

MEDICINE AND THE WAR

ARMY

GROWTH OF ARMY MEDICAL CENTER

Major Gen. Shelley U. Marietta, commanding general of the Army Medical Center, recently stated that there was no truth in the rumor that the Forest Glen section of Walter Reed Hospital is to be transformed into an operative section of this hospital. Forest Glen is actually being further developed for the benefit of personnel sent there for recuperation after operations. Buildings now being erected there provide for the expansion of this feature of physical rehabilitation. However, General Marietta said that the branch at Beltsville, Md., used for patients most advanced toward rehabilitation, is to be abandoned, and patients who would normally be sent there will be sent to convalescent camps throughout the United States.

NURSES GRADUATE AT A. A. F. SCHOOL OF AVIATION MEDICINE

Thirty-five officers of the Army Nurse Corps recently graduated from the Army Air Forces School of Aviation Medicine, Randolph Field, Texas, ten as "flight nurses" and twenty-five as "chief nurses."

The course for flight nurses extends over a period of nine weeks. This is divided into three phases of three weeks each. The first phase is a review of various military and medical subjects required of all military personnel. The second phase is concerned with material peculiar to air evacuation, and the third phase is occupied by actual evacuation flights with the zone of the interior.

The four weeks course given to the chief nurses is designed to familiarize the nurse with various phases of military nursing and nursing administration as well as to enable her to function in a supervisory capacity over Army Nurse Corps personnel.

The diplomas were presented by Col. John R. McGraw, acting commandant of the school.

SALE OF ARMY BANDAGES

Howard Bonham, in charge of public relations for the American Red Cross, points out that the 28,000,000 army bandages that were sold as dusters were not American Red Cross dressings but were purchased from commercial concerns. None of the Red Cross dressings have been salvaged by the War Department. On the contrary, the American Red Cross was recently requested to supply an additional 43,000,000 dressings. The Congressional action controlling the disposal by government agencies of surplus property acquired in connection with the war effort states that no surgical dressings, garments or other items processed, produced or donated by the American Red Cross may be disposed of except after consultation with the American Red Cross.

"LET'S WALK"

Under the title "Let's Walk," the Convalescent Training Division of the Office of the Air Surgeon has issued a manual (Air Forces Manual No. 49) which is designed to teach the man who has had a leg amputation to walk again. It is a well illustrated, carefully prepared handbook, telling the man how to exercise in order to prepare his muscles for the job. There follows a history of crutches, with a description of the various types available and full information leading up to the ultimate use of an artificial limb. The book is based on a large experience and should be most helpful in achieving its purpose.

NAMED POST SURGEON

Col. Charles E. Sima, M. C., has been appointed post surgeon at Fort Des Moines, Iowa, succeeding Major Charles H. Coughlan, who has been transferred to Camp Carson, Colorado.

MEDICAL AID MAN AWARDED MEDAL OF HONOR

The Medal of Honor was recently awarded to a medical aid man, Pvt. Harold A. Garman, formerly of Albion, Ill., who saved the lives of three seriously wounded infantrymen last August 25 when the assault boat in which they were being evacuated across the Seine was fired on by the Germans. At the time of the action Private Garman's medical battalion, the Fifth, was attached to the Fifth Infantry Division of the Third Army, then fighting near Montereau, France. The citation accompanying the award read:

"For conspicuous gallantry and intrepidity at the risk of his life above and beyond the call of duty. On Aug. 25, 1941, in the vicinity of Montereau, France, the enemy was sharply contesting any enlargement of the bridgehead which our forces had established on the northern bank of the Seine River in this sector. Casualties were being evacuated to the southern shore in assault boats paddled by litter bearers from a medical battalion.

"Private Garman, also a litter bearer in this battalion, was working on the friendly shore carrying the wounded from the boats to waiting ambulances. As one boatload of wounded reached midstream, a German machine gun suddenly opened fire on it from a commanding position on the northern bank 100 yards away. All of the men in the boat immediately took to the water except one man, who was so badly wounded that he could not rise from his litter. Two other patients who were unable to swim because of their wounds clung to the sides of the boat.

"Seeing the extreme danger of these patients, Private Garman without a moment's hesitation plunged into the Seine. Swimming directly into a hail of machine gun bullets he rapidly reached the assault boat and then, while still under accurately aimed fire, towed the boat with great effort to the southern shore.

"This soldier's moving heroism not only saved the lives of the 3 patients but so inspired his comrades that additional assault boats were immediately procured and the evacuation of the wounded resumed. Private Garman's great courage and his heroic devotion to the highest tenets of the Medical Corps may be written with great pride in the annals of the corps."

RECENT LECTURES AT SAN FRANCISCO PORT OF EMBARKATION

A series of lectures in Industrial Nursing and Medicine was held at the Port Dispensary, San Francisco Port of Embarkation, Fort Mason, California, under the United States Army Industrial Medical Program from Nov. 29, 1944 to March 7, 1945. The conference was open to all industrial nurses, personnel managers and safety engineers in the San Francisco Bay area. The series was arranged by Col. H. S. Villars, M. C., port surgeon for the San Francisco Port of Embarkation. Among the subjects discussed were the medical aspects of industrial diseases, health education, women in industry and mental hygiene.

ARMY AWARDS AND COMMENDATIONS

Colonel Elliott G. Colby

Col. Elliott G. Colby, formerly of San Diego, Calif., has been awarded the Bronze Star "for meritorious achievement in connection with military operations against the enemy on Saipan, Marianas Islands, as surgeon for Army Garrison Force APO 244, an Island Command, Saipan, Marianas Islands, from April 15, 1944 to Nov. 24, 1944. Colonel Colby landed on Saipan on D plus 2 and assisted at the evacuation stations and field hospitals. With inadequate personnel he established a hospital

for the care of a civilian population of approximately 17,000 and generally supervised the sanitation of the civilian camp during the period of the assault. He made early reconnaissance in areas infested with Japanese snipers, selected sites and prepared layouts for the hospitals. He prepared a plan for and participated in the establishment of the air evacuation of casualties which was successfully conducted from the island of Saipan. Colonel Colby was confronted with a task of establishing sanitary and livable conditions on an island utterly devastated and on which there were scarcely forty inhabitable and no undamaged buildings. The thousands of unburied enemy dead, the mounds of debris and the unhealthful habits of disease ridden civilians, added to the swarming flies, crawling insects, teeming mosquitoes and multitudinous vermin, virtually all disease bearing, posed one of the major problems of the occupation and resulted in an epidemic of dengue and dysentery which threatened the success of the mission. By his untiring efforts, ingenuity, practical approach and professional ability he devised and initiated a program of spraying the island from an airplane with DDT, using improvised equipment, and thereby eradicated the flies, mosquitoes and vermin, which immediately reflected a reduced rate of illness and restored the maximum number of soldiers to duty. This accomplishment was a major contribution to the success of the mission, which made possible the mass air raid on Tokyo on Nov. 24, 1944." Dr. Colby graduated from the College of Medical Evangelists, Los Angeles, in 1922 and entered the service Sept. 16, 1940.

Lieutenant Colonel James W. Branch

Lieut. Col. James W. Branch, formerly of Hope, Ark., was recently awarded the Bronze Star "for meritorious achievement in connection with military operations against an enemy of the United States in France during the period July 29, 1944 to Oct. 13, 1944. He controlled and directed the activities of the . . . Medical Battalion Armored which evacuated . . . wounded and sick. Frequently he operated in enemy territory, and on one occasion he with another officer and an enlisted man was captured. After being held captive for three days and being subjected to both friendly and enemy artillery fire, he succeeded in persuading fifty of the enemy to surrender. This action supplied our troops with much valuable information. Lieutenant Colonel Branch organized collecting platoons and treatment platoons so that fatal casualties were rare once the wounded reached the medical battalion. When unit detachments sustained casualties, trained aid men from the medical battalion were able to perform these functions efficiently. His professional knowledge, ability to organize the medical evacuation, and his tactical efficiency reflects great credit on himself, his battalion and the Medical Corps of the United States Army." Dr. Branch graduated from the University of Arkansas School of Medicine, Little Rock, in 1935 and entered the service Feb. 3, 1941.

Captain Nicholas W. Hatfield

The Silver Star was recently awarded to Capt. Nicholas W. Hatfield, formerly of Indianapolis, "for gallantry in action at Biak Island, June 7, 1944. Although himself painfully and seriously wounded during the barrage of enemy artillery and mortar fire, Captain Hatfield, a medical officer in command of a collecting platoon, refused to be evacuated until he had personally treated the casualties brought to him by personnel of his platoon. This required four hours, during which time he was continually exposed to intermittent enemy fire. When the last casualty had been treated and evacuated, Captain Hatfield was carried to the beach evacuation point. Owing to limited facilities for evacuating wounded to hospitals in the rear, Captain Hatfield again refused to be evacuated until the evacuation of the other wounded had been completed. This necessitated another delay of thirty-six hours. His outstanding devotion to duty probably saved the lives of many wounded." Dr. Hatfield graduated from Jefferson Medical College of Philadelphia in 1935 and entered the service July 5, 1942.

Brigadier General Edgar King

Brig. Gen. Edgar King, commanding officer of the Medical Section, Army Service Forces Training Center, Fort Lewis, Washington, was recently awarded the Legion of Merit for

"exceptionally meritorious conduct in the performance of outstanding services." The citation states that General King "directed and coordinated the organization, training and supply of medical units which participated with the forces engaged in the successful operations in the Filbert, Marshall and Marianas Islands." General King graduated from the University of Arkansas School of Medicine, Little Rock, in 1906 and from the Army Medical School in 1907. He was surgeon of the Hawaiian Department at the time of Pearl Harbor and was awarded the Distinguished Service Medal for outstanding work in caring for Pearl Harbor casualties. Subsequently he was surgeon of the Central Pacific Area and then became surgeon of the United States Armed Forces, Pacific Ocean Area.

Major Howard P. Serrell

The Silver Star was recently presented to Major Howard P. Serrell, formerly of Greenwich, Conn., for "meritorious service" in France. Dr. Serrell, who graduated from Cornell University Medical College, New York, in 1932, entered the service in November 1942. The War Department stated that he was decorated for "voluntarily flying into besieged Bastogne on Christmas Day to render medical aid to the U. S. forces there." Accompanied by a medical corpsman, Dr. Serrell flew into Bastogne in a small plane accompanied by four U. S. Army Air Corps pursuit ships as guards. Throughout Christmas day he performed twenty major operations, "saving many lives." Dr. Serrell also took part in the D day invasion of Normandy.

Captain Benedict Biondi

The Chinese Grand Star of Honor Medal, for outstanding and distinguished service rendered to the republic of China and to the Chinese army, was recently presented to Capt. Benedict Biondi, formerly of New Haven, Conn. With the medal Dr. Biondi also received a certificate with the official Chinese signatures. Dr. Biondi graduated from Tufts College Medical School, Boston, in 1938 and entered the service Aug. 13, 1943. He is now serving in China with the Fifty-Third Portable Surgical Hospital.

Captain William Henry

Capt. William Henry, formerly of New York City, was recently awarded the Bronze Star for heroism. Dr. Henry is regimental surgeon of the 112th Infantry medics (with the 28th Infantry Division in France). He has been active at the front in all of the 28th's campaigns—the Normandy hedgerow battles, the closing of the Falaise Gap, the sweep across Belgium and Luxembourg and the first allied punch at the Siegfried Line on Sept. 10, 1944. Dr. Henry graduated from Long Island College of Medicine, Brooklyn, in 1941 and entered the service July 1, 1942.

Colonel Marshall M. Best

For meritorious service last year the Bronze Star was awarded to Col. Marshall M. Best of Xenia, Ohio, now stationed in France. Accompanying the award was a citation from Brig. Gen. William L. Richardson, which complimented Dr. Best for his "ingenuity, enthusiasm and skill" as command surgeon of the Ninth Air Service Command. Dr. Best graduated from the University of Cincinnati College of Medicine in 1927 and entered the service Jan. 5, 1941.

Major G. Charles Morrone

The Bronze Star for "meritorious service" in connection with military operations against the enemy in France and Belgium was recently awarded to Major G. Charles Morrone of Yonkers, N. Y., while serving as general surgeon of the 44th Evacuation Hospital. Dr. Morrone graduated from Georgetown University School of Medicine, Washington, in 1930 and entered the service in August 1942.

Colonel Anthony J. Lanza

The Legion of Merit was recently awarded to Col. Anthony J. Lanza, formerly of Arlington, Va., "for exceptionally meritorious conduct in the performance of outstanding services from March 1942 to December 1944." Dr. Lanza graduated from George Washington University School of Medicine, Washington, in 1906 and entered the service March 12, 1942.

MISCELLANEOUS

THE CADET NURSE CORPS

Testimony of Thomas Parran, Surgeon General,
U. S. Public Health Service, Before the
House Committee on Military
Affairs, February 6

The Public Health Service, working with the hospital and nursing associations, has been actively concerned with the total wartime nursing problem since 1941. In the fiscal years 1941-1943 Congress appropriated \$5,300,000 to be allotted to nurse training schools as incentive payments to increase student nurse enrolments. In the spring of 1943 it became apparent that the limited measures were insufficient to meet the demands of total war. After extensive hearings the Bolton Nurse Training Act was passed. The provisions of this act were designed by all national nursing and hospital groups, who were agreed that this was the only practical way to meet the total situation. Under the provisions of the Bolton act the U. S. Cadet Nurse Corps was organized. The purpose of the act is to furnish an adequate supply of nurses for the armed forces, governmental and civilian hospitals, health agencies and war industries. Consideration at that time was given to establishing a program exclusively for the armed forces. It was decided, and I think wisely decided, that one unified training program should be undertaken to meet both the military and civilian needs. The Bolton act became effective July 1, 1943. Under its provisions grants of federal funds are made to schools of nursing meeting provisions of the act. The more important provisions are (1) that the school will give an accelerated program of training (twenty-four to thirty months instead of thirty-six months), (2) that students admitted to the corps pledge to "engage in essential nursing, military or civilian, for the duration of the war" and (3) that in return for the moral obligation which the student nurse assumes, the government pays all reasonable tuition, fees and other training costs and provides a distinctive uniform.

The U. S. Cadet Nurse Corps has been highly successful; in fact, it has been recognized as the most successful recruitment effort of the war. More than 1,100 out of a total of 1,300 nurse training schools are participating. A quota of new admissions to all schools was set at 65,000 for the first fiscal year. The actual number of admissions was 65,521. The quota set for the current fiscal year is 60,000 and for next year the same. The total corps membership of first, second and third year students on Jan. 1, 1945 was 105,000. These quotas do not represent the full needs of the country for nursing service. They do represent, however, the maximum training capacity of the nurse training institutions, and the numbers being trained should meet our most urgent needs for nurses.

Since many schools could not accelerate their training programs for older students and since most of these students had already paid their tuitions, only a small proportion of students approaching graduation at that time joined the corps. As a result, during the first fiscal year there were only 1,206 graduates of the corps, and during the current fiscal year 9,165. The number will increase sharply: for the fiscal year 1945-46, 25,166; for the fiscal year 1946-47, 35,579.

All required clinical experience, laboratory and classroom instruction must have been completed under an accelerated program within a period of not more than thirty months. This makes the student available as a senior cadet for full time nursing service during her last six months before graduation. She performs hospital nursing service comparable to that of a graduate nurse. Many state regulations require thirty-six months' training before a student nurse may graduate and take the examination to become a registered nurse.

The Bolton act provides that senior cadets may apply for service in army, navy and other federal hospitals in this country. From April 1944, the first date at which senior cadets became available, until Jan. 1, 1945 the total number of senior cadet nurses was 8,556. The U. S. Civil Service Commission, clearing agency for the federal services, reported 10,168 applications during that same period. Some of these applicants will not be available for active duty until the first months of 1945. The number of available senior cadets will be doubled and trebled during the current and next fiscal years.

The single most important and immediate function of the Cadet Nurse Corps has been the replacement of graduate nurses in civilian hospitals, which makes it possible for greater numbers of graduates to go into the military. Even in 1943, before the great increase in student enrolment, student nurses were giving two thirds of all the nursing care in civilian hospitals operating training schools (Altenderfer, Marion E.: *Pub. Health Rep.* 60:90 [Jan. 26] 1945). Our best estimates are that students now are giving 80 per cent of nursing care in their associated hospitals.

By replacing graduate nurses who already have gone into the military, the U. S. Cadet Nurse Corps has prevented a collapse of nursing care in civilian hospitals. Moreover, the increasing number of graduates constitute a reservoir of nurse power which if effectively distributed would in my opinion meet both the military and minimum civilian needs.

This nurse training program represents a substantial investment of federal funds: \$63,000,000 during the current fiscal year. In my opinion the country has received and increasingly will receive substantial returns on this investment. We cannot measure what the loss to the country would have been if civilian nursing service had collapsed, any more than we could measure the cost of failure on the Normandy beachheads. We can, however, recognize the practical contribution already made by the thousands of loyal and tireless members of the U. S. Cadet Nurse Corps. They have made it possible to release many more graduates to the armed forces; as senior cadets they have given service comparable to graduates in the five federal services, the largest of which is the Army. Increased admissions to schools of nursing in 1944 (76 per cent as compared with 1940, the last year prior to federal aid) have prevented the collapse of civilian nursing, the reservoir from which the military must draw.

Cadet nurses have been criticized because not all of them have applied for military service. The law as passed by the Congress does not impose that obligation on them. Of the approximately 10,500 nurses who have graduated from the Cadet Nurse Corps during its first eighteen months existence ended Jan. 1, 1945, 40 per cent have applied or have actually been accepted by the military services, and this record was made during the time when the public believed the war about to end. It does not include the peak enlistment period since January 1. They have responded for military duty in much greater proportion than have their classmates who were not in the corps. To be specific, there were graduated from nurse training schools last year some 29,000 nurses. If 40 per cent of this total number had entered the armed services the Army's 1944 quota of 10,000 additional nurses would have been exceeded at the time the President made his recommendation.

Hospitals today are caring for the largest number of patients in their history in spite of the fact that we have no widespread epidemics. While some nurses can be withdrawn from hospital service, there is no large reservoir in this group. The Army should not accept nurses who are occupying positions which are really essential. There are two groups of nurses in particular where a great damage may be done. Public health departments and visiting nurse associations employ approximately 21,000 nurses. None of them are overstaffed. In fact, this figure represents 20 to 30 per cent vacancies. Public health nurses constitute the largest single group among all health department employees. Without nurses, health departments cannot operate. Because many hospitals are overloaded, many sick patients are being cared for in their homes by visiting nurses.

The nurse training schools are training an unprecedented number of nurses. Losses of teaching staffs to the military have been severe during the past three years.

We must continue, therefore, to supply a minimum number of graduates with minimum special preparation to fill key positions vacated in staffs of public health agencies and schools of nursing.

As the war progresses, the major civilian health problems are still ahead of us. We shall see the cumulative effects of fatigue, long hours of work, worry, anxiety and grief. In other words, there is bound to be a lower level of civilian health and greater susceptibility to disease. We have been fortunate up to now in not having had any serious epidemics.

ROCHESTER LEAGUE FOR THE HARD OF HEARING TO AID VETERANS

The Rochester League for the Hard of Hearing, Rochester, Minn., recently completed a program whereby returning veterans who have suffered loss of hearing at the battle fronts will be given aid and instructions. The league has trained interviewers and teachers and a program of social activities. The organization can direct the hard of hearing person to the agency that will try to place him in a job or suggest his vocational training needs. The league conducts classes in lip reading, with instructors supplied by the board of education. It is equipped also with a club room and kitchen for social activities. Another service the organization offers is audiometer tests to guide the hard of hearing in the selection of mechanical hearing aids that are on the market.

PSYCHIATRIC NURSING SCHOOLS

Neuropsychiatric nursing schools are now activated at the following general hospitals in the stated service commands: First, Pushing, at Framingham, Mass.; Second, Mason, at Brentwood, N. Y.; Fourth, Kennedy, at Memphis; Seventh, Fitzsimons, at Denver; Eighth, McCloskey, at Temple, Texas. The Army Medical Department stated that similar schools will be established in the other commands in a short time.

Leading specialists are now supervising a three month training course in these schools. The enrollees are volunteer army nurses, and a certificate of neuropsychiatric nursing is awarded on successful completion of the course. At least two of these nurses are assigned to each general hospital in this country and to the staff of general hospitals organized in this country for service abroad.

BELGIAN AMERICAN EDUCATIONAL FOUNDATION, INC.

Three pamphlets, published in French, on the subject of blood transfusion, penicillin and the use of the sulfonamide drugs were recently issued by the Belgian American Educational Foundation, Inc. (420 Lexington Avenue, New York 17) and are being distributed free of charge to members of the medical profession in Belgium. Some of these pamphlets have already arrived in Belgium and additional pamphlets are now being prepared.

HOSPITALS NEEDING INTERNS AND RESIDENTS

The following hospitals have indicated to the Council on Medical Education and Hospitals that they have not completed their house staff quota allotted by the Procurement and Assignment Service:

(Continuation of list in *THE JOURNAL*, April 7, page 928)

DELAWARE

Wilmington General Hospital, Wilmington. Capacity, 224; admissions, 4,267. Mr. T. A. Weth, Superintendent (1 intern).

ILLINOIS

Loretto Hospital, Chicago. Capacity, 159; admissions, 4,221. Sister M. Stephanie, R.N., Superintendent (interns, October and December). St. Mary's Hospital, East St. Louis. Capacity, 276; admissions, 5,366. Sister M. Prosperia, R.N., Superintendent (2 interns).

MASSACHUSETTS

Brockton Hospital, Brockton. Capacity, 151; admissions, 2,608. Dr. F. M. Hollister, Superintendent (1 intern, July 1).

NEW YORK

Israel Zion Hospital, Brooklyn. Capacity, 518; admissions, 9,867. Dr. J. Prager, Executive Director (interns, July and October). Mother Cabrini Memorial Hospital, New York City. Capacity, 205; admissions, 3,212. Mother Corinna, Superior (interns).

NORTH CAROLINA

Watts Hospital, Durham. Capacity, 225; admissions, 7,527. Mr. Samuel B. Forbus, Superintendent (2 interns, 1 resident—medicine, July 1).

OHIO

St. Thomas Hospital, Akron. Capacity, 235; admissions, 6,147. Sister M. Eleanor, R.N., Superintendent (2 interns, 1 resident, July 1).

WARTIME GRADUATE MEDICAL MEETINGS

The following subjects and speakers for Wartime Graduate Medical Meetings have just been announced:

California

A. A. F. Regional Hospital, March Field, Riverside: Blood Plasma and Substitutes, Lieut. Col. R. M. Jones; Water Balance, Major Edward Swartz, April 17.

Torney General Hospital, Palm Springs: Fractures About the Wrist, Lieut. Col. Richard B. McGovney; Fractures About the Ankle Joint, Dr. Samuel S. Mathews, April 17.

Station Hospital, Camp Cooke, Lompoc: Allergies, Dr. Robert W. Lamson, April 18.

Hoff General Hospital, Santa Barbara: Allergies, Dr. Robert W. Lamson, April 18.

A. A. F. Regional and Convalescent Hospital, Santa Ana: Surgery of the Traumatic Abdomen, Dr. Charles Phillips and Comdr. Gaylord Bates, April 17.

U. S. Naval Air Training Station, San Diego: Problems of Urology, Major P. S. Bennetts, April 20.

U. S. Naval Hospital, Long Beach: Thoracic Surgery, Dr. John Jones and Lieut. Comdr. J. E. Dailey, April 21.

Letterman General Hospital, Presidio of San Francisco: Psychosomatic Medicine, Dr. Karl Bowman, April 21.

Station Hospital, Fort McDowell, Angel Island: Changing Trends in Syphilotherapy, Drs. Norman N. Epstein and Rees B. Rees Jr., April 27.

Illinois

Regional Hospital, Rantoul: Brain and Spinal Cord Injuries, Dr. Loren William Avery, April 18; Conditions Affecting Glucose Metabolism, Dr. Arthur R. Colwell, April 25.

Indiana

Billings General Hospital, Fort Benjamin Harrison: Diseases of the Intestinal Tract: Medical and Surgical Diagnosis and Care, Drs. Walter Palmer and Warren Cole, April 25.

Wakeman General Hospital, Camp Atterbury: Dermatologic Disease, Drs. C. G. Culbertson and Stephen Rothman, April 25.

Kentucky

Fort Knox General Hospital, Louisville: Low Back Pain, Dr. Fremont A. Chandler, April 18; Late Treatment of Burns, Dr. Wayne B. Slaughter, April 18.

Nichols General Hospital, Louisville: Low Back Pain, Dr. Fremont A. Chandler, April 19; Late Treatment of Burns, Dr. Wayne B. Slaughter, April 19.

Nebraska

Station Hospital, McCook Army Air Field: Melena—Those Obscure Hemorrhages from the Bowel, Dr. Julius B. Christensen, April 17; Hematuria, Dr. Leroy W. LaTowsky, April 17; Blood and Its Derivatives, Dr. Raymond L. Borchers, April 17.

Pennsylvania

Deshon General Hospital, Butler: "Blood Dyscrasias" and "The Rh Factor and Erythroblastosis Fetalis," Dr. Mortimer Cohen, April 17.

U. S. Naval Hospital, Philadelphia: Functional Nervous Disorders and Their Differentiation from the Organic, Dr. George Wilson, April 20.

Virginia

Woodrow Wilson General Hospital, Staunton: Arteriovenous Fistula, Dr. William B. Porter, April 18; Penicillin, Capt. Monroe Romansky, April 25.

A. A. F. Regional Hospital, Langley Field: Psychosomatic Medicine, Dr. Salomon Katzenelbogen, April 27; Radiology, Dr. Clayton W. Eley, April 27.

Wisconsin

Station Hospital, Camp McCoy: Heart Disease, Dr. Chester M. Kurtz, April 25.

MATERNITY CARE

Dr. Martha M. Eliot, associate chief of the Children's Bureau, United States Department of Labor, reported recently that three fourths of a million servicemen's wives and infants received care under the emergency maternity and infant care program in the first two years of its operation.