

# Texas OSTEOPATHIC PHYSICIANS Journal

Volume XVIII

FORT WORTH, TEXAS, AUGUST, 1961

Number 4

## *In This Issue—*

	Page
Editorial Page .....	1
Resume of Actions of the House of Delegates of A.O.A. ....	2
Education and Colleges .....	6
Financial and Business Activities of A.O.A. ....	9
Bureau of Research and Bureau of Hospitals .....	12
Activities of Bureau of Public Education On Health .....	16
A.O.A. Department of Professional Affairs .....	20
Executive Secretary's Travelogue ..	23
Radiological Society to Conduct Symposium .....	26
Tarrant County Osteopaths Care for City's Winos .....	29
Washington News Letter .....	30
News of the Districts .....	31

# Texas Osteopathic Physicians' Journal

OFFICIAL PUBLICATION OF THE  
TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS

PUBLICATION OFFICE: 512 BAILEY STREET, FORT WORTH 7, TEXAS

EDITOR - - - PHIL R. RUSSELL, D. O.

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VOLUME XVIII

FORT WORTH, TEXAS, AUGUST, 1961

NUMBER 4

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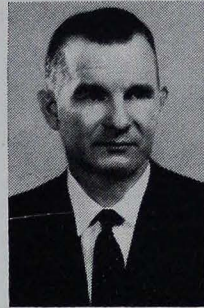


# EDITORIAL PAGE

## NEW A.O.A. LEADERS



CHARLES L. NAYLOR, D.O.  
Ravenna, Ohio  
President, A.O.A.



CHARLES W. SAUTER, D.O.  
Gardner, Massachusetts  
President-Elect, A.O.A.

These newly elected leaders have the backing of the A.O.A. House of Delegates as indicated in the adoption of the following statement in answer to the A.M.A. assertion that there is a difference between the practice of osteopathy and the practice of osteopathic medicine:

### STATEMENT

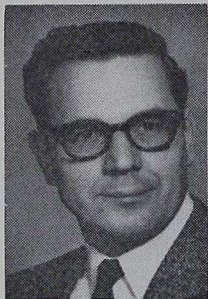
Osteopathy or osteopathic medicine is a philosophy, a science and an art. Its *philosophy* embraces the concept of the unity of body structure and function in health and disease. Its *science* includes the chemical, physical and biological sciences related to the maintenance of health and the prevention, cure and alleviation of disease. Its *art* is the application of the philosophy and the science in the practice of osteopathy or osteopathic medicine and surgery in all its branches and specialties.

The practice of osteopathy is not and cannot be differentiated from the practice of osteopathic medicine or osteopathic medicine and surgery. Osteopathy does not request or need to be judged or graded by individuals or a profession who do not understand the basic concept of osteopathy.

Osteopathic physicians and surgeons have no need or desire to be graded by the A.M.A. to determine their level of practice or education.

Our obligation is to the public and its needs, not to a segment of the healing arts profession and its egocentric desire to be a pure science whose policies and theories are beyond reproach.

## Elected to A.O.A. Board of Trustees



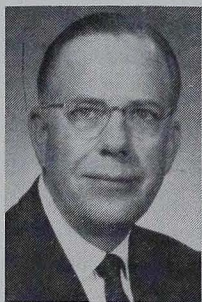
LOREN R. ROHR, D.O.  
Houston, Texas

Dr. Loren R. Rohr, 7112 Lyons Ave., Houston, was elected to the Board of Trustees of the A.O.A. for a three year term. For the past year Dr. Rohr has served the A.O.A. in the capacity of Second Vice-President. His valuable contributions and leadership were recognized and he was immediately elected to the Board by the A.O.A. House of Delegates.

Dr. Rohr is a member of the Board of Trustees of the Texas Association of Osteopathic Physicians and Surgeons and also serves as Chairman of the Department of Professional Affairs.

## Reports of Delegates to A.O.A.

# Resume of Actions of the House of Delegates of A.O.A.



C. E. DICKEY, D.O.  
Fort Worth, Texas

Militant determination characterized the attitude of the members of the A.O.A., House of Delegates, recently in Chicago. This attitude was the direct result of the events in California during the past year plus the irrefutable evidence that organized medicine is planning to attempt the liquidation of the Osteopathic profession by any and all means at its disposal. The latter is

documented by the factual reports of the recent A.M.A. Convention and its deliberating bodies.

In the struggle to date, the initial success achieved by our opposition could *never* have been accomplished except through a conspiracy with our disloyal members and by our own complacency in thinking that our continued growth, development and almost universal recognition were the only safeguards we would ever need.

The following quotations from the annual report of Dr. Eveleth, our Executive Director, typifies the thinking which pervaded the deliberations of your House of Delegates. "At this moment when every eye should be focused on our objectives there is no time for selfish indulgences. We must realize that our preferences have to be weighed against the problem we are trying to solve or they will become part of the problem.—Determination to defend it-



self against destructive forces means active defense within all segments of the Osteopathic profession, its schools, specialty colleges, affiliate bodies, as well as individual members, merge in the common interest. All must realize that to pursue individual interests dilutes the united front and thus the effectiveness of the defense."

Positive action through legal processes will be carried out in California on a number of fronts. Many chapters are yet to be written about this issue. The demise of the Osteopathic profession in California is far from being conceded.

The actions taken by your House of Delegates pertained to the following:

1. Changes in the Constitution, By-Laws and the Code of Ethics of the A.O.A.
2. Statements of policy and recommendations.
3. Resolutions.
4. Election of Officers.
5. The adoption of the 1961-62 budget and the authorization of a special assessment.

### **Changes In the Constitution:**

1. Distinguishes between the annual meeting of the House of Delegates and the annual convention or clinical assembly of the A.O.A.
2. Provides for the succession of the Presidency.

### **Changes In the By-Laws:**

1. Requires dual membership in both A.O.A. and your divisional society. Neither can be continued without the other.
2. Provides for the processing of new memberships in the A.O.A.
3. Provides for increase in A.O.A. membership dues from seventy-five dollars to one-hundred dollars annually.
4. Provides for increase in A.O.A. membership dues for special categories, i.e., first year, second year and third

year members following graduation or internship.

5. Provides for discontinuing joint memberships.

6. Provides for disciplinary action against disloyal members and for the appeal of the disciplined member.

7. Provides for disciplinary action against A.O.A. officers and divisional societies.

### **Change In the Code of Ethics:**

1. The one change in the Code of Ethics provides clarification of the Code regarding unethical practices.

### **Policy Statements:**

1. That the Michigan Resolution of 1959 be reaffirmed. It reads, "That the Osteopathic School of Medicine in the interest of providing the best possible health care to the public shall maintain its status as a separate and complete school of medicine, cooperating with all other agencies and groups that sincerely promote the same objective when that cooperation is on an equal basis granting full recognition to the autonomy and contribution of the Osteopathic School of Medicine.

2. That your House of Delegates denounce the California Osteopathic Association, the California Medical Association and the American Medical Association and their betrayal of the public trust and working for the elimination of the Osteopathic profession in the State of California and elsewhere, thereby attempting to create a medical monopoly.

3. That the House of Delegates of the A.O.A. direct that the Conference Committee be continued and be it further directed that the A.O.A. Conference Committee may meet with a like committee of the A.M.A. when and if the American Medical Association has demonstrated by definite action its acceptance of the Osteopathic profession



on an equal and ethical basis at the national level.

4. Statement and answer to the A.M.A. assertion that there is a difference between the practice of Osteopathy and the practice of Osteopathic medicine.

Osteopathy or Osteopathic medicine is a philosophy, a science and an art. Its *philosophy* embraces the concept of the unity of body structure and function in health and disease. Its *science* includes the chemical, physical and biological sciences related to the maintenance of health and the prevention, cure and alleviation of disease. Its *art* is the application of the philosophy and the science in the practice of Osteopathy or Osteopathic medicine and surgery in all its branches and specialties.

The practice of Osteopathy is not and cannot be differentiated from the practice of Osteopathic medicine or Osteopathic medicine and surgery. Osteopathy does not request or need to be judged or graded by individuals or a profession who do not understand the basic concept of Osteopathy.

The Osteopathic physicians and surgeons have no need or desire to be graded by the A.M.A. to determine their level of practice or education.

Our obligation is to the public and its needs, not to a segment of the healing arts profession and its egocentric desire to be a pure science whose policies and theories are beyond reproach.

### Recommendations:

1. That the Osteopathic profession and the A.O.A. continue to resist vigorously all efforts, externally and internally, to destroy its scientific and political independence.

2. That the association immediately accelerate its research programs relative to the basic contributions of the Osteopathic School of Medicine.

3. That the Osteopathic profession mobilize its efforts to provide health

care to all segments of our society at the least possible cost to the public.

### Resolutions Passed:

Resolution Number One: That members of all specialty colleges and practice organizations affiliated with the American Osteopathic Association must be members of the American Osteopathic Association and their respective divisional societies.

Resolution Number Two:

Whereas:

The American Osteopathic Association recognizing that increased cost of medical care creates a grave socioeconomic problem in certain groups and,

Whereas:

Preventative medicine has brought about an increase in the number of our aging population, and,

Whereas:

A significant number of these persons have insufficient income to meet the increasing cost of medical care, Therefore, be it resolved:

That the American Osteopathic Association recognizing the need for suitable health plans, offers its assistance and cooperation to all agencies concerned with providing adequate health care to our citizens and urges immediate steps be taken to alleviate these growing problems.

Resolution Number Three:

Whereas:

O.P.S.C., a divisional society of the American Osteopathic Association, deeply appreciates the extensive support, both in money and in personnel, provided by the American Osteopathic Association in carrying out the order of the 1961 Miami House of Delegates to use "any and all means" to meet the threat to Osteopathy everywhere as posed by the California situation, and,

Whereas:

A critical situation continues to exist in California, threatening to establish



precedents that are designed to destroy our profession nationally, and,

Whereas:

The continuing struggle to preserve the professional beachhead presently existing in California in the national, as well as the local professional interest,

Therefore, be it resolved:

That the national support of the California battle go forward undiminished and that the Board of Trustees of the American Osteopathic Association be directed to continue to use any and all reasonable means to combat the efforts to destroy the Osteopathic profession in the State of California and elsewhere.

#### **Election of Officers:**

The complete list of newly elected officers will be given in the A.O.A. publications in the near future. The Texas Delegation is pleased to announce that Dr. Loren Rohr, Houston, Texas, was elected to the A.O.A. Board of Trustees for a three year term.

#### **The Budget for 1961-62:**

The adoption of the budget for 1961-62 will be reported by another delegate, however, it can be mentioned here that by special action your House of Delegates passed the recommendation of the Board of Trustees, which was as follows:

That a budgetary item of \$500,000.00 be allocated to promote the public health by preserving and extending the

availability of Osteopathic health care in all the states and that a \$75.00 assessment per member be levied to create this fund.

## **O.B. and Gyn Group to Meet In Fort Worth**

The Texas Association of Osteopathic Obstetricians and Gynecologists will hold its fall meeting October 28 and 29, at the Western Hills Hotel, Fort Worth, Texas.

Dr. C. Bowden Beaty, of Tyler is serving as Program Chairman for the meeting and an excellent program has been outlined. Out of state speakers will be present, along with other specialists, who will discuss many topics regarding the problems in the field of Obstetrics and Gynecology.

The complete program and other details will be published in the Journal at a later date.

## **Correction**

The names of the two recipients of the Freshman Scholarships awarded by TAOP&S were transposed under their pictures in the July Journal. The student pictured at the left of page 16 is Royce K. Keilers, Dallas, Texas and the student pictured at the right is William R. Graves of Fort Worth, Texas.

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# Education and Colleges



A. ROLAND YOUNG, D.O.  
Dallas, Texas

The reports of the 1961 House of Delegates meeting in Chicago concerning the educational picture in the profession and colleges were of a cautious tone in as much as the events of the past year will play an important part in decisions made and to be made relative to our educational facilities.

It is probable that we have lost some 1700 members, one school, many hospitals with training facilities and considerable prestige in a great state. For this reason many adaptations will result in stabilizing our educational agencies and coordination of the specialty colleges, accrediting committee and board of trustees will result in a more unified approach to the training of osteopathic physicians. Many loopholes had to be plugged relative to the organizational structure of our present educational programs to insure our professional integrity.

The following action was taken on the recommendations of the Bureau of Professional Education.

1. That each approved osteopathic college hold a required faculty seminar before the coming school year concerning the immediate improvement of the teaching of osteopathic theory and practice, and report to the Bureau in detail the present programs and the

proposed immediate efforts to improve the efficiency of these programs.

2. That each approved osteopathic college continue to seek additional full-time faculty personnel in the departments of osteopathic practice and theory.

3. That the Academy of Applied Osteopathy, in cooperation with associated colleges, the Bureau of Professional Education and its various agencies immediately develop a Program of postdoctoral training in the field of osteopathic theory and practice, and report back in detail to the next meeting of the Bureau of Professional Education.

4. That the Academy of Applied Osteopathy study the possibility of their conversion into a specialty college and develop a specialty board for the development of a certification program in the field of osteopathic theory and practice in contradistinction of Physical Medicine and Rehabilitation.

5. That the secretaries of the Evaluation Committees of the Specialty Colleges be instructed that all training programs shall include evidence that the osteopathic concept of disease is an integral component part of the program; further, that the specialty boards be instructed that the candidates shall be implemented by on-the-spot inspection of these training programs by individuals qualified to make such inspection.

6. That each recognized specialty college be requested to prepare in detailed outline an ideal undergraduate training schedule in its particular specialty, including therein the personnel needed, the time on the curriculum, the methods of clinical teaching, minimum clinical needs, library requirements, methods of integrating the subjects with other topics in the curriculum, a general pattern of research areas, means of demonstrating the osteopathic prin-



ciples therein, and present these outlines to the Bureau of Professional Education prior to its meeting in 1962.

7. That the approved osteopathic colleges continue to seek consultation and approval by the regional educational associations and that the policy and procedures concerning college evaluations by agencies outside the osteopathic profession as adopted by the A.O.A. Board of Trustees, July 1950 be followed. This policy and procedure is as follows:

"It shall be the privilege of the osteopathic college recognized and approved by the A.O.A. to permit inspection or visitation by federal, state or public agencies or other interested groups, provided that such agency or group files a formal statement with the A.O.A. and with the college clearly stating its purpose in requesting to make an investigation, the scope of the investigation, the members of the investigating committee and their qualifications.

"In such a case, the American Osteopathic Association and the College shall be given ample opportunity to participate in any discussions relative to the planning of such inspection. No decision to permit such inspection

shall be given by an osteopathic college recognized by and approved by the A.O.A. without concurrence in this decision by the A.O.A.

"This rule should not be construed to prevent representatives of pre-professional colleges acting in the role as faculty members from visiting osteopathic institutions upon the invitation of such institution."

8. That survey teams of any regional educational association shall include for the survey of clinical phases of the educational program only those educators and physicians who hold the degree of Doctor of Osteopathy.

9. That the off-campus clerkship program of the Kirksville College of Osteopathy and Surgery at the State Mental Hospital No. 1 at Fulton, Missouri be approved.

10. That the committee on Colleges conduct an inspection or visitation of each osteopathic college during the year, 1961-62.

11. That the Board of Trustees Re-affirm its policy that no approval shall be given to internships conducted in institutions not approved by the American Osteopathic Association.

12. That it be required that a qualified representative of the Evaluating

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Comm. of each specialty college shall be present at the Annual Meeting of the Committee on Accreditation for Postgraduate Training during the discussion of the specialty college concerned.

13. That postdoctoral programs sponsored or co-sponsored by agencies outside of the osteopathic profession shall be approved on an individual basis and not prior to its presentation.

14. That no training by an extension type of supervision that is to be continued under a plan by which the trainee rates himself and reports by mail to the training committee, be approved.

15. That it be reaffirmed that practice, whether in a specialty or in general practice not under the supervision of a trained, certified teacher, shall not be approved as specialty training, except as provided for under the standard provisions of the Advisory Board.

16. That the Board of Trustees give consideration to the problems relating to the specialty certification of osteopathic physicians and surgeons of California.

17. That the Board of Trustees direct the continuation of the Committee on Standard Nomenclature.

The report from the Office of Education revealed the 1960-61 enrollment of 1944 for the six osteopathic colleges shows an increase of 29 over the enrollment of 1959-60, and is the largest in the history of osteopathic education. They report the enrollment of 1961-62 will show a decrease of about 35 students.

The above figures are based on six osteopathic colleges and no publication was made not to include the Calif. College since there is a legal possibility of regaining or maintaining this educational institution. The entire session of the House of Delegates was dominated by the atmosphere of the California situation which at first seemed pessimistic but resolved in a

more confident and determined environment to work for a unified osteopathic profession.

## Texas Academy to Sponsor Seminar

The Texas Academy of Applied Osteopathy will sponsor a one and one-half day Seminar, September 30 and October 1, at the Villa Capri in Austin. Principal instructor will be Dr. T. J. Ruddy of Los Angeles. He will be assisted by Dr. Reginald Platt of Houston.

Dr. Ruddy has never conducted a course in this section of the nation before, so this is an outstanding opportunity to gain some of his wonderful knowledge.

The \$25 registration fee may be sent to Dr. Catherine K. Carlton, 815 W. Magnolia, Fort Worth 4, Texas. Room reservations may be made directly with the Villa Capri. Please make your reservations by September 15!

(Texas U. will play Texas Tech in the evening of September 30.)

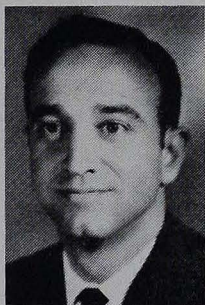
## Good Locations

MIDLAND, TEXAS (Pop. 21,713) Good location available for a D.O. who wishes to practice in this area. Building available for rent or lease on a month to month basis. For information contact Dr. R. N. Voss, 1404 W. Wall, Midland, Texas.

FRANKSTON, TEXAS (Pop. 953) New oil field town with good trade territory needs good osteopathic physician. Only one other physician there. Good office building available. This is a splendid opening for young physician. For further information contact Mrs. P. W. Burtis, Box 186, Frankston or the Superintendent of Schools, Mr. J. C. Hicks.



# Financial and Business Activities of A.O.A.



SAMUEL B. GANZ, D.O.  
Corpus Christi, Texas

The financial position of the American Osteopathic Association according to the financial statement at the end of this report is very strong. The American Osteopathic Association started out the fiscal year on June 1, 1960 with \$108,411.06 in cash and a reserve in stocks and bonds of \$335,388.17 for a total of \$443,799.23. The profit for the year was over \$3,000.00 in spite of the expenses incurred as a result of the California situation.

In an apparent contradiction of this strong financial position, amendments No. 12 and No. 13 which provided for a general increase in dues, were passed unanimously by the House of Delegates. These amendments increased regular members' dues from \$75.00 to \$100.00 annually. They also increased dues for the second and third year of practice i.e. from \$20.00 to

\$30.00 for the second year men and from \$37.50 to \$50.00 for the third year men. A dues increase at this time is imperative if the American Osteopathic Association is going to be able to operate in the black this year. The loss of membership that has occurred in California will cost us as much as 20% of the American Osteopathic Association income from membership dues and a corresponding loss figure from advertising income. Since dues and advertising comprise 75% of the American Osteopathic Association's total income, substantial losses from these sources will be costly. The dues increase passed by the House of Delegates will make up for most of these losses.

A few hours after the dues increase had been passed, Dr. Eveleth dropped a bombshell on the House of Delegates in the form of House paper No. 21 which read as follows

"That a budgetary item of \$500,000 be allocated to promote the public health by preserving and extending the availability of osteopathic health care in all the states and that a \$75.00 assessment per member be levied to create this fund."

Doctors Eveleth, Harvey, Northrup, Naylor and Pearson spoke for the assessment and this issue was discussed at great length. This discussion brought out clearly the nation-wide

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danger involved in changing the practice law in California to exclude the osteopathic physician from gaining license to practice medicine and surgery in that state. If the American Medical Association and the California Medical Association are successful in destroying the osteopathic practice act in California, they could then use the California decision as a blueprint to implement the destruction of our profession state by state. The general feeling of the House of Delegates is that this attack on the profession in California constitutes an attack on the whole profession and that the American Osteopathic Association will have to fight this battle sooner or later. The earlier we make our stand the better chance we have of succeeding and therefore we must stop this American Medical Association aggression at all cost.

Within the next twelve months an election will be held in the state of California to determine whether the

people want to keep the osteopathic practice act they voted into law in 1922. The American Osteopathic Association must have funds with which to get our message to the people of California. It costs large sums of money to put this message across and we must have these funds available. If the people vote to maintain the osteopathic practice act, the American Medical Association "package deal" will be cancelled and the battle for California will be won. There is of course much legal expense involved and the \$500,000 will help pay the above expenses.

It is possible that further expenditures will be necessary but even if this is so, the House of Delegates feels we must expend any amount necessary to bring the California situation to a successful climax.

Your Texas delegation voted unanimously for this assessment as did the House of Delegates.

## AMERICAN OSTEOPATHIC ASSOCIATION GENERAL FUND—BALANCE SHEET

May 31, 1961

### A S S E T S

#### CURRENT ASSETS:

	1961	1960
Lake Shore National Bank, Chicago .....	\$ 75,439.67	\$ 48,436.09
Petty Cash .....	75.00	75.00
Bank of Montreal .....	186.72	713.06
U. S. Treasury Bills .....	345,970.00	538,963.56
Accounts Receivable—Net .....	41,100.53	65,974.28
Assessments Receivable—Net .....	81,000.00	—0—
Dues Receivable—Net .....	2,165.13	1,987.58
Loans Receivable—McCaughan .....		
Education Fund .....	50,000.00	50,000.00
Travel Advance .....	15.00	820.00
Interest Receivable .....	—0—	102.05

#### INVENTORIES:

Big Ben and films .....	126.00	126.00
"Health" paper stock and envelopes .....	1,767.04	3,569.58
Journal and D.O. paper stock and envelopes .....	13,267.80	15,189.14
Office supplies, literature, etc. ....	21,552.15	15,117.94
Unexpired insurance .....	1,542.67	1,685.78

TOTAL CURRENT ASSETS .....	\$ 634,207.71	\$ 742,760.06
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## INVESTMENTS:

Harris Trust Investment Agency Account .....	270,723.97	311,272.95
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## FIXED ASSETS: (less depreciation)

Land and building, 212 E. Ohio Street .....	272,712.75	279,198.50
Furniture, office equipment, library .....	42,069.60	46,626.16
Audio-Visual equipment .....	139.08	220.47

## DEFERRED ASSETS:

Deposit accounts .....	7,685.68	5,485.93
Employee loans (Pension Trust Premiums) ....	2,334.22	1,934.06
Prepaid convention expense .....	3,133.14	6,529.40
Prepaid membership expense .....	—0—	525.07
Prepaid publication expense .....	1,536.85	1,030.96
Prepaid miscellaneous expense .....	5,373.50	—0—

## CASH RESERVES:

Pension trust account .....	500.00	500.00
Building fund .....	277.77	277.77
<b>TOTAL ASSETS</b> .....	<b>\$1,340,694.27</b>	<b>\$1,396,361.33</b>

## LIABILITIES AND SURPLUS

### CURRENT LIABILITIES:

Accounts payable .....	\$ 13,970.62	\$ 12,191.99
Credits and refunds .....	566.26	443.87
Advance dues .....	238,778.45	280,000.00
Advance hospital inspection fees .....	61,620.00	59,245.00
Advance specialty re-registration fees .....	4,250.00	4,720.00
Advance directory double listing .....	—0—	57.00
Advance convention exhibit income .....	—0—	30,150.00
Advance convention registration .....	—0—	1,932.00
<b>TOTAL CURRENT LIABILITIES</b> .....	<b>\$ 313,185.33</b>	<b>\$ 388,739.86</b>

LIFE MEMBERSHIPS .....	34,050.00	32,550.00
RESERVE FOR BUILDING PROGRAM .....	51,124.65	35,335.80
SURPLUS AS OF MAY 31 .....	942,334.29	939,735.61
<b>TOTAL LIABILITIES AND SURPLUS</b> ...	<b>\$1,340,694.27</b>	<b>\$1,396,361.33</b>

## MEDICAL BOARD TO MEET

The next meeting of the Texas State Board of Medical Examiners when examinations will be given and reciprocity applications considered is scheduled for November 30th, December 1st and 2nd, 1961, at the Hilton Hotel, Fort Worth, Texas.

Completed examination applications must be filed with their office thirty days prior to the meeting date.

Completed reciprocity applications must be filed sixty days prior to the meeting date to be given consideration.



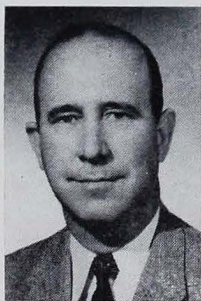
# Hurst General Hospital Construction Begins

—From Daily News-Texan, May 30, 1961



Dr. Phil Russell (right with shovel) of Fort Worth, secretary of the Texas Association of Osteopathic Physicians and Surgeons, assists Dr. V. L. Jennings in breaking ground for the new \$500,000 hospital at Pipeline Rd. and Brown Trail, Bedford. Builder, other doctors and Mayors look on approvingly.—News Texan photo by Bill Austin.

## Report On Bureau of Research and Bureau of Hospitals



M. G. HOLCOMB, D.O.  
El Paso, Texas

The Bureau held its annual meeting April 21-23, 1961 at the Kirksville College of Osteopathy and Surgery. The primary purpose of the meeting was to review the progress of those investigators who had received AOA support during the current year and to consider applications for new or continued support.

From these discussions a new emphasis in Bureau activity was agreed upon and specific suggestions by which



research in osteopathy can move toward its full potential were made.

Grants-in-aid from the American Osteopathic Association during the 1960-61 fiscal year supported, completely or in part, the following projects:

1. Effect of Muscle Hypertrophy on the Myoneural Junction.

2. Vital Intracellular Fluorescence with Induced Metabolic and Endocrine Tissue.

3. Peripheral Nerves and Neuromuscular Apparatus as Affected by Antibiotics.

4. Clinical Significance of Cholesterol Distribution in Lipoprotein Fractions of Normal and Pathological Serum.

5. Effects of Isotonic and Isometric Exercise on the Strength of Antagonistic Muscles.

6. Continued Studies in Somatic-Autonomic Interchange and Related Phenomena.

7. Functional Characteristics of Normal and Abnormal Body Mechanics.

8. Influence of Myofascial and Connective Tissue Irritation on the Function Morphology and Cytochemistry of Nervous Tissue.

9. Components of the Action Potential and Liberation of ACh.

10. Support of a Student Research Training Program.

11. Funds to Develop a Biochemistry Research Laboratory.

The Bureau received 13 applications for grants-in-aid for the 1961-62 year. The requests total \$110,881.

The Bureau agreed that perhaps the most critical area in osteopathic research, and the one which should receive increased attention in the future, is the shortage of adequately trained research personnel. If researchers can be recruited and supported during their training they could be expected to advance to a point where they could seek and expect to receive governmental or other support for their projects.

In addition to gradually increasing the numbers of men engaged in re-

search this program could serve to raise the quality of research activity. The understanding that an individual must prepare himself to qualify for governmental support would serve as an impetus, the Bureau felt, for the highest quality work possible.

In reference to *Bureau of Hospitals*: The spring meeting of the Committee on Hospital, considerable time was devoted to a discussion of the new inspection program and arrangements for the pilot study. Fourteen hospitals have been selected to not be inspected this year, and another twenty-three were selected for team inspection. Seven teams, ranging from two to five members per team, were selected and instructed to conduct inspections between July 15 and September 1, 1961.

THE RECOMMENDATIONS WERE PASSED BY THE BOARD OF TRUSTEES AND HOUSE OF DELEGATES.

A. That a target date for the imple-

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WILLIAM H. BROWN, D.O.

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mentation of Specialty College participation in the inspection and evaluation of new residencies in their respective specialties be set for January, 1962.

B. That the Board of Trustees inform the Specialty Colleges of the date of anticipated implementation.

C. That the Board of Trustees instruct the Committee on Hospitals to have a representative meet personally with the various specialty colleges to explain this program and direct them to cooperate in implementing the program.

New questions and problems appear to be developing regarding profit hospitals and their place in the hospital system. New restrictions are being placed upon their organization. Likewise some health insurance organizations are considering limiting the providing of benefits to hospitals accredited or approved by national accrediting organizations.

The more stringent enforcements by the Internal Revenue Service of the requirements and regulations applicable to non-profit tax exempt charitable hospitals is another sign of the increasing public interest. A tax-exemption memorandum incorporating applicable Internal Revenue Rulings should be given periodic study and review by administrative officers of such institutions.

Some discussion was given HOSPITAL UTILIZATION COMMITTEES.

A "hospital utilization committee" in the case of any hospital means a committee, composed of physicians, or of one or more physicians and other professional personnel, which reviews (from the standpoint of the necessity therefor) admissions into, the duration of stays in, and the services furnished in such hospital.

The only new development affecting the use by osteopathic physicians and surgeons of public tax supported hospitals was the action of the Joint Commission on Accreditation of Hospitals

in September, 1960, adopting in toto the Listing Requirements of the American Hospital Association thus permitting D.O.s to be appointed to the staffs of accredited hospitals, whether governmental or non-governmental in ownership, under prescribed conditions. The first joint staff hospital accredited by the Joint Commission was the Boone County Hospital, Columbia, Missouri.

At the present time only a few joint staff hospitals are Approved or Registered by the A.O.A., while 21 joint staff hospitals are Listed by the American Hospital Association. 8 of the 21 hospitals Listed were non-governmental in ownership, although not necessarily due to such fact, not the recipients of public funds.

### Address in General

"And what is your address?" I asked my patient as I prepared to take his history.

"Just put it General 'Lectric," he replied. "We gets our mail at the post office."—L.R.B.

### Anesthesia Unnecessary

The hillbilly's teen-age son was to have an operation. I explained that, with an anesthetic, the boy wouldn't know a thing was happening.

"Save your time, Doc," the father remarked. "He don't know anything now."—A.T.

### Deceased

Vera Gorrell, wife of Dr. William E. Gorrell, Kerrville, Texas, died July 2, 1961 at the hospital in Kerrville.

\* \* \*

Frida Diver, wife of Dr. G. W. Diver, Elsa, Texas died June 25, 1961 in a hospital in Monroe, Wisconsin.



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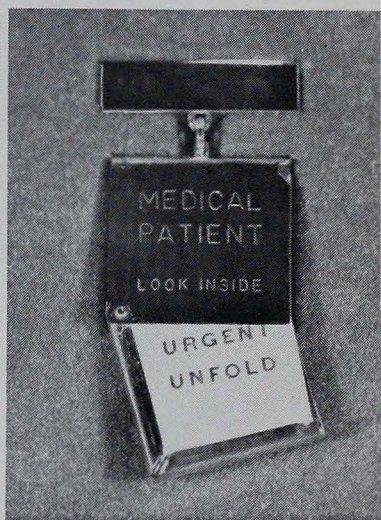
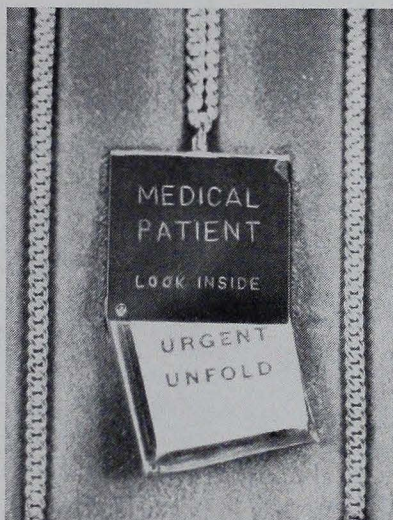
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# Report of Activities of Bureau of Public Education On Health and Bureau of Public and Industrial Health



ELMER C. BAUM, D.O.  
Austin, Texas

The benefits accruing to the public and to the profession from having representation on state boards of health or welfare are now recognized in nearly all states. The health and welfare programs of the states are an important part of the overall governmental program of each state, and the amounts of expenditures as well as scope of the programs are constantly on the increase. The osteopathic profession as one of the two professions whose members are licensed as physicians and surgeons needs to participate in the development, planning, and administration of these programs so that maximum benefits can accrue to the public from their administration. Doctors are particularly well qualified to serve on such boards because of their experience at the county or city level with the administration of such plans and the needs of the people. The role of the states in health and welfare programs will continue to increase in the future and the profession will be better advised and informed if it can secure representation upon these important state administrative agencies. In a recent survey of all

the states it was found that Texas was far in the lead in the number of county and city Health officers.

The A.O.A. Committee on Medical Care Plans and the Bureau of Public Education on Health both distributed to the divisional societies information concerning the Medical Care for Aged Programs which was created as a part of the 1960 Social Security amendments enacted by the United States Congress in August, 1960. In some states new laws were required while in others the responsible state agency promulgated regulations implementing this program by which persons over 65 years of age, not receiving old age assistance, may qualify for medical care under the new federal-state program. Seldom has the profession been better advised concerning the details and plans for the implementation of a new medical care program at the state level. In some states even now laws are required to permit the state government to participate in this federal program of matching funds for the medical care of the aged. The divisional society Bureaus of Public Education on Health in those states have given particular attention to such legislative proposals to ensure that the required legislation is in the public interest and permits all qualified physicians and surgeons to provide care thereunder.

Even if new federal legislation is enacted in the next year providing for medical care under the Social Security Act—OASI provisions, the need in each state for a Medical Care for the Aged Program will exist nonetheless because of the fact that not all persons over 65 are covered by the OASI provisions of the Social Security Act.



No letup, therefore, in the interests of the divisional societies in each state in the 1960 Medical Care for the Aged Program should occur. In June, 1961 Kerr-Mills type plans for the aged were in effect in eight states, Puerto Rico and the Virgin Islands. Proposed legislation was under consideration in many states.

The divisional societies in Florida, Georgia, Hawaii, Minnesota, Nebraska, Nevada and New York sponsored legislative proposals relating to practice acts. In Montana and North Carolina serious consideration was given to the introduction of such legislation. In Florida, Texas and West Virginia the profession was concerned with proposed bills relating to scholarship-loan bills. In other states interest was directed to bills relating to the medical examiner system, privileged communications, medical practice corporation acts, state board of health, hospital records or committees, medical assistance for the aged, and a wide variety of similar bills affecting the public health.

Bureau members have maintained their contacts with the limited practice right states and visits have been made by Bureau members or representatives to the states of Arkansas, Louisiana, Maryland, Minnesota, Montana and Nebraska. In addition, representatives of the Bureau have met with the officials of the divisional societies in Georgia and North Carolina. Correspond-

ence has been carried on with the divisional societies of Idaho and South Carolina. An effort has been made to stimulate the interest of the one D.O. in Alaska to do something about the situation in that state. Mississippi and North Dakota are the only limited practice right states with which the Bureau has encountered difficulty in maintaining active contacts. No substantial results were secured during the year in alleviating the restrictions upon the practices of doctors of osteopathy in the above named states, but it is believed that once again this year progress was made. This profession can be proud of the efforts of the D.O.s in the limited practice right states to bring about an improvement in the licensing laws in their areas. The time, effort and expenditure of funds on their own personal parts required to advance such public education on health objectives are not frequently recognized by D.O.s who have never encountered or practiced under such restrictions.

In addition, in some of the unlimited practice right states the divisional societies reviewed their state laws to determine if the group of limited practice right licensees in their state could qualify for an unlimited practice right license so as to put all licenseholders in the state upon the same legal basis. The Bureau has been encouraging such evaluations of the practice rights of D.O.s in all states so as to further the

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objective of the Profession of securing unlimited licensure in all states. In Illinois additional persons were issued the unlimited license to practice medicine in all its branches under the 1959 law enacted in that state. Statutory changes in the practice acts were enacted in Nevada and New York to clarify their unlimited licensing laws.

Members of the Bureau met with the officers of the Osteopathic Physicians and Surgeons of California in Miami in January, 1961. Offers of the Bureau's assistance and advice to the O.P.S.C. were made then as well as again on May 5 when a legislative situation in California which had developed was referred to the Bureau at that time. Senate Bills 1189 and 1190 had been introduced proposing amendments to the Physician's and Surgeon's Code of California permitting D.O.s acquiring an M.D. degree to elect to hold themselves forth as M.D.s (but no longer as D.O.s) and providing for the supervision and the annual registration of such persons licensed after such election by the Board of Medical Examiners and not by the Board of Osteopathic Examiners. The offers of assistance, including a visitation made by the Bureau, were not however used by O.P.S.C. S. B. 1189 and 1190 at the time of the preparation of this report had been passed by the Legislature and were waiting action of the Governor. The legislative plans of the California Medical Association affecting osteopathy include the amendments to the Physician's and Surgeon's Code and Osteopathic Initiative Act which were set forth in detail in the Agreement entered into by the two associations in May of this year. The Initiative Act will have to be defeated by a referendum vote of the people of California to remove the Osteopathic Law. This will be voted on in the fall of 1962.

Increased interest and use of public hospitals by D.O.s throughout the country has resulted from the action of

the Joint Commission on Accreditation of Hospitals in September, 1960 adopting in toto the Listing requirements of the American Hospital Association. These Listing requirements permit the staffs of Listed, and now Accredited hospitals, to be composed of doctors of osteopathy and doctors of medicine. The Bureau distributed to all of the divisional societies detailed information in regard to this action of the Joint Commission and has furnished copies of the Listing standards as well as related information upon request to members of the profession.

Joint staff hospitals have been Listed by the American Hospital Association and the Joint Commission on Accreditation of Hospitals has applications for accreditation of hospitals which have already been Listed as joint staff institutions subsequent to the A.H.A. action of August, 1959. The first joint staff hospital accredited was the Boone County Hospital, Columbia, Missouri. There are about 6845 Listed hospitals in the United States and of this number 3600 are Accredited by the Joint Commission on Accreditation of Hospitals. In addition, some joint staff hospitals are registered or approved by the American Osteopathic Association itself under its registration and approval programs.

The annual licensing statistics for state licensing boards prepared jointly by the Bureau of Public Education on Health and the American Association of Osteopathic Examiners were distributed in November, 1960. On December 27, 1960 the questionnaire on which information for the 1960 licensing statistics is compiled was forwarded to the state licensing boards.

In addition to the licensing statistics prepared by the A.O.A. each year the American Medical Association publishes in its State Board Number annually statistics which it compiles for solely boards of medical examiners. The A.O.A. and the A.M.A. statistics vary only slightly during each year. The



D.A. statistics, however, encompass all state licensing boards while the A.M.A. restricts its publication regarding osteopathic licensure to those medical boards apparently which furnish it information. The Journal of the A.M.A., May 27, 1961, this year published that 313 D.O.s were examined by boards of medical examiners and that 187 passed and 126 failed. A failure rate for D.O.s of 40.3 was thus published. Out of the 126 D.O.s who failed the licensing examination 103 of the failures occurred in Illinois under the 1959 Grandfathers Act. Were it not for this statistic, the passing rate would have been 84% or 129 passing out of 152 who took medical board examinations in other states. In Kentucky 39 more D.O.s not included in A.M.A. statistics passed the Kentucky State Board of Health examination and the inclusion of this number would have raised the passing rate to 88% exclusive of the Illinois figures which are largely related to persons covered by the grandfathers' clause. The failure rates of state boards of medical examiners varied considerably. Twenty-one boards of medical examiners had no failures during the year 1960 while in Massachusetts 57.1 failed, in New York 31.9, in Washington 24.4, and in Connecticut 38.5, almost exclusively M.D.s. A.M.A. statistics also indicated that boards of medical examiners issued 174 licenses by reciprocity or endorsement. No less than 365 D.O.s were thus licensed by Boards of Medical Examiners in 1960 alone. The A.O.A. Central Office will furnish to D.O.s requesting copies the complete compilation of the licensing statistics prepared by the A.O.A. and A.A.O.-M.E.

There are eighty-three recognized colleges in the United States that train physicians and surgeons—seventy-seven schools confer the M. D. degree and six schools confer the D. O. degree.



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# Report On A.O.A. Department of Professional Affairs



LOREN R. ROHR, D.O.  
Houston, Texas

My assignment is the Department of Professional Affairs, except for the Committee on Colleges and the Committee on Hospitals, which will be reported upon by other members of the Texas delegation to the American Osteopathic Association House of Delegates. The Department of Professional Affairs is made up of many Bureaus and Committees. I shall give you an insight into the significant activities of this department.

## Committee On Student Loan Fund:

Dr. Robert N. Evans of Michigan is Chairman. From the American Osteopathic Association Loan Fund were issued thirty nine loans in the sum of \$28,575.00, and from the Foundation Fund, 106 loans in a total amount of \$76,730.00. The combined total shows 145 loans in an amount of \$105,305.00, an increase over last year of 6.6% in number of loans issued and 17% in amount loaned. During the fiscal year just ended, fifty four students completed repayment of their loans.

## Bureau of Research:

Dr. Otterbein Dressler of Michigan is Chairman. This Bureau has spent

a great deal of time considering objectives, scope and limitation of research under Osteopathic auspices. Particular emphasis was placed on the necessity of establishing a priority system in the Bureau's grant program so that the most pressing needs of research in the profession can be met and so that support will not parallel or compete with the increasing funds being made available by the National Institutes of Health and other agencies.

Given these realities, the Bureau agreed that perhaps the most critical area in Osteopathic research, and the one which should receive increased attention in the future, is the shortage of adequately trained research personnel. If researchers can be recruited and supported during their training, they could be expected to advance to a point where they could seek and expect to receive governmental or other support for their projects.

## Committee On Ethics:

Dr. Wesley Larsen of Illinois is Chairman. This Committee handles, by correspondence, ethical matters referred to it. Generally it is the policy of the Committee to refer such matters to the Committee on Ethics of the divisional society of the state of the member involved. The divisional society Committees on Ethics are very cooperative and are doing an excellent job. When the physician involved is not a member of the divisional society, this Committee handles the correspondence with the member directly.

## Committee On Membership:

Dr. John W. Hayes of Ohio is Chairman of this Committee. During the past year the Committee on Membership has used every means at its dis-



posal to increase the total membership. Two letters to non-members were sent out over the signature of the Chairman of the Committee on Membership and one over the signature of the Executive Director of the American Osteopathic Association. The total membership as of June 1, 1961 was 11,114, which is an increase of 247. This Committee has done an excellent job in the face of "the California situation."

#### **Committee On Veterans' Affairs:**

Dr. Robert E. Morgan of Texas is Chairman. I feel two sentences would very adequately give the feelings of Dr. Morgan. The Osteopathic profession campaigned earnestly for equal rights in the Veterans Administration and received them. Since that time too few doctors have applied for positions in the Veterans Administration.

#### **Committee On Constitution and By-Laws:**

Dr. J. Scott Heatherington of Oregon is Chairman of this Committee. Several constitutional and By-Law changes were proposed. The most significant changes that were passed by the House of Delegates are as follows: Increase in dues from \$75.00 to \$100.00; a requirement of divisional society membership as a requisite for American Osteopathic Association membership; and changes in Code of Ethics to clarify Chapter II.

#### **Committee On American Osteopathic Assn. Publications:**

Dr. Wesley B. Larsen of Illinois is Chairman. This Committee has spent the year in search of an editor but with little success. During the meeting in Chicago they signed a contract with Dr. George W. Northup for one year, as editor of American Osteopathic Association publications. This is a stop-gap measure until a qualified permanent editor can be found.

#### **Some of My Conclusions:**

Every effort was made to place all the facts before the House of Delegates so it might make sound policies. The facts seemed to add up to one course of action, it was imperative that we remain a separate and distinct School of Medicine as this was to the best interest of the public health.

Never have I left a meeting of the House of Delegates more convinced that this body had made up its mind to a course of action and dedication to a purpose, than this time. A strong feeling was manifested that we must use all the resources at our disposal to carry out our objectives.

I suppose the best answer for the reasoning behind a dues increase was a simple statement of facts. With an anticipated decrease in total dues income for the year 1961-62 and an expanding program on the other hand, it would require an increase in revenue from some source. The logical answer seemed to be from an increase in dues per member.

Our state has long felt the need for dual membership. Dr. Phil Russell has championed this view for several years. This year the House of Delegates passed changes in the By-Laws making it mandatory that in order to be an American Osteopathic Association member one must be also a member of his divisional society.

During the last few years Texas has felt a drouth as to membership in the Bureaus and Committees of the American Osteopathic Association. This year we can brag of several accomplishments in this field. Dr. Elmer C. Baum was returned to the Bureau of Public Education on Health; Dr. J. Warren McCorkle is in the Bureau of Disaster Medical Care; Dr. Robert E. Morgan, Chairman of Committee on Veterans' Affairs; and Dr. Loren R. Rohr, Chairman of Bureau of Organizational Affairs. We also captured a three-year



term on the Board of Trustees. Things are looking up for Texas in the American Osteopathic Association.

It is the desire of all members of your delegation to the American Osteopathic Association House of Delegates to give you all the factual information possible. We want Texas to be an informed divisional society. If, by reading our reports, you have any questions, just write or call and we will be glad to relay any information that we possess.

## Attends Postgraduate Course At Cornell University Medical College



CHARLES H. BRAGG, D.O.  
Hurst, Texas

Dr. Charles H. Bragg of 849 Brown Trail, Hurst, Texas attended the Sixth Annual Postgraduate Course in Fracture and Other Trauma held at Cornell University Medical College, New York City, June 12-20.

The organization of the course included fifty-five lecture periods, from 30 minutes to one hour, and a series of demonstrations of application of traction and plaster of paris. Discussion periods followed each lecture. At the end of each day, a conference was held, led by various members of the faculty of Cornell University Medical College, all of whom are associated with the

New York Hospital and Hospital's for Special Surgery, and Bellevue Hospital.

The purpose of the course was to give to the practicing surgeon, a practical review of the current methods used in the treatment of each subject under consideration.

The first of these series of annual postgraduate courses on "Fracture and Other Trauma" was presented by Cornell University Medical College in 1956, and was planned to cover the entire field of Trauma, including general principles of trauma and the injuries sustained in specific areas, involving many specialties.

This year, 97 physicians from the United States, Chile, B.W.I., Venezuela, Mexico, South Africa, and Aberdeen, Scotland, attended the course. Twelve of those attending were Osteopathic Physicians. The course was under the direction of Dr. Preston Wade.

## A FORECAST FOR 1966

On Page 134 of the August issue of *Medical Economics* you will find an article with the above title.

Quoting from this article on Page 140 we find the following:

"Some G.P.s may even be graduates of what were once schools of osteopathy.

You doubt it? So do some medical leaders. But here's what the consensus seems to be:

Medicine and osteopathy appear headed for some sort of merger. When it occurs—which could be by 1966—nearly all D.O.s (by then, M.D.s) will enter general practice. They'll bring with them at least a few manipulative techniques, and these may well be handed down to their sons who enter practice. Meanwhile, the osteopathic schools that become medical schools will also become strongholds of generalism.

All the above is admittedly speculative. But you're not advised to bet money that it *won't* happen."



# Executive Secretary's Travelogue



Dr. P. R. Russell, right, executive secretary of the TAOP&S is presented a plaque from the College of Osteopathic Medicine and Surgery, Des Moines, Iowa, appointing him COUNSELLOR AT LARGE "in recognition of his many years of devotion in furthering the interests and welfare of this institution." The presentation was made by Dr. Merlyn McLaughlin, President of the college.

*In writing the travelogue this month,* the executive secretary is reminded of a line in the famous film, "Green Pastures" in which the angel Gabriel made the statement that even being a God is not a bed of roses. I want to assure this profession that being an executive secretary can sometimes be thorny and at the end of a fiscal year, it is worse than the depths of Hades, particularly when the Board of Trustees issues instructions to drop all members whose dues are not paid in full by July 1st and then allows him 30 days to automatically reinstate them upon payment of their dues. Those who are permanently dropped as of August 1st must formally re-apply should they desire membership. Believe me, the past

month has been difficult in trying to convince the membership that the Board's orders must be carried out. In enforcing the Board's directives, the executive secretary has become the goat and believe me, he is bleating. Unfortunately we are losing some members, but not many.

*Most of the month* has been taken up with general office procedures and travel has been at a minimum. However, on Thursday, July 6, the executive secretary left Fort Worth, by plane for Chicago to attend a meeting of the Awards Committee of the Association of Osteopathic Publications which was held that evening.

*July 7 and 8* were devoted to a meeting of the Society of Divisional Secre-



taries which program included attendance at the Conference on Health Insurance and Medical Care Plans. This was an extremely interesting program and one that we wish each member of this organization could have heard in order to better understand the problems of third party medicine which are confronting the profession. The program was indeed worthwhile and the executive secretary is thoroughly convinced, from the plans offered as solutions for protecting our voluntary system of health care, that Texas is far in the lead in its activities in dealing with insurance problems. However, he was astounded to hear Mr. Charles L. Massie, President of the Federal Postal Hospital Association give a most unusual and shocking report on the abuse of insurance. His report sounded so ridiculous that the executive secretary felt certain nothing like this could ever happen in Texas. Then, Mr. Milton McKay, attorney for the AOA, whispered in the executive secretary's ear that Mr. Massie was speaking about a Texas case! Unfortunately Mr. Massie had never heard of our activities concerning insurance matters and Mr. McKay advised him to confer with the executive secretary regarding the matter. This Mr. Massie did and now the executive secretary wishes he had not been in Chicago. It has been a mess and not entirely the fault of the doctor involved, but has caused considerable difficulty as it presents a problem entirely foreign to any we have encountered before.

*The business session* of the Society of Divisional Secretaries was held on Saturday afternoon, July 8, and thank God the executive secretary is now past-president of this organization. He certainly hopes he does not get hooked into another office.

*On Sunday, July 9,* the executive secretary attended the meeting of the A.O.A. Board of Trustees which was one of the most interesting meetings he has ever had the privilege of at-

tending. He picked up considerable information in reference to the California situation. Of course, from that time on he was in constant attendance of the House of Delegates meeting which began at 1:00 p.m., with the exception of time taken out for conferences with leaders of various divisional societies of the A.O.A. He left Chicago on July 11 (one day ahead of the closing of the House of Delegates) as he felt there was no more good or damage he could do and he returned to Fort Worth.

*From July 13 - 25* he was in the office and his time was taken up with conferences with prospective students, meeting with visiting students from our osteopathic colleges and carrying out the detailed office procedures, particularly that having to do with membership.

*On Tuesday, July 25,* the executive secretary left for Houston and on the following morning was at Community Hospital in a conference with President G. W. Tompson. At 11:30 a.m. they proceeded to Prudential Life Insurance Co. for a meeting with Mr. Smith and Mr. Belcher of their claims department and with the two medical directors of that company. They invited Dr. Tompson and the executive secretary for lunch in their beautiful guest dining room and for 2½ hours had a lengthy session over an insurance problem. We frankly never found a

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more cooperative group than the representatives of this company and there was a wonderful meeting of minds and a good understanding of the problem at hand.

At 2:30 p.m. Dr. Tompson and the executive secretary were at the Houston office of Travelers Insurance Co. where they remained until almost 6:00 p.m. discussing the problem that had been presented to the executive secretary in Chicago by Mr. Massie of the Federal Postal Hospital Association, which involved not only their organization but Travelers Insurance. After an hour's discussion with Travelers Claim Department, the doctor involved in this was requested to come down to the company office which he did. It is felt that a great deal was accomplished and the fault in this case was more or less that of the policy holder. However both Travelers Insurance and the doctor involved both admit they themselves had flubb-dubbed. Dr. Tompson, as President of the TAOP&S, had been requested to accompany the executive secretary to these insurance offices more or less to lend his advice and support, as these matters were a little too much for one man to handle alone.

That evening the executive secretary had dinner at the home of Dr. and Mrs. G. W. Tompson and remained

for a meeting of the officers of the beautiful new professional building in Jacinto City which has just been completed.

*The following morning, July 27,* the executive secretary was at the Houston Osteopathic Hospital where he did over two hours work telephoning members of the profession to discuss problems that required personal conversation. He is certain Houston Osteopathic Hospital wished he had had a private line rather than tying up their switchboard for so long but this method beat driving all over Houston in the terrific heat and humidity of that city.

At 3:00 p.m. he was at Doctors Hospital where he spent considerable time with the administrator, Mr. Hal Coker, and with several members of the staff, after which he returned to Azurillas for a wonderful Italian dinner. Following dinner he left for Fort Worth and was back in the office on Friday, July 28.

*At this writing, July 31,* the executive secretary is preparing for a meeting at 7:30 p.m. of the Membership Committee at the state office at which time the Committee will drop a few members, accept a few members and remit the dues of a few members. It is to be hoped he survives to see you all again next month!

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# Texas Osteopathic Radiological Society to Conduct Outstanding Galveston Symposium On Urology



Jack Tar Hotel. Site of the Texas Osteopathic Radiological Society's Urological Symposium on September 23 and 24. All Texas D.O.s are welcome to attend.

On September 23 and 24 the Texas Osteopathic Radiological Society will conduct a symposium *DISEASES OF THE URINARY TRACT* at the Jack Tar Hotel in Galveston. Two urologists and a radiologist will be guest lecturers. Members of the Society will also participate. It has been emphasized by Program Chairman, Chas. D. Ogilvie, that all Texas D.O.s are welcome to attend . . . especially those who engage in general practice.

Registration will begin on Friday, September 22 at 7:00 P.M. At this time a reception and cocktail hour will be provided through the courtesy of the Ansco Company. Professional events on Saturday will include a breakfast meeting at which the subject "Un-

toward Reactions to Urological Contrast Media" will be discussed in round-table fashion. At 5:00 P.M. Dr. James H. Kritzler will conduct a urological film reading session. The remainder of the day (Saturday) will be "free time" for the registrants and their families.

High point of the week-end entertainment will be a Beach Party and Barbecue which will be provided by the Jack Tar at 7:00 P.M. on Saturday night. Entertainment at the party will include an orchestra for dancing. The ladies will be honored at a coffee on Sunday morning and a luncheon for all guests and registrants will be held on Sunday noon. The Convention will definitely be a "family affair." If suf-



ficient interest is shown, an excursion to San Jacinto Battlefield and the Battleship Texas will be arranged on Sunday morning for the children.

The Society is fortunate in having an excellent slate of speakers to participate in the symposium. The urologists include Dr. A. A. Choquette who now practices in Fort Worth and is a former Professor of Urological Surgery at the Kansas City College and Dr. D. E. Marinelli who has recently moved to Dallas from Los Angeles, California where he was engaged in his specialty. Doctor Marinelli received his training in urology at the Los Angeles County Hospital. The guest radiologist is Dr. R. K. Widney of Denver, Colorado. Doctor Widney is a certified Roentgenologist and is Chief of the Department of Radiology at the Lamb Memorial Hospital. The program schedule has been arranged to finish at 3:00 P.M. on Sun-

day for the convenience of those who have long distances to travel.

Lodging (single rooms to family suites) is available at the Jack Tar. The Hotel has accorded special convention rates to the society in addition to the reduced winter rates that are in effect in September. The registration fees will be as follows:

Physicians: \$20.00 (includes luncheon and beach party)

Wives and other adult guests: \$15.00 (includes luncheon and beach party)

Children: \$5.00 (luncheon and excursion)

Physicians (program only): \$10.00

All Texas D.O.s, their wives and children are cordially invited to participate in this enjoyable and profitable week-end. Please notify Dr. Gilbert S. Rogers of Galveston, Local Program Chairman, of your intentions.

## **Texas Osteopathic Radiological Society**

### **Tenth Annual Fall Symposium**

### **Diseases of the Urinary Tract**

**Jack Tar Hotel**

**Galveston, Texas**

**September 22, 23 and 24, 1961**

### **PROGRAM**

#### **FRIDAY, SEPTEMBER 22**

7:00-10:00 P.M.—REGISTRATION AND RECEPTION ....(Courtesy Ansco)  
POMPAÑO ROOM

#### **SATURDAY, SEPTEMBER 23**

7:30- 8:30 A.M.—DUTCH TREAT BREAKFAST MEETING  
TARPOON ROOM

*Topic:* Untoward Reactions to Urological Contrast Media

*Moderator:* DR. CHARLES D. OGILVIE



8:30 A.M.- 5:00 P.M.—FREE TIME

Deep Sea Fishing (arrangement with Jack Tar); Bay Fishing;  
Excursion Boat Ride; Horseback Riding; Surf Swimming;  
Trip to San Jacinto Battleground

5:00- 6:00 P.M.—UROLOGICAL FILM READING SESSION  
POMPANO ROOM

*Moderator:* DR. JAMES H. KRITZLER

*Participants:* DR. R. K. WIDNEY, DR. D. E. MARINELLI,  
DR. A. A. CHOQUETTE, DR. R. E. MODDERS

7:00 P.M. —BEACH PARTY AND BARBECUE

## SUNDAY, SEPTEMBER 24

POSSIBLE EARLY MORNING TRIP TO SAN JACINTO  
BATTLEGROUNDS AND BATTLESHIP TEXAS FOR  
CHILDREN

9:00 A.M. —LATE REGISTRATION  
OAK ROOM

9:30 A.M. —TUMORS OF THE URINARY TRACT  
OAK ROOM  
DR. DANTE E. MARINELLI, *Urologist*, Dallas, Texas

10:00 A.M. —COFFEE AND ENTERTAINMENT FOR LADIES  
TARPON ROOM

10:30 A.M. —RECESS—COFFEE AND DOUGHNUTS  
OAK ROOM

11:00 A.M. —ROENTGENOLOGY OF THE URINARY TRACT  
OAK ROOM  
DR. R. K. WIDNEY, *Roentgenologist*, Denver, Colorado

12:15 P.M. —LUNCHEON FOR REGISTRANTS AND GUESTS  
CHARCOAL GALLEY

1:30 P.M. —MEETING TEXAS OSTEOPATHIC RADIOLOGICAL  
SOCIETY  
TARPON ROOM

2:00 P.M. —THE OBSTRUCTIVE UROPATHIES  
OAK ROOM  
DR. A. A. CHOQUETTE, *Urologist*, Ft. Worth, Texas

## REGISTRATION FEES:

Physicians: \$20.00 (includes luncheon and beach party)

Wives and other adult guests: \$15.00 includes luncheon and beach party)

Children: \$5.00 (luncheon and excursion)

Physicians (program only): \$10.00



# Nine Tarrant County Osteopaths Care for City's Winos

—Reprint 6 Column Story With Photos from FORT WORTH STAR-TELEGRAM

By BLAIR JUSTICE

Nine Tarrant County osteopathic physicians have a unique kind of medical practice.

Some of their patients have to be sprayed with DDT as the initial phase of treatment. Many have never had regular medical attention in their life.

These are Fort Worth's winos, the habitual drunkards who get picked up by police and work off their fines at the Fort Worth Rehabilitation Farm at Lake Worth.

Now, instead of rarely ever seeing a doctor, they have the nine osteopathic physicians caring for them.

## Weekly Checkup

The nine take turns spending an afternoon every week at the wino farm clinic, a one-story building containing a reception room, treatment room and a room with two hospital beds.

Occasionally, one of the rehabilitation residents is unable to make it to the clinic for examination and treatment. The doctor then goes to him—usually to the man's bunk in one of the three dormitories.

One building is behind a fenced enclosure. It houses "security" prisoners, those charged with misdemeanors who wear coveralls with a large "P" on the back. Other men at the farm are there on a voluntary basis, making attempts at rehabilitation.

The farm doctors treat an average of 20 patients a day, mostly for problems related to excessive drinking. They see a number of cases of sclerosis of the liver, of chronic inflammation of the stomach and even some delirium tremens.

The DT's, however, are rare, since most of the men at the farm have passed the acute phase of an alcoholic episode by the time they get there.

Some surgery is performed at the farm clinic, but it's minor. One operation recently involved the removal of a growth from a man's eyelid.

## Equipment Needed

The nine wino farm physicians are somewhat handicapped in lack of equipment and supplies at the clinic. They have had to rely in large part on equipment and supplies being donated or provided from their personal practices.

One of the nine drives 20 miles each way to spend his one afternoon a week at the farm. All are available for emergencies at any time. The Fort Worth Osteopathic Hospital and Lake Worth Osteopathic Hospital have taken some cases the doctors could not handle at the clinic.

Offering the voluntary medical care at the farm are Drs. A. H. Clinch, W. A. Griffith, D. J. Truitt, W. S. Williams, W. F. Baker, E. L. Phillips, Jr., G. J. Luibel, H. B. Stilwell and M. S. Miller. It was Dr. Clinch, a member of the reserve police officers association here, who initially contacted Police Chief Cato Hightower on setting up the clinic service at the farm.

All are reminded at the clinic of the alcoholic's creed, which is displayed on the wall:

"God grant me the serenity to accept the things I can not change, the courage to change the things I can—and the wisdom to know the difference."



# American Osteopathic Association

Office of

CARL E. MORRISON, D.O.

*Chairman: Council on Federal Health Programs*

1757 K. Street, N.W.

Washington, D. C.

July 14, 1961

## Washington News Letter

### **Social Security Amendments of 1961, Public Law 87-64, Approved 6-30-61**

The Social Security Amendments of 1961 (H.R. 6027) permits men to retire at age 62, with reduced benefits; raises the Federal share in expenditures for medical care for old age assistance from an average expenditure per recipient per month from \$12.00 to \$15.00; and raises self-employment taxes by 3/16 of 1 percent to 4.7 percent for 1962, 5.4 percent for years 1963-4-5, 6.2 percent for years 1966-7, and 6.9 percent thereafter. No change in tax base of \$4800.

### **MAA**

When the above Social Security Amendments Bill H.R. 6027 passed the Senate on June 26, it contained an amendment offered by Senator Humphrey preventing any State from denying free choice of doctor or hospital to recipients of medical care under the Kerr-Hills medical assistance for the aged program. The amendment was knocked out in Conference. This serves to point up the importance of stepped-up osteopathic vigilance in respect to State MAA plans. According to a January 8, 1961 staff report of the Senate Special Committee on Aging, some 25 States expect to have an MAA program in effect by January, 1962.

### **Health Insurance for the Aged**

The Chairman of the House Ways and Means Committee has set July 24

as the tentative date to begin hearings on the so-called King-Anderson elder-care bill, H.R. 4222, as to the extent of need for this, or other, legislation in the area of medical care for the aged, and as to the impact which this or alternative proposals might have on the utilization of hospitals by aged persons, quality and availability of hospital care, utilization of nursing homes and utilization of hospital, diagnostic, out-patient facilities, and the quality and the availability of diagnostic out-patient service, and the cost of the proposal.

### **Restricted Retirement Funds**

The Senate Finance Committee has scheduled a one-day hearing July 25 on the Keogh self-employment tax deferment bill, H.R. 10, which passed the House June 5.

### **Hospital Discrimination**

Federal tax exemption would be denied hospitals or medical education or medical research organizations which fail or refuse "to accord to any duly licensed doctor of medicine the equal privileges of its facilities on the grounds that such doctor does not belong to a duly constituted county, city, State, or National medical association or society." Introduced by Mr. Celler of New York, July 12.



# NEWS OF THE DISTRICTS

## DISTRICT SEVEN

Many of the doctors are taking their vacations at this time; some to Mexico, some out west and some just fishing.

We decided to postpone our summer meeting until such time when our State President might be able to visit with us. We have sent our invitation direct to the president and a copy to the executive secretary. We do not feel it was the wish of the House of the Delegates as stated in the July issue that the district request the central office to ask our president to visit in various districts.

Since we have not had an official meeting the following comment is my personal feeling. I am opposed to the new assessment of \$75.00 by the A.O.A. I feel that some of the reserved funds should be used first before such an assessment be made. There is such a thing as being over taxed. As an example, I'm a sustaining member of the State Assn.—\$300.00; member of the College of G.P. Nat'l. \$25.00, State \$5.00; I paid 1961 dues \$75.00 plus \$35.00 assessment and now another \$75.00 assessment. District dues are \$10.00, local dues average about \$25.00 per year. So you see all this comes to over \$500.00. Not everyone can afford this much money. Consequently we will lose some members.

I believe the A.O.A. should listen to and poll the members on some of these things. I'm not too sure that we are always kept informed of A.O.A. policies and actions. An example of this was when the various states were encouraged to support their colleges thru dues and were cited the example of California doing that. We were not told until just recently that Cali-

fornia retained a large portion of this money and have used it now in their effort of amalgamation.

I agree with the policy as expressed that we should not beg the A.M.A. to evaluate the Osteopathic profession. We are strong enough to stand on our own two feet.

I wonder if Dr. H. Wright didn't have some of this in mind when he wrote the District Ten news in the July issue.

WALDEMAR D. SCHAEFER, D.O.  
*Secretary, District No. 7*

## DISTRICT EIGHT

The staff of the Corpus Christi Osteopathic Hospital gave a party to bid farewell to the outgoing interns, Drs. Thomas and Johnson and to welcome the incoming interns, Drs. Kelly and Eliades at the Sandy Shores Motel with swimming, dinner and dancing at the Surf Club. Dr. Thomas will practice in Charlestown, West Virginia and Dr. Johnson is practicing in Florence, Texas. We wish them both the best of luck.

Dr. Kelly is a graduate of the Kansas City College of Osteopathy and Surgery and is a former resident of Lubbock, Texas. Dr. Eliades is a graduate of the Kirksville College of Osteopathy and Surgery and is a native of Greece.

Dr. Baxter Greer, who recently finished his internship at Oklahoma Osteopathic Hospital, Tulsa, Oklahoma, has moved into the office formerly occupied by Dr. C. A. Myers. The following article appeared in Dr. Greer's



hometown paper, the *Comanche Chief*, Comanche, Texas:

"Dr. B. D. D. Greer, Jr., who has recently completed his internship at a hospital in Tulsa, Oklahoma, has been here visiting his parents, Dr. and Mrs. B. D. D. Greer, Sr. Dr. Greer, Jr., began the training for his profession at Austin College in Sherman. Later he graduated from the University of Texas as a pharmacist and was employed as such in Corpus Christi for five years. In 1956 he entered the Medical College in Kansas City and graduated in 1960. He will go to Corpus Christi this week to begin the practice of his profession in association with Dr. D. H. Hause, D.O. who is a successful physician and surgeon in that thriving city."

Mr. Fred Logan, son of Dr. and Mrs. Fred Logan of Corpus Christi, will begin his professional education this Fall as a freshman student at Kansas City College of Osteopathy and Surgery. Dr. Logan's son, Mike, is a pre-medical student at Del Mar College.

D. H. HAUSE, D.O.  
*Secretary*

### DISTRICT ELEVEN

District Eleven had its monthly meeting on the 12th of July at the home of Dr. H. D. Smith. The business meeting consisted primarily of the adoption of the new Constitution and By-Laws.

A copy of this constitution and By-Laws has been submitted to the central office for filing. The balance of the business meeting was taken up by Dr. M. G. Holcomb who reported on the National Convention in Chicago. His report was concise and informative. Of course the main topic of discussion was the California situation. The program planned for the evening was a film on "Caudal Anesthesia." Due to the importance of the California situation and the freshness of the material that Dr. Holcomb had to report to the group, the showing of the film was cancelled.

Dr. H. D. Smith, member of the Grace Methodist Church of El Paso reported to the district of the wonderful response he received in showing the film "The American Doctor" to the Methodist Youth Fellowship Group. This particular group of thirty to forty young people of college age, home on vacation, were greatly impressed by the film. Dr. Smith reported that the group kept him for two or three hours asking questions. As of this writing he will have shown the film to another group of M. Y. F. Group of a younger age consisting mainly of high school students.

Most of the doctors in the district have taken their vacations and are beginning to settle down and get back in the groove.

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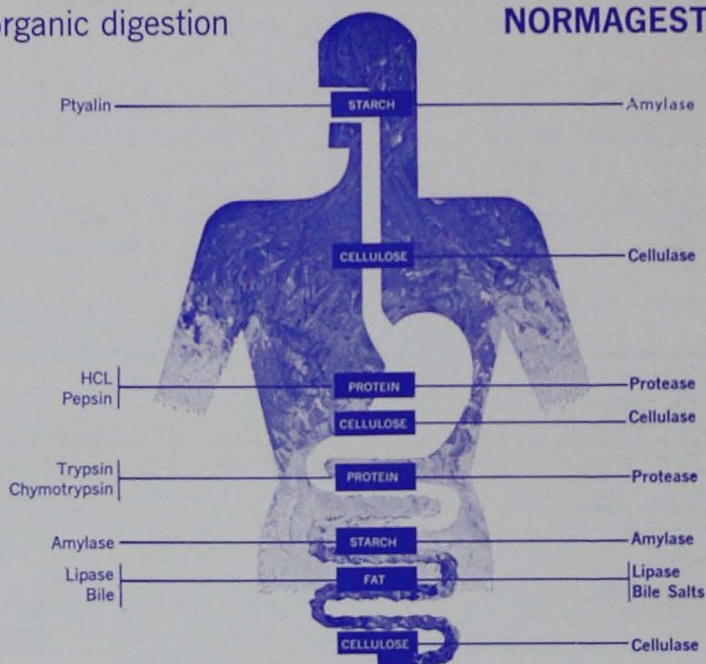
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