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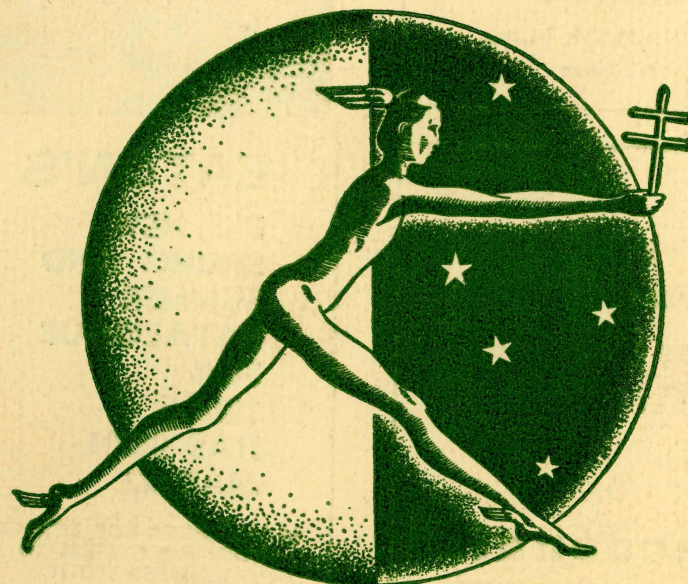
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THE

Mr. J. Zayshley,
City Health Dept., X-ray,
Winnipeg, Man.

**Messenger
OF HEALTH**



VOL. 9—No. 3 10 CENTS
MARCH - - - - 1946
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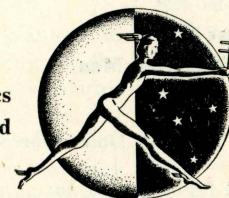
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THE *Messenger* OF HEALTH

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"Where there is no vision the people perish."-- Proverbs.

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Editorial « « « « « « « «

TRAVELLING CLINICS

Mass x-ray surveys have tended to over-shadow somewhat the regular work of the Travelling Tuberculosis Clinics, which since 1926 have been operated by the Sanatorium Board. These Travelling Clinics, equipped with x-ray apparatus, and staffed by a doctor, technicians and a public health nurse, visit between 40 and 50 centres in the province each year, examining as consultants patients referred by family physicians and contacts of known cases of tuberculosis, and re-examining ex-patients from the sanatoria.

This work is of the greatest importance in the anti-tuberculosis campaign, and already a schedule has been drawn up which embodies a planned itinerary for the Clinic during the balance of 1946. Among communities that will be visited are: Gladstone, Dauphin, Brandon, Carman, Morden, Steinbach, St. Pierre, Vita, The Pas, Flin Flon, Ethelbert, Roblin, Russell, Shoal Lake, Minnedosa, Grahamdale, Ericksdale, St. Laurent, Arborg, Teulon, Beausejour, Swan River.

The Central Tuberculosis Clinic carries on this work continuously in Winnipeg for the benefit of those in the city and the surrounding area.

Tuberculosis clinics are planned to bring to the people of this province the very best diagnostic service and advice to protect our homes from the tragedy that can follow from neglected tuberculosis. There is no charge for examinations at the clinics. That tuberculosis has been reduced from first to seventh place in the causes of death in Manitoba is due in no small measure to this health protecting service.

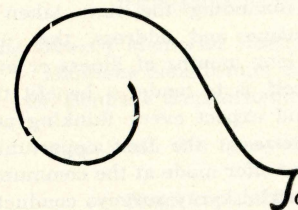
PEOPLE ARE QUEER

An offer to give every individual in a community a free, painless examination, that does not take more than five minutes including the time taken to record name and address, that may prevent long months of illness or even death itself, is to tender a benefit that one would expect every thinking person to seize at the first opportunity. This is the offer made at the community and industrial x-ray surveys conducted by the Sanatorium Board, and the industrial surveys conducted by the Winnipeg Health Department. Yet the most amazing reasons are advanced by some people in every community for not having a chest x-ray.

Some are anxious to have their children x-rayed, but do not wish to have an x-ray themselves, entirely failing to see that the only way to protect the children in a community is to have chest films of the adults who might pass on the germ of tuberculosis to them.

A man elected to responsible public office in one community stated belligerently that neither he nor his wife would have a chest x-ray; nobody could force **him** to do something he didn't want to do; etc., etc. Misguided man! Of course there is no compulsion, but isn't it strange that he would not wish as an elected representative of his people to set an example by being among the first to attend? Another otherwise rational gentleman wouldn't attend because—and this will startle the medical men who have been carrying such a heavy burden in the sanatoria in recent years—the whole thing is a scheme to make jobs for the doctors! And then plain inertia keeps a certain

(Continued on page 31)



*To every man there openeth
A Way, and Ways, and a Way.
And the High Soul climbs the High Way,
And the Low Soul gropes the Low,
And in between, on the misty flats,
The rest drift to and fro.
But to every man there openeth
A High Way, and a Low,
And every man decideth
The Way his soul shall go.*

JOHN OXENHAM

Redeeming Time in Hospitals

By DAVID A. STEWART, B.A., M.D., F.R.C.P. (C.), LL.D.

WHEN the good Samaritan picked up the man left half dead by bandits on the road from Jerusalem to Jericho he applied first-aid,—poured into his wounds oil and wine. He called an ambulance,—put him on his own donkey's back. He took him to a hospital, that is he brought him to the shelter and care of the nearest inn. He paid his bill leaving two pence with the innkeeper, a hospital charge of very unmodern proportions, and gave a guarantee for future payments. Thereon departing he laid this very broad, inclusive responsibility upon the innkeeper—the broad inclusive responsibility of all hospitals in all ages—"Take care of him."

Just what is implied in that "Taking care of him" has been the study of hospital staffs for 2,000 years. For the good Samaritan's patient it meant mere shelter in a wayside inn; now it might mean luxury in a palatial hospital. It meant then a few dates, a crust of bread and a jug of water; now, carefully planned, varied and faultless dietary. Then it meant treatment with the best of intentions, but little skill. It may mean now the utmost resources of modern science and nursing care in a super-equipped hospital, of which the ancients never dreamed.

But even 2,000 years ago "Take care of him" meant more than shelter, food and treatment. It meant taking thought for the affairs of the wounded man, and safeguarding his interests. It meant comradeship and encouragement, and even, in the come and go of travelers at the caravansary, some sort of entertainment so that time should not hang heavily on his hands. It meant help to get back to his home again for a new start. In the last quarter of a century

our hospitals have developed many new plans, even new departments, for personal services to the patient, social welfare, follow-up, occupational therapy, after-care. But the essentials of these new services are not new, indeed they use all included in the broad general charge given twenty centuries ago to the kindly innkeeper by the man who was neighbor to him that fell among thieves, "Take care of him."

Time is not life; it is only the stuff, the raw material that life can be made of. Every moment of emptiness or mere twirling of thumbs is a moment lost out of life. The measure of life is not days of the calendar or hours of the clock, but the fullness and joy of the days and the fruition of the hours. Hundreds of lazy turtles basked in tropical suns and hundreds of sleepy crocodiles wallowed in cooling ooze in the same few hours of the clock while Oliver Wendell Holmes wrote the Chambered Nautilus or Nelson fought Trafalgar. But these flaming souls lived more in one intense moment than the hundreds of somnolent saurians in countless centuries.

It is surely a right of people who sojourn in hospitals, that within the limits set by bodily conditions and needs, their lives should be interfered with as little as possible. Is it too much to ask that they should have permission, encouragement and even help to make days of life and living out of hospital days? Hospitals built to lengthen lives should surely not at the same time narrow them. In curing disease and so safeguarding future years, need we overlook present days? In restoring health and so making liberty and happiness possible for tomorrow, must we neglect liberty, occupation, happiness, life for this very day?

It has been said in criticism of hospitals where chronic disease is treated, that patients come into them men and go out cabbages; that they come perhaps with bad lungs and go out with better ones, but with backbone lost, or go out with improved stomach functions but less character or pep.

Lying in bed month after month may be good for diseased tissues, indeed it is a most important part of the cure for many ills, but it is not always good for people. Even a sick man, if he does nothing, when he might have some employment, may be, or may easily become a shirker.

Hospital days can be among the best days of life. People who have been hurried and worried, who have worn the shackles of exacting duties, can sometimes find in hospitals time to think, to come to themselves, to relax, to enjoy a little leisure, to read, to write what they have not had time to write. They may find time, as Walt Whitman would say, to rest and invite their souls. There are not a few who can look back on hospital days as days in which they have lived amply and enjoyably, as fresh and happy ones.

There is not much difficulty in giving opportunities for living or the pursuit of happiness to one who comes in well trained and well disciplined in living. Such a rare soul gathers eagerly from this and that, and, within hospital walls and limitations can find means to live an ample life. He will ask very few conditions, it may be a little orderly untidiness of books piled up perhaps, or working material about him. In the use of time such a man is a self-starter. But the majority at all ages are not self-starters, do not know how to employ themselves under the new conditions found in hospitals, twirl their thumbs and yawn and exist through long vacant days. And this is not because they could not or would not do better things but because they have not within them-

selves the suggestions of better things, do not know how to get started, do not know how to find life and liberty and happiness in hospitals. So they chafe, then perhaps get over chafing, and become satisfied with long, empty, aimless days, which is the worst of all.

When days with us are full of economic evil and revolutionary evil and moral evil there is more need than usual to look to uses of time, and avoid the empty spaces where weeds grow. Bernard Shaw believes it should be a capital crime to be idle. If so, it should be a capital crime also to encourage other people to be idle.

There are many things that can make the hospital day a day of living: a fine outlook from windows, surrounding gardens and lawns, birds in the trees, a view of the sky with its floating gallery of ever changing cloud pictures; or even a look at the come-and-go of a busy street; human interest in the welfare of other patients, the routine and technique of the hospitals, bits of medical and nursing knowledge to absorb, pictures on the walls, magazines circulated, and library books available—real books that are chosen because they are worth while, and not just the books people weed out of their libraries because they do not like them, yet send as good enough for hospitals. Such things as charts of outside temperatures, records of rainfall, barometric readings, daily or weekly verses or mottoes within reach of all, hospital news made available, can help to transform time into life. Radio broadcasts can be extremely bad. Radio choices should aim high rather than low. Some may actually grit their teeth over doggerel, slush and jazz, but nobody can be hurt by the "Unfinished Symphony."

Then may come definite work for hands—either occupational, or vocational—remunerative work, or training that leads to remunerative work. Some old country enthusiasts consider it al-

most as important to get pennies into the pockets of their patients as to get rales out of their lungs. Such work, occupational or vocational, undoubtedly fills many moments usefully and interestingly. But, however pushed, it leaves many hours still unfilled. It is technical, takes considerable outfit, cannot be carried very far without paid organization, supervision and management, does not fit all hospital patients, nor satisfy all, and cannot be provided for all hospitals.

Of all occupations for sick people, especially sick people in bed, or barely ambulant, or even on exercise, one of the very best, in our experience, is study. It is the most universally useful, the most varied, elastic and adaptable, the least monotonous, the easiest to begin, the cheapest to get tools for, the most convenient, for every bed can be a school, and by odds the most popular. A patient, a book and a teacher can make a start, or even a patient and a book. Study can be along the line of a man's vocation or can lead to a vocation, and that is perhaps the most useful. But if it leads only to interest and hobby it may be almost as valuable to man, to citizen, and to state an education with a more practical aim.

There is nothing that can be adapted to hospitals of any kind or size so easily as ordinary school education. Even if a teacher cannot be employed or if there can be one teacher only where there should be a dozen, much can still be accomplished. The biggest thing is to get the people started. Ten minutes with a patient—discussing, suggesting, arousing enthusiasm, a simple textbook loaned, an occasional visit not oftener than once a week or even once a fortnight thereafter may be quite enough to change dawdled hours into fruitful and happy ones. Behold how great a matter a little fire kindleth. As has been said, few people are self-starters in the useful employing of their leisure, but it

is astonishing how many people easily become self-starters if they are just cranked up enthusiastically once or twice and taken for an exhilarating little journey in study. Even if such promising people only are delt with and tough nuts that are harder to crack are left, very much will be accomplished—and accomplished easily.

But when a man has set himself work to do and has done it, especially when he has added knowledge or skill usable in his ordinary occupation—a better store clerk because he has learned bookkeeping, a better garage man because he has studied electricity, a better business man because he has read fundamentals and theories—he goes out with courage. Even if handicapped in one way in comparison with his pre-hospital life, in other ways he has gained advantages. He has no feeling of inferiority. There are great gains in study that is vocational.

And there are almost equal advantages in study that is cultural. If one has raised his standard of ordinary education a grade or two, or deliberately set himself to a course of study in history, or learned another language, or read literature studiously, or made a hobby of painting or drawing or read up on the theory and appreciation of music or art, even if none of these things bring a penny into his pocket or give much prospect of ever doing so, still they can send him out cheerfully without the fatal inferiority complex. What if he has a physical handicap? Has he not set himself difficulties and conquered them? Has he not shown himself capable of study and reflection? Has he not proved that he is adaptable, that he has capacity, that he can learn new things? Will he not therefore be able to meet new emergencies, and conquer new conditions? And every new interest is a new bit of life. Even if not better prepared than he was for earning—
(Continued on page 16)

Climate and the Tuberculous

YEARs ago, a change of climate was the first thing a person thought of when he found he had tuberculosis. Patients in the West hurried away to the Western pine forests and mountains. Those in the East travelled to the dry Southwest. Everyone believed that new air would be magic air—that the smell of pine trees or the heat of the desert sun would kill the germs. As we look back, the travel and expense and loneliness seem especially sad because they were all so unnecessary.

Today, doctors know that a person with tuberculosis does not have to go to a new climate in order to get well. They know that good sanatorium care near the patient's home gives him his best chance to recover.

Treatment in a nearby sanatorium gives the patient many advantages. He doesn't spend his time and money in useless travel. He is near his family and friends. He has constant medical and nursing care. He is in a treatment center that has been built around one idea—to help him, and other people with tuberculosis, to get well.

Fortunately, nobody needs to go far from home to find a good tuberculosis sanatorium. In each of these treatment centers there are doctors who understand the disease and know how to treat it. The patient and his family can be sure that good sanatorium treatment gets the same good results anywhere in Canada regardless of climate.

Families often try to talk the doctor

(From a U.S. Public Health Service "Health Leaflet" prepared by the Division of Sanitary Reports and Statistics and published with the permission of G. St. J. Perrott, Chief, Division of Public Health Methods.)

into agreeing to home care for the sick person. They are afraid that he will be lonely among strangers, and that he can't get well away from home. Many thousands of well people who have been patients in tuberculosis sanatoria say that this is not so. A new patient is encouraged by others in the sanatorium. Many fine friendships are started there. The doctor knows that this is true. He knows also, that home care is dangerous because tuberculosis can spread to other members of the household. A person who has tuberculosis should never be cared for at home if there are any children in the family. Children and young people are easily infected with this disease.

Once the move from home is past, the patient feels happier in his new surroundings. He doesn't have to worry about spreading the disease in his family. He never feels set apart from other people because his new companions are all patients like himself. He sees his family and friends as soon as the doctor thinks he is well enough to have callers. Later, as his health improves, he may be allowed a visit home now and then. At the sanatorium he is trained in new ways of living that build up his strength and keep him well. He is helped to form the habit of physical and mental relaxation so necessary to his recovery. There, close to family and friends, and in his own home climate, he learns how to get well.

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Tuberculosis Control

G. C. BRINK, M.B.

Division of Tuberculosis Prevention Department of Health of Ontario, Toronto

The prevailing thought that tuberculosis is on the way out is a handicap in its prevention. Any disease that is the first cause of death, excepting accidents, between the ages of 5-30 years, and which kills one out of every four persons dying in the age group 16-39 years in Canada, is not under control. From September, 1939, to June 30, 1944, tuberculosis killed more Canadians in Canada, than did our enemies in all theatres of war. Krause, in 1918, stated that during the war of 1914-18, tuberculosis accounted for more deaths than shot and shell in the warring countries.

The fact that tuberculosis caused more deaths in Canada than the infectious diseases during the five-year period 1938-42 bears repeating.

Deaths from Infectious Diseases	
Typhoid fever	884
Measles	1,071
Scarlet fever	730
Whooping cough	2,662
Diphtheria	1,479
Influenza	12,744
Poliomyelitis, all forms encephalitis and cerebro-spinal meningitis	1,341
Syphilis, including locomotor ataxia; general paralysis of the insane and gonococcus infections	4,094
Total	25,005

Deaths from Tuberculosis, All Forms	
Average number of deaths from tuberculosis in each of these years	5,988
Total	29,944

The campaign against tuberculosis should be regarded, not as an isolated or special endeavour, but as an important part of the general public health program. Through the control of other infectious diseases, better housing facilities and general living conditions

will have their influence in lowering the incidence of tuberculosis, the chief factor will remain the deliberate prevention of tuberculous infection.

There is need for both official and voluntary agencies in the fight against tuberculosis. Tuberculosis prevention requires not only physicians (specialists, general practitioners, medical officers of health) and public health nurses, but also lay groups. The lay groups should comprise executives, community leaders, voluntary organizations, and municipal and provincial official organizations. The complete co-operation of family physicians is necessary to the success of the program.

There are five chief factors in tuberculosis prevention, namely (1) early diagnosis of the disease, (2) prompt sanatorium treatment, (3) adequate post-sanatorium care, (4) social service, and (5) rehabilitation.

Up until three years ago the pace of tuberculosis control was governed by the speed with which medical officers of health, private physicians and public health nurses could refer contacts of known cases and suspected cases to stationary and travelling clinics. A program, based only on the examination of these groups, would be only relatively efficient because eight per cent of persons having unknown active disease are not conscious of being ill.

With the development of the mass x-ray surveys, those engaged in tuberculosis prevention need no longer be discouraged by their past failure to reduce the number of far advanced cases entering sanatorium. Given the personnel and equipment, one has reason to hope that the mortality from tuber-

culosis can be cut in half in the next ten years.

The importance of surveys of groups of apparently healthy people is well illustrated in the following table.

Percentage of classifications of all admissions to Ontario sanatoria in 1943		Percentage of classifications of all active tuberculous cases found by mass surveys in Ontario 1943	
21	Minimal	57	
33	Moderately advanced	30	
44	Far advanced	13	

On the left is shown the percentage of patients entering sanatoria in Ontario during 1943 with disease in the minimal, moderately advanced and far advanced stages. The figures on the right show the classification of those found, in mass surveys during the same year, to have active tuberculosis requiring treatment. The fact that, when the disease is in the minimal stage, more than two and a half times the percentage of active cases of tuberculosis will be found by mass surveys than by ordinary clinic methods, illustrates the importance of this procedure. The value of mass surveys is even more appreciated when it is known that 45 per cent of persons entering sanatoria with far advanced disease are discharged by death while 6 per cent entering with minimal or moderately advanced disease die within the sanatoria.

It is evident that until admissions to sanatorium with minimal and moderately advanced disease are considerably in excess of admissions with far advanced disease, we cannot hope to solve the tuberculosis problem.

Adequate Treatment Facilities

Obviously, the number of sanatorium beds should depend upon the extent and the result of diagnostic activities, not upon that false index "beds per death." If there are patients with tuberculosis awaiting admission to sanatoria, it is self-evident that there are insufficient beds, irrespective of the ratio of

beds to deaths. Waiting lists indicate shortage of beds.

Sanatorium treatment not only protects the public, by segregating spreaders of infection, but renders a high per-

centage of such patients non-infectious on discharge.

Adequate Post-Sanatorium Care

The policy of spending \$1,000.00 to \$3,000.00 on the treatment of a tuberculous person, and permitting him to return home with no provision made for adequate post-sanatorium care, is decidedly shortsighted, and an economic fallacy. The responsibility of providing proper after-care is undoubtedly that of the local health department. The enlightenment and attitude of health and welfare officials will determine, in many instances, whether or not the disease of a patient returning from the sanatorium will remain arrested, and the patient become a self-supporting citizen, or whether his tuberculosis will be allowed to reactivate, thus endangering other members of his family and community, and causing additional expense for further treatment. Approximately twenty-five percent of all patients are in sanatorium for second or third time. There should be just as close correlation between the activities of the welfare and public health officials as between sanatoria and the clinics.

Social Service

Social service should become more closely allied with tuberculosis control than it has in the past.

When the wage earner is stricken with tuberculosis, a tremendous adjustment is required in the living habits of the

other members of the family. The steady income usually ceases abruptly, and the family provider is reluctant to enter a sanatorium, leaving his family unprovided for. A mother contracting tuberculosis is also loath to enter sanatorium until reasonable provision has been made for the care of her children.

Many of these social and economic factors, which inhibit the control of tuberculosis, may be overcome if the welfare agency, in co-operation with the health authorities, takes a liberal and generous attitude toward the other members of the family who are potential cases of tuberculosis. Money spent in this manner should not be looked upon as charity, but as an investment or insurance by the state or municipality against future and large expenditures, which will undoubtedly follow if a niggardly policy is followed. Penny-wise policies will only add to the burden of the future taxpayer. It must never be overlooked that every case of tuberculosis prevented, either as the result of segregation of an infectious case, in a sanatorium, or the provision of proper standards of living within the home represented by tuberculosis, is not only money saved to the treasury but a life to the nation.

Rehabilitation

Rehabilitation of patients discharged from sanatorium has been largely overlooked, or at least plays a very small part in the over-all tuberculosis control problem. In many instances there has been an emotional disturbance, and the recently discharged patient re-enters civilian life apprehensive as to security and with ideas of inferiority, and generally ill-prepared to compete with others more favourably situated in striving for an adequate livelihood.

The solution of this problem must begin while the patient is still in sanatorium. Some type of patient-adjustment program is indicated in every sanatorium. Many patients do not adjust

themselves well to sanatorium routine. It is believed that, if the patient's worries and fears could be allayed, better results would be obtained by treatment. Each sanatorium should have an officer who has had some training in social and vocational work and who, from the medical findings, can evaluate the patient's potentialities and plan for his future activities, both while an in-patient and after his discharge.

The peculiar nature of the disease further handicaps the patient in that usually a prolonged gradual return to normal activities is necessary.

Immediately following discharge from sanatorium, the patient should be placed under the supervision of a well trained rehabilitation service, working in co-operation with employment centres for handicapped persons. With the intelligent assistance of each agency, the patient should once more become an asset to the community. Thought should be given to the training of necessary personnel.

Summary

The following are facts, and all in authority should recognize their significance:

1. Sixteen people in Canada die from tuberculosis each day of the year.
2. During the last ten years, approximately 60 per cent of all tuberculosis deaths occurred in most productive age group of life, 20-49 years. Further, over 60 per cent of all patients entering sanatoria are in this age group.
3. The average cost, including loss of wages, clinic service, and hospital care (no matter by whom paid) when a male wage earner is incapacitated because of tuberculosis, has been estimated at \$5,400.00, and when a female wage earner is incapacitated and requires treatment, at \$5,000.00.
4. The average cost to the taxpayer for assistance to a family because of tuberculosis, has been estimated by the

Continued on page 15)

Rehabilitation Notes

DURING THE QUIETNESS of those pre-sleep hours, there is one question worthy of thought, one that you should ask yourself and answer honestly—"What have I accomplished today?" Your sanatorium day from 8 a.m. to 8 p.m. is over and as far as studying and preparation for the day of your discharge is concerned, you can chalk it up as a complete loss. Look over the day—Was it made up of a game of bridge or chinese checkers, writing a couple of long friendly letters, reading a hair-raising detective story, or doing some diversional handicraft work? Add up your activities and evaluate them in terms of accomplishment. Do yours score high or low?

How is it that welshing on your studies goes on from day to day, week to week, and month to month? How come you've been caught in this sanatorium rut? We're not trying to make you out a slacker. You mean well and you do put forth considerable effort—now and then. But something must be wrong somewhere, and if unbiased careful thought is given the situation, it will probably turn out to be you.

Some people in Sanatorium find time to study and do other things as well. They must study, for they accomplish a remarkable amount of work in their allotted study time. Like you, they have only twenty-four hours in their day—so why is it they managed to get so much done?

The answer is not difficult to find—it is in the word "organization." Briefly, it means knowing *what* you have to do and planning ahead of time *when* you are going to do it. By mentally organizing your activities during your spare moments, you will be amazed at the results. An inflexible schedule is not necessary nor is it desirable. No one should take all the pleasure out of life by following a rigid changeless routine. But you will find that if you plan your work ahead of time and stick to those plans, you will really be able to accomplish the things you have always wanted to do.

Every month men and women are being discharged from sanatorium and join the ranks of the job hunters. In a few months or a year you will be one of these hopefuls, making a bid for a job in your chosen field. But, remember, it takes more than just an aimless desire to "do something." Constructive effort on your part is the key to getting what you want but indulgence in wishful thinking is fatal. So start planning your day now, and remember, "Wishing won't make it so."


CONGRATULATIONS to the following students on completion of their courses: Allan Saher, Practical Mathematics; Jean Frederickson, Typing Unit 3; Violet Graham, Typing Unit 2; Louis Jones, Typing Unit 1; Garth A. Johnson, Trigonometry.

JOB SEEKERS CHECK LIST

THERE comes a day in almost everyone's life when he or she has to look for a job. Since you will be joining the ranks of job seekers, or have already worked, you should be interested in learning how your job-hunting techniques rate. With the coming of peace, competition for jobs is greater, and inexperienced job-seekers need to know more about job finding. Do you know how to plan a job campaign? Do you have the right work attitude? Are you familiar with employment trends? Try the check below, answering "Yes" or "No". Scoring is on page 32.

1. Have I sought the advice of a competent and trained vocational guidance counselor in my job hunt? _____
2. Am I applying for a job for which I am obviously unsuited or unqualified for? _____
3. Am I in the proper locality for finding the occupation I have selected? _____
4. Have I investigated to see if the field is overcrowded? _____
5. Have I checked my qualifications, training, and education against those generally required in the occupation I have chosen? _____
6. Have I checked wages, hours, and working conditions to see if I would be happy in the work? _____
7. Have I checked to see if the occupation offers any chance for advancement? _____
8. Have I checked to see if I am applying during a seasonal lull in employment? _____
9. Have I checked to find out the job hazards, advantages, and disadvantages of the occupation? _____
10. Am I applying in fields where there are dwindling opportunities for employment or advancement, and passing up new and growing fields? _____
11. Am I considering job fields allied to the specific occupation I have chosen? _____
12. Am I passing up valuable part-time work which offers a chance to get experience? _____
13. Am I taking advantage of vocational materials which will give me insight into the labor market? _____
14. Have I organized my job campaign systematically? _____
15. Have I investigated all community facilities and public agencies for job finding? _____
16. Have I visited personally all the prospective employers I can? _____
17. Have I prepared and used a prospect list? _____
18. Have I tried to write legible, intelligent application letters to employers whom I cannot visit? _____
19. Have I revisited all employers who had nothing to offer me on my first visit? _____
20. Have I checked with all reliable private organizations who do placement work? _____
21. Do I look for a job in only the most likely places, omitting other possibilities? _____
22. Do I have a fair knowledge of the job which I am interested in getting? _____
23. Is my choice of a job a wise one, picked for good reasons, rather than glamour or because someone told me I should enter the occupation? _____
24. Do I feel that it is beneath me to start at the bottom and work up? _____
25. Does my interest in a job go beyond just getting my weekly pay check? _____
26. Do I learn from my own and others' mistakes? _____
27. Do I shirk responsibility? _____
28. Have I the habit of doing a little more than is expected of me? _____
29. Do I get along well and co-operate with the people around me? _____
30. Do I welcome constructive criticism of my work? _____
31. Am I persistent and resourceful? _____
32. Do I show initiative and imagination in my work? _____
33. Do I obey orders cheerfully and willingly? _____
34. Do I try to show an employer I "know it all"? _____
35. Have I the necessary education for the job? _____
36. Have I the necessary experience for the job? _____
37. Do I have the personality and temperament required for the job? _____
38. Physically, do I measure up to requirements? _____
39. Do I have bad habits which may prejudice an employer against me? _____
40. Do I have the ability to adjust myself to changing situations? _____
41. Can I meet an emergency calmly? _____
42. Do I meet the other specific job requirements? _____
43. Is my personal appearance neat and clean? _____

(Continued on page 16)



The Canadian Legion of the British Empire Service League

No. 105

MANITOBA BRANCH

TUBERCULOUS VETERANS SECTION

Com. A. E. Christensen
Pres.

Com. F. E. Ross
1st Vice-Pres.

"They shall grow not old, as we that are left grow old;
Age shall not weary them, nor the years condemn.
At the going down of the sun and in the morning,
We will remember them."

Com. T. H. Johnston
2nd Vice-Pres.

Com. V. E. Garner
Secretary

Com. W. J. Purcell, Treas.

ANOTHER month gone by and old man winter seems to have been floored for the time being. However it doesn't pay to be too optimistic when March "comes in like a lamb", as the saying goes, but with a new weather forecasting station in Winnipeg we should at least get fair warning of a double-cross. Since the last issue we went into a huddle with the editor and came up with one or two improvements. The more important of these are: (1) It is planned to increase this article in size to two pages or more, if necessary; (2) It will now be possible to bring you the news from the current month's meeting instead of the previous one; (3) Efforts will be made to place in the hands of the writer, the latest news on changes in legislation, as they affect chest disabled veterans. We hope these changes will tend to improve this section of the Messenger, and make it more interesting and worthwhile to read, and we would like to thank the editor for his generosity and assistance during our past association.

The regular monthly meeting of this branch was held at 8 p.m., March 5th in the Canadian Legion War Services office, Lombard building. After reading of the minutes and correspondence, the question of a delegate to the Dominion convention was discussed. This coming convention of the Tuberculous Veterans' Section is to be held in Montreal a few days prior to the Dominion Convention of the Canadian Legion, also to be held in that city. Since it was felt that we cannot afford at this time to send a delegate, we probably will be represented by proxy through a delegate attending from another branch.

The Welfare Committee has made tentative arrangements for an evening of cards, and dancing to recorded music. It will probably be held in the Women's Tribute building, Deer Lodge, on April 20th. However there will be more definite news of this in our next issue. Other proposals made at a recent meeting of the Welfare Committee call for (1) a basket picnic around the end of June to be held in City Park, this to be for the branch only, and a program of races, etc., to be set up, (2) in October, or around then, the Third Annual Dinner, the details of which will be arranged later, and (3) a Christmas Tree for the children of branch members. From the foregoing it looks as though this year will see much more activity within the branch than there was last year, and with sound planning ahead all these events should be successful.

The hospital committee has put in another busy month. Here is a very brief resume of their activities. During the month they gave twenty-two showings of various moving pictures to servicemen and ex-servicemen, six of which showings were to Sanatoria patients. Apart from this they paid several visits to different sanatoria, interviewing patients, and also the staff on behalf of the patients.

Well comrades, I believe this is about the best we can do this month. Next month there should be more news on legislation. In the meantime don't forget to let us know of any ideas you have for this column. Either tell the Hospital Committee when they are around to see you, or write to me at the address below. See you next month.

There is Many Kinds of Bones

An old newspaper clipping brought to light in Saint John, N.B., contained the following essay on "bones," purportedly written by a small boy:

"Bones is the latticework on which the body grows. If you didn't have sum bones you would be shaped like a custard py. If I didn't have no bones I wouldn't have so much motion and my teecher would be pleased. But I like to have motion, especially in this pay-as-you-enter suit that ma hired for me. "If my bones wuz stuck together with wire in the right places it would make a skeleton. I am mighty glad my skeleton was put on the inside before I was finished, because it looks better there, and if my bones wuz on the outside and I fell down I would break everything in the place. Onst I went to circus and seen a living skeleton. He looked like his folks didn't keep house but boarded sum place.

"There is a grate many different kinds of bones. There is the crazy bone, the wish bone, the soup bone, the trombone and the backbone. The backbone is sit-cher-evated just inside the skin on the other side from the front side and is filled with rubber.

"The backbone is made up of bumps with spaces in between where the bumps is left out. When your skates fly out in front of you and you sit down on the ice, one end of the backbone is at the lowest side of the head (if it don't bump up through) and the other is at the upper side of the ice.

"There is another bone called the skull. The skull has bumps, too, sometimes there is branes on the inside of the skull.

"Bones don't grow solid like limbs on a tree 'cause they have joints. Joints is good things to have in bones. There is a good many kinds of joints. They grease themselves and don't squeak.

"The bones that hold your lungs in

are kalled slats. They run around you east and west. When bones is ground up fine they make good fertilizer; it gives me a lonesome skattered feelin' and brings tears to my eyes to think that some day I might be used on an onion patch.

"That's all."

—Toronto Star.

TUBERCULOSIS CONTROL

(Continued from page 11)

Mothers' Allowance Commission of this Province to be \$2,800.00.

5. It has been estimated in Ontario that, for approximately every seven dollars spent in treatment, only one dollar is spent on prevention. This probably applies to other provinces.

6. If we are to wipe out this preventable disease, there must be:

(a) Adequate diagnostic facilities, which should include enough mass survey equipment, and personnel, to make possible an x-ray film of the lungs for every citizen at least once every five years.

(b) Sufficient beds to permit prompt sanatorium treatment for every person with active tuberculosis.

(c) Adequate public health nursing services.

(d) Proper post-sanatorium care.

(e) Social services to make possible a higher standard of living in families represented by tuberculosis.

(f) Rehabilitation of the handicapped patient.

If these facilities were available, the road ahead would be clear, and people in all parts of our country would be protected against tuberculosis.

The pioneering period is over. The result of a planned attack on tuberculosis needs no restating here. There is a new spirit abroad among the people in regard to what can be done to prevent disease, and they are demanding an all-out program which should be the go-ahead signal to all governments and health departments.—*Canadian Journal of Public Health.*

Manners Maketh the Man

There is no one quality which has higher regard from everyone than good manners. In the middle ages good manners were linked with good morals and courtesy was one of the attributes of virtue. Today we are much more apt to think of them as being the fundamental golden rule of life.

Consideration for the rights of others is the first law of good manners and in nothing do we show lack of consideration more than in the matter of noise. Today nearly everyone lives close enough to his neighbor so the noise he makes may prevent others from getting much-needed rest. A radio may be a boon or it may be a great strain upon the endurance depending upon whether it is yours or your neighbor's. If you

have your own radio in the hospital you might find out how those nearest you feel about it. Maybe you could work out a compromise program with them, if they do not see eye to eye with you on the virtue of sweet swing.

Visiting with the fellow who wants to sleep or waking him up by loud talking is always annoying. Then there is the pest who won't observe a rest hour, nor let anyone else do it; he must have a drink of water, he thinks of a wise-crack or the window shade doesn't work right.

It is easy to forget about other people. We all do at times. After all, no one ever said that doing unto others as you wanted them to do to you was a particularly easy way of life.—NTA Clip Sheet.

REDEEMING TIME

(Continued from page 7)

ing a living he is better prepared for living life. He has become a better man and considering the menace of badly employed leisure, has become a better citizen also.

I have already suggested, perhaps iterated and reiterated in much of the foregoing discussion that filling weary, empty, trifling hospital days with study which may possibly turn out to be good for the pocket, and which will always be good for the head, will be good for the character also. Work is absolutely worth while even if character is the only result. A daily duty, whatever it may be, fills an empty day, and makes it a day of living and of life.

There is no tonic like duty. It helps to keep the moral backbone stiff and straight. It prevents deterioration and the sense of inferiority that can so easily beset those who are laid aside for time from the routine of ordinary life. It adds to cheerfulness and self-respect and the sense of responsibility. A duty a day can keep the very devil away.

The hospital that casts the bread of educational work upon its waters will find it turning after many days in better spirit and discipline, better co-operation in the main purposes of the hospital. Even the difficulties of medical and nursing care, the cure of diseased bodies and minds will be helped by the tonic of the three "R's" and the educational and cultural occupations that follow in their train.

The excellency of knowledge is: that wisdom giveth life to them that have it.

(Continued from page 13)

44. Do I answer questions with the information asked for, not too much and not too little?
45. Have I proof of my former experience?
46. Is my self-sales talk the high pressure type?
47. Am I careful not to interrupt the speaker?
48. Is my application for just "any kind of work"?
49. Do I have a good understanding of the job requirements and what the employer wants, so I can show how I qualify for the job?
50. Do I thank him for the time he has spent in interviewing me?

T-I-D B-I-T-S

By C.P.R.

Prefect Bliss: A woman discovering an old rival has lost her teeth and grown fat.

* * *

A penny can be dropped into a collection plate in such a way that it makes a noise like a quarter, but it doesn't ring up a quarter on St. Peter's cash register.

* * *

Judy: Why is that girl in the next room always looking at her face in the mirror in that mournful manner.

Mary: She heard that a girl's face is her fortune and she's facing bankruptcy.

* * *

A reformer is one who wants everyone to be better than he is himself.

* * *

Love makes some men do foolish things. One chap slashed his wrist, drank a bottle of disinfectant; jumped out of a seven story window and had his fall broken by an awning, at the hospital he commented, "Kind of a foolish thing to do. I could have killed myself."

* * *

Postmaster: "What's that peculiar odor around here?"

New Clerk: "I guess it's the dead letters sir."

* * *

Daughter: "I can't marry him mother. He's an atheist and doesn't believe in Hell."

Mother: "Marry him, and between us, we'll convince him that he's wrong."

* * *

The dimmer the porch light the greater the scandal power.

* * *

Four out of five woman haters are women.

* * *

"Good morning," said the switch-board operator. "This is Perkins, Perkins. Peckham and Potts."

"Mr. Perkins, please."

"Who is calling please?"

"Mr. Pincham of Pincham, Pettam, Popum and Pogg."

"Just a moment please, I'll give you Mr. Perkins' office."

"Hello, Mr. Perkins' office."

"Let me speak to Mr. Perkins, please."

"Mr. Perkins? I'll see if he's in. Who's calling, please?"

"Mr. Pincham of Pincham, Pettam, Popum and Bogg."

"Just a moment, Mr. Pincham. Here's Mr. Perkins. Mr. Pincham on the line, please."

"Just one moment, please. I have Mr. Pincham right here. Okay with Perkins, Parkins, Peckham and Potts, Mr. Pincham. Go ahead please?"

"Lo, Joe. How about lunch?"

"Okay, Charlie."

* * *

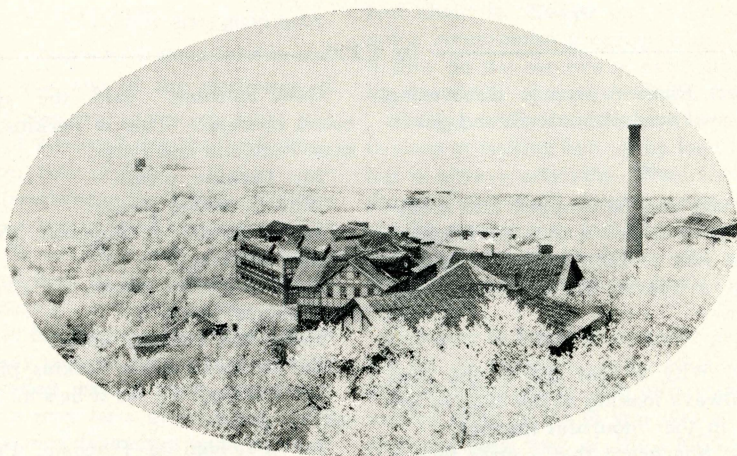
During a performance of "Faust", the scene arrived where Mephistopheles was to take Dr. Faustus down to hell. The devil yanked open a trapdoor on the stage, and the two descended a short ladder into a three-foot pit. As they knelt to open a second trapdoor, which would permit their full exit, they found to their horror that it was stuck tight.

While Mephistopheles tugged frantically at the handle, Faustus made urgent attempts to close the door above them. But the space in which they stood was much too small.

As the audience tensely waited for their heads to disappear, one spectator suddenly stood up in his seat, waved his arms triumphantly, and shouted:

"Hooray! I'm saved. Hell is full at last!"

Manitoba Sanatorium



East Three Laments

Here we are near the 17th, when all the sons of old Ireland have a chance to howl, but for some reason or other we have a shortage of Son's of Erin on our flat, which is a rare thing.

Those who have taken up a lease for what we hope is a short stay are, Sloan, who hails from Virden, and Graham from La Riviere but who spent a short time in Number 3. Frank Hickson spent a few days with us after having his tonsils removed by Dr. Paine, Frank said he is glad to be rid of them as they were only a pain in the neck to him. D. Rankin arrived from West 2 and looks no worse for his stay with the fair sex. Arthurson moved back from East 2, is it for to stay or are you going to be away again Art? Skob and Campbell moved to One and we hear they are settled, how is the coffee Skog?

REWARD McKnight is offering a reward for the culprit who put sawdust in his bed one night, (Gee Elmer, you must sleep sound.)

HIGHLIGHT Bartlett's major operation, Jim's "Motto" walk upstairs and save a dollar.

DUMBNESS. The prize this month goes to Wallis. What did you turn that radio off so soon for? I am afraid you will never be able to go back to Deloraine.

BRAGGART. If you have not heard Paul (Mumaliga Kid—Cornmeal to you who do not know) Friedman talk about his grandfather you are really missing out — on what you ask me? I wouldn't know.

WISE CRACK (Kozier)—Paul do you know your neck and my typewriter are alike?

Paul—How?

Kozier—Both Underwood.

My goodness I nearly forgot to report that W. Kelly moved to East 2 prior to his operation, the boys miss you Bill and good luck to you. Our staff this month is comprised of Miss Lee who has the job of getting us up in the morning, while Miss Rankin comes and tucks us into bed, Alyce, Melinda, and Evelyn, are looking after us in the daytime, of course we still have Miss Duncan to see that we are good.

Hanisch visited the O.R. for adhesions

and came out with a feeling of relief and is nearly back to normal.

Guess I had better sign off or I will be getting as Korny as the reporter who writes for the K.E. "That's a joke, Daughter."

P.S. Just heard that Frank Shearer has moved on the flat again.

West One

Welcomes are out this month to Mrs. Carter from Brandon, Mrs. Stewart from No. 2 pavilion, and Julie Flett from West 3.

Our feature attraction, Baby Kenneth Cook, went home leaving behind a conspicuous silence.

Mrs. Johnson in Room 1 had her son, recently returned from overseas, and her two daughters, out for a weekend visit.

Phyllis Laird is still knitting diamond socks—and very nice they are too. Her roommate—Mitzi Newmark—has been made president of the huba huba club—and how she was! That laugh did us all a world of good Mitzi.

There's no telling what might happen to Mrs. Adamanchuk if she keeps on gaining weight. Guess you'll just have to give up those chocolate bars.

Mary Haney has taken "to school" so enthusiastically, that she's at her studies almost 24 hours a day, almost, that is. Roberta Cooper, however, becomes so involved in her knitting that I'm afraid her three R's get sadly neglected.

Mrs. Mona Hayden, despite extra blankets and a hot water bottle still complains of cold feet. Any worthwhile suggestions would be warmly received I'm sure.

Reta Latimer said "nothing for publication", which in itself is front page copy.

Hit and Miss—

Connie Gaddie—becoming an ardent jig-saw fan.

Mrs. Esquaish—augmenting Connie's efforts with the puzzles.

Mrs. Rondeau—a newcomer to the pneumo field.

Mrs. Fleury—still tops in knitting.

Sixty-four dollar question—

Who asks almost every evening "for a wee drop of mineral oil?"

Mrs. Hannah is busy turning out the most exquisite crochet work.

Farewells were said to Mrs. Taylor and Betty Manzer, both of whom left us for the Obs. Alice Johnson moved up to West 3. Thanks Al for pinch-hitting for me last month.

This is about all the news, furthermore it's almost 8:30 and being in the infirmary, well.

King Edward Korn

Please, Mr. Editor, Dear Mr. Editor, would you kindly change the heading of our kolum from "Krackers" to "Korn?" Krackers are fine when in season, but that is the beauty of korn it is in season at anytime, especially when I have anything to do with planting it!

Once again we have had a lot of doin's at our house. First of all we had Helen Setter come back to us, she no sooner got here and started working on the attendants staff than she was moved up to the Nurses Home; Linda

Jerrett

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115—10th St. Brandon, Man.

Hamnett is also living up there now. We hope you like your new place of residence. I won't say what I generally say at this time, i.e., how anyone can be happy and not in the K.E., I'll leave that to your imagination, of which I know everyone around these parts has plenty of. We had a small delegation downstairs for a few days and then in one day we welcomed Myrtle Munro, Eileen Matthews, Betty Venus and Jean Jeffery, all from No. 2. Following in their footsteps we now have Mrs. Eleanor Wolfe and Margaret Bishop, also from No. 2. To all you girls we, of the old gang, namely, Ada, Mac, Ardy and Anne wish you a very pleasant and happy sojourn in the K.E.

Upstairs we said goodbye to Claude (Bulgy) Ball, at least he left. I never did say "au revoir" to him, which I missed doing very much. Best of luck to you, Claude. Joe Switzer spent a week at his home in Dauphin, he reports having had a nice time. Our very best wishes go with Frank Shearer who moved back to East 3, hurry back Frank, the old K.E. just isn't the same when you're not here.

Before another Messenger comes around shure and begorra another St. Pats Day will be a thing of the past. To all the Irish, have a big day and please forgive this foreigner's feeble attempt at playing she's Irish.

Cheerio.

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East Two Notes

There's not much to report this month except that "Huba Huba" Harry and Gordon Anderson have left us for the comforts of No. 1. Cheer up Harry, Hank and Wilf are still singing, "You'll get used to it."

Lloyd (Scruffy) Edwardson is our only new recruit from the C.T.C.

Angus Grudeski and Don McLellan visited the O.R. this month and had their adhesions cut, also Dave Gair who had a revision and two more ribs out.

The latest mystery on the flat is how Dave Gair slept through the snores of Tom Bruce. While his latest roommate "Fargy" was snored right to the bath board, where he remained for the rest of the night. Tom Bruce is now in Room 2 where he sleeps peacefully with his "snores."

Observation News

Howdy folks, here we are back again with a lingo of news for this month.

We were sorry Mary Laurenson and Grace Rogers were taken back to the infirmary but wish you both a speedy recovery.

Ruth (Pluto) Pico, Rose (Nicky) Nyhorak, Sophia Soltys, Florence McKeowen, moved to No. 2. Good luck girls. Oh, pardon my mistake—ladies.

New members to join us were Jennie Rushton from Erickson, Steena Olafson from Sinclair, Betty Manzer, and Mrs. M. Taylor, West 1, Mrs. G. Watson, West 2, Mrs. F. Aitkens, West 3, Mrs. I. Smith returned from Winnipeg.

Betty Rink (lucky girl) received three boxes of roses for Valentines. Where did you keep them Bet?

Melba Fry was over for a bronchoscopic the other day. She said it wasn't bad, it's all in the way Dr. Ross holds your head.

Arline Fawns received word the other day that she was the owner of a large sum of money left to her by a dear

friend. She's expecting to retire any day now.

Miss Braun, the bombshell, is writing a dictionary. How goes it all Helen?

I Saw

A very odd thing happened the other morning. Doreen Wicklund was back in bed when her breakfast tray was brought in.

Don't get around any more 'cause we've got the T.B. blues. Dr. Ross says rest is the cure, so we're at it harder than ever.

Number One News

Many changes have taken place this month. Everytime the phone rings it's almost certain to be another move. It all started with Betty Venus, Jean Jeffery, Eileen Matthews and Myrtle Munroe, moving to the K.E. Hear they like their new home but, knew they would. Hear tell, Myrtle was especially pleased over the move. What's the attraction Myrt?

Vara Yakabovich left us for West 2 where she underwent an appendectomy. At the time of writing, we hear she is getting along very well. (Do you see Dr. Paine very often Vara?)

Mrs. Etta Stewart moved to West 3 and is recuperating from the flu. Hurry and come back Etta, your bed is still empty.

We welcome Ruth Pico, Rose Nyhorak, Sofia Soltys and Flo McKeown from the Obs and Verna Eaton from the C.T.C.

West Three

The doctors rushed hither and thither; the nurses, thither and fro; and by here all self-respecting patients—even when bent on legitimate excursions—developed bad cases of conscience—it is. The cause for this commotion was the flu. The victims were: Miss Proven, the San housekeeper from the Main building, Grace Rodgers and Mary Lawrenson from the Obs, and Isobel Lafontaine from West 2. They have all

practically recovered now, thank you. Isobel has even returned to her customary niche on the floor below.

In addition to those moves we lost Bea Smith and Mrs. McCallum to West 2, Mrs. Aitkens to the Obs, Julia Flett to West 1 and Mrs. Wallace to Calgary (you should have been here the day she left. What alarms and excitement!) In return we gained Alice Johnson from West 1, and Mrs. Bateman from Brandon. May the sun shine brightly on all of you.

The most glorious news of the whole month—to your reporter—was a negative gastric, her own naturally. At this moment new and different fields look very green so don't be too surprised if you read of another move from this flat in short order. She'll be shocked if she doesn't!

Every mail day near the 14th had our orderly scattering love tokens all over the flat and well, we liked them. Frances Vaski had the truest valentine of all in the shape of red roses. That is, she did if you except Mr. Radalinsky's offering of himself. He was here that whole week, which made his wife extremely happy.

We would like to thank those responsible for the delicious lunch of coffee, tarts, and cakes that surprised us one evening. We liked it!

Here is a throw back to Christmas. Anne Harder is still looking for the replacement for her rattle that was broken then. Someone promised it to her but perhaps they aren't being made anymore?

Our heartiest birthday greetings went to Amelia Julius and Mrs. Dubois this month. May their days be long and full of joy.

Mrs. Melnick visited the O.R. to have her adhesions cut. Said she on her return, "It's not as bad as I expected." Nothing ever is—or is it?

On that questing note we shall now leave you in peace.

Thoraco Themes

Since we last greeted you things have happened. One of the girls in the big ward gave us a scare when she developed a case of flu and made a flying trip to West 3, but we are happy to say she's back with us. What was the idea Isabel?

We laid the welcome mat out to Mrs. T. Stefanic from the Clinic. Good luck.

Mrs. Cecil Stewart is now tackling a brace and doing O.K., too.

Mr. Gair returned to the East after paying a visit to the O.R. and we now have Mrs. Frances Larn from Obs who had a wax pack. A speedy recovery, Frances.

Doug Rankin is the only man on the flat these days—brave, eh?

Mrs. McCallum and Bea Smith came from West 3 and are now recovering from first stage thoracos. They seem to be doing nicely. Mrs. Johnson at long last got a roommate. Yes! it's none other than Tommy from Room 1.

Mabel Watson told of a very heart-breaking moment when she bid sad adieu to her grey sweater, but succeeded in getting a nice blue one in place of it.

We are still wondering if Edith is telling the truth. She had a soldier out to visit her, a big handsome blonde she says is her cousin (we wonder).

We wish to thank Rose Hamilton and Marge Sinclair for treating us to coffee and cakes. We all enjoyed it very much.

Well folks this seems to be all for this time. Your reporter signing off.

Cheerio.

Gordon Cottage Calling

Once again the evening of the 20th finds me sitting down trying desperately to think of something to write for the Messenger. I'm afraid a few lines will have to suffice for this time.

Herb Jentsch left us to take up residence in No. 3 pavilion. Congratulations on your progress Herb.

Vic Pauls is with us again after his visit to the C.T.C. in Winnipeg and a

short stay in No. 1. We had expected that Vic would do the reporting this month but he is a difficult person to persuade.

Last Saturday evening Don McEntee, our Sgt. Major, hit a peak of excitement as he listened to his friends from Minto singing, fiddling and guitaring on the radio.

Dr. J. L. S. Anderson and Wes Kearns are wondering why they can't keep buttons on their pyjamas and are inclined to blame the laundry—but we know differently.

Needless to say, the rest of us are happy and content.

Nurses Home

This is the Nurses Home coming to life again after quite some years of absence from your pages — and glad to be back.

Well now that everyone has recovered from the terrific shock, pick up the magazine again and let's see what gives in the news.

Valentine's Day was quite eventful for some of the girls namely, Miss Duncan and Agatha Driedger. They are still trying to find out who sent them those lovely valentines.

And our own Kay Gillis and Lillian Lee, ah! The lucky girls received roses.

We welcome to our nursing staff, Audrey Stender, June Sutton, Linda Hammett, and Helen Setter.

We hope Miss Seys is liking her new position. While we are missing her terribly, Dick's white horse is sure getting a break.

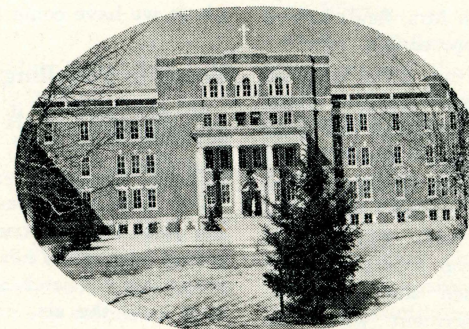
Here comes Muriel home from seeing her brother who has returned from five years overseas. Enjoyed the holiday but is glad to be back at the San.

Well, guess that's enough for the first time, be seeing you all again next month.

DRINK MORE MILK

It's Good For You

St. Boniface Sanatorium



Ste. Therese Tattlings

We're doing a little pinch-hitting this month for Mrs. Mae Baxter who does a wonderful job on this column usually.

Our first note concerns Sister Robert. Our good mother had left us orphaned due to illness.

"We were all thinking of you,
More than any words can ever tell;
We were wishing, hoping, praying, begging for health,
And now you are back with us; WELL!"

Forming the nurses staff are: Miss Kirby, Miss Eileen Norman, Mrs. Grant and Miss Brien. At night we have our pretty, little red-head, Miss Arber, who puts us off to sleep with, "Good night, and God bless you."

We bade farewell to Miss Nellie Fedkowsky this month, and we wished her luck as we waved her goodbye.

Miss Doris Barkman made her first visit to the O.R. and is now looking well and happy.

We welcome a newcomer, Mrs. Rosencrans, and we hope that your stay will be a short and happy one. Others on the balcony are Mrs. Romund, Mrs. Holm, Mrs. Ellis who is now on R. 4, and hoping for more, and Mrs. Sasnella with her flowers by the dozens.

Up the hall is Miss Letitia Walker with a new roommate, Miss Marjorie Krups, to you too, Marjorie, we extend best welcome wishes for your health and happiness.

There's Mrs. Sutherland, Mrs. Chalons and Mrs. Barter all looking beautiful after their charm curl waves.

Mrs. Kitchen seems to have a lot of fun spilling ink these days—over what though?

Room 159, or need I say more? There we find glamor-girl Nora, sweet and gentle Frankie, Alice troubled with her eyes, one always seems to wink. And then, not forgetting our one and only Mae. At this point words fail me—but you ought to see Mae's permanent!

Room 158, there's Stella that swoons over blonde men. Bjorg and Helen in the card business, and they really have a specialty. Ruth, you're a wonder, chasing the cure so well.

157 are a model C.C. Company too. Well, cure-chasing can surely do the trick to turn the tables in our favor, so we have Miss Mondor, Mrs. Reimer, and Mrs. Crykowski all giving us their good example that it can be done without exception. Mrs. Gregorchuk has just left us in favor of St. Joseph's and Mrs.

Kitchen has taken her place to complete the foursome.

Welcome goes out to Mrs. Lewicki as she comes in with Mrs. Seaticki and they look such a happy couple.

And last but far from being least we report on 156's—their modesty holds them from the limelight—not this time, and Heaven forgive me—there's No. 1 Mrs. Blake, the sallies of Blondie are a tonic, producing smiles that burst when she doesn't have the joy of being able to drop a letter at our door, etc. And then she knits her eyebrows in wonderment when the scales tell the story of another pound. Then a bow to our demure Mother Marie who is another model C.C. She has the visitors, and it is our sweet little "Dolly Dimples", Miss Kathleen Ingram, who comes out a-glow with the Sweetheart roses. She just seems to wear a perpetual smile. But I suppose one shouldn't wonder, for after all she's even got the King on her side! If Miss King hasn't toned down a bit with her collection, she will soon have a select group of horses to enter in the spring's Grand National.

A hearty welcome goes to our new trio of younger nurses, Miss Gosselin, Miss Mowatt, and Miss Miron on our flat and to all those of the new set we wish you all the best of luck in your chosen profession.

"If tomorrow never comes, there's been a lot of yesterdays." . . . and those

yesterdays have been made beautiful to remember, to treasure and cherish because of the kindness of those with whom we have come in contact.

Youville Yodellings

Hi all! Wonder if little Cupid had anything to do with the goings on on your flats?

Our little seven year old, Julie Senick, played the part very well, and admits it was worth her while when Saturday arrived and a special greeting came over the air.

There are many other little accomplishments that Cupid was responsible for, and seeing that action speaks louder than words, we'll just let it go at that.

In the meantime, our greatest worry is: How "Mr. Flu" could be kept under check. Both Mrs. Carriere and Peggy Cummings have had a visit from him but we are glad to report that they are feeling much better. Nice going there, girls, hope to see you up and around once again.

Mrs. Poinsonneault has R. 5, and that's about all for the blue side.

Turning the corner, we drop into 256. We find Mrs. Elliott with her R. 5—official of course, so she says.

Millie almost flying out of bed ever since she started double pneumo, careful there, Milly, or that Walter guy will catch up with you.

Adele Pyziak has R. 4, congratulations,, Adele! Also to Mrs. Hill who has R. 6. Now what can we find that's good to gab about in Room 258? Millie no doubt—and why not? Cupid had her somewhat worried. It's quite alright, but which will it be?

Talking about "Easter Bonnets", well, your troubles are over with if you see our milliner, Miss Buckle, and to be sure, Hollywood has nothing on her—no not when it comes to designing them from pancakes.

Why the balcony girls turned to be so quiet still remains a mystery. It couldn't be because Mrs. Strutt has started pneumo!

We wonder:

1. From where Miss Danalchuk gets all those lovely gowns?
2. From whom Hedio Dirks gets all those flowers?
3. What Corrine's favorite pastime could be?
4. Why Miss Hesper insists that she has hay fever? Could it be spring fever? No doubt it is, so let's put it this way. When one spends all their moments shopping at J. M. Huot & Co., buying spring clothes, eh Doreen?

Our new nurses are Miss Norman, Miss Scott and last but not least Miss—tu vas brule—Cantin.

We must not forget the best of news. We have our very efficient Miss Jenkins back again with us as head nurse. Au revoir for now.

P.S. Miss Mary Dirck insists that I purposely forgot to mention that she celebrated her ?? birthday. Do you feel bigger now?

Ici St. Jean

This month has seen a few changes on the flat. First of all, three gents had the good fortune to receive their discharges. They were: Mr. J. Stewart, Mr. B. Stewart and Mr. Smith. To these chaps go our best wishes for success in their future life.

There are two new fellows in the persons of Messrs. Demchuk and Cochrane. Welcome fellows and may your stay here be pleasant.

The nursing staff is made up of Miss Bailey, Miss Reti, and Mrs. Russell, with Miss Knelman taking over at night.

Three gents made a trip to the O.R. Mr. Derrien for a thoracoplasty, Mr. Russell for a pneumolysis and Mr. Rollick for a spinal fusion. All are doing

fine. Mr. Anderson and Mr. Nichols are back on R. 3 again, we are sorry to say. We are also sorry to see that Mr. Riggs is on Silence.

Bobby O'Halloran continues his winning ways with the hockey pools. "Parcel Money" is his term for it. Ken Porter took the cribbage money this month, and seems to be making a habit of it. A nice habit to get into.

Mr. Einarson is trying his hand at needle-work and is doing a very fine job. The other chaps in 110 are all busy making cushions. Lou and Johnny in 104 are continuing their collection of records. They recently modernized their juke-box, having a crystal head pick-up installed.

There has been quite a flurry in 111 the reason for it being Mr. Pfeifer's new record player. After thumbing through numerous radio books the merging of the two was successfully achieved.

Tom Mackie has a complaint to make. It seems that a certain gent sent a certain girl a dozen roses when she had a cold. But when poor Tom had a cold, did he receive roses from that certain gent? No siree!

Mr. Rosko is doing alright for himself these days, especially on visiting nights. Take a bow, Maurice. (Up to press time no date had been mentioned.)

Dr. Povah literally threw a fit one recent Saturday night, but he said that he was afraid the person who came in to see what was the matter might slug him to bring him out of it, so he turned off the act.

The boys of St. Jean wish to thank Mr. Imrie and Mr. Pielow of the Cana-

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dian Legion for the various shows that they have been so kind to bring out to the Sanatorium.

We also wish to send wedding congratulations to Bert and Mrs. Stewart.

Kwickie Kwiz:

Who are the two Lotharios in the balcony, currently having blonde troubles? One of them must have his Radar put together wrong, while the other is afraid his home fillie has "X-RAY EYES."

Who is the shy fellow on the balcony who received all sorts of lush Valentines, and said that they were all from cousins and nephews?

Who is the fellow, to be featured later on in the year, when he will partake of a ton of some very nourishing food? See you on the corner of Portage and Main in June.

Who lives on Bertrand St., and why the mystery surrounding it? Will someone out there on the balcony loosen up?

Who set up a radio station on the flat one night and was heard from one end of the building to the other? Can you hear me?

So long for now.

Annex

Hi there! Here I am a new reporter. I hope you won't be disappointed. February has been a very lively month for us. Why for? Patients getting routine, some being discharged, new patients coming to spend a few months with us, and last but not least, our Valentine's party.

We are pleased to have Sister Lane back with us, looking hale and hearty. The old flu couldn't get you down, could it Sister?

What's this. I see coming down the hall? Suit cases, boxes and more boxes, goodness, it's none other than Mae Gaudry. She's lucky to have received her discharge, after quite a few months of cure-chasing. Here's wishing you the

best of luck, Mae, and here's hoping too, we follow behind soon!

New patients to register in our "San Hotel" this month are Mr. Hourre, Mr. Guiboche, Peter Beadry, John Beatry. We have some little beauties on our registry roll. Angela Wald, who hails from the States. Make yourself at home everyone.

St. Valentine's day proved to be a happy event for the majority of us patients on the third floor. The rooms were tastefully decorated for the occasion. As many as were permitted, were able to attend. The afternoon was spent in games, music and Valentines. After the postman left, Misses Kulba and Carberry, assisted by Mrs. Nichols served the most scrumptious lunch you ever tasted. The party ended when Mrs. Nichols did the "Irish Jig."

Our little darling, Mary Boyer, is on four hours work. Good for you Mary! We are all pulling for you, and hope you'll get more.

Looking after us here are Misses Connolly, Hardin and Kelly on first; Misses Perron and Zekewsky on second; and on third, we have those two "impossibles" Misses Kulba and Carberry. But we sure would miss them if we didn't have them up here.

Things we would like to know.

Where all the letters go that Mrs. Chaboyer writes. (Nurses C.C. are you the deliverer?)

Why Albert Richards was so dry, when he came back from the show that night? (Would you know Florence?)

Why Mrs. Starr insists on wearing nightgowns instead of pyjamas. (Miss Kulba screams.)

Why Mrs. Hardin answers the telephone. Is she expecting a call?

Why Agnes Lucier always feels "cheap?"

Why that puzzled look on Beatrice Schmidt?

So until next month rolls around it's "Au Revoir."

St. Lucs

After being absent for so long, we decided to fill the many requests to have us back once more so we'll try and do some catching up.

It seems there is a certain stillness around the flat since Devlin, MacDonnell, Saher and Simpson left. We sure miss you boys, but we are glad you are at home at last!

I believe congratulations are due to Archie MacDonell and Terry Burt, also Allan Saher and Dot Gregor on their marriages. "Marriage is a great institution." Need I say more?

'Tis a bit late but we would like to thank Rev. Sister O'Harro and the boys who were able to be up for their Christmas scene and decorations. Sister put in many an extra hour just for us and we appreciate it very much.

Nick, the Mayor of 233, put the welcome mat out for Alex Moskow. Gin York and he were busy saying goodbye to Alex Garbolinsky when we went by.

In 229, Ted Elliott was busy drumming a la Krupa with whisks. Anyone got an extra set of drums? Since then, though, Ted has had a pneumolysis and he can't be blamed if premedication works fast, can he?

Tommy Bjarnason keeps getting "Esquire" so we are happy, though Charlie Simpson keeps us well versed in musical works with his record player. Palmer? Sleeping as usual though he wakes up bright and cheery at mail time!

"Hello Mr. Payaski." He nods and we keep a-going. In 225, Kuz is out—again! Jim Cymbaluk is busy with his plastic work, it's really very nice. Jenkins across the way, was bargaining with Charlie Kusman about a dressing gown. We'd like to know just whose dressing gown that really is!

Mr. Rosencrans was quietly drinking a real honest-to-goodness Coco-Cola so

we just stared and went drooling down the hall.

Room 212 has welcomed Jake Unrau and judging by the visitors and flowers, Jake is doing hokay-dockey! Mr. Webb keeps busy after having a bout with the flu, while Mr. Boyeczko keeps Joe company. Joe (Carriere, that is) hasn't been doing so well at rap rummy, but soon, eh, Joe!

Across the hall, in 211, Harry Warenko parted with a dearly cherished toe-nail. Freddie Mustowy is the guy that everybody looks for on Saturday night or Sunday morning. Y'see, Freddie is "keeper of the pools"—hockey, I mean to say. We admired Britskey's leather work and stuck our neck out when we asked him, "why the parlor at 7 p.m.?"

In 209, Stan Van Koughnett was sorting pictures and telling tall tales of Japs to Meilleu, (yes, Frenchie stopped letter writing long enough to listen,) Jack Mathieson, who seemed a bit skeptical, and Nils Bergman, another Air Force man, who has recently reserved a bed here.

Well, Carl Smith, whatever are you doing so plastered, and in here. Don't be discouraged about your shells. Peter will give you a few pointers. Delaronde keeps us hopping because of so much daily mail while Sanderson waits for "Sunday, Monday and Friday!"

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We tiptoed to see Gordichuk and Lionel Moreau and being good cure-chasers they were sleeping.

Across to 208 then and if Rekrut and Jack White aren't eating again! If anyone is interested, the menu these two eat is the most mixed-up lot of proteins, vitamins or what have you.

Mr. Chic and Mr. Abramson are model patients, or at least while we're looking. (Or if the head nurse is around.)

Mr. MacDonald was trying to sell some stock, mining, that is, to John Pubihunski but somehow John wasn't any too serious. What's October rye or Sheridan. Andy?

I think a few female knitters I've seen could well take lessons from Mr. Jenson on knitting diamond socks. They are, what you say, sharp! While Jimmy Favel's mitts aren't bad at all.

Out in the solarium (balcony, you illiterates) Alex Davidson is kept busy tooting the horns that don't toot. Romas and Calleou should have been members of Parliament, the way they settle the Dominion problems!

Dama Richard scouts around every day looking for comics and then he finds a book, only to realize that he's already read that copy.

Sonnenberg and Larocque maintain the dignity of the place and you know, "Still water runs deep!"

Our nursing staff right now consists of Mrs. Nichols, (the head nurse), Mrs. Freeman, Mrs. Teevens, Miss Spencer and Miss Hendrickson. (Why all the married women on a man's flat?) The duties of night nurse are handed over to Miss Anderson and Miss Thomas.

Well, that's St. Luc's and now that you've met them, we'll come around again 'cuz we'll be here for a spell. Till next time, Au Revoir.

Mr. J. Cymbaluk wishes to announce the winners of the draw for the locket sets with ring and ear-rings, being as follows:

1st—W. J. Pfeifer, St. Jean; 2nd—Sarah Chaboyer, Annex; 3rd—Miss E. G. Arber, Nurses Residence.

St. Joseph

Dr. Kujawa, our very able ex-reporter, has tossed over her ink-covered apron in favor of the white-starched dress. Thanks for such a grand job as reporter. We notice too, that the Doctor has made a couple of lightning trips down town. It's a job to keep up with the fashions ain't it? And so the reason for this very feeble column. By the time you read this, Dr. Kujawa will have left us and taking life easy at home, so we see that she is one of the lucky ones and her's hoping that she stays lucky.

We'd like to say good luck to Mr. Showalter over in King Edward and we sincerely hope you're liking your new surroundings. Others who have left us this month are Mrs. Markell and Mr. Eyolfson. How does the great outdoors feel these days, folks? Lots of luck to you both. Mr. Simpson and Mr. Van Koughnett have taken it on the lam for St. Luc's. What's the low altitude like, boys?

Newcomers to St. Joe's, this month, are Mrs. Russell from St. Therese, Mrs. A. Panisko, Mrs. Hasuik and Mrs. Ratner. A big hello from all of us to all of you and we hope your stay will be short and sweet.

The staff at G.H.Q. this month is headed by (Major-General) Mrs. Johnston ably assisted by Lts. Earle, Anneck, Knight, Arber (the swing shift killed), Degroot and Coty. Occasionally we see Capt. Wolbaum careening around the flat. Hubba Hubba (Janet Anderson) and Sammy (Irene) Lasko make us say our prayers before lights out.

Congratulations and best wishes go out this month to Mr. and Mrs. Benton on their recent marriage.

Those who have put their best foot forward on a little routine this month are Mr. Morrison, Mr. George and Mr. Wickdahl with R. 5. Room 320 are reported doing fine, Miss Knowles coming along on R. 4, while Miss Deacon got a creeping routine of R. 3. Nice going.

Father Calinski and Mr. Shinewald have both taken first stage thoraco and Mr. Neva second stage. Best of luck to you all and we sincerely hope you're feeling ship-shape again.

From 309 come this brainchild. It seems Mr. Morrison and Mr. Rees have taken to the fad of matching wits with the contestants on radio quiz programs and have attained some excellent results. The other evening the Quiz Master shot out the question, "What's the definition of a cynic?", and without blinking an eye (here it comes, folks) Rees came up with, "Oh that's what the girls in the kitchen wash the dishes in." Kind of an orphan, ain't it, folks?

327 are feeling sorry for themselves at the loss of their most boring comrade of the "Boresome Foursome." Anyway we wish you the best of luck, Lorne, and hope you're able to keep the bugs away with George's formula of molasses and field glasses. Sleep with one eye open.

Ye old reporter would like to know what a couple of gals have on the announcers of certain request programs to deserve so much popularity? Got any clues Addy and Fran?

Overheard at the bedside.

"Gee I wish I was a boy."

"Lee-ave me aaa-lone."

"I could really go for Walter Pidgeon."

"The first two are awful, but after a dozen, who cares?"

(Eds. note: What happens between 2 and 12?)

"You aren't nice to me at all."

"Who stole my trolley?"

"Don't call me Annie."

Miss Knowles says, "Mr. Rees, you move your pegs too far when you count your hand." But all's even because Miss Deacon tells us those checkers sure get shoved around when Mr. Rees looks out the door.

That flaming red-head (BLONDE?), Miss Seale tells us that she is taking the gate and migrating south with the rest of the chicks. (I thought they went south for the winter!) First reports were that Miss Seale headed for Whitehorse, Y.T., but it's a woman's privilege to change her mind. We would like to wish you the best of luck in your new position.

Sorry we weren't able to get around to see the rest of you folks this month but your reporter took a few days off to greet the better half of the Long family on her arrival from Scotland. In the meantime you people dig around and find some stories and we'll see you next month. That's all folks.

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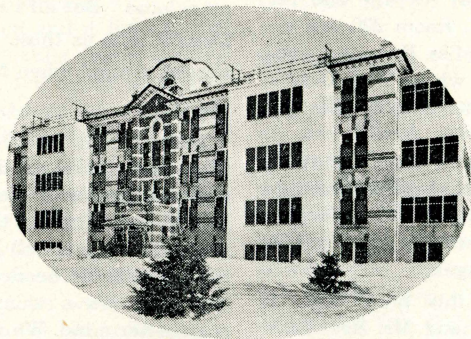
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Well folks, li'l ole Dan Cupid was kept mighty busy this month and by the looks of things I suspect there are very few of the local guys and gals who are fully foot-loose and fancy-free at the present time. Most of the fellows boldly penned their names to gifts of flowers and chocolates but a few timid souls just sent their lady-loves valentines signed with a (?) and a row of (x's). Now, boys, is that being fair?

While most folks were trying to figure out "What is this thing called love?" the Calamity Kids, Collins and Ricky, had second floor wondering "What is this thing called?" Someone must have had their wires crossed or should we say their floors mixed? Anyway, while most of the victims quietly passed out, there were a venturesome few who succeeded only in tying themselves into knots. Amusin', but plenty confusin'! Somehow or other we prefer Vicki's method of "knocking" her victim out. At least the poor girl figures she's getting something out of it, even though it's only a pair of slippers. I can see her point but why do they have to be mine, Vicki?

We have at last found the reason for the sudden quiet which invaded the Edward a few weeks ago. Yep! Paul Aime started pneumo. He soon got tired of climbing walls, pulling down pipes and swinging on chandeliers so he de-

cided to give bed-rest a try. And did that man ever take the whole business seriously! He just lay there and it was everybody's duty to see that he was made perfectly comfortable, even to having his cigs lighted and his ear-phones put on those petal-pink ears. But we hear that Aime is his old self again and he's now able to lift his water glass. For further developments on Paul's progress, don't miss the next exciting episode!

Speaking of chasing the cure, that's just what Les Milks is doing—but good! Why the sudden change, Les, or did you just decide its quicker that way?

FLASH! Just received a report that Paul O. was crowned checker champion of K.E.M.H. Any challenger please see P.O.'s manager, Norman Keir.

Snooping around in Ward 115 gets me nowhere cause Mr. Hunter tells me they're just "being good", and his partner-in-crime, Bruno Schmidt, firmly agrees. We hear that Bruno is a 'cellist of local fame and a good many of you must have heard him over CBC.

All of the Grenadiers from K.E.M.H. would like to take this chance of saying "Hi boys, hurry and get well" to their pals at Ninette and St. Boniface San. And that comes from the rest of us too!

We've all heard of the "Latin Quartet", but up on third you'll find the "Lavatory Quartet." Julius Cassagrande

and Kenny (how about those cough drops) Robinson takes bass, or something, Paul Stuart takes soprano, and Jim Allen takes——well, anyway, the further he takes it, the better. He and his pal "2½ years Hanna" do enough damage.

Seems like Clare Simpson and Eddie Draho seek excitement in weird mystery stories. Very nice, boys, but take care you don't have too many sleepless nights.

64 Dollar Questions:

Why did Clare Ernewien rid himself of that mustache? And who's the new girl, Ernie?

Why does Freddy Bowes wake up screaming "yams, yams"? Is it a sweet potato he's wanting or could that be short for Williams? Guess I'd better get out of town—but quick;

Where did Doug Buck get that artistic streak from and is it caricatures or characters that he draws?

When are we going to get the chance to see the weaving done by Stan Ackabee? By the way, when are we going to see you, Moose? We hear very little from you these days.

And while questions are being asked, we'd like to ask Millie Murray one. What's the matter, Millie, did you get fed up with being a grown-up and decide that, after all, childhood habits are the simplest? We suppose it has its merits, but we hear that your face was plenty red!

Seems that Jenny Yarrish has a secret admirer but her room-mate Janey just won't give the secret away. Never mind, Jenny, I'll snoop, I mean inquire around until I find out.

Kinda looks as tho' the Jumpin' Jacks will soon be parted, meaning Anne Braun and Tibby O'Regan. Anne has decided to leave us, once and for all, and we'll all miss her. But she's already broken in her new successor, Laura Sematok, to do all of the work (?) so we can start in on her now. No one will miss Anne more than what Tibby and BLANK will, but Tibby says that the

only time she was sure of finding Anne occupying the next bed was from 9 p.m. to 9 a.m. Such is the price of popularity!

Our thanks go out to the legion for bringing out two grand shows and the City Hydro troupe. All three were very much enjoyed and we certainly appreciate all the work and worry that the Legion goes through to bring them out to us.

We also had a bang-up birthday party put on for Mrs. Birch's birthday by the Odd Fellows Troupe. Celebrating birthdays around the same time were Mrs. Braunstien and Mrs. Fleurry. Quite a wild life we've been leading but so far there's been no ill effects. Instead, these concerts boost our morale considerably. Here's hoping we have many more.

This month the welcome mat goes out to: Misses Violet Sanders, Patricia Karnes, Mrs. H. Slavuta, Messrs. W. Barrett, R. Affleck, R. Smith, P. Day, W. Dick, A. Thomas, M. Freese, W. Gilmore, W. Nastiuk.

Those fortunate enough to receive discharges were: Messrs. G. York, R. Prince, J. Batten, E. Boyko, T. Simons, E. Lassi, R. Merrineau. Good-bye and good luck to you boys.

EDITORIAL

(Continued from page 3)

number of people away. Or the theory that one can be too old to have tuberculosis.

Yet just last week we saw a grandfather who was found to have had active tuberculosis for some time. He had been living in a home with his grandchildren. In January one of those children died with tuberculous meningitis after a short illness, and another is being treated in sanatorium. The chain of infection from grandfather to grandchildren with whom he was in close daily contact is plainly apparent.

No, tuberculosis is no respecter of persons. It can attack anyone. There is only one way to be sure. Don't fail to have an x-ray of the chest when the opportunity is presented.



JOTTINGS ON A DESK PAD

Miss Eunice Porteous, in a letter from Agassiz, B.C., reports that she spent an evening with Mr. and Mrs. Lewis (nee Nita Friesen) prior to their leaving for their home at Barkerville in northern B.C. Nita and her husband had been working for the past two years at the Harrison's Hot Springs Hotel which had been converted to a military convalescent hospital. She also reports that Norah Stewart has been appointed private secretary to an executive of the Dominion Securities Corporation in Montreal.

Two weddings of note, at the Clearwater Lake Indian Hospital, were those of Mr. Palmer Johnston to Miss Florence Rapley and Mr. J. C. Hunter to Miss Alice Mary Boby.

A recent visitor to the Clinic was Dr. H. Meltzer. Sympathy is extended to Dr. Meltzer on the loss of his father.

The office staff of the Central Tuberculosis Clinic held an informal party at The Antique Shop on March 6th in honour of Miss Ruby Feldman who is leaving shortly for California. Ruby left with our warmest wishes for the sun to shine on her constantly—and an umbrella in case it doesn't.

Miss Hazel Hart of Ottawa, Field Secretary of the Canadian Tuberculosis Association, was a visitor in Winnipeg on March 7th and 8th.

Dr. R. G. Moffit, who formerly practiced at Grandview and Flin Flon, has been assisting in medical work at the Central Tuberculosis Clinic. Dr. Moffit went overseas in 1937 and did post-graduate work in radiology at the Middlesex Hospital in London, England. He joined the Royal Canadian Army

Medical Corps in 1942 and served with it for three and one-half years. He returned to Canada in January, 1946.

SCORING FOR JOB SEEKER'S CHECK LIST

Here are the most desirable answers to the check list on page 13, although we doubt that anyone could get a perfect score. But here's your chance to start working on your weak points, now that you know them. Give yourself one point for every question you answered correctly.

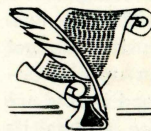
1. Yes	18. Yes	35. Yes
2. No	19. Yes	36. Yes
3. Yes	20. Yes	37. Yes
4. Yes	21. No	38. Yes
5. Yes	22. Yes	39. No
6. Yes	23. Yes	40. Yes
7. Yes	24. No	41. Yes
8. Yes	25. Yes	42. Yes
9. Yes	26. Yes	43. Yes
10. No	27. No	44. Yes
11. Yes	28. Yes	45. Yes
12. No	29. Yes	46. No
13. Yes	30. Yes	47. Yes
14. Yes	31. Yes	48. No
15. Yes	32. Yes	49. Yes
16. Yes	33. Yes	50. Yes
17. Yes	34. No	

40-50 You're pretty well up on this business of job hunting.

26-39 You know some of the important factors, but need some further brushing up.

11-26 You'd better get busy unless some rich uncle has left you an inheritance.

10 or less You've probably never thought much about working. Better start, unless you want to be left behind in the job race.



LETTERS

To the Editor:

o the patients of the King Edward Memorial Hospital I wish to express my heartfelt thanks for the lovely gift. I sincerely appreciate their kind thoughtfulness.

AGNES M. ZAWADKE

To the Editor:

I would like to take this opportunity of expressing through *The Mesenger*, my appreciation to the doctors, nurses, and staff for their kindness during my stay at St. Boniface Sanatorium.

Sincerely,

H. D. G. STEWART

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Mix your own drinks by
adding lime, orange, grape
juice or grapefruit juice to

DREWRY'S CRYSTAL SODA

... m-m-m is it good!

"FLOWERS THAT LAST"

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R. B. Ormiston FLORIST

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