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MAY, 1960

Therapy School To Open at Children's Hospital

Board Appoints Four New Men To Elected Body

our new members were of the Sanatorium Board of Manitoba last month when board members held their annual meeting in Winnipeg.

They are Harold T. Spohn, Dr. L. G. Bell and J. F. Baldner of Winnipeg, and T. A. Moore, of Brandon.

Mr. Spohn, who is vicepresident and general manager of Carling Breweries, Ltd., came to Winnipeg some 10 years ago. He is also honorary-treasurer of the Welfare Council of Greater Winnipeg, a member of the council of the Chamber of Commerce, and a member of the Board of Governors of the YMCA.

Mr. Baldner is president of Robinson and Webber Ltd., is an executive member of Canadian Manufacturers

ciation, a member of the Board of Referees of the Unemployment Insurance Commission and a member of the Advisory Council of the Winnipeg Chamber of Commerce.

Dr. Bell is well known in Canadian medical circles. He is Dean of Medicine at the University of Manitoba.

Mr. Moore is associated with J. A. Kedy, Ltd., in Brandon, and is Dominion Vice-President of the Associated Canadian Travellers.

Executive

At the annual meeting J. W. Speirs was re-elected chairman of the Board and J. N. Connacher was again named vice-chairman.

Other executive officers are R. H. G. Bonnycastle, nk Boothroyd, S. Price ray, and R. L. Bailey.

The other elected members are Dr. J. D. Adamson, G. Collins, H. T. Decatur, Dr. J. E. Hudson, G. E. Mayne, Dr. Ross Mitchell, E. B. Pit-blado, Q.C., and J. R. Mc-

(Continued on page 3)



During a recent visit to Assiniboine Hospital in Brandon, Dr. Leslie H. Truelove, chief of staff of the Manitoba Rehabilitation Hospital, toured the Physiotherapy and Occupational Therapy Unit now under construction there. Here, Dr. Truelove (second from left) inspects what will be the hydrotherapy pool. With him are (left to right): Dr. Gordon Coghlin, assistant medical superintendent of Assiniboine Hospital, Dr. E. I. Bess. medical disector of the Secondarium Boards Dr. pital; Dr. E. L. Ross, medical director of the Sanatorium Board; Dr. William Shahariw; Mrs. I. A. Cruikshank, superintendent of nurses; Dr. A. H. Povah, medical superintendent and J. P. Prendiville, physiotherapist.

Chief of Staff and Family Look Forward to Life in Manitoba

Dr. Leslie H. Truelove and his family arrived in Winnipeg from Edinburgh, Scotland, the day after an unseasonable April storm dumped six inches of wet, sticky snow on the city.

But the tall, engaging doctor, who will be chief of staff of the Manitoba Rehabilitation Hospital and head of the new school of physical and occupational therapy, seemed little disturbed by the damp winds, mud and slush, and happily confided that he and his family are prepared to enjoy life in Manitoba.

Soon after he arrived, Dr. Truelove started the work of organizing the physiotherapy occupational therapy school. He also paid a visit to Assiniboine Hospital in Brandon, inspected the parcompleted physical therapy unit and the Indian Rehabilitation quarters there acquired a few pieces of Eskimo sculpture, and persistently inquired about local history, vegetation, etc.

A week later he conducted a similar tour of the grounds, buildings and services at Manitoba Sanatorium, Ninette, and it is expected that he will soon get a glimpse of Manitoba's northland when he pays a visit to Clearwater Lake Hospital at The Pas.

While Dr. Truelove is busily getting acquainted with various Sanatorium Board institutions and staffs, his charming authoress wife has temporarily settled her family into a cosy, furnished house on Dominion street.

Sons Paul, 11, and Simon, 9 are enrolled at Sargent Park School and on "extracurricular" time are making their own private study of the Canadian scene. Fouryear-old Patrick who, of course, is too young for school, has taken to Canadian life in his own way. He has

(Continued on page 3)

A School of Physical and Occupational Therapy will be opened this September in the nurses' residence of the Winnipeg Children's Hospital, a spokesman for the University of Manitoba announced this month.

The school, which eventually will be located in the new Manitoba Rehabilitation Hospital, will be under the admin-

istrative jurisdiction of the Faculty of Medicine.

It will have a maximum enrollment of 35 students for the first year, and 70 students for the second year. So far, approximately 70 young men and women have already inquired about the course.

Program

The program to be offered in the school will consist of two years of course work and a year interneship. Upon successful completion of the curriculum a candidate will be awarded a diploma,

To be eligible for admission a student must have his senior matriculation, including physics, mathematics and chemistry.

Staff

Dr. L. H. Truelove, chief of staff of the Sanatorium Board's Rehabilitation Hos-Sanatorium pital, will be director of the school, and Miss Marjorie Spence, currently chief physiotherapy instructor at the University of Montreal, will be responsible for teaching physiotherapy.

Miss Spence was born in Winnipeg and is the daughter of the late Dr. W. J. Spence, former registrar at the University of Manitoba. She will

assume her new position sometime in July.

Increasing Demand

The aim of the physical and occupational therapy course is to provide a supply of ade-quately trained graduates to work in hospitals, institu-tions, and private homes. At present there are only four other training centres of this sort in Canada - at the Universities of Toronto, Alberta and Montreal and McGill University.

The need for trained physical and occupational therapists in this country has been described as "tremendous" In Canada, it is said, there is only one physiotherapist for every 26,000 persons. In the Scandinavian countries, where the ideal has apparently been reached, there is one physiotherapist for approximately every 2,000 per-

The acute shortage of physiotherapists in Canada has only existed for the past few years and is the result of an increasing awareness by the medical profession of the important role physical and occupational therapy can play in medical treatment.

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Profiles

H. T. DECATUR

For more than 15 years now the Associated Canadian Travellers of Brandon and Winnipeg have been enthusiastic supporters of the work of the Sanatorium Board. Through their rather unique fund-raising projects these ambitious travelling salesmen have not only made a sizeable cash con-



tribution to TB prevention in Manitoba, but they have also been valuable ambassadors for the Board's health education program.

One of the men who was instrumental in starting the Winnipeg Club on TB work, and since then has been one of the most energetic organizers of A.C.T. projects, is Harold T. "Dick" Decatur, an elected member of the Sanatorium

Board and former president of the Winnipeg A.C.T. By selling the 200-man organization on the idea that "TB is a good project", Mr. Decatur and the then president E. J. Conway started the men selling "health bonds" for the Christmas Seal drive in 1944. From there they graduated to the Search for Talent Radio Broadcasts, which over the years have attracted a wide listening audience in both Brandon and Winnipeg, and last year launched what has proved so far to be their biggest plum — the sale of tickets on a luxurious "Lucky Star" home at the Red River Exhibition.

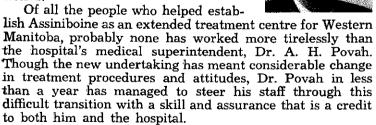
A retired insurance salesman, Mr. Decatur was born in Toronto, the son of clothing merchant Daniel Decatur. He moved to Winnipeg in 1902 and, after completing high school, enlisted in the Canadian Army Service Corps. In 1919 he returned from overseas and started work as a travelling salesman for Cudahay Packing Company and later, the California Dried Fruit Company in Toronto. In 1925 he switched to selling insurance for the Dominion of Canada General Insurance Company, and when he retired some 35 years later had worked his way up to Western manager of the Life Division of that company.

Married 20 years ago to the former Maria Goodman of Winnipeg, Mr. Decatur lives comfortably in the River Heights area of Winnipeg. Besides his work with the Travellers, he is also a member of Blue Goose International, an insurance man's fraternity, the Shriners and the Canukeena Club. But the A.C.T. projects are, as he puts it, his "biggest hobby", and he spends a great deal of time on them. He served as Dominion President of the A.C.T. from 1934 to 1936, and a few years earlier was president of the Winnipeg Club. He has been a charter member of the organization for 30 years.

DR. A. H. POVAH

This past year has been one of radical change for Assiniboine Hospital in Brandon. First opened as Brandon Sanatorium in 1947, this sprawling, barrack-like institution served for over a decade as an important centre for the treatment of tuberculous Indians and Eskimos. But last year, as the de-

mand for TB beds continued to drop in Manitoba, many of the Indian and Eskimo patients were despatched to other Sanatorium Board institutions and the hospital, assuming a new name, em-barked on a new venture in the medical treatment field — the care of patients with long term, non-tuberculous ill-

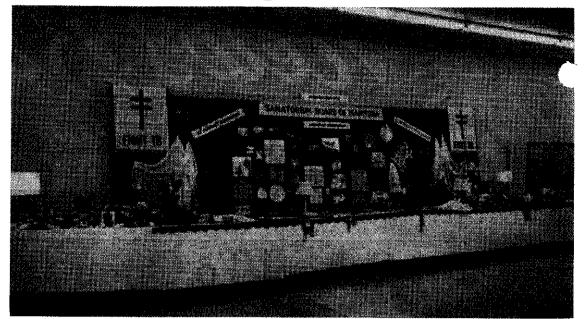


A pleasant, soft-spoken man, Dr. Povah has been associated with the Sanatorium Board for nearly 13 years. Since becoming medical superintendent of the Brandon Hospital in 1951 he has earned a reputation in this growing agricultural community as a skillful and conscientious chest surgeon, greatly devoted to his work and well liked by everyone.

Although born in Winnipeg, Dr. Povah spent his early life in Kelowna, B.C. After completing high school he returned to Winnipeg to enter the University of Manitoba Medical School. He graduated in 1944 and interned at St. Boniface Hospital.

He was a patient for a year at St. Boniface Sanatorium and after recovery joined the sanatorium's medical staff.

Patients Display Handicrafts



Wide variety of patient crafts capture interest of Winnipeg shoppers and teachers.

(Photo by David Portigal & Company.)

Nine months later he was appointed resident physician at Manitoba Sanatorium, Nin-ette, a position he held until 1948 when he moved to Brandon as Sanatorium surgeon.

Dr. Povah's keen interest in thoracic surgery has led him to spend considerable time taking courses outside Brandon. In 1948 he studied bronchoscopic procedures under Dr. Paul Hollinger in Chicago, and two years later spent six weeks of study in Boston. More recently he was a senior resident in surgery at the Winnipeg General and Children's Hospital and at Emery University Hospital in Atlanta, Georgia.

Dr. Povah is married to the former Isobel Bilton of Winnipeg and has two children, Bruce 8, and Barbara Lynne, 11. Like so many other busy doctors his personal life doesn't include much time for outside interests. But he does enjoy the occasional game of golf and is a member of the Brandon Country Club. He is also a member of the Brandon and District Medical Association, the Trudeau Society and the Canadian Tuberculosis Association.

Major Killer

Tuberculosis is still among the 10 leading causes of death in nine of 15 countries for which comparable data are available, according to the January-February 1960 issue of World Health.

In these countries tuberculosis still ranks between fifth and tenth in the list of leading causes of death and correspondingly higher if accidents and deaths from violence are excluded.

Only in Australia, Denmark, England and Wales, the Netherlands, and the United States has tuberculosis dropped below the rank tenth cause of death.

On two occasions last month TB patients proved that occupational therapy is not only, among other things, an interesting diversion, but is also a rather nice way to boost the size of one's ego—and pocket book.

At the Manitoba Education Association Convention

the Royal Alexandra Hotel, April 18 to 20, a display to patient handicrafts drew many comments of praise from the teachers who attended the event, and a week later a similar display at the Polo Park Shopping Centre auditorium received more enthusiastic attention from the shoppers.

Patients from Manitoba and St. Boniface sanatoria and Assiniboine hospital contributed to the displays. The work, ranging from hand-some lamps, stuffed toys and knitted apparel to intricately designed jewelry, leather and beaded work, was artistically set up and presided over by Mrs. Vera Davidson, of Assiniboine Hospital, and Miss Mitzi Newmark, occupational therapist at Manitoba Sanaatorium.

Among the biggest attention-getters at both exhibits were two beautiful crochet table cloths contributed by two Eskimo women. Annie, of Sugluk, Quebec, and Resolute Bay, Sarah, of Resolute Bay, learned the art of crochet from the instructress. by imitating her, and using pictures of the various patterns as guides, they made the large cloths in less than six weeks. They could not, of course, read the written instructions.

Other objects displayed are too numerous to mention. Pretty stationery boxes, deer and mooseskin moccasins and Eskimo dolls sold quickly to the enthusiastic buyers. But of all these, the unique soapstone sculpture stole the

Perhaps it may interest one of our Baker Lake patients that several of his largest carvings probably now decorate the home of Hollywood singing star, Jimmy

It seems that Jimmy, who appeared in Winnipeg recently, wandered into the shopping centre auditorium in search of Eskimo art. As a crowd of curious on-lookers and fans gathered around him, Jimmy managed to carry on a lengthy chat with Mrs. Davidson and wound up buying the most expensive soapstone pieces, plus a sweater for his daughter.

He left the unsuspecting Mrs. Davidson gleefully holding a wad of bills — and vaguely wondering how a "nice boy" like that could afford all that loot.

Seal Campaign Scores "First"?

"The Manitoba Christmas Seal Campaign recorde 'first', but it is not a 'first' in which we take much pride, said Seal Sale Director Miss Mary Grey in reviewing results of the 1959-60 campaign.

"For the first time in the history of the Manitoba Seal Sale, we had a decrease," she said. "Our 1959 total was \$179,670 — a .7% decrease under the record-breaking 1958 total of \$181,048.'

Manitoba and Newfoundland were the only provinces to register a decrease this year. The over-all Canadian sales, which totalled \$2,533,-379, showed a 1% increase.

British Columbia topped the sale of Christmas Seals with an increase of 7%. The returns, amounting to nearly \$275,000 are the highest in its history.

However, Manitoba take comfort in the fact that it ranks second in the highest per capita return. Its rate of 20.6 cents is only a little under Ontario's 20.9. In the average return per letter sent out, Manitoba manages to rank highest with \$1.01.

"TB Patients With Itchy Feet" One of Doctor's Worst Problems

Spring is the season of magical transformation. With the rival of fine, warm weather the whole world suddenly puts a delicate green; the crocuses begin to spread a lovely carpet of blue-grey over the winter-darkened prairie, and the long stretches of brown willow come alive with fiery red blossoms.

It's the time of year, too, things happen to human beings and no where is this more evident than in the sanatorium. One fine day the medical superintendent walks into his wards to find a large number of springstruck patients gazing wistfully out the windows and doors, with feverish "Huck Finn" expressions on their faces.

This is fine in some cases, because the doctor has been waiting for just this sort of weather to discharge many of his patients. But in other cases, the sight of half-cured ients gazing around with a same longing can cause nim some qualms.

Leaving sanatorium too soon is one of the biggest problems facing TB workers today. There are, of course, other reasons besides the arrival of spring that make patients leave against the doctor's advice. Fall, spring or winter, there are always a few who rebel against sanatorium life, become disgusted with the whole regimen, and so pick up and leave before they should.

Others just plain get homesick — and it is probably these who constitute the largest number of patients who leave hospital against medical advice.

It's up to the patient, of course, to decide whether or the remains in sanatorium til he is fully cured. The purpose of this article is

It's the time of year, too, when some rather astonishing

merely to point out some of the consequences should he decide to leave half-cured.

Dollars Lost

First, consider the cost to the taxpayer. The daily cost of treatment at the Sanatorium Board institutions runs to about \$9.00 a day. If a patient decides to sanatorium after a leave weeks or months of treatment, the chances of his becoming completely cured are considerably lessened. If he does suffer a relapse he must start the treatment all over again. This means even more days in hospital and for every day his absence has added to the cure in sanatorium, it costs an extra \$9.00 from the taxpayer's pocket book.

Add to this the cost of additional work days lost by this delay and one gets a pretty fair picture of the "dollars-and-sense" value of sticking to hospital treatment.

Infection

More important than the cost, however, is the damage the patient may do outside the sanatorium. However careful he tries to be, there is always the danger of spreading infection to others . . . and this doesn't make much difference whether one is constantly positive or only occasionaly so. The hazard is always there: an unexpected couch or sneeze — failure to protect oneself and others —



TB-SURVEY — These employees from Simpsons-Sears Ltd., were among the some 800 employees of 51 business firms who took part in a tuberculin skin testing and chest X-ray survey at the Polo Park Shopping Centre last month. The free tests were given by the Sanatorium Board of Manitoba as part of their tuberculosis preventive program and were available to all Polo Park Shoppers as well as employees. Pictured here: Miss Gertrude Joyal, SBM laboratory technician, administers the skin test to Mrs. Ted Gunter, of Simpsons-Sears Ltd. (Photo by David Portigal & Company.)

Student Nurses Visit Ninette



Twenty-one nursing students and four nursing instructors from the Children's Hospital in Winnipeg partial April 30 to Manitoba Sanatorium to observe and learn about tuberculosis nursing. Following a total various sanatorium buildings, talks were given by Miss Bente Hejlsted, director of nursing services the Sanatorium Board, and Dr. A. L. Paine, medical superintendent of Manitoba Sanatorium. Others took part in the tour were Miss D. Ellis, superintendent of nurses of the sanatorium, and Miss Pat Bham, assistant laboratory technician (second and third from left), and William Broadhead, nursing instru (extreme right).

and presto, the patient quite possible has passed the germ on to others.

Perhaps a patient may leave sanatorium too early because he feels his family needs him. One can sympathize with a parent because a family naturally does need the father and mother. But for that reason alone the patient should think long and hard about the consequences of leaving too soon. Not only does he pose a great danger to all the other members of his family (and statistics show that the longer and closer contact, the more certain the spread of infection), but he also runs the risk of his condition becoming worse. Perhaps he may have to give up entirely — what happens then to the family? How much better it is then to wait out the cure and go home knowing that these risks, in all likelihood have been removed.

Benefits of Staying

The cure of tuberculosis requires a lot of bed rest, good food, drugs and sometimes surgery. The only place where this can be provided best is in the sanatorium. Moreover, treatment, if adequate initially, will almost always result in permanent cure. If, however, the treatment is inadequate, the tuberculosis may cause permanent invalidism, or even death.

True, the long stay in sanatorium will undoubtedly be the most trying time in a patient's life, but if he can stand the test, turn his attention while in hospital to study, reading, occupational therapy and other self-improvement measures, he will eventually walk out a much happier—and cured—man.

Eight Rules . . . For Happy Feet

Feet killing you? Are you doing anything about it? Or do you, like millions of other people, shrug stoically and consider yourself just another one of those unfortunates whose life must forever be burdened with annoying aches and pains.

There are some interesting facts about people with sore feet. They are, for instance, suffering from one or more of some 75 foot ailments. Most of these started in childhood, and in 80 cases out of 100 they were preventable. A great many people do little or nothing to correct their trouble, despite the fact that 95 percent of foot ills are curable if caught soon enough.

There is a lot one can do for his feet just by giving them the everyday care they deserve. Here are eight good rules:

1. Bathe your feet at least once a day, using a soft brush to remove dead skin. Dry thoroughly and dust with powder.

2. If possible, don't wear the same shoes two days in succession. Change socks once a day, wear all-leather shoes and make sure they are the right size. (They should be a half inch longer than the longest toe.)

3. Cut toenails straight across, not shorter than the flesh.

4. Exercise occasionally. Wriggle toes, elevate feet to help circulation, pick up a pencil with toes.

5. Don't get your feet wet if it's avoidable. Don't let them stay wet from perspiration.

6. Cultivate good posture.
7. Examine your feet occasionally for possible de-

fects, badly fitting shoes poor walking habits.

8. Don't be a bathresurgeon. If your feet need tention, see a qualified potrist, chiropodist or orthodist.

CHIEF OF STAFF (Continued from page acquired a cowboy outfit; like so many other pis packing small fry we kn lives, eats and sleeps in it

The whole family is thusiastic about crammir lot of travel and camping vacation time, and even a have the road maps out, p ning their first trips in "whole, new continent have yet to explore!"

BOARD APPOINTS (Continued from page

Life Member

An honorary life meml ship was presented to A Longstaffe who, owing to health, retired from his p tion as vice-chairman of Administration and Fina Committee. Mr. Longst has been a valued membe the Sanatorium Board exetive for the past six years

THERAPY SCHOOL

(Continued from page Many authorities feel t

the establishment of the P sical and Occupational Tr apy School in Manitoba evoke even more interest physical medicine and result in an increased mand by medical groups to physiotherapy be included more treatment programs

As one official puts "Doctors will begin to rea that they need physical a occupational therapists much as they need operat rooms."

This 'n' That

Madame Georges Vanier, wife of the Governor-General of Canada, paid a visit to the Indian and Metis Friendship Centre during her recent visit to Winnipeg, and during the 20 minutes she was there won the hearts of all on hand to greet her.

Among the fortunate ones who shook hands and talked with Canada's First Lady were the Board of Directors, which included Miss Margaret Busch, director of rehabilitation services for the Sanatorium Board, and Ted Locke, Indian rehabilitation officer. Also present were members of the Indian Council and several others actively interested in the work of this unique social club for Indian and Metis youth.

On her return to work the following morning Miss Busch gave a most enthusiastic description of the tall, smiling woman.

"She is a woman of infinite charm and grace," she reported, "and her ability to put people at ease is so apparent. What had been a solemn group of almost expressionless faces just like magic transformed to pleasure at being spoken to in a kindly manner."

Miss Busch also related that when Mme Vanier was unexpectedly offered a cup of tea by one overwhelmed fan she promptly accepted, sat down in a corner with a group of Indian men and women, and thoroughly en-

And that bit of informality, finished Miss Busch, seems to me to be the height of lovely graciousness!



In a last-minute rush to fill up what would have been "In Memoriam" white spaces in the April issue of the News Bulletin, the editor quickly dug up two feature-type stories which she thought might interest readers. The choices apparently were a mistake.

For example, C. G. Bonney, our director of pharmacy services, takes issue with last month's story on the origin of the emblem "Rx" which, according to the Bulletin, evolved from an ancient Egyptian recipe sign, and at one time was repre-sentative of Horus, the God of Health.1

This isn't a pharmacist's version, says Bonney. "In the first place the sign is not Rx.

"The letter R is the initial letter of the Latin word 'recipe', the imperative form of the word 'recipio' and means 'vou take'.

"The origin of the dash across the letter R is obscure, but it is thought to be a portion of the astonomical sign for Jupiter, King of Gods, and was used on prescriptions in pagan times as an invocation to this diety.3

"In French prescriptions the superscription is P. or Pr., from 'prenez' which also means 'you take'.*

To this bit of information the scholarly sports car own-

"No doubt with some of the pharmacists kicking around (in Roman times) they had to have an invocation to the King of Gods. This also could be true in the Sanatorium Board today, for shortly after I came out to Assiniboine, I was asked if I was the exterminator, who was arriving that day.

"I replied, 'Could be.' "



George Millar of Kingdon Printing takes exception to another story in last month's issue - one that centred on a medieval practice called the King's Touch.

In this it was reported that Samuel Johnson, famous British lexicographer, essayist, poet, conversationalist and what have you, was among the many (?) learned men who firmly believed in this royal practice, and allowed himself to be touched for scrofula by Queen Anne

"I doubt if he had anything to say in the matter," sniffed Mr. Millar. "He couldn't have been any more than four years old at the time - and one could hardly call any four-year-old learned!"

Well, a belated investigation into Boswell's Journal showed that both Mr. Millar and the editor are a little hazy on the subject of Sam Johnson. It seems that Johnson was not even around in 1702.

He was born in 1709 (died 1784). He did indeed suffer from scrofula and he was touched for this afflction by Queen Anne in 1712.

But Mr. Millar is right. Johnson was only about three years old at the time, and he was dragged to the Queen by a determined mother.



- 1. A History of Medicine by Douglas Currie, M.D., F.R.C.S., F.R.S.E. He got his information from: J. D. Comrie, Medicine Among the Assyrians and Egyptians in 1500 B.C., Edin. Med. Jour., 1909, New Series, vol. ii p. 101.

 2. The typesetters regret that on their machines they cannot reproduce this sign. But, as many readers know, it is like a capital R with a dash through the oblique stroke.

 3. The typesetters again regret that
- the oblique stroke.

 3. The typesetters again regret that they cannot reproduce this sign. To the editor's thinking it is something like the number 4, but with the oblique stroke turned out instead of in.
- 4. Mr. Bonney's authority: A Treatise on Pharmacy by Caspari; Pharmaceuti-cal Latin by Muldoon.

Three More "Rehab Students" Graduate From Orderly Course



SIDNEY CASTEL

One of the biggest events in the Rehabilitation Department this month was the graduation of three young Indian men from the new orderly training program at the Winnipeg General Hospital.

In a brief ceremony held in the auditorium of the Nurses Residence, William Moose of South Indian Lake, Edward Redsky of Rat Portage, Ont., and Sidney Castel of Pukatawagon — all former students at the Indian Rehabilitation Unit in Brandon — received the handsome leather-bound certificates that now mark them as certified orderlies. They were among 18 persons to receive them.

Miss Margaret Cameron, director of nursing at Winnipeg General Hospital, Peter Swerhone, assistant administrator, and Richard Vandenberg, male nurse in charge of orderlies, officiated at the ceremony.

The graduation of these young men as orderlies has

partment. According to Ted Locke, Indian rehabilitation officer, the low academic level of many Indian rehabilitants and the relatively high levels required for formal vocational training are two of the biggest problems which must be overcome.

In the orderly training program the department now seems to have found a vocation which not only seems to be particularly suited to the Indian rehabilitant but which also seems to capture his interest.

A total of four rehabilitants have graduated from the course so far. Three more are still in training.

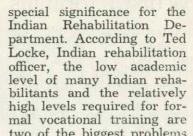
The course, as the boys have testified, is not easy. It consists of some 30 hours of classroom work, five weeks of practical work on the wards, and two written examinations.

But, they pointed out, if one sticks to it and works conscientiously, he should have no trouble graduatingindeed, will probably enjoy

Bill and Edward are now employed at the General Hospital. Sidney, who is married, has joined the staff of Clearwater Lake Hospital, The Pas, where he can be near his wife and two small daughters.

All realize, of course, that they still have much to learn before they will become firstclass orderlies, but their graduation this month has at least been a big step forward for them.

The Sanatorium Board takes pride in their achievement, and wishes them every success in their new careers.



A recent visitor to the Sanatorium Board head offices was Miss Haze. Hart of Ottawa, Christmas Seal director for the Canadian Tuberculosis Associa-tion. Miss Hart, who was on a tour of the Western Provinces, arrived in Winnipeg on April 28 and spent the day talking over Seal Sales with SBM Seal Director Miss Mary Grey.

Bulletin

Board

Dr. Leslie H. Truelove, new chief of staff of the Manitoba Rehabilitation Hospital, flew to Toronto on May 10 to discuss re-habilitation and physical medicine services in Can-ada with Dr. A. T. Jousse, director of the Division of Physical and Occupational Therapy at the University of Toronto. During hi three-day visit Dr. True-love also visited the Workm e n 's Compensation Board Hospital and Rehabilitation Centre in Downsview.

T. A. J. Cunnings, executive director of the Sanatorium Board, visited Clearwater Lake Hospital at The Pas this month to talk over an improved pension plan for all Sanatorium Board employees. The plan, effective May 1, provides increased benefits to all employees at no extra cost.

Director of Nursing Services Miss Bente Heilsted again this year served a counsellor to the Danis delegation at the Model United Nations Assembly at Daniel McIntyre Collegiate last month. The two-day sessions were attended by high school students from Minnesota, North Dakota, and Northwestern Ontario.

The Sanatorium Board welcomes three new members to the nursing staff. Miss Beryl A. J. Jones, a native of Gloucester, England, and Miss Grace L. Parsons, formerly of Lacombe, Alta., were appointed general staff nurss at Assiniboine Hospital,

New Licensed Practical Nurse at Manitoba Sana torium, Ninette, is Mis Julia Frances Carty. Mis Carty, who was born in Southern Ireland a n d came to Canada several years ago, was at one time employed at St. Boniface Sanatorium.



THE ASSINIBOINE (HOSPITAL) ESKIMOS bowling team proudly Survey their trophies after winning the Assiniboine League Five Pin Bowling Championship in Brandon. The trophies were presented to the players at a banquet held in Brandon on Thursday, April 28. Pictured left to right, back row, are: Ross Evans, Keith Yorke, and Stan Leronowich. Front row: Miss Joan Hawitt, Hal Kane (captain), and Miss Frances Baker. (Photo by John P. Prendiville.)