

Texas OSTEOPATHIC PHYSICIANS Journal

VOLUME XXV

FORT WORTH, TEXAS, AUGUST, 1968

NUMBER 4



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Texas Osteopathic Physicians' Journal

OFFICIAL PUBLICATION OF THE
TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS

PUBLICATION OFFICE: 512 BAILEY AVE., FORT WORTH, TEXAS 76107

VOLUME XXV

FORT WORTH, TEXAS, AUGUST, 1968

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Report of The Professional Affairs Committee



CLIFFORD E. DICKEY, D.O.

This Committee pondered several matters pertaining to Professional Affairs and submitted to the House of Delegates by various states by means of Resolutions. The Committee held hearings on these Resolutions, heard all spokesmen for and against these Resolutions, had closed door Committee discussions and arrived at decisions. These decisions were reported to the full House of Delegates. All Committee recommendations were adopted by the House of Delegates as follows:

I. SUBJECT: PHYSICIANS' FEES FOR SERVICE

(Missouri Resolution)

ACTION: The Committee concurs with the action of the Board of Trustees of the AOA in that no action was necessary. The Missouri Resolution is consistent with the AOA Code of Ethics.

II. SUBJECT: AOA INTERN REGISTRATION PROGRAM
(Oklahoma Resolution)

ACTION: The Committee resolved that no action be taken on the Oklahoma Resolution but that the following observations be considered by the Office of Hospital Affairs and the Office of Education:

August, 1968

1. The present restriction on contact with osteopathic students is unrealistic.

2. *Contacts* with students by hospitals and State Associations should be encouraged at all levels of the students' educational program.

3. Guidelines be established for the hiring of osteopathic students as paid employees in our hospitals prior to completion of their junior school year.

4. *Contracts* with students should not violate the present policy regarding the intern registration program.

5. Intern contracts should include all stipends and fringe benefits in writing.

6. Hospitals should be encouraged to up-grade their teaching programs as an additional method of intern recruitment.

III. SUBJECT: MEMBERSHIP OF OSTEOPATHIC PHYSICIANS IN THE MEDICAL AND CHIRURGICAL FACULTY OF THE STATE OF MARYLAND
(Maryland Resolution)

ACTION: The Committee resolved that the Maryland Resolution be withdrawn with the concurrence of the Maryland Delegation and, **BE IT FURTHER RESOLVED**, that the House of Delegates direct the AOA Legal Counsel to give further consultation and assistance to the Maryland Osteopathic Association relative to the problem of obtaining staff privileges at medical hospitals.

IV. SUBJECT: MEMBERSHIP OF OSTEOPHYSICIANS IN ALLOPATHIC MEDICAL SOCIETIES
(Michigan Resolution)

The Resolution in effect stated that the House of Delegates of the American Osteopathic Association declare that any member accepting membership in any form in the American Medical Association or any of its political divisions is acting contrary to the best interests of this Association and shall be subject to discipline up to and including expulsion, and that the American Osteopathic Association take appropriate action by By-Law Amendment or otherwise to implement and enforce this policy.

ACTION: The Committee recommended adoption of this resolution.

**V. SUBJECT: EDUCATION OF
OSTEOPATHIC STUDENTS
IN IMPORTANCE OF
ORGANIZATIONAL AFFAIRS
(Ohio Resolution)**

ACTION: That the Ohio Resolution be referred to the American Association of Osteopathic Colleges.

**VI. SUBJECT: MIXED-STAFF
OSTEOPATHIC HOSPITALS
(New Jersey Resolution)**

This Resolution requested that the AOA approved mixed-staff hospitals for Residency and Intern training.

ACTION: The Committee recommended that the New Jersey Resolution be disapproved and that the Board of Trustees and the Bureau of Professional Education be instructed to re-evaluate the accreditation of mixed-staff osteopathic hospitals for intern-residency training and report as soon as possible, but no later than the House of Delegates meeting in 1969.

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Osteopathic Progress Fund Committee



JAMES E. FITE, D.O.

In the fiscal year of 1967-68 members of the osteopathic profession and affiliated groups, through the Osteopathic Progress Fund, made available to the five osteopathic colleges \$976,939.86 which represents 86% of the million dollar goal.

CCO received	87,149.52
COMS received	170,061.54
KC received	101,632.28
KCOS received	521,154.00
PCOM received	96,942.52

Seventy-five percent of the profession gave an average of \$170 each (based on divisional society membership.) This is a considerable increase over last year.

The Progress Fund had to close the books over a week earlier this year due to the resignation of the OPF secretary. At this writing, an additional \$7,550.00 in checks are in that could not be included in this report which would put us over \$7,000 ahead of last year.

Florida leads with 236% of their goal. Those who exceeded their goal are: Alaska, Arizona, Colorado, Florida, Indiana, Iowa, Kentucky, Maine, Massachusetts, Michigan, Minnesota, Nevada, New York, North Dakota, Ohio, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Virginia, Wash-

ington, and Wisconsin. Utah achieved 98%.

The variation in the time we received reports from the colleges, as well as the reports made to the central OPF office, caused this report to vary greatly from year to year as well as month to month. For example, a matter of two days would have put West Virginia up to 140% of their goal. Their check for \$7,550 came in too late to be included in this annual report.

Thirty states are now on Support-thru-dues and the committee is actively engaged in trying to get every divisional society to adopt a support-thru-dues bylaw. Only three divisional societies, with a membership of over 100 do not have a support-thru-dues bylaw. If just these three would adopt support-thru-dues, we would exceed our \$1,100,000 goal.

In cooperation with the colleges, the committee continues to urge members of the profession to give on the basis of equal sacrifice, not equal gifts.

Personally visiting with members of the profession, keeping them up to date on what OPF is enabling their colleges to accomplish, encouraging them to continue their present giving, and increase it when possible, has been a top priority with the committee.

A new exhibit where the doctor sees himself in a closed circuit television picture with a caption over the picture reading "You are in the OPF picture" and below the picture is printed "Thanks for giving \$977,403.79, to the osteopathic colleges last year — let's exceed the \$1,100,000 goal next year" has been displayed at state and national meetings whenever possible this year. All meetings where it was not possible for an OPF representative to be present a smaller exhibit was provided and the secretary was asked to please display it.

Once again letters from the OPF committee chairman to every freshman

student in each of the five osteopathic colleges pointing out what wonderful opportunities lay ahead for these students as members of the osteopathic profession were sent out. It was also pointed out in this letter the large contributions being made by osteopathic physicians to enable them to get their education. Another letter along the same lines was written to the wives of osteopathic students by Mrs. Violet Sutula, AAOA member of the OPF committee.

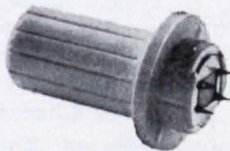
One again the number of osteopathic physicians giving to their colleges, and the amount they have given for the same period of time in past years, has increased. The osteopathic profession continues to provide far more support per member to their colleges than any other profession.

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A.O.A. Board of Trustees



GEORGE J. LUIBEL, D.O.

Dr. Earl Lyons, as President of the AOA, called the Board of Trustees to order at 9:00 A.M. on Wednesday, July 17 in the Walton Room of the Drake Hotel. From that moment until noon on Sunday, July 21, the Board followed a 9:00 to 5:00 daily schedule either in full session or through its various reference committees in order to complete its agenda before the House of Delegates convened.

The various Administrative Officers and Staff presented their annual reports and comments. All of these added up to another year of progress for the profession though problems were not disregarded in the over all picture.

Dr. True B. Eveleth announced his retirement as Executive Director effective September 1, 1968. The Board voted to advance Dr. Edward Crowell to fill the position of Chief Executive Officer of the AOA.

Other reports included those of the Treasurer, Kenneth Ettenson, the Business Manager, Walter Suberg, both of whom brought to us the bad news incurred by the Internal Revenue action taxing our non-professional related income i.e. advertising revenue. This eventually resulted in a drastic overhaul of the budget and a new approach to the purchase of goods and services to minimize the impact on AOA's financial picture and to avert

a possible dues increase to the membership.

Dr. George Northup reported on the wider distribution of our publications particularly the requests from other medical publications throughout the world. This fall the publications will be prepared by a new printing firm and in the near future the D.O. will be redesigned.

Mr. Robert Klobnak spent the last several months traveling with President Lyons, arranging his press conferences and interviews. His report indicates that osteopathic films and exhibits continue to appear before an expanding audience and before a wider range of professional and lay health and hospital groups.

Lawrence W. Mills, Director of the Office of Education reported the college enrollment of 1823 students is the largest since 1962 and the applicants for the forthcoming academic year have exceeded any total in recent years.

Dr. Roy Harvey gave his usual comprehensive review of the activities of the AOA Washington Office and on Friday morning at 11:00 A.M. in a special order of business, the Board was addressed by Louis M. Rousselot, M.D., Deputy Assistant Secretary of Defense, Health and Medical. The Secretary was most gracious in expressing his high opinion of D.O.s serving in the services and explained the plans for osteopathic physicians who will be deferred while in various approved residency programs.

Most of the staff and department heads also reported to the House of Delegates and I will not elaborate further on them since they are covered in summaries of other delegates. However, the Board divides these activities among its four reference committees

which goes into much greater detail before reporting back to the full Board with recommendations for final action.

The various House resolutions are also reviewed and the Board's recommendations are passed on to the House. The notable exceptions this year were the Texas and Michigan resolutions which went directly to the House without comment.

A partial list of Texas hospitals granted accreditation by the Board includes: Doctors Hospital, Groves, Fort Worth Osteopathic Hospital, Mid-Cities Memorial, Mt. Pleasant Hospital and Clinic, and San Antonio Osteopathic Hospital.

The final session of the Board of Trustees was held following the Presi-

dential Installation Luncheon on Tuesday, July 23. Final action was taken on all unfinished business and reports before Dr. Roy Young assumed the presidential chair. To Texans the most important decision was to continue the grant money available to the Texas College of Osteopathic Medicine for its development campaign. This had been deleted by the Bureau of Finance in its austerity program.

Following the approval of President Young's appointments for the year 1968-69 the AOA Board of Trustees adjourned its meeting just in time for us to move next door into the House of Delegates which was about to take action on the Texas and Michigan resolutions.



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Financial Report of The American Osteopathic Association



SAMUEL B. GANZ, D.O.

The financial position of the American Osteopathic Association continues strong. As of May 31, 1968 there was \$227,652 in surplus cash and reserve of \$627,028 in stocks and bonds for a total of \$854,680. This is an increase of \$47,829 over last year. The combined net worth of the A.O.A. as of the above date is \$1,853,617. This represents a decrease of \$82,639 over the past year.

During the fiscal year 1967/68 the A.O.A. showed a sharp increase in expenses. The total central office expense of \$1,890,000 was \$290,000 more than the previous year and this resulted in a \$49,000 expense over

income figure. Part of this expense increase is due to including the cost of operating the Washington office but much of it is the result of inflationary pressure. It was pointed out that since the last dues increase in 1962/63 there has been a 35% increase in expenses and although this has been offset by increased advertising income it now appears to your reporter that a dues increase may soon be contemplated.

Another factor which will adversely affect the financial position of the A.O.A. is a new regulation which will force us to pay income tax on our net advertising income. This regulation states that paid advertising is unrelated to educational activity of the kind contemplated by the exemption statute. There is at the present time a test case in the courts contesting the IRS decision but we must assume that we are going to be taxed at corporate rates and therefore must provide for a tax of \$185,000 in our budget estimates for this year. This (1968/69) budget anticipates a \$36,000 deficit.

No increase in dues is now being considered.

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Public Affairs Committee Report



ROBERT E. SLYE, D.O.

The Department of Public Affairs of the A.O.A. with J. Scott Heatherington, D.O., Chairman, has been quite active the past year. Under this department is the Bureau of Public Education on Health with J. Edward Sommers, D.O., Chairman. This year Georgia joins the list of unlimited practice rights states by virtue of an opinion rendered by the Attorney General of Georgia on February 13, 1968. This is being contested and the rights of D.O.'s are being challenged in the courts of the state. This case is due to come to trial sometime this fall. The Georgia Osteopathic Medical Association is conducting meetings with the Georgia Medical Association in an effort to reach an agreement on a composite board law. This appears to be an antithetical situation in as much as the Medical Association of Georgia and two of its leading members have filed suit to stop Medicaid payments for non-narcotic prescriptions written by Georgia D.O.'s. There are now forty-one states and the District of Columbia which grant unlimited practice rights to D.O.'s. The prospect for unlimited laws in the near future in Idaho, North Carolina and South Carolina appears to be good. At the present time Mis-

issippi has only one D.O. and little activity has been forthcoming in this state. Two unlimited states of particular concern are Nebraska and California. The Nebraska group plans to go before the legislature in early 1969, attempting to get a bill passed which will clarify the right of D.O.'s to take an examination for an unlimited license. In California a trial court in June 1968, rendered an opinion that D.O.'s must be examined for license in California. The function of examining and licensing of Osteopathic Physicians was said to reside in the Board of Medical Examiners rather than the Board of Osteopathic Examiners. The decision of the trial court represents a great victory for the Osteopathic Profession and a significant step on the road back for the profession in the state of California. Also under the Department of Public Affairs is the Bureau of Comprehensive Health Planning with John W. Hayes, D.O., Chairman. The Bureau of Comprehensive Health Planning is composed of several task forces, consisting of Mental Health, Mental Retardation, Health Care for the Aged, Physical Fitness and Sports Medicine, Alcoholism, Disaster Medical Care, Environmental Health, and Health Care Cost. The Bureau has conducted three meetings. The first consisted of the full board which met with three members of the Health Insurance Council. The second meeting was an organizational and informational meeting. The third meeting was held at the time of the National Health Forum and National Health Council meetings in Los Angeles, California. A full review of these meetings can be found in the May issue of the "D.O."

Health Programs and Insurance



ELMER C. BAUM, D.O.

I have been asked to report on the activities of the Professional Liability Insurance Committee and the Council on Federal Health Programs.

I. Professional Liability Insurance.

The general trends in professional liability litigation and in professional liability insurance during 1967 continued as anticipated with increases in the number of cases and a spiraling of the dollar amounts of costs and verdicts. In the 1966 report, you were advised that many carriers formerly affording this type of coverage had dropped from the field. This situation did not ease in 1967. Some of the largest judgments ever heard of in this field were handed down by juries during the year.

In our program, we had a favorable trend in the number of cases reported during the year. This dropped from 297 cases reported in 1966 to 263 cases reported in 1967. These are total doctor and hospital cases. However, the average cost of closing a case remained at a very high level. At December 31, 1967, the three-year average cost of a case against the program was \$4,457. The two-year average cost was \$5,502 and the one-year average was \$5,504. We were able to report last year that our program had not been involved in any of the extremely high verdict cases. Unfortunately, during

the year, a case against a doctor was settled for a record high for the program of some \$160,000. A verdict was returned against one of our hospitals for \$340,000. This verdict is now on appeal. A motion for a new trial has been denied.

The premium increase, announced to you in last year's annual report, was intended to raise the general level approximately fifteen per cent. Ten per cent of this was calculated in straight rate increases and another five per cent was anticipated from changes in classifications. Fortunately, for the health of the program, the change in classifications resulted in an increase of about eighteen per cent. Consequently, we were able to renew the contracts for 1968 with only a ten per cent increase over all.

Life Insurance. During 1967, our total premium decreased slightly to \$160,765—down \$3,500 from 1966.

Death payments for eleven (11) members totaled \$110,000 with an additional \$10,000 for one (1) accidental death. With administrative costs and conversion charges included, the calendar year showed a profit for the Company of \$10,676. In addition, reserve changes have added an additional \$13,000 so that we have a total profit of \$23,676 to be applied against our total loss for all years of \$31,954—leaving a net loss for all years since 1959 of \$8,278.

During the year, five (5) members who became ineligible to continue the coverage because of age or retirement, elected to have the Company convert their protection to Whole Life Insurance.

II. Council on Federal Health Programs.

One year ago, the plans for the Washington Office were outlined and the personnel that would be responsible for the functioning of that office were indicated. At the end of the first year of operation, we can express the firm belief that it has been a year of significant accomplishment for the profession.

The Council on Federal Health Programs met in the fall of 1967, and again in the spring of 1968. These meetings were held in the office of the Association in the Cafritz Building. Work is from a prepared agenda, and the minutes of the meetings are kept and are transcribed for the purposes of record and continuing information of all involved. They are conducted in an orderly business-like manner, and yet at the same time, extend ample opportunity for careful consideration and evaluation of the matters and for the expression of viewpoints of all present.

At the spring meeting, there was a special order of business involving a discussion on health manpower, problems of the Department of Defense and the Selective Service System. Participating with us at that time were the following: Colonel Vernon McKenzie, U.S.A., Ret., Director of Medical Management Deputy Assistant Secretary of Defense (Health and Medical), Office of the Secretary of Defense and Lt. Colonel Linwood A. Wilhelm, U.S.A., Manpower Office, the National Headquarters, Selective Service System.

This represented the first meeting of the Council in which outside persons were present to discuss with us the problems with which the profession and its institutions are concerned in these areas of government. And, during the past year or two, we have been very directly concerned with certain matters in Department of Defense and with the Selective Service System.

If possible, you should take the time

to visit the offices of your Association in the Cafritz Building. It is centrally located within just a moment or two of the Statler and the Sheraton-Carlton Hotels. The office is in an excellent building, the space provisions are very adequate, and you will be stimulated by the climate in which your Association works in Washington, D.C.

The Council on Federal Health Programs has been traditionally charged with certain defined responsibilities with reference to the Congress and the Agencies of Federal Government. These have had to do with the overall activity and function of legislative affairs in the Congress, contact with certain of the governmental agencies as they pertain to the responsibilities of formulating legislation, the programming of such, and to see to it that the osteopathic profession is appropriately identified and included at such points as are appropriate.

As the office grows in usefulness to the profession, as it is further integrated into the increasing responsibilities of

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the profession in the health field, the Washington Office must continue and increase its activities and expand in the areas of service that it may importantly render.

The first area is that of strengthening the representation and activities in connection with the educational institutions of the profession, quite probably through the organization of the American Association of Osteopathic Colleges. We could well understand that a closer representation of the colleges at the Washington level may

be of significant importance in their growth and development. The provisions of governmental funding of the educational institutions in the health field are well known, and it is important that the osteopathic educational institutions participate in all areas of grants and funding at a level consistent with the participation of other educational institutions in health. It would seem, therefore, of major importance that on-the-scene representation at this level should be obtained in close association with the Washington Office.

Special House Reference Committee Report



JOHN H. BURNETT, D.O.

The House of Delegates of the American Osteopathic Association convened in the Grand Ballroom of the Drake Hotel in Chicago on July 21. The Speaker of the House appointed six (6) Reference Committees. This report will deal with the findings of a Special Reference Committee which was appointed to consider the Texas and Michigan resolutions. Both resolutions reflected the growing discontent with the profession of one of the major issues; that is, revoking the affiliate status of the American College of Osteopathic Surgeons. The Chairman of this special committee was Charles W. Sauter, II, D.O., with the following

members: Philip Adler, D.O., John H. Burnett, D.O., Raymond A. Gadowski, D.O., Max T. Gutensohn, D.O., Richard A. Michael, D.O., Bernard J. Plone, D.O., Donald Siehl, D.O., Ronald K. Woods, D.O. This committee held open hearings with many members of the House of Delegates in attendance. The resolutions were presented and documentary evidence was presented to substantiate the validity of each statement.

Following many hours of deliberation, it was the considered opinion of this committee that the objectives of this association could be carried out most effectively by not removing the affiliate status of the American College of Osteopathic Surgeons at this time. The following resolution was presented to the House and was passed.

WHEREAS, there has been increasing dissension between various segments of the Osteopathic profession, and

WHEREAS, a certain amount of this dissension has been due to a lack of understanding of the relationship

of the American Osteopathic Association and its affiliated organizations, and

WHEREAS, this lack of understanding has been evidenced by many communications between the American Osteopathic Association and the American College of Osteopathic Surgeons (governing bodies of both organizations),

THEREFORE BE IT RESOLVED, that the American College of Osteopathic Surgeons restore to membership or candidate status, without prejudice, the Osteopathic surgeons referred to in MEMO B-Jan/68-21, and the accompanying report of the Committee on Ethics of the AOA (R-235ff; SR-1, January, 1968) and

BE IT FURTHER RESOLVED, that the American College of Osteopathic Surgeons must reaffirm its status as an affiliate body of the AOA, and

BE IT FURTHER RESOLVED, that the American College of Osteopathic Surgeons must realign the Code of Ethics of the American College of Osteopathic Surgeons to conform and parallel the Code of Ethics of the AOA, and the AOA interpretation thereof, and

BE IT FURTHER RESOLVED, that any additions, deletions or changes

of the Code of Ethics peculiar to Divisional Societies, or Affiliated Organizations must be submitted to the House of Delegates of the American Osteopathic Association for ratification, and

BE IT FURTHER RESOLVED, that if compliance to these resolutions by the American College of Osteopathic Surgeons has not been effected by the October 1968 meeting of the Board of Trustees of the American Osteopathic Association, the House of Delegates instructs the Board of Trustees of the American Osteopathic Association to take action, as delineated in Res. 800 and 802 and

BE IT FURTHER RESOLVED, that the membership of this association be notified, in writing, of this action.

It was the feeling of many members of the House that this decisive resolution clearly placed the burden of responsibility on all the affiliates of the American Osteopathic Association to conduct themselves in a manner that is in the best interests of the entire profession. This resolution recalls to mind a quotation from John Ruskin which would seem appropo: "What we think, or what we know, or what we believe, is, in the end, of little consequence. The only thing of consequence is what we do."

CONSULTANT STAFF

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W. R. Russell, D.O.

Proctology & Urology

K. S. Wooliscroft, D.O.

Orthopedics

M. Glickfield, D.O.

T. R. Turner, D.O.

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Andrew C. Viscardi, D.O.

Direct inquiries to: Paul A. Stern, D.O., Medical Director

The Texas Association of Osteopathic Physicians' Assistants

1968-69 OFFICERS



MRS. KATIE HOLSTEAD
President

Mrs. Holstead is employed by Doctors Hospital, Groves, Texas, as Admitting and Dismissal Secretary (11 years); she has served as Vice President of the State Association and has served as President and Secretary of District 12 society. Katie Holstead is a member of the American Legion Auxiliary and the 8 & 40 Club of Port Arthur, Texas.



MRS. ELVA CHILDRESS
President Elect

Elva Childress is in the office of Dr. F. Marion Crawford of San Antonio (17 years). Mrs. Childress has served as Vice President and Secretary of the State Association and President of District 7 Society. She is also Chairman of the Membership Committee on the state level.



MRS. LOU HAYES
Vice-President

Lou Hayes is employed at Doctors Barnett and Young Clinic of Bridge City (9 years). Mrs. Hayes is currently Treasurer of District 12 society and has served as vice president, as well as chairman of various committees.



MRS. BETTY LATIMER
Secretary

Betty Latimer is associated with Doctors Hospital of Groves as Medical Record Librarian, (71½ years). Mrs. Latimer is currently President of District 12 Society and has served as Secretary both at the state and local level. She is also the State Reporter. A member of the American Assn. of Medical Record Librarians; she is an Accredited Record Technician.



MISS ELLEN JACKSON
Treasurer

Ellen Jackson is in the employ of Dr. J. Ralph Cunningham of Houston, Texas. Miss Jackson has been in this position for 6½ years.

Much was accomplished at the Seventh Annual Convention held in Houston, Texas, June 22 and 23, 1968 with a new district society being formed in Amarillo. Representatives were in attendance from San Antonio, Fort Worth, Dallas, Houston, Port Arthur, Groves, Beaumont, McAllen, and Amarillo.

Specialty Groups Organize:

In a July 13 meeting in Chicago, 28 persons representing 12 specialty, hospital and other osteopathic organizations formed the Association of Osteopathic Specialty Organizations. They named E. W. Alden, D.O., immediate past president of the American College of Osteopathic Anesthesiologists, president. Multi-purposes of the Association are to promote high standards of practice, aid in continued education of physicians, residents, interns and osteopathic medical students and to exchange information, experiences, knowledge and ideas of the practice and hospital organizations and the American Osteopathic Association.

August, 1968

Memorial Fund for Dr. Powers

KANSAS CITY, Mo. — Officials of the Kansas City College of Osteopathy and Surgery have authorized the establishment of a memorial fund in honor of Dr. Eugene P. Powers, president of the College from 1966 until his unexpected death July 19.

Named to a committee to organize the fund were Dr. James A. DiRenna, chief of surgery at Osteopathic Hospital and a trustee of the College; Dr. Mary Lou Butterworth, president of the College's alumni association, and Mrs. Maedene Moody, secretary to the late president.

Inquiries or gifts to the fund should be addressed to Mrs. Moody in care of the College, 2105 Independence Ave., Kansas City, Mo., 64124.

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The New Conformity

GEORGE W. NORTHUP, D.O.,
Editor, American Osteopathic Association



GEORGE W. NORTHUP, D.O.

Progress is more frequently achieved by nonconformists than by conformists. Some conformists are passive and others aggressive; but both forms are likely to be stifling.

One of the conformities of our times is dissent. It has become the role of the conformist to dissent — a role which seems, in many cases, to be against everything and supportive of nothing. In the area of world affairs it seems to some that peace can be achieved merely through the absence of war. No one would deny that the absence of war is one of the requisites, but peace is more than that, far more.

To dissent against the establishment is one of the more popular current conformities. Therefore it is not surprising that the osteopathic profession and its organizations should have its dissenters.

However, dissent is not always as negative. To be sure, there are those dissenters who abandon their profession and professional organizations with the hope of acceptance as an osteopathic refugee within the camp of organized medicine. This, in reality, constitutes abandonment more than dissent. For as most refugees have already found out, it is difficult to obtain full citizen status in other professional medical organizations.

There are other dissenters who tear down for the sake of tearing and leave nothing but emptiness in the place of former structures. There is also a dissenter who is most useful and creative.

He is the one who uses his discontent as a stimulus to construct a better model.

Osteopathic medicine has always had both negative and positive dissenters within and outside its own ranks. It is particularly sad to see a dissenter from within turn on his own colleagues as a tool for self justification. But as disturbing as these things are, they too shall pass; the destructive dissenter finds little comfort in his abandonment.

But more than ever before in its history, the profession needs *constructive* dissenters — people who believe that the status quo can be improved and have the courage to go about improving it. We need dissenters who have patience and understanding, who construct rather than complain. We need leaders and followers who have the insight to understand that everything does not germinate in a first planting. We need men of courage, men of vision, and a continual flow of enlightened leadership. Through people such as this the profession will grow strong and will prevail in spite of the few who because of their own inadequacies have failed to secure the degree of attention they desire.

The destructive dissenter thrives on publicity and starves for lack of it. It is time in this profession, as in the nation, that all those who have little to say other than to complain be ignored into the oblivion they so richly deserve.

Scholarship Recipients



ROBERT GARMON



RICHARD WRIGHT



SANFORD T. WARD



JOHN O'CONNOR, JR.



DONALD W. FOX

The Texas Association of Osteopathic Physicians and Surgeons awarded \$2500 in scholarships to Texas pre-med students in May, 1968 during the final session of its annual statewide convention at the Shamrock-Hilton Hotel in Houston, Texas.

Recipients of the Osteopathic College Scholarships offered by The Auxiliary to the American Osteopathic Association are Mr. Robert Garmon, 21, of Groom, Texas, and Mr. Richard O. Wright, III, 24, of Wichita Falls, Texas.

Garmon, a pre-med student at West Texas State University will attend Kirksville College of Osteopathy and Surgery in Kirksville, Missouri. Mr. Garmon has also attended Amarillo Junior College and Southwestern State

College, Weatherford, Oklahoma.

Richard Wright has attended Midwestern University where he was awarded his B.S. degree and the University of Houston where he was granted his M.S. degree. Mr. Wright plans on entering Kansas City College of Osteopathy and Surgery, Kansas City, Mo.

The AAOA Award consists of \$1500 dollars, \$750 for the freshman year and it may be renewed the sophomore year provided the student has maintained satisfactory standards and his financial status has not changed.

Mr. John T. O'Connor, 22 of Wichita Falls, Texas, was awarded the \$1,000 Phil R. Russell Scholarship. O'Connor is a graduate of the University of Dallas where he earned his B.S. degree. He will attend Kirksville Col-

lege of Osteopathy and Surgery this fall.

Winners of the Texas Association of Osteopathic Physicians and Surgeons Freshman Scholarships are Sanford T. Ward, 22, of Austin, Texas, a pre-med student of Texas A & M, and Mr. Donald Wayne Fox, 24, of Grand Prairie, Texas. Mr. Fox attended East Texas State University, Commerce, where he received his M.S. degree. Both grantees will be entering freshmen this fall at Kirksville College of Osteopathy and Surgery.

Requirements for the osteopathic scholarships include faculty recommendations, good scholastic standing, financial need and acceptance from one of five approved osteopathic colleges in the nation. The approved colleges are Chicago College of Osteopathy, The College of Osteopathic Medicine and Surgery in Des Moines, Iowa, Kansas City College of Osteopathy and Surgery, The Philadelphia College of Osteopathy and Kirksville College of Osteopathy and Surgery in Kirksville, Missouri.

A further requirement for the scholarships is a sincere interest in the profession and philosophy of osteopathic medicine which dates back the founding of Kirksville College.

Other applicants will be considered for the Legislative Scholarships to be awarded in the fall.

Calendar of Events

October 14-17, 1968 — AMERICAN OSTEOPATHIC ASSOCIATION, 73RD ANNUAL CONVENTION AND SCIENTIFIC SEMINAR. Americana, Beau Rivage and Balmoral Hotels, Bal Harbour, Miami Beach, Florida. Program Chairman, Harmon L. Myers, D.O., 750 South Craycroft Rd., Tucson, Arizona 85711. True B. Eveleth, D.O., Chairman, Mr. Walter A. Suberg, Vice Chairman, Bureau of Conventions.

October 27-31, 1968—FORTY-FIRST ANNUAL CLINICAL ASSEMBLY OF THE AMERICAN COLLEGE OF OSTEOPATHIC SURGEONS, Denver Hilton Hotel in Denver, Colorado. For further information and registration materials, write Dr. Charles O. Ballinger at 1550 S. Dixie Highway, Coral Gables, Florida 33146.

GEORGE E. MILLER, D.O.

PATHOLOGIST

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Plaques and Certificates Awarded Delegates of TAOP&S

Plaques were given for the number of years contributed of service in the House of Delegates of The Texas Association of Osteopathic Physicians and Surgeons. Tabulated figures reveal 77 members who have served at least five years or more including twelve who served ten years or longer.

Those doctors providing the greatest number of years service includes: Dr. Elmer C. Baum of Austin, Texas, (18 yrs.); Dr. Waldemar D. Schaefer, San Antonio, Texas, (13 yrs.); Dr. Dan D. Beyer, Fort Worth, Texas, (16 yrs.); and Dr. Mable Martin, of Weslaco, Texas, (13 yrs.).

The Board of Trustees of TAOP&S has authorized the purchasing of an unusually distinctive plaque for each member who has served an excess of ten years. Certificates of service have been obtained and will be presented to all having served five terms or more, according to Speaker of the House, Dr. Samuel B. Ganz, of Corpus Christi, Texas.

Ersal Cain, D.O.	Seven Years
J. Paul Price, Jr., D.O.	Ten Years
Francis Brown, D.O.	Seven Years
Dwight H. Cox, D.O.	Five Years
John L. Witt, D.O.	Five Years
Glenn Porter, D.D.	Eight Years
Henry Spivey, D.O.	Ten Years
Carl Everett, D.O.	Nine Years
Dan D. Beyer, D.O.	Sixteen Years
Robert N. Rawls, D.O.	Six Years
Noel G. Ellis, D.O.	Six Years
W. R. Jenkins, D.O.	Five Years
R. H. Peterson, D.O.	Eight Years
H. W. Roberts, D.O.	Six Years
William Blackwood, D.O.	Seven Years
Clifford E. Dickey, D.O.	Five Years
Charles Bragg, D.O.	Nine Years
J. Natcher Stewart, D.O.	Six Years
C. D. Ogilvie, D.O.	Six Years
Carl F. List, D.O.	Seven Years
John S. Turner, D.O.	Nine Years
Palmore Currey, D.O.	Seven Years

Henry Hensley, D.O.	Five Years
Wayne M. Smith, D.O.	Ten Years
Howard Coats, D.O.	Ten Years
Charles Rahm, D.O.	Twelve Years
Ross McKinney, D.O.	Five Years
V. Mae Leopold, D.O.	Six Years
Norman Leopold, D.O.	Nine Years
James M. Shy, D.O.	Five Years
Wiley B. Rountree, D.O.	Eleven Years
Frank Bradley, D.O.	Seven Years
A. Roland Young, D.O.	Seven Years
Robert G. Haman, D.O.	Nine Years
Walters Russell, D.O.	Five Years
John H. Burnett, D.O.	Nine Years
Eugene Zachary, D.O.	Five Years
Robert B. Finch, D.O.	Six Years
Robert F. Lutz, D.O.	Five Years
Robert H. Lorenz, D.O.	Six Years
N. E. Dunn, D.O.	Six Years
Gordon McClimans, D.O.	Five Years
Joe E. Wolpmann, D.O.	Five Years
William R. Masters, D.O.	Five Years
Jack P. Leach, D.O.	Five Years
J. R. Alexander, D.O.	Seven Years
Robert P. Kelley, D.O.	Five Years
Donald C. Young, D.O.	Five Years
Richard Brennan, D.O.	Five Years
Lester I. Tavel, D.O.	Eight Years
J. Ralph Cunningham, D.O.	Seven Years
Loren Rohr, D.O.	Six Years
G. W. Tompson, D.O.	Six Years
William Badger, D.O.	Six Years
S. E. Hess, Jr., D.O.	Six Years
Elmer C. Baum, D.O.	Eighteen Years
Waldemar Schaefer, D.O.	Thirteen Years
Wilfred G. Millington, D.O.	Eight Years
Joseph L. Love, D.O.	Seven Years
Gordon Beckwith, D.O.	Six Years
Leland C. Long, D.O.	Seven Years
M. Glen Kumm, D.O.	Five Years
Samuel B. Ganz, D.O.	Ten Years
Mabel Martin, D.O.	Thirteen Years
H. Freeman Elliot, D.O.	Nine Years
Robert J. Brune, D.O.	Seven Years
John H. Boyd, D.O.	Eleven Years
Richard L. Stratton, D.O.	Eight Years
H. Eugene Brown, D.O.	Six Years
Harlan O. L. Wright, D.O.	Seven Years
Michael Calabrese, D.O.	Six Years
Roger R. Delgado, D.O.	Five Years
Mickie G. Holcomb, D.O.	Seven Years
Harvey D. Smith, D.O.	Five Years
Kenneth Watkins, D.O.	Seven Years
James E. Fite, D.O.	Six Years
S. E. Smith, D.O.	Five Years

Dr. Poage Receives Honor



ALAN J. POAGE, D.O.

In recognition of his tremendous service and years of dedication to the osteopathic profession, the Texas Association of Osteopathic Physicians in annual session of the Board of Trustees and the House of Delegates unanimously voted to bestow Honorary Life Membership on Dr. Alan J. Poage. Dr. and Mrs. Poage were honored at the President's Banquet during the State Convention in Houston on May 9, 1968.

Alan Jordan Poage, D.O., was born January 21, 1897, in Gillette, Arkansas. His medical career began in 1918 and 1919 when he served as a medic with the United States Navy. Following the war, and an honorable Navy discharge, he took his pre-medical education at Austin College in Sherman, Texas, Baylor University and at the University of Texas. His doctoral work was taken at the Chicago College of Osteopathy where he was granted the degree, D.O., in 1930. He then in-

terned at Jefferson Park Hospital, 1930-1931. His only practice has been in El Campo, Texas, and his practice has been continuous since 1931. It is there that he has distinguished himself and has added to the prestige of the osteopathic profession. He actively supported and helped create the Wharton County Hospital known as the Nightingale Hospital at El Campo, Texas, and except for a brief period when his right to be there was challenged by the board of managers and/or the allopathic staff, he was and is an active staff member. This membership was regained in the face of frank adversity and thorough personal sacrifice at a time when those hospital privileges would not have been essential to his practice. However, he felt that patients using the county hospital were just as much entitled to osteopathic service as those who could afford a private institution.

Dr. Poage is a member of the Western States Osteopathic Society of Proctology. He is a Life Member of the American Osteopathic Association a member of the Presbyterian Church, the American Legion, and the Lions Club in his community.

This man in all of his transactions epitomizes the Christian principles of his faith and so doing causes the profession which he represents to be well reflected.

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Robert B. Price New Administrator at East Town



ROBERT B. PRICE, C.P.A.

Mr. Price has resigned as Executive Secretary of the Texas Association of Osteopathic Physicians and Surgeons to accept the position of Administrator for East Town Osteopathic Hospital. The Board of Trustees in session on August 17, 1968, passed the following RESOLUTION: Be it resolved that Mr. Robert Price be commended for his loyalty and contribution to the Osteopathic Profession during his tenure as Executive Secretary of The Texas Association of Osteopathic Physicians and Surgeons, from June 1964 until August 1968.

Caribbean Osteopathic Medical Seminar

San Juan, Puerto Rico — St. Thomas, Virgin Islands — October 17-23. Put "Caribbean" on your 1968 October calendar! Following the 73rd Annual Convention and Scientific Seminar in Bal Harbour, Florida, October 14-17, the American College of General Practitioners in Osteopathic Medicine and Surgery, the American Osteopathic Association and the Florida Osteopathic Medical Association will co-sponsor didactic sessions in San Juan, Puerto Rico. Related meetings will follow in St. Thomas, Virgin Islands.

The Hawaii Clinical Tour of last year proved to be highly successful with over 300 in attendance. Space was limited and an estimated 200 interested persons could not be accommodated. Over 600 can be accommodated on this 1968 Caribbean Program . . . but because of the close proximity to Florida and the comparative low cost, an early 'sell-out' is anticipated. Therefore early reservations are deemed most advisable!

To simplify all necessary travel and accommodation arrangements, International Travel Service, Inc. of Chicago has been appointed to organize special travel arrangements. For further information write to: International Service, Inc., 116 South Wabash Avenue, Chicago, Illinois 60603.

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GERALD D. BENNETT, D.O.
PATHOLOGIST

Fort Worth Osteopathic Hospital
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L'Arte Medica



MICHAEL A. CALABRESE, D.O.

As a 'post mortem' on last month's article (in reference to Dr. Sheppard's article "Why I Am Leaving Osteopathy") I received criticism from my most severe critic, my wife. As most good wives and mothers she is supersensitive and overly sympathetic to any one's cause. This is good because it adds to her charm and makes her much more understanding — besides it acts as a counter balance or buffer to my short sightedness, dogmatism and impatience. I have a tendency to "overtalk" to my patients giving them all kinds of explanations as to cause and effect. When I see them nodding their heads I assume they understand what I am saying and are agreeing with me. My wife says they are nodding their heads buffeting the blast of hot air that I am huffing in their faces (which is enhanced by my waving of hands and arms) and they are waiting for me to stop long enough to take a deep breath so that they can get up and go home.

She claims I was too harsh and too critical in my chastisement of Dr. Sheppard's actions and opinions. I purposely delayed giving her a copy to read until after I had submitted the article for publication. I knew that her arguments would be rather persuasive. She said that I did not take into consideration all of the mental

anguish and the adversities that he (Dr. Sheppard) and his family had endured. The truth of the matter is that I did — and I could see no way in which this would have a bearing on his attitude towards the osteopathic profession of which I am a member . . . therefore he was speaking about me and I felt that I should defend myself and my profession. Anyway I am glad I anticipated my possible capitulation to her persuasive sentimental feminine logic by sending the article in before I submitted it to her for "proof reading."

Sometime ago (about two months) I made reference to the suit filed in California by eight D.O.s seeking a right to be examined and licensed to practice in California. I'm sure most of you know the decision of the court as it has been reprinted several times in osteopathic publications but for the benefit of those few who are too busy making a buck and don't have time to read about your profession (why then should you be reading this?) the decision was in favor of the D.O.s. The court did not base its opinion on constitutional issues as argued by the D.O.s but said "that the Board of Medical Examiners had the authority to license D.O.s in 1913. That authority was suspended when the first osteopathic act was passed in 1922. When the osteopathic act was terminated in 1962 the authority of the Board of Medical Examiners to license D.O.s was revived." According to Edna M. Lay, D.O., Chairman Legislative Committee of the Osteopathic Physicians and Surgeons of California, "we have made a major stride in our effort to restore licensure of D.O.s in California."

An amazingly ironical side light of the suit came about when the California Medical Association entered the case as

'amicus curiae' (friend of the court) "to present rancorous arguments against the competence and training of D.O.s as physicians. This is the same society that in 1961 recognized more than two thousand m.d. degrees to D.O.s merely upon payment of sixty five dollars." (This is taken from the A.O.A. News Review, July 1968 Volume 11, No. 7) I've always thought that the M.D. degree covers a lot of faults but I didn't think it would go to that extreme. It's difficult for me to muster up much respect for an organization that will take two thousand "incompetent" and "ill-trained" individuals, shroud them in a white mantle with the initials M.D. embossed upon it as to imply, "now you are respectable, now you are competent, now you are no longer a 'quack', now go out and practice scientific medicine."

In the same issue of A.O.A. News Review was an article about the setbacks the A.M.A. encountered in its drive for total "amalgamation" of the osteopathic profession. The report of the committee seeking conversion of schools of osteopathy into medical schools, indicated difficulty "in the absence of cooperative leadership on the part of practicing osteopaths and osteopathic educators." The Board Committee on Osteopathy said the A.M.A. has gone "as far as it can reasonably go in the unilateral approach to the problems created for the public by the co-existence of osteopathy . . ." Then why in the hell don't they leave us alone? Can't they see that we don't want to be M.D.s? What problems have we created for the public? We are rendering a health service to the public that it probably would never have received if it weren't for the osteopathic profession. Time and again it has come to my attention that we are such a small part of the total health force (13,000 D.O.'s compared to about 350,000 M.D.s) that we are insignificant. Why bother with us then?

Is it because it's a pretty cheap way to pick up five medical schools and a few hundred hospitals? Is it because after the "amalgamation" they can say "we are the ultimate" or is it because we are the only organization that flaunts their unwarranted invincibility by publicly proclaiming that there can be a competent well trained and well qualified physiican and surgeon and still not be an M.D.? I'm sure they are well aware of the recognition of the osteopathic profession on a National level by all the agencies from the Armed Forces on down.

Dr. Dwight Wilbur, newly installed A.M.A. president said "the A.M.A. must be concerned about the student who had osteopathic training . . . Could he take a state board, could he practice in a medical hospital . . .?" Does Dr. Wilbur read his own reports? All the way back to the Cline reports in the mid-fifties groups of M.D.s have examined our schools and found them adequate. Not too long ago a national organization put out a report on the percentage of failures of doctors taking State Board examination. The M.D.s had some fantastically low figure of about 3 to 5% but even more fantastic was that of the D.O.s — it was 0! Now, if Dr. Wilbur is going to use State Boards as a criterion for qualification to practice medicine then on that basis the D.O. is more qualified.

A few days ago I received the distressing news that Dr. Eugene Powers, President of the Kansas City College of Osteopathy and Surgery, passed away Friday the 19th of July 1968. I had the good fortune of having known Dr. Powers personally. I feel proud to have been numbered amongst his many acquaintances. Most of you may remember him as that little dynamic bundle of energy whose enthusiasm and fervency electrified the audience at the College President's Luncheon at the State Convention in Houston. His loss will be sorely felt by the profession and the College.

Insurance Liaison and Comprehensive Health Facilities Planning Emphasized

Several Texans, both professional and laymen, presented important portions of the lecture program for the Society of Divisional Secretaries at its annual meeting in Chicago just prior to convening of the A.O.A. House of Delegates, as pictured on the following page.

G. W. Tompson, D.O., of Houston, and Mr. John P. Nelka, of Dallas, were principal speakers to present the methods and important advantages of effective liaison between the Osteopathic profession and the voluntary health insurance industry. Mr. Nelka, a claims attorney by profession who was recently honored as the outstanding claims manager within the Connecticut General Insurance Companies, explained the objectives, philosophies and methods involved by insurance companies' claims control programs. Pointing out that the voluntary health insurance industry represents the private citizens financial sources of paying for medical care, the mutual importance of effective insurance administration was clearly seen as a major answer to expanding of Medicare federal-type programs.

Noting that the A.O.A. has recently been forced to embark upon an insurance liaison program at the national level primarily because of the failure by divisional societies to effectively discharge their responsibilities toward their own profession, Dr. Tompson emphasized that an effective liaison program was primarily dependent upon a fair-minded, hard working insurance committee at the state level within the profession, itself. The tremendous advantages to the profession and to the industry which

are achieved because of the frank interchange of reliable information, were described in depth by Dr. Tompson, who is President of the Texas Osteopathic Insurance Liaison Committee, a pioneer effort which has received national recognition by the Health Insurance Council.

Another member of TAOP&S, Dr. Elmer C. Baum, spoke in depth concerning the problems, challenges and opportunities we must encounter under the federal "Partnership for Health" program that is more formally known as Comprehensive Health Facilities Planning Act. In this program, the legislation provides for health facilities planning for all federal programs to be done at the state level, with the single exception of Regional Programs on Cancer, Heart Disease and Stroke. The absolute future of the Osteopathic profession may lie in the planning councils, Dr. Baum told the state secretaries, both on the local and state levels where D.O. — participation is extremely important.

TAOP&S Executive Secretary Mr. Robert B. Price was elected president of the executives secretaries' national association and installed in that office immediately following the annual business session. For two years Mr. Price had served as vice president and program chairman with the S. D. S. In the photo are seen various officers of the national group congratulating Mr. Price. Left to right are Dr. B. J. Davis, Albuquerque, newly-elected trustee; Mr. Price, Dr. C. Fred Peckham, Oswego, N. Y., Immediate Past President; Mr. R. B. Chapman, Trenton, N. J., Secretary-Treasurer; and Dr. Irene Key of Kentucky, Vice President.



Dr. G. W. Tompson is pictured at the podium, Mr. Nelka is seated to his left.



Dr. Baum pictured at the speaker's rostrum with Mr. R. B. Price the Program Chairman.



S.D.S. Officers

A.A.O. Established in Fort Worth



MR. DAVID J. RODGERS
Executive Director

The State Office of the Texas Association of Osteopathic Physicians and Surgeons welcomes the establishment of the national headquarters of the Academy of Applied Osteopathy. Mr. David Rodgers, Director and former Executive Secretary of the Osteopathic Physicians and Surgeons of California commenced operations the second week in August.

Mr. Rodgers will direct the efforts of the academicians toward the achievement of a graduate center.

According to David Rodgers of Sacramento, California, executive director of the Academy of Applied Osteopathy, the decision to establish both the national office and graduate facility in Fort Worth was based on that city's

central geographic location and the area's large number of osteopathic physicians.

Rodgers, who is already building a home in the Fort Worth area, served as executive director of the Osteopathic Physicians and Surgeons of California for the last seven years before taking his present post with the AAO earlier this month.

Rodgers said that as of August 1, the Academy will share quarters with the Texas Association of Osteopathic Physicians and Surgeons, but will have its own separate entrance at 508 Bailey Avenue.

He added, however, that this arrangement will be temporary since present hopes call for housing the national office in the graduate center building now in its initial planning stages.

Rodgers said that although a site for this center has not yet been selected, he expects the land will be purchased before the end of this year and construction well underway by the end of 1969.

"The exact date of completion," he commented, "will depend in large measure on how soon the necessary funds are raised."

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Drug Abuse

By ROBERT N. HINDS, Director

Bureau of Narcotics & Dangerous Drugs, Dept. of Justice

The now widespread abuse and misuse of the stimulant, depressant, and hallucinogenic drugs has been well documented and publicized in the press and TV media. This social phenomenon of the 1960's prompted President Johnson to propose, and the Congress to approve, merger of the Bureau of Drug Abuse Control and the Federal Bureau of Narcotics into one agency known as the Bureau of Narcotics and Dangerous Drugs.

This new bureau, which came into being on April 8, 1968 under the Department of Justice, will pool the talents and resources of the former two agencies into one well coordinated effort to combat the illicit traffickers and purveyors of these drugs.

Amphetamines, barbiturates, and tranquilizers, valuable tools when used as prescribed by the physician, and the illicit hallucinogens such as LSD, marijuana, and mescaline are today's primary socially abused drugs. The hallucinogens, of course, have no medically recognized usage outside of the researcher's laboratory, and there are no legal commercial manufacturers of these drugs.

Federal law and most state laws provide severe penalties for the illegal possession or sale of marijuana. These laws also provide penalties for the illegal manufacture and sale of the other hallucinogens, the barbiturates, amphetamines and some of the tranquilizers.

The Drug Abuse Control Amendments to the Food, Drug, and Cosmetic Act hold all handlers of the amphetamines, barbiturates, specified combinations thereof, and certain tranquilizers, to a strict accounting of all receipts and disbursements of these drugs.

Additionally, prescriptions for one of the controlled drugs may not be filled or refilled more than six months after date of issue and may not be refilled more than five times. After six months or five refills a new prescription must be issued.

The above legal restraints and restrictions are predicated on the very real hazards posed to the physical and mental health of abusers of these drugs.

Amphetamines are stimulants, such as dexedrine, benzedrine, desoxyn, and methamphetamine, and are generally used medically to treat depression, sleeping sickness, and in some weight control regimes.

Excessive use of large doses causes excitability, talkativeness, tremors, enlarged pupils and heavy perspiration, and may result in serious psychiatric disorders and organic brain damage.

Abusers of amphetamines cover a broad spectrum from the college student who takes a few tablets to stay awake in studying for exams, to the burglar who takes a few more to bolster his courage, to the long distance truck driver who takes 150 — 200 mgs. a day to stay awake at the wheel for extended periods of time, to the "speed freak" who "mainlines" 1500 mgs. for "kicks."

Barbiturates are depressants such as nembutal, seconal, and tuinal, and are used medically to treat certain emotional disturbances, induce sleep, sedate and dull pain.

Excessive doses of barbiturates affect individuals much in the same manner as alcohol, causing slurring speech, loss of balance and quarrelsome disposition.

There are thousands of intentional

and accidental suicides each year from barbiturate consumption.

The hallucinogens include LSD (Lysergic Acid Diethylamide), STP (4 Methyl 2, 5 — Diamethoxy Amphetamine), mescaline from the peyote cactus, DMT (Dimethyltryptamine), psilocyn and psilocybin from the Mexican mushrooms and marijuana from the cannabis plant. Perhaps the most widely abused is marijuana. Unquestionably, the most potent is LSD.

There are no legal suppliers of the hallucinogens. All supplies of these drugs available on the "street" are illicitly manufactured.

The average dose, now retailing between \$5 — \$10 a "trip" (a "trip" on LSD is 8-12 hour duration) usually runs between 200-250 micrograms. However, 100 micrograms is sufficient for a trip, so that one ounce of LSD will provide 280,000 doses of 100 micrograms potency.

LSD may produce dilated pupils, auditory and visual hallucinations, trembling, distortion of sight, sound, touch, and taste, irregular breathing, nausea, chills and flushes, panic, suicidal impulses, and loss of sanity.

Its effects are absolutely unpredictable. Hallucinations may recur at any time without warning and without another dose of the drug. Perhaps most disturbing, recent research shows that LSD causes damage to the body chromosomes which suggests that it may cause malformation at birth.

Research with LSD has been under way for some 20 years though the great impetus in this area has been achieved in the past six to eight years. To date, some promise of positive benefits has been shown in the treatment of alcoholism and various mental and emotional disturbances.

Though results are still inconclusive, the Food and Drug Administration and the National Institute of Mental Health, which have control over all

legal supplies of LSD, are conducting and sponsoring the conduct of increasing research into this most powerful and perplexing drug.

Texas is probably the leading state in the country for the production and use of mescaline, the active ingredient of peyote cactus. This cactus grows wild in South Texas. The tops or "buttons" of the peyote cactus are chewed, steeped to make a tea, or dried, ground, and placed in capsules. Mescaline is normally extracted from peyote, but it may also be prepared synthetically in the laboratory. It is a relatively mild hallucinogen.

Marijuana is certainly the most "abused" illicit drug today. This is probably because marijuana is relatively easy to obtain.

However, marijuana does cause hallucinations, with all the adverse ramifications thereof, and does introduce its users to the drug subculture.

The scope of the drug problem cannot be defined in precise terms. It is broad and it cuts across most all ages, socio-economic groups and geographic areas. The most vulnerable are our teenagers and young adults.

We believe education, research and enforcement efforts have and will continue to dissuade most of our finest young citizens from hazarding the risks inherent in the abuse and misuse of drugs.

WANTED: Ambitious mature D.O. with Texas License to work in a well-established Clinic and Hospital Group in the Industrial Area of Houston.

General Practice and Obstetrics. Salary of \$18,000 per year with one month paid vacation.

Homestead Road Hospital & Clinic

**8214 Homestead Road
Houston, Texas 77028**

NEWS OF THE DISTRICTS

District No. Two



D. D. BEYER, D.O., F.A.C.G.P.

The groundbreaking ceremonies were held July 3, 1968, at the Fort Worth Osteopathic Hospital to put in motion an expansion project that will double the hospital's floor space and enlarge seven types of facilities. When the total expansion program is completed in August of 1969, at a cost of 2.4 million dollars there will be a total of 200 beds in the hospital (presently there are 120 beds), and there will be new enlarged facilities in the laboratory, surgical suite, recovery rooms, rehabilitation department, intensive care unit, pediatrics areas, gift shop and library.

Dr. Phil R. Russell, Chairman of the Hospital Board and Dr. Roy Fisher turned the first shovels full at the groundbreaking.

This is the third building for the Osteopathic Hospital. The hospital was established by a group of 20 physicians in 1946 in a Mansion at 1402 Summit Avenue. It was then moved to larger facilities at 3706 Camp Bowie Blvd. in 1950 with a 25 bed capacity. Six years later the hospital was moved to its present location on Montgomery Street.

Dr. Bobby R. Haley has been appointed County Health Officer of Hood County. Dr. Haley is associated with Drs. Robert Rawls and L. G. Ballard in Granbury, Texas.

District 2 congratulates Drs. George J. Luibel and C. E. Dickey on their hard work they put forth during the recent meetings of the House of Delegates of the A.O.A. The Texas Society of General Practitioners congratulates Dr. John H. Burnett, President of the A.C.G.P. and also a Delegate to the A.O.A. on his contributions to the recent meetings of the House of Delegates.

A letter was received recently by all of the A.O.A. members which proves that our Texas Delegation to the A.O.A. House of Delegates is to be highly complimented for their effort and achievements.

S.O.P.A. NEWS

The Annual Convention of the Texas Association of Osteopathic Physicians' Assistants was held on June 22-23, 1968 at the Carrousel Motor Hotel in Houston, Texas.

This was the Seventh Annual Convention to be held and proved to be most successful with many fine speakers, and educational conferences.

Among the guest speakers were: Mr. George Walters, Mrs. Ed D. Syndon, Dr. and Mrs. Art Johnson and Mr. Chet Brooks, State Representative. Toastmaster for the meeting was Mr. George Scoffield.

Dr. and Mrs. Art Johnson of Houston, Texas, presented a talk and showed slides of their Mission in Africa. (The TAOPA has collected many sample drugs for the Johnson's use in their work in Africa.)

Mr. Chet Brooks, State Senator of Pasadena was guest speaker at the banquet. Mr. Brooks is a businessman and former newspaperman. He is president

of a Houston advertising firm, and is active in the real estate business.

He served on the county steering committee for the 1960 and 1964 Democratic Party Presidential campaigns. He has served two terms as secretary of the Harris County Delegation to the House, and is a member of the Harris County Grand Jury Association.

During the business meeting—President Katie Holstead appointed the following Committee Chairman Membership—Elva Childress; Constitution &

Bylaws — Oletta Warren; Convention Program—Betty Woodall; State Organization and Public Relations — Sandy Mason; Educational — Alice Nickles; Ways & Means — Lillian Lloyd; State Reporter and Publicity — Betty Latimer; Nomination — Odell Morris; Scholarship—Armilda Innerarity; Historian & Scrapbook — Rvay Arnold; Parliamentarian — Kay Vance; Auditing — Jim Cain; and Insurance — Wynona Scoggins.

THE TEXAS STATE BOARD OF EXAMINERS IN

THE BASIC SCIENCES

1012 STATE OFFICE BUILDING
AUSTIN, TEXAS 78701

NOTICE OF EXAMINATION

The next examination of the Texas Board of Examiners in the Basic Sciences has been set for Monday and Tuesday, October 14-15, 1968 in Austin.

Details as to time and place may be obtained by writing to the Executive Secretary at the above address.

Applications for the October examination must be complete and in this office by September 13, 1968 and all necessary information and documents required of examinees by the Board must be completed and in the applicant's file by that date. Those interested in participating in this examination should act immediately.

It should be noted that the certificate which is acquired by examination is the only one which is valid for reciprocity with other state basic science boards. The Texas Basic Science Board has reciprocity with the following states: Alabama, Alaska, Arizona, Arkansas, Colorado, Iowa, Kansas, Michigan, Minnesota, Nebraska, Nevada, New Mexico, Oklahoma, Oregon, Rhode Island, South Dakota, Tennessee, Washington and Wisconsin.

The Executive Committee of the TAOP&S is presently screening applicants for the position of Executive Secretary of TAOP&S. Please have any interested individuals contact me at Denton, Texas, 387-6101.

Robert H. Nobles, D.O., President

Officers of the District Associations of the TEXAS ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS, INC.

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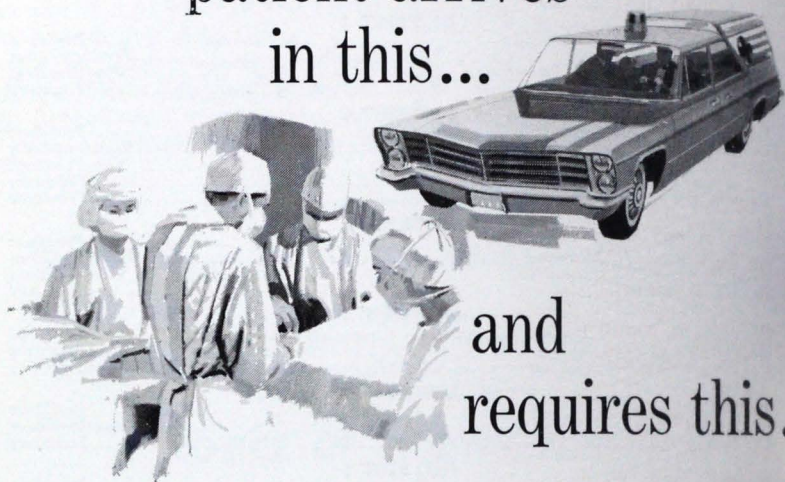
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