

1950 - 1951

Second Annual Report

DEPARTMENT OF SURGERY

University of Colorado School of Medicine

Henry Swan, M.D.

Professor and Head of the Department

I. Department Status:

July 1951, brings to a close the first year of tenure of the present incumbent as Head of the Department. The year may be characterized as one in which the Department was attempting to catch-up with the marked expansion of its activities which occurred primarily during the years 1947 to 1950 under the able leadership of Dr. John M. Foster. In many respects, progress has been shown in these attempts to meet the Department's responsibilities.

The very large service load undertaken by the Department is detailed in the statistical section of this report. In summary, exclusive of our affiliated hospitals, the staff undertook the responsibility for 34,377 outpatient visits and 4,677 hospital patients, and performed 2,429 major and 3,419 minor operations. The teaching load at undergraduate and graduate level remained at the high level established last year, which was outlined in more detail in last year's report.

The creation of a Department Staff Executive Committee has strengthened our Department organization so that staff relationships and staff acceptance of responsibility have improved steadily; the five-year residency program has proved to be a tower of strength in meeting our teaching and patient service obligations; the acceptance of the Administration of our recommendation to recognize the importance of the Senior residents to the School by giving them faculty appointments has materially lessened the economic hardship of the residency; the assimilation of the Denver General Hospital into the teaching and service program of the Department has made notable strides. Inter-departmental relations have remained on a high plane.

On the other hand, the conclusion of the year still finds the Department severely undermanned both in professional and clerical full-time personnel. The Division of Orthopedic Surgery operates a large teaching and service program, and for two years the staff of the Division have been urging the appointment of a full-time Head of the Division. This has now been authorized by the Administration, and it is hoped that this problem will meet solution in the immediate future. The Division of Neuro-Surgery is severely understaffed in meeting their service demands. Although the volume of the service does not at the present time warrant the establishment of a specialty residency program, the advent of a

full-time neurologist next year in the Department of Medicine will increase the demands on this Division. As indicated in Dr. Freed's report, (See Pg. 14 ) because of the demands of private practice on the volunteer faculty, the appointment of a half-time Head of the Division of Neuro-Surgery is strongly indicated. The Division of Ophthalmology also strongly feels the need for a full or half-time Head of the Division. (See Dr. Danielson's report). In addition, the Department still finds itself extremely short on stenographic and clerical help, and in budgetary allocations for operating expenses.

The growth of the Graduate School activities has added a tremendous administrative burden to the Department. Three years ago, this Department had no students enrolled in the Graduate School; this year, through the Medical Center affiliated and regular residency programs, the Department had fifty students enrolled. This, of course, means counselling of each student in his selection of courses; grades for each student each quarter; guidance of each student in his Master's Thesis; comprehensive master's examinations for candidates presenting themselves for degrees; and staff participation in graduate school courses. The Administration must recognize the magnitude of this increased burden in the form of increased full-time personnel if this program is to be effectively accomplished. It is a credit to the already busy full-time and volunteer staff that this year six degrees of Master of Science were awarded by the Department. The recipients of these degrees and the titles of their Master's Theses are as follows:

Division of General Surgery

Feehan, John Joseph, Jr.: " The Preservation of Aorta Homografts by Freezing and Storing at Low Temperatures". (CGH)

Eckhout, Gifford Van: " The Treatment of Acute Gastro-duodenal Perforations by the Mushroom Catheter Technique". (St. Joseph's)

Neerken, Adrian John: " A Water Soluble Agent for Bronchography". (DGH)

Humphreys, James William Jr.: "Vagotomy in the Treatment of Peptic Ulcer". (Fitz.)

Division of Anesthesia

Pierce, Allison Ford: " Pain Threshold Determinations With Nitrous Oxide and Sodium Pentothal Separately and Combined". (CGH)

Division of Otolaryngology

Somers, Kenneth: " Intravenous Procaine Following Tonsillectomy". (CGH)

The affiliation between State Hospital, Pueblo, and the Department became firmer during the year. In December 1950, at the request of Dr. Eugene Ley and myself, Dr. F. H. Zimmerman, Administrator of the Hospital, authorized the employment of a full-time Chief of the Surgical Division at State Hospital and on January 1, 1951, we were fortunate in welcoming to our staff, Dr. J. Cuthbert Owens to fill this position. His problems in raising the service to the level of a teaching residency have been and will continue to be many. Some real success has already been attained. The volume of surgery for the six months from January to June was double that of the previous six months, while, at the same time, the mortality rate was cut in half. The Department will endeavor in every way to support Dr. Owens in his efforts by supplying consultant visits from our staff in accordance with the need. Dr. Virtue has been sending a second year anesthesia resident to the hospital for the past several months. Dr. Zimmerman has promised the services of a full-time anesthetist at the hospital, a must if an adequate service program is to be maintained. On the strength of the advent of Dr. Owen's full-time, approval of our four year affiliated Surgical Residency Program has been obtained, which in turn has solved the problem faced by Children's Hospital in the withdrawal of its one year Surgical Residency approval. The resident in this program now will spend his first year at Colorado General Hospital, his second at Children's Hospital and his third and fourth at State Hospital, Pueblo. This Department endeavor is in line with the Medical School policy to attempt to provide community services throughout the state where the need exists and our help is requested.

The integration of the Denver General Hospital progressed materially during the year. To a large measure, this was accomplished through meetings of the Department Executive Committee. Appointment and promotion policies were clarified and made uniform for men on service in the two teaching hospitals. Service assignments have continued on a rotation basis. Department staff policy and services at both hospitals are at the present time on a unified basis. The five year residency program sees the residents rotate between assignments at both hospitals. The philosophy of the resident system is the same, but the difference in the type of patient load at each institution broadens the resident's experience. The undergraduate Senior students continued to spend equal periods of time in each hospital. The Denver General and Colorado General Hospitals now represent equally important assets in the training, service and research program of the Department.

In addition, Fort Logan Veteran's Hospital has proved of great value in our undergraduate teaching, particularly in the Junior year. Under the direction of Dr. Paul M. Ireland, Chief of the Surgical Service at this hospital, clinics were arranged for the Junior Surgical Clerks twice a week throughout the academic year. With the removal of the Veteran's Hospital to its new building adjacent to the Medical Center, even further teaching use of this body of clinical material may become possible.

Dr. Mordant E. Peck, during the second half of the year, was requested to study our teaching program in the Junior year and its relationship to our Outpatient clinics at all hospitals. This has resulted in a report making several very constructive suggestions which will be implemented in the coming year and should materially strengthen our teaching of the Junior Surgical Clerkships as well as improve our Outpatient services.

A few important changes have been made in the roster of both the volunteer and full-time faculty. Dr. David H. Watkins joined the staff full-time in the Division of General Surgery in the capacity of Associate Professor of Surgery and Associate Chief of the Division of Surgery, Denver General Hospital. Dr. Watkins, coming to us from Ohio State University, had previously spent several years first as Fellow and later as Associate at the Mayo Foundation, University of Minnesota. During the latter half of the year, in association with Dr. Geo. Ellis, Chief of the Division of Surgery at Denver General Hospital, Dr. Watkins has aided materially the program at that institution. The appointment of Dr. J. Cuthbert Owens has already been mentioned. In the Division of Anesthesia, Dr. Philip A. Lief resigned on September 1, 1950, to assume a position at Montefiori Hospital in New York City. Dr. Robert Virtue became Acting Head of the Division, and has maintained a very active and effective service at both hospitals. This was greatly aided by the appointment of Dr. Edith Roth-Kepes, who joined the staff on September 15, 1950, as Assistant Professor of Anesthesiology, working primarily at Denver General Hospital.

Dr. H. Mason Morfit has continued to serve half-time as Chief of the Division of Oncology, and Dr. James Stapleton remained on a part-time basis in the Tumor Clinic.

Mrs. Elizabeth Willins continued to bear the heavy brunt of our administrative problems as Senior Secretary of the Department, often working long hours overtime. The administrative staff was strengthened by the addition of Miss Elvira Wurch, who has been assigned to Dr. Watkins to help in the work at Denver General Hospital. Mrs. Mary Jo Wood served helpfully throughout the year as Senior Clerk at Colorado General Hospital. The secretarial and clerical work of the Department is at present of such magnitude that additional secretarial help is greatly needed.

It is with pleasure that we announce the appointment of the following men to the faculty of the Department of Surgery.

<u>Name</u>	<u>Rank</u>	<u>Date of Appointment</u>
Watkins, David Hyder, M.D.	Assoc.Prof. & Assoc. Chief of the Div.of Gen. Surgery, Denver General Hospital	January 1, 1951
Feehan, John Joseph, Jr., M.D.	Instructor in Surgery	July 1, 1950

Appointments (con't)

<u>Name</u>	<u>Rank</u>	<u>Date of Appointment</u>
Johnson, Marvin E., M.D.	Clin. Instructor in Surgery	July 1, 1950
Rachiele, Frederick J., M.D.	" " " "	March 1, 1951
Robertson, Howard T., M.D.	" " " "	July 1, 1950
Owens, James Cuthbert, M.D.	" " " "	January 1, 1951
Reimers, Wilbur L., M.D.	Assistant in Surgery	July 1, 1950
White, Hays MacMurray, M.D.	Assistant in Surgery	July 1, 1950
Warner, George W., M.D.	Assistant in Surgery	July 1, 1950
Kepes, Edith Roth, M.D.	Ass't. Prof. of Anesthesiology	September 15, 1950
Cowen, Homer Charles, M.D.	Clin. Ass't. in Ophthalmology	January 1, 1951
Chapman, Katharine H., M.D.	Lecturer in Ophthalmology	April 1, 1951
Droegemueller, William H., M.D.	" " "	April 1, 1951
Koplowitz, Joseph E., M.D.	" " "	April 1, 1951
Nelson, Fritz, M.D.	" " "	April 1, 1951
Stine, Geo. Haeberle, M.D.	" " "	April 1, 1951
Glassburn, Alba Roscoe, M.D.	Clin. Ass't. in Orthopedic Surgery	January 1, 1951
Garcia, Felice A., M.D.	Clin. Instructor in Plastic Surgery	October 1, 1950

Other changes in the Staff were as follows:

<u>Name</u>	<u>Promotions</u> <u>Rank</u>	<u>Effective Date of Promotion</u>
Henry Swan, II, M.D.	Professor & Head of the Dept. of Surgery	July 1, 1950
<u>Division of General Surgery -</u>		
Kenneth C. Sawyer, M.D.	Ass't. Clin. Prof. of Surgery	July 1, 1950

<u>Name</u>	<u>Rank</u>	<u>Effective date of Promotion</u>
Gilbert Balkin, M.D.	Clin. Instructor in Surgery	January 1, 1951
John Steel Benwell, M.D.	" " " "	July 1, 1950
Howard Ferris Bramley, M.D.	" " " "	January 1, 1951
Gerald H. Friedman, M.D.	" " " "	January 1, 1951
James Adams Stapleton, M.D.	" " " "	July 1, 1950
Monroe Robinson Tyler, M.D.	" " " "	January 1, 1951

Division of Ophthalmology -

Geo. Arnold Filmer, M.D.	Ass't. Clin. Professor of Ophthalmology	July 1, 1950
Eli Bard, M.D.	Clin. Instructor in Ophthalmology	January 1, 1951
John Albert Egan, M.D.	" " " "	January 1, 1951
Robert Sterling, M.D.	" " " "	January 1, 1951

Division of Orthopedic Surgery -

Harry Carpenter Hughes, M.D.	Ass't. Clin. Professor in Orthopedic Surgery	January 1, 1951
Daniel Stewart McKenna, M.D.	Clin. Instructor in Orthopedic Surgery	January 1, 1951
William Frank Stanek, M.D.	Clin. Instructor in Orthopedic Surgery	July 1, 1950

Division of Otolaryngology -

Merrill O. Dart, M.D.	Clin. Instructor in Otolaryngology	July 1, 1950
Rocco Louis Barra, M.D.	" " " "	January 1, 1951
James Robert Blair, M.D.	" " " "	October 1, 1950
Sidney Harold Fieman, M.D.	" " " "	January 1, 1951
Howard Edward Swanson, M.D.	" " " "	January 1, 1951

Division of Plastic Surgery -

Douglas Wetherill Macomber, M.D.	Associate Clinical Professor of Plastic Surgery	July 1, 1950
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Division of Proctology -

William Byron Swigert, M.D.	Clin. Instructor in Proctology	January 1, 1951
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Division of Thoracic Surgery -

William Bean Condon, M.D.	Ass't. Clin. Professor of Thoracic Surgery	January 1, 1951
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<u>Name</u>	<u>Rank</u>	<u>Date</u>
<u>Division of Urology-</u>		
Henry Augustus Buchtel, M.D.	Clin. Instructor in Urology	January 1, 1951
Solomon Herbert Bassow, M.D.	" " " "	January 1, 1951
Samuel Wm. Downing, Jr., M.D.	" " " "	July 1, 1950
Isadore Gersh, M.D.	" " " "	July 1, 1950
<u>Resignations</u>		
<u>Division of Anesthesiology:</u>		
Philip Alfred Lief, M.D.	Assoc. Prof. & Head of the Division of Anesthesia	September 1, 1950
<u>Division of General Surgery:</u>		
Edward M. Lipan, M.D.	Clin. Ass't. in Surgery	January 1, 1951
Myron Wilkoff, M.D.	" " " "	January 1, 1951
Lawrence A. Wilson, M.D.	" " " "	January 1, 1951
<u>Division of Orthopedic Surgery:</u>		
Hugh W. L. Westbrook, Jr., M.D. (M.C.)	Clin. Instructor in Orthopedic Surgery	July 1, 1950
Piero Albi, M.D.	Clin. Ass't. in Orthopedic Surgery	January 1, 1951
<u>Division of Otolaryngology:</u>		
Myers Bowman Deems, M.D.	Clin. Ass't. in Otolaryngology	July 1, 1950
<u>Change of Status</u>		
John McEwen Foster, M.D.	To - Clin. Professor of Surgery From - Clin. Professor & Head of the Dept. of Surgery	July 1, 1950
<u>To Inactive Status</u>		
Merrill Collins Jobe, M.D.	Assoc. Clin. Professor of Surgery	January 1, 1951
Prinzing, Joseph Fredric, M.D.	" " " " "	August 18, 1948
Burlingame, Robert Miles	Clin. Ass't. in Surgery	

During the year, the following Residents served on the Surgical House Staff at the University Hospitals:

Anesthesia: Dr. Rafael Junquera, Dr. Alice J. Smith, Dr. Rodolfo Galeano and Dr. Barbara Makaroff.

General Surgery: Dr. Robert J. Beveridge, Dr. Scott P. Christensen, Dr. James B. Dumm, Dr. John J. Feehan, Jr., Dr. Lawrence M. Gwinn, Dr. Clare W. Johnson, Dr. Lorence T. Kircher, Dr. Duane D. Lahey, Dr. Michael Lubchenco, Dr. Gordon A. Munro, Dr. Wilbur L. Reimers, Dr. Bill D. Stewart, Dr. Leon J. Tune, Dr. Geo. W. Warner and Dr. Hayes Mac. White.

Ophthalmology: Dr. Ivan E. Hix, Dr. Homer C. Cowan,

Otolaryngology: Dr. Allan H. Twyman

Orthopedic Surgery: Dr. Robert Gunderson, Dr. Lynn Keys, Dr. Duane M. Kline and Dr. Robert E. Carlton.

Urology: Dr. Edgar Updegraff, Dr. Dale Atkins and Dr. Thomas Kilfoyle.

In addition, the following Residents were registered in the Medical Division of the Graduate School in the Department of Surgery through our affiliated Residency Program:

Ft. Logan Veterans Administration Hospital

Robert Eugene Nelson, M.D.  
Frank Albert Nicoletti, M.D.  
Charles Joseph Staley, M.D.

Children's Hospital

Duane M. Kline, M.D.  
James Byron Dumm, M.D.

St. Joseph's Hospital

Richard Herman Altmix, M.D.  
Gifford Van Eeckhout, M.D.  
Edward John Lowell, M.D.

State Hospital, Pueblo

Levi Reynolds, M.D.

St. Anthony's Hospital

Albert Wolfson, M.D.

St. Luke's Hospital

John Winthrop Haskin, M.D.  
Theodore Wm. Novak, M.D.  
Richard P. Schellinger, M.D.

Corwin Hospital, Pueblo

Lawrence M. Gwinn, M.D. ✓  
Robert E. Carlton, M.D.

The following Residents in the General Practice Residency Program completed their service in the Department of Surgery during the year. Frequent changes in this program were necessitated by changes in personnel in the program caused by the call to active service in the Armed Forces of several of the General Practice Residents.

Drs. Evelyn Anderson, Channing Bowen, David A. Fisher, Lee Edward Rice, Edward S. Stephenson and Philip D. Weaver.

It is with pleasure that we can record the success of our recent Resident graduates in their examinations for certification by the American Board of Surgery. During the past year Dr. David Akers, Dr. Marvin E. Johnson and Dr. Howard T. Robertson, all now members of our staff, received their Board Certification in Surgery.

## II. DIVISION ACTIVITIES

A. Anesthesia - Assistant Professor Robert Virtue, Acting Head of the Division.

This report is the annual review of the functions of the Division of Anesthesiology, University of Colorado Department of Medicine. It is concerned with the activities for the fiscal year July 1, 1950 to June 30, 1951. The report covers the third year of the establishment of the Division of Anesthesiology in the Department of Surgery.

### Divisional Statistics

During the year a total of 3,208 surgical anesthetics were given, as compared to 2,838 for the previous fiscal year. (Please see Page 60 for a breakdown of these figures). These statistics are accurate for July, 1950 through June 15, 1951, but the figures for the last two weeks of June, 1951, are estimated.

### Personnel and Administration

During this year, Dr. Philip A. Lief accepted a position at Montefiore Hospital in New York City and therefore left the Division of Anesthesiology September 1, 1950. Dr. Robert W. Virtue, who had been a member of the Division at Denver General Hospital, became Acting Head of the Division, and Dr. Edith Roth Kepes was appointed Assistant Professor to superintend activities at Denver General Hospital.

A full-time secretary continues to work in the Division; she is employed by the University of Colorado Department of Medicine. A full-time anesthesia nurse is also employed by the University of Colorado Department of Medicine. For most of the year a full-time anesthesia nurse was employed by Denver General Hospital. She resigned effective April 1, 1951. Negotiations are under way to obtain a successor to this position.

Seven physicians practicing anesthesiology full-time in Denver are members of the part time clinical staff. They are the following: Drs. C. W. Metz, M. L. Phelps, F. R. Brown, B. H. Battock and J. C. McAfee, all of whom have been certified by the American Board of Anesthesiology, and Drs. J. L. Campbell and H. B. Stein.

Our resident staff includes Dr. Rafael Junquera, who is a Fellow from Venezuela, Dr. Alice Smith, a graduate of the University of Colorado Medical School, Dr. Rodolfo Galeano, a Fellow from Paraguay, supported by the Kellogg Foundation, and Dr. Barbara Makaroff, a graduate of the University of Toronto Medical School. In addition, an arrangement has been made whereby each general practice resident has a two-month service in the Division of Anesthesiology. This, on the whole, has been a very satisfactory arrangement, both to the resident and to our Division.

#### Major Changes in Equipment or Physical Plant

The only major change in equipment during the year has been the obtaining of a new rotameter head for our Foregger anesthesia machine and a Ben Morgan ether vaporizer and suction machine. Denver General Hospital has on order for our use a Waters-Conley oximeter and a Reiter electrostimulator.

A most desirable and gratifying change in the physical plant at Denver General has been made in that conductive flooring has been put in each of the three operating rooms in the main suite. When final changes are made in location of the obstetric operating rooms, it is also expected that conductive flooring will be laid there. The physical plant at Colorado General Hospital is also undergoing modification. Better patient care should result from the locating of the Recovery Room on the same floor as the Operating Room, next door to the Anesthesiology Office. Another modification being made in the operating rooms is not so desirable, i.e., the obstruction of the line of sight between the operating rooms in the proposed plans, because it will make supervision of anesthesiologists in training more difficult.

#### Special Problems in the Division

About January 1, 1951, when a surgical staff member was appointed full-time at the Colorado State Hospital in Pueblo, it became evident that better anesthesia was needed at that institution. Since that time we have been cooperating in sending one of our more advanced residents to that institution, the residents rotating there on a monthly basis. To date the relationship has been quite satisfactory.

Our resident training program continues to be improved and is developing satisfactorily. Our residents obtain experience at Colorado General, Denver General and National Jewish Hospitals and at the Colorado State Hospital in Pueblo. Weekly chart conferences and seminars are held. These are regularly attended by residents from the Veterans Hospital at Fort Logan.

Our undergraduate training program continues satisfactorily. We feel that our organization is especially good in this respect in that we have at least some contact with each of the four undergraduate classes.

Two papers are in press, reporting the results of original investigation in the Division. The Acting Head of the Division attended conferences on anesthesiology at Salt Lake City in September, 1950, and the National Meeting at Houston in November, 1950. He was also appointed Secretary-Treasurer to the Colorado Society of Anesthesiologists. He is also Attending Physician at Fitzsimons Army Hospital, where he teaches the basic sciences of anesthesiology and conducts weekly seminars for the Fitzsimons staff. Dr. Kepes attended the Western Regional Conference at Coronado, California, in April 1951. At that time she took her oral examination for accrediting by the American Board of Anesthesiology.

#### Interdepartmental Problems and Relationships

The Department of Obstetrics feels that their own residents should be trained to give anesthesia to their own patients. Since most of this is done through conduction anesthesia, it has proved to be quite satisfactory. The Division of Anesthesiology has given a few inhalation anesthetics for obstetrical cases and gives the anesthesia for cesarean sections. The relationships between the two departments have been most cordial.

#### Clinical Services

The Division of Anesthesiology, in administering anesthesia, is attempting to emphasize the idea of patient care both before and following surgery. Our activities also include the relief of pain by nerve blocks, and diagnosis of the etiology of painful syndromes through nerve blocks. Treatment of peripheral vascular disease by means of various regional procedures has been fairly successful. The Division welcomes calls for intubation during emergency respiratory situations.

#### Research Projects

The Denver General Hospital has just purchased a new electro-stimulator, by means of which it is hoped that barbiturate poisonings may be treated and that experimental data may be obtained concerning the intermediary metabolism of barbiturates.

Work concerned with the effects of Pronestyl is in progress. Data are also being obtained on the effect of extubation after anesthesia on the electrocardiogram. Another project involves the effect of demerol on the intra-cranial and cerebrospinal pressure.

#### Conclusions and Recommendations

The Division has progressed moderately well in caring for the clinical needs of the various institutions during the past year. It is hoped that original investigation may be accelerated in the future.

The chief recommendation offered at this time, is that at some time during their four years of training the surgical residents have some opportunity for participation in anesthesiology.