Osteopathic Medical Association (SOMA). Dates are March 19-21, 1971, in Detroit.

Professionals need to sharpen up their own thinking to converse with these young ones, but SOMA, too, misses the point: The public, increasingly, will set the conditions for doctors' education, training and practice, not the AMA.

The M.D. will not grant privileges. The D.O. will not deny them.

The unity and strength of the osteopathic profession is the best hope for bringing about changes needed to get medicine into focus with its political problem with the public.



What's really going on here in this picture taken at the Atlanta meeting is that Doug's wife, Edith, is testing his Polaroid for him. Anyway, you're looking at about 50 years' service to the osteopathic profession: l. to r., Mr. D. O. Durkin, Mr. Walter L. Gray and Mr. Tex Roberts, all state association execs from Illinois, Oklahoma and Texas, respectively. Walter retires next year. This year he is national president of the Osteopathic State Executive Directors' Association.



# Letters

Dear Mr. Roberts,

On behalf of my son and his wife, Gregory and Jennie Smith, and myself and my husband, I want to thank the Texas Association of Osteopathic Physicians and Surgeons for the memorial given to the Texas College of Osteopathic Medicine in the name of my grandson, Dorian Christian Smith.

TCOM, which is already close to my heart, will always carry a special meaning for me in the future as I watch it develop and grow into a successful osteopathic medical college. Perhaps someday an osteopathic physician will graduate from our college who will develop a method to avoid deaths such as Dorian suffered.

Again, please accept our thanks for this living memorial.

Sincerely,

Phyllis J. Deneke

**GERALD D. BENNETT, D.O.**  
PATHOLOGIST

Fort Worth Osteopathic Hospital  
1000 Montgomery PE 8-5431  
Fort Worth, Texas 76107

## DISTRICT NEWS

### DISTRICT III

by

H. George Grainger, D.O., FAAO  
Pretty Sharon Coldsnow who was our Miss Pittsburg a couple years back is now a TCU sophomore studying toward her B.S. in nursing.

Dr. and Mrs. Earl Kinzie's son-in-law, Leonard Hughes, received his M.D. from Southwestern Medical School, Dallas, this spring. Dr. Hughes is the husband of daughter Ellen. He is interning at Wilford Hall Hospital.

Geneva Grainger's little boy Jack, a KC sophomore-to-be, has been externing at Dallas Osteopathic Hospital under some of the best D.O.s in Texas this summer, to listen to him talk. Then he finished up in Tyler working for the Old Man.

Jack's wife, Doris, a pert little RN, who will probably have her baby ere this is read, worked all summer at Tyler's Mother Frances Hospital as long as she safely could. Looks like both kids have what it takes. Well, at least one of them.

## Dr. Hall to Chair Manpower Panel

Dr. Richard M. Hall of Groom, president-elect of TAOP&S, was recently voted chairman-elect of the Advisory Panel of the Texas Health Careers Program.

He has long been active in vocational guidance and student recruiting for osteopathic medical schools and was just appointed to the Advisory panel this last spring. The Careers program is affiliated with the Texas Hospital Association.

A manpower survey was mailed to all D.O.s earlier this summer, along with professionals in a dozen health-oriented organizations, in an effort to determine manpower needs. Thirty-six per cent of the D.O.s have responded to the survey.

In its fifth year, the Texas Health Careers Program is taking the story of the great opportunities in health careers to high school students of the state. More than 200,000 students were contacted last school year by entertaining and informational high school assembly programs.

When a student shows interest in a health career his name goes into a computerized manpower pool and periodically he is sent information concerning the field of his choice.

He is also brought to the attention of schools and training courses offered in his area.

Dr. Hall is a '62 graduate of KCOS and in general practice.

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# Dr. Phil is Honored

(Continued from Page 5)

Club and is a former AOA president and a former executive secretary of TAOP&S.

The plaque is a walnut wood map of five Southwestern states of Texas, New Mexico, Oklahoma, Arkansas and Louisiana with a gold plate reading:

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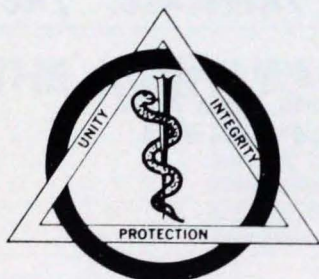
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