NEWS BULLETIN



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AUGUST, 1971

New Director



MRS. DORIS SETTER

Pioneering Technologist Honored For Long Service

The routes were often dirt tracks, sometimes over farmers' fields. The x-ray equipment, compared to modern standards, was crude and ponderous. And the "mobile unit" that carried the radiological technicians, doctor, public health nurse and all their paraphernalia was a converted Model A panel truck with high spoked wheels and the courage of Hercules.

This more or less constituted the working conditions of the tuberculosis travelling clinics when Walter J. Anderson joined the newly organized x-ray

staff of the Sanatorium Board of Manitoba 43 years ago. Wally, who (owing to ill health) retired from our staff earlier this year and was honored this month at a special coffee party held by fellow employees and old friends, remembers the early clinics as the happiest days of his life. Although he is reluctant to admit the importance of his role, it was Wally and other early x-ray technologists of the Sanatorium Board, plus the doctors and public health nurses, who paved the road to tuberculosis prevention in Manitoba.

"We worked long hours," he once

disease and was admitted to the Manitoba Sanatorium at Ninette in 1925. As a patient he completed his high school education and three years later, on October 1, 1928, he was pronounced well enough to join the sanatorium's x-ray department and take up training under the supervision of the medical superintendent, Dr. D. A. Stewart.

In 1929 Wally was on road with the travelling clinics, and a year later he received his Registered Technician's certificate. In 1932, when his colleague and supervisor Bill Doern took a new post in Winnipeg, he became senior rediological technician for the Board . . . and in 1935 he happily took to himself a wife, the former Jonina Johannesson, also a former patient at Ninette. A few years later their only child, Valdyn (now a registered nurse) was born.

During his four decades with the Board, Wally assiduously kept notes on the progress of our preventive services. He was with the first clinics to reach Flin Flon, The Pas and Sheridan in the north, and in the mid-1940's, when 70 mm x-ray equipment was developed, huge mobile vans acquired, and the Board's headquarters moved to Winnipeg, he saw yearly examinations in the community increase to well over 200,000 each year. In fact, it is estimated that between 1947 and 1956, while Wally was in charge of our x-ray department, these

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On August 1 Mrs. Doris J. Setter assumed the position of Director of Nursing Services at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre.

A member of the Sanatorium Board staff since October 1, 1963, Mrs. Setter has an excellent background in rehabilitation nursing and wide experience in general, private, and public health nursing. For six years she capably headed the In-service Education programs at the Manitoba Rehabilitation Hospital-D. A. Stewart Centre, and in December of last year she stepped up to the post of Assistant Director of Nursing.

Mrs. Setter was born in Thessalon, Ontario, and was raised and educated in Regina and Winnipeg. After graduation from the Misericordia General Hospital School of Nursing some 35 years ago, she held a wide variety of nursing posts — among other things. as a general and private duty nurse in Winnipeg, as a visiting nurse and teacher at the Margaret Scott Mission, as a RCN nursing sister (stationed in the Maritimes) during World War II, as a member of the Victorian Order of Nurses in Montreal, and then (for six years) as nursing director of the Town of Mt. Royal Health Department.

During the eight years Mrs. Setter has been with the Board, she has become well known and appreciated for the efficiency and dedication with which she carries out her duties, and, above all, for her interest in and contributions to high quality patient care.

She is a first-rate nurse and teacher . . . and we are very happy to welcome her to her new position.

seem appaining today, and as the 1930's rolled by we covered the whole province, reaching a peak of 10,795 examinations (and 234 new diagnoses) in 1939."

Wally, who was born and raised in Winnipeg, lost both of his parents to tuberculosis while he was still a boy and he, too, fell victim to the

Home Visits Part Of Para Service

A senior physiotherapist and occupational therapist of the Manitoba Rehabilitation Hospital-D. A. Stewart Centre have recently been authorized to visit the homes of paraplegics and quadriplegics to assist in their return to the community.

The visits are made at the request of the physician in charge of the hospital's Spinal Injuries Service, and in cooperation with the Central Western Division of the Canadian Paraplegic Association.

Accompanied by a CPA rehabilitation worker, physiotherapist Mrs. Tamiko Yamashita and occupational therapist Mrs. Linda Boyko made the first official visit July 30 to the home of a patient prior to her discharge from hospital. The purpose of the visit was to determine and recommend building modifications or devices that would be needed in the home for wheelchair living (with respect, for example, to wheelchair entry into the home and rooms in the home, and transfer into and out of bed and bath).

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Edward Dubinski, assistant executive director of the Sanatorium Board, is pictured with Wally Anderson and his wife Jona, standing by the color TV, presented to Wally by fellow employees and friends in recognition of his 42 years of service in the x-ray department.

(Photo by Dave Portigal)

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Colleagues Pay Tribute to Wally

Over the years Wally Anderson was known for the kindly interest he took in his staff, and for the encouragement and assistance he gave to many young people to take up x-ray technology as a career.

As Wally recalls, 11 technologists took their training at Ninette (either under Wally's supervision, his predessor's or successors'), and 10 of them made radiography a life-time career. At the former Central Tuberculosis Clinic (now D. A. Stewart Centre), 30 young people became registered x-ray technologists, of whom 11 continued in the medical x-ray field and the remainder went on to industrial or other posts.

Thus, among the several score good will messages that poured in for Wally at the party in his honor this month, there were special greetings from a number of these technologists and long-time colleagues. They included Wilf Allison, who recently retired from his post as senior x-ray technician for the Province of Manitoba, J. R. Lock, newly appointed senior x-ray technician, Department of Health and Social Welfare; Tony Samolesky, x-ray supervisor with the Department of Health at Portage la Prairie (who took part in the organization and conduct of early x-ray clinics out from the former Clearwater Lake Hospital at The Pas); Hugh Gibson, former senior x-ray technologist at the Assiniboine Hospeg photographer; and Lionel Joyal, technical representative for Fuji X-ray Film.

Miss Elsie J. Wilson, a former public health nurse who established the Central Tuberculosis Registry and prior to that had a leading part in organizing the first travelling clinics, sent greetings from her home in Winnipeg.

And a particularly special guest at the party was Bill Doern, who joined the x-ray department at the Manitoba Sanatorium in 1926, became the first qualified Registered Technician in Manitoba, and moved on to the Winnipeg General Hospital in 1932 where he organized the first training school for x-ray technicians and became head and technical coordinator of the hospital's x-ray department. Bill retired officially in April, 1967, but he stayed on for several years to take charge of the planning and equipping of new x-ray facilities for the Manitoba Medical Centre, and later, under the direction of the Manitoba College of Physicians and Surgeons, he organized a survey of x-ray services and equipment in Manitoba and made recommendations for their improvement. That survey. Bill stated, involved over 7,000 miles of travel by car and some 3,000 miles by plane.

Two other noted guests at the party were Dr. E. L. Ross, who retired in 1967 as medical director of the Sana-

TB-RD Involve "Human" Problems

Although the history of tuberculosis has reached a significant turning point with the development of many effective drugs and the return of its treatment to the main stream of medicine, serious problems remain before eradication can be achieved, Dr. A. L. Paine recently told the annual meeting of the Alberta Tuberculosis and Respiratory Disease Association.

Dr. Paine, who is medical superintendent of the Manitoba Sanatorium, Ninette, and immediate past president of the Canadian Tuberculosis and

Respiratory Disease Association, said that the toughest work in TB control today lies not in the modes of treatment, but rather in the form of advanced bacillary disease and in human behavior.

"The high incidence of advanced bacillary disease still found in new cases is sure evidence of the very considerable dissemination of infection," he said. "Moreover, patients with advanced disease are now most often discovered because of illness... not on routine examination, or by general chest x-ray surveys, which turned up 100's of new cases in earlier stages of disease years ago."

It seems likely that eradication will be a slow process that will come only with the elimination of poverty and privation . . . and until then, he suggested, voluntary associations should not only concentrate their preventive efforts among under-privileged groups, but also support legislation and other programs to improve their lot.

Dr. Paine has spent 40 years of his

medical career in the fight against tuberculosis in Manitoba, and 30 of these years have been largely devoted to chest surgery. "But I've always thought of myself not as a surgeon but as an operating physician with responsibility for total treatment," he told delegates.

Referring to TB treatment, Dr. Paine said that the attitude of patients has changed profoundly in recent times. "In the pre-drug era," he reminisced, "removal of the ribs over the diseased area was often a life-saving procedure, and it was commonly done with the patient awake under local anaesthesia to avoid spread of the disease.

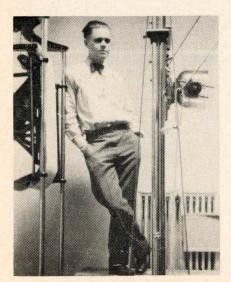
"Naturally they were pre-sedated, the tissues well filled with local anaesthesia . . . and the patient-doctor relationship was very strong, he said. But even so, it was a traumatic experience which patients were willing to endure along with many months

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CTRDA Life Memberships

senior x-ray technologist at the Medical Arts Building in Winnipeg; and Bill Amos, who for many years has been in charge of the x-ray department at the Manitoba Sanatorium.

Doug Penley, now a technical representative for Dupont, Western Canada Division; John Kaczoreski, R.T., at the Portage School for Retardates; Murray Isliefson, senior technologist at Sioux Lookout Hospital; J. J. Zayshley and Alex Roh, surveys officer and supervising radiographer respectively for the Sanatorium Board, all extended warm wishes as did Gus Schmecko, a member of our staff for a number of years; Hubert Jones, a pioneering technician with the Board and now living in retirement in British Columbia; John Kresz, now a Winni-



In 1929 at the age of 21, Wally Anderson began seven years of service with the Sanatorium Board's Travelling Tuberculosis Clinics. This photo was taken in the schoolroom at Ninette.

vice, and Dr. D. L. Scott, who for 38 years was medical chief of the former Central Tuberculosis Clinic.

LONG SERVICE

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Christmas Seal financed surveys were carried to about 40 percent of the Manitoba population annually.

X-ray technologists like Wally Anderson, and his colleagues Bill Doern, Hugh Gibson, William Saxton, Hubert Jones, Dave Sowden, Bill Amos, Ernie Ackroyd and Wilf Allison number high among the real heroes of tuberculosis control.

They worked diligently and without complaint at a time when (according to a former public health nurse) there didn't seem to be one mile of all-weather road; they set up examining rooms with clothes lines, pins and bed sheets in pool halls, church basements or "any old place" they could get; they cleverly improvised dark rooms when the occasion demanded it: they helped spread the gospel of tuberculosis control, and more importantly, they encouraged and assisted with the practical training of hundreds of other technicians . . . and vet for the long hard hours they put into the effort, they received little in terms of monetary reward.

"It must have been dedication to a cause they wholeheartedly believed in," remarked a staff member. "Around the time Wally Anderson joined the Sanatorium Board, a new, full-time technician's salary was \$40 a month . . . plus maintenance."



Dr. A. L. Paine, out-going president of the CTRDA, pays tribute to Edward O'Brien, left, executive director of the Ontario TB-RD Association, and Miss Elizabeth (Betty) Sutherland, office manager of the CTRDA since 1927.

For their fine and long years of service to the tuberculosis and later, the respiratory disease cause, Miss Elizabeth (Betty) Sutherland, of Ottawa, and Edward J. O'Brien, Toronto, were two of six persons specially honored at the 71st annual meeting of the Canadian Tuberculosis and Respiratory Disease Association in Toronto in June.

At the end of this year, Miss Sutherland will retire from her position as office manager of the CTRDA in Ottawa, with the longest record of service of anyone ever employed by the Association, and a well deserved reputation for efficiency and dedication to the work of both the national office and provincial associations across the country.

Born in Prince Edward Island, Miss

Sutherland worked briefly for the Canadian Welfare Council before joining the staff of the CTRDA in 1927. She is a long time member of the Business and Professional Women's Club of Ottawa, and is presently a member of the Club's committee to prepare a five-year guide for B & P Club Activities.

Mr. O'Brien, who was born in Glasgow, Scotland, first became involved in tuberculosis work as an x-ray technician and rehabilitation officer with the Ontario Department of Health's tuberculosis travelling clinics.

He organized the Ontario Tuberculosis and Respiratory Disease Association in 1945, serving as its executive director since that time. Since 1966

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Minister Inspires Others Without A Voice Box

The Rev. Mr. Yoshimi Yamamura is an extraordinary man with a well varned reputation for religious zeal and helping those who share his problem — loss of the voice box.

On his way to attend the International Association of Laryngectomees annual meeting in Kansas City last month, the friendly, 68-year-old, Japanese minister stopped in Winnipeg to preach a sermon to the Manitoba Japanese United Church (at Knox United Church) on July 18, and to pay a visit to the Department of Communication Disorders at the Manitoba Rehabilitation Hospital D. A. Stewart Centre.

A pastor-missionary since 1931 and a graduate of Hawaii University (Philosophy) and Doshisha University in Kyoto (Theology), Mr. Yamamura developed a persistent hoarseness eight years ago that was diagnosed as a malignant tumor behind the vocal cords. His larynx was removed, and like all others who sudenly lose the normal means of verbal communication, he experienced a difficult period of adjustment. In time, however, he learned esophageal speech - in English as well as Japanese — and he also acquired a special artificial larvnx, which he said had been developed in Italy and improved upon by himself to give high and low pitched tones and greater amplifica-

Fambaggal angoh which is as



The Rev. Yoshima Yamamura, minister of Amaki (United) Church in Kurashiki City, Japan, demonstrates his artificial larynx to a friend. The device consists of a long plastic tube with a broad end that he applies to the permanent "breathing" hole in his throat and a thin end that he places in his mouth. By expelling air through the stoma or hole in his neck, Mr. Yamamura activates a rubber drum in the instrument and the sound travels through the tube and comes out past tongue and lips as in ordinary speech.

ly, with feeling and no pauses to his 200-member congregation of Amaki Church in Kurashika City — and, equally important, he added, to join in the singing, which he dearly loves.

At Knox United Church he spoke and sang for an hour to the Japanese-Canadian congregation; and at the Manitoba Rehabilitation Hospital a few days earlier, he discussed the United Church, regretted that he could not meet the 34 members of the newly formed Lord Chord Club of Manitoba. In Japan, as in other parts of the world, there is an ever growing number of people who have lost their larynxes to disease, he said; and in addition to his participation at the meeting in Kansas City, the Minister of Welfare of the Japanese govern-

TB-RD PROBLEMS

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of bed care just to rid themselves of an implacable disease.

"They were used to working hard for what they got, and total commitment came naturally to them."

But so many patients today have a different viewpoint, Dr. Paine feels. Generally they expect to get better quickly and easily . . . and in fact are able to do so if they adhere strictly to drug-taking. Early discharge is common . . . but all too often, patients (including many who were cooperative in hospital) do not persist with drugs at home, and they end up with an incomplete current the potential for future reactivation of their disease.

Quoting the late Dr. Earl Hiltz of Nova Scotia, he said: "Today we have miracle drugs, but yesterday we had miracle patients."

In the realm of chronic bronchitis, emphysema and other respiratory disease, Dr. Paine considers that the job ahead will quite possibly be tougher than the continuing fight against tuberculosis. Chronic obstructive lung disease has become a serious threat to health and life; it is assuming alarming proportions and if unchecked, may outstrip the morbidity, if not the mortality, of tuberculosis at the turn of the century.

"In the fight against cigarette smoking and air pollution we are again

upper part of the esophagus, and then on expiration, producing sound by vibrating the air against the throat tissues — is usually recommended as the most effective and nearly normal form of speech for laryngectomees. But Mr. Yamamura prefers his own artificial device simply because he wants to get his message across clear-

ing laryngectomy patients and of the role of Lost Chord Clubs in assisting and encouraging people to regain their zest for living as well as a new voice.

Mr. Yamamura, who during his week-long stay in Winnipeg was a guest of the Rev. Makio Norisue, minister of the Manitoba Japanese

Tony Mann Wins CRCD Award

Tony Mann, executive director of the Central Western Division of the Canadian Paraplegic Association, was the first recipient of a special award instituted by the Canadian Rehabilitation Council for the Disabled.

The award — designed to give special recognition to a disabled person for his achievements on behalf of other disabled people — was presented to Mr. Mann at the recently held National Assembly of the CRCD in Toronto.

A paraplegic as a result of a war injury in 1945, Mr. Mann became interested in the rehabilitation of paraplegics during a long stay as a patient at the Deer Lodge Hospital. He became secretary of the newly organized Central Western Division of the CPA at Deer Lodge, and in 1950 he was named executive director.

Over the years Mr. Mann has orked on numerous projects to improve the welfare of paraplegics and other handicapped people, and he has been closely associated with the Spinal Injuries. Unit at the Manitoba Rehabilitation Hospital since its inception in 1962 — particularly in the field of counselling and resettlement in the community.



Fred Harrison, CRCD president, presents a special plaque to A. T. (Tony) Mann, honoring him for his achievements in the rehabilitation of the physically disabled.

(Michael Burns Photography)

In addition to his many duties, Mr. Mann is currently chairman of the National Research Council Committee on Building Standards for the Handicapped and a member of the National Advisory Committee on Recreation for the Handicapped.

the facilities and aids available to laryngectomees in Canada . . . particularly in Vancouver, Winnipeg, Toronto and Montreal.

Mr. Yamamura is an outgoing, warm-hearted, inspiring man . . . an outstanding example that loss of the voice box does not necessarily mean loss of voice or the ability to have a fulfilling life. Soon after his larynx was removed, he founded the Kurashiki New Voice Club, and today he still serves as its president.

CTRDA HONORS

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he has also acted as an honorary Region Development Consultant to the International Union Against Tuberculosis, and during the past several years, he has travelled to many countries on the Union's behalf.

The first layman to be honored with an honorary life membership in the Ontario Thoracic Society, Mr. O'Brien was instrumental in shifting the work of the OTRDA to include all respiratory disease and in establishing the province's five medical schools as centres of professional interest in the new program.

For these and other significant contributions, Miss Sutherland and Mr. O'Brien were presented with honorary life memberships in the CTRDA.

Also honored for outstanding service over many years were Dr. G. F. Kincade, Vancouver, Dr. S. J. Hawkins, Waterloo, P. DesRochers of Sillery, P.Q., and Dr. H. H. Stephens of Edmonton.

himself and not in an external factor such as the tubercle bacillus of the old days, which took its toll regardless of what man did."

Dr. Paine suggested that TB-RD associations make a special effort to build a positive image of cigarette smoking as socially unacceptable . . . and that priority be given to discouraging young people from taking up the habit.

Turning to air pollution, the doctor advised delegates that, even though the self-pollution of cigarette smoking is a more serious threat to health, particularly in pollution-free Central Western Canada, we should nevertheless be fighting the problem right now. "The long-range consequences of pollution far outstrip that of smoking, which takes a grave but fairly predictable toll," he said. "But the ultimate toll from pollution, if one believes the experts, might gravely threaten the survival of the human race."

Dr. Paine concluded his address by stating his belief that man will rise to a challenge if it is great enough. "I am old fashioned enough to believe that good will prevail over evil, not in the religious sense, but in what is biologically, ecologically and socially good for mankind," he said.

"A modern sage, Walter Lippmann once said 'The supreme question before mankind is how will men be able to make themselves willing and able to save themselves.'

"I believe man is able . . . and that a chief function of the voluntary agency is to help lead him to the light and make him willing," Dr. Paine said.

Physiotherapists Hold Holiday Car Rally

Dominion Day should be a family day, the Physiotherapy Department of the Manitoba Rehabilitation Hospital - D. A. Stewart Centre decided. So to celebrate it in grand family style, the department staged its First Annual Car Rally . . . with some 20 staff members participating . . . and in many cases, wives, husbands, kids and friends loaded into the back seats of their cars.

Rally organizers, Clinical Training Supervisor Sharon Dandy (who has a flair for mathematics and cunning) and phy otherapy orderly Joe Varkerti (w) has a detailed knowledge of rural Manitoba roads) worked out an intricate 130.1 mile route from the Pembina Drive-in Theatre in Fort Garry to a farm at Sundown, a village located near the U.S. border in southeastern Manitoba.

Beginning at 8 a.m. on July 1, drivers and navigators were flagged off at four-minute intervals, armed with sheets of complicated instructions and a questionnaire for the first lap out of the city, and a county road map for the last part of the course from Ste, Elizabeth.

HOME VISITS

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The family was also counselled about the patient's needs, and, according to the therapists, recommen-



With Chief Physiotherapist Joan Edwards looking on, car rally winners Sandra Terauchi (centre) and Beryl Berry (right) hold their handsome trophy. Using a 1970 Toyota Sprinter, Sandy acted as navigator and Beryl drove the 130 mile route.

The competition, which required a 20-minute coffee break, was worked out on a point system, Miss Dandy said — with points deducted, for example, for time less than the predicted three hours and 28 minutes to complete the course (which, among other things would indicate travelling faster than instructed), for mileage above or below the predicted mileage (indicating wrong turns or short-cuts), and for incorrect answers to the questionnaire.

The winner's trophy was presented to physiotherapists Beryl Berry (driv-

lent in their jobs in the physiotherapy department!)

The Dominion Day rally will be remembered as one of the happiest holiday celebrations ever organized by the department, and members are especially grateful to Mr. Varkerti and his relatives (who own the farm at Sundown) for making the concluding festivities the high point of the day.

Takes New Post

BULLETIN

With regret, the Sanatorium Board bade farewell this month to three senior members of the Occupational Therapy Department at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre.

Mrs. Heather Birtles, assistant chief occupational therapist who has had charge of the O.T. arthritis service, has taken a post as lecturer in occupational therapy at the School of Medical Rehabilitation of the University of Manitoba. She has been a member of our staff since October, 1962.

Mrs. June Thompson, who joined the staff in July 1964, and Mrs. Jane (Peacock) Burpee, a staff member since March 1967, have also resigned from the department. Mrs. Burpee was senior therapist in charge of the O.T. orthopaedic and paraplegic services, and Mrs. Thompson headed the O.T. neurological service.

All three have contributed considerably to the development of occupational therapy programming of in-patient services and, in addition, they have had a significant part in organizing special Christmas festivities and other activities

vices and assistance for the patient would be discussed with the family when the therapists make another visit at the time of the patient's discharge.

Informal visits of this nature have been made by therapists on the hospital's paraplegic service in the past; but now that a formal, cooperative program is being worked out between the hospital and CPA, it is felt that a better job of rehabilitation can be accomplished.

who completed the rally in a 1970 Toyota Sprinter, with a loss of 18 points on time and only three points on mileage.

Orderly Mike Wenesz, driver, and physiotherapy aide Florence Trudeau, navigator, turned up a little late for the concluding weiner roast, baseball game and presentation of the loser's trophy. Somehow they finished the course at Emerson, some 45 miles west of Sundown, with a total loss of 88 points. (But they are both excel-



AN EXHIBIT OF THE WINNIPEG MODULAR SYSTEM of artificial legs and other prosthetic products was a main attraction at the National Conference of the Canadian Association of Prosthetists and Orthotists at the MacDonald Hotel in Edmonton, July 19 to 21. Reinhart Daher (right), prosthetics research engineer who, among other things, heads the Prosthetics Products Division of the Sanatorium Board, explains newly developed Winnipeg components to Peter P. Kraft, past president of the Association. Some 150 delegates attended the meeting, Mr. Daher said, and among those participating in the program were Dr. G. Sarmiento, professor in the Department of Orthopedics, University of Miami, Antony Staros, director of the Veterans Administration Prosthetic Centre, New York, and Dr. O. Rostrup, professor and head of the Department of Orthopedics, University of Alberta.

gave up her post as Director of Nursing Services at the Manitoba Rehabilitation Hospital - D. A. Stewart Centre, was honored by fellow staff members at a farewell coffee party and gift presentation in the hospital staff lounge on July 29.

A member of our staff for the past two years, Miss Fleury has accepted a new position as Director of Nursing at the Welland County General Hospital in Ontario, beginning September 1.

Born in Marquette, Manitoba, and a graduate of St. Boniface General Hospital School of Nursing, Miss Fleury holds a BSc.N. degree from L'Institut Marguerite d'Youville (University of Montreal), and is a graduate of the two-year course in Hospital Organization and Management sponsored by the Canadian Hospital Association.

Miss Fleury, who prior to joining the Sanatorium Board staff served as assistant administrator of the Regina Grev Nuns' Hospital, has made a number of contributions to the promotion of nursing service and education. In 1965 she served on the Manitoba Minister of Health's Committee on the Supply of Nurses, and in Saskatchewan, she served as president of the Catholic Hospital Conference and as president of the Regina Chapter of the Saskatchewan Registered Nurses' Association. For the past two years she has been chairman of the Nursing Service Committee of the Manitoba Association of Registered Nurses.

Our best wishes are extended to Miss Fleury for a happy and successful future in her new position and home in Welland. shall miss them very much.

Dr. Victor Chernick, a member of the active medical staff and consultant in paediatrics to the D. A. Stewart Centre, has recently been appointed Professor and Head of the Department of Paediatrics in the University of Manitoba Faculty of Medicine, and Paediatrician-in-Chief of the Children's Hospital of Winnipeg.

A graduate of the University of Manitoba School of Medicine, Dr. Chernick was previously associate professor in the Faculty of Medicine, with a joint appointment in paediatrics and physiology, and in June 1971, he became Director of the Newborn Service at both the Children's Hospital and the Winnipeg General Hospital.

His long list of honors include Fellow, American Academy of Paediatrics, Queen Elizabeth II Scientist (1967-73), and member of the Canadian Paediatric Association and the American Academy of Paediatrics. He is the author or co-author of many abstracts, presentations and papers.

Our congratulations to Mrs. Alvina Boyechko, RRL, who has accepted an appointment as a member of the Finance Committee of the Canadian Association of Medical Record Librarians, Mrs. Boyechko plans to attend the annual convention of the association in Hamilton this fall.