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For Patients, Staff, and Friends of the Sanatorium Board

JUNE, 1961

# SBM Graduates First Nurses' Assistants Class



Pictured here is the first class to graduate from the Sanatorium Board's newly established Nurses' Assistants Training Program. The ceremony took place at Assiniboine Hospital, Brandon, on June 6. Front row, left to right are: Mrs. I. A. Cruikshank, superintendent of nurses, Miss Helen Forbes, Mrs. Verlie Forbes, Mrs. Lillian Burton, Mrs. Sadie McBeth, Mrs. Elizabeth Briggs, Mrs. Isabel Howell, Mrs. Olive Tod, and Mrs. Marjorie Klimczak, instructress. Back row, left to right, are: Miss Bente Hejlsted, director of nursing services for the Sanatorium Board, Miss Coralie Pollock, Mrs. Alice Robinson, Mrs. Ora Martin, Mrs. Rose ey, Mrs. Isabelle Robins and Gene Chambers. (Photo by David Portigal & Company.)

# Part In Dramatic Rescues

Most of us are acquainted with Clearwater Lake Hospital as primarily a tuberculosis hospital and an extended treatment centre. What many do not realize is that this 148-bed institution also operates a full emergency service for accident cases in the North. The Sanatorium Board is particularly proud of our northern outpost—and we cite here three accident stories in which the hospital staff and, in one case, a former superintendent of nurses played an important part. ED.

The Victoria Day weekend provided a holiday of fun and relaxation for most Sanatorium Board members — but for the medical and nursing staff of our Clearwater Lake Hospital at The Pas, these three days were filled with dramatic — and tragic — incident.

One of the best rescue stories we've heard of recently was recounted in a letter by D. S. L. Carey, the hospital's of medical services.

It seems that on Friday, May 19, a ten-year-old Indian girl, Melinda Susan Spence, of Nelson House, was playing with a piece of plastic game in her mouth and accidentally inhaled it. She was rushed to the Nelson House Nursing Station where she was examined by unit supervisor Miss Marjorie Lovell.

Miss Lovell, a former superintendent of nurses at Clearwater Lake Hospital, had had a long experience in bronchoscopic proced ures and recognized the danger of little Melinda's condition. She hurriedly contacted the Indian Health Services at The Pas, who in turned phoned Dr. Carey. An immediate mercy flight was arranged with Lamb's Airways at The Pas.

The pilot made the 170mile flight to Nelson House in two hours and, despite dangerous break-up conditions on the lakes, managed to land his tiny aircraft and pick up Melinda (along with a replica of the small piece of plastic she inhaled).

A couple of hours later Melinda was admitted to Clearwater Lake Hospital where Dr. Carey, assisted by superintendent of nurses Miss V. E. Appleby, triumphantly extracted the bit of plastic from the left lower lobe of the girl's lung. She was discharged from hospital six days later.

The story of Melinda's rescue illustrates the prominent role Clearwater Lake Hospital plays in providing a full emergency service (particularly for chest accidents) for a vast area in the North.

The medical and nursing staff have also proven to be of invaluable service in providing emergency treatment and care for general accident cases closer to the hospital base.

The day after Melinda's accident, for example, the

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# Twelve nurses' assistants and one nursing orderly comprised the first class to graduate from the Sanatorium Board's newly established Nurses' Assistant Training Program at Assiniboine Hospital on Tuesday, June 6. Looking crisp and shining in brand new white uniforms

Bovine TB Now

# Under Control

Canada celebrated a high point in the 38-year-old war against bovine tuberculosis on Saturday, June 3, when the last herd of cattle in a total of 711 areas in Canada was tuberculin tested on a farm near Peace River, Alta.

The rite was performed in a grand style by Federal Agriculture Minister Alvin Hamilton who used a goldplated syringe for the final tuberculin injection.

The victim was a black and white cow belonging to Joe Skirlik of Nampa.

The ceremony does not mean that the war against bovine tuberculosis is now ended, but it does mean that TB in Canadian cattle can be considered under control. Just as with human beings, tuberculin testing of cattle will have to be continued to keep the disease under control.

The first areas in Canada to begin tuberculin testing cattle were the municipalities of Dufferin, Roland and Thompson in Manitoba who began the program in 1922.

with attractive blue and yellow crests on the sleeves, the class was formally presented with their certificates in a simple but impressive ceremony conducted in the hospital classroom.

Dr. A. H. Povah, chief of medical services of Assiniboine Hospital, acted as chairman for the event, and T. A. J. Cunnings, executive director of the Sanatorium Board of Manitoba, was guest speaker.

In his address to the graduates, Mr. Cunnings commended the class for their enthusiastic interest in the new program.

Nursing is the heart of the hospital, he said, and what the nurses' assistants learn through NATP will reflect markedly on the type of care the patients will receive.

The nurses' assistants can now give nursing care with more self confidence and assurance, he said, and the patients will benefit greatly by it.

Mr. Cunnings also praised the nurses' assistants and other members of the hospital staff for the quick transition they have made from a

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# Profiles

#### JOHN F. BALDNER

John F. Baldner, president of Robinson and Webber, Ltd., has been an elected member of the Sanatorium Board of Manitoba since April, 1960. A shrewd, engaging businessman, Mr. Baldner is greatly attracted to the Sanatorium Board's rapidly expanding health program and has been a valuable contributor to its development during the past year.



The son of H. A. Baldner, Mr. Baldner was born in Akron, Ohio, and came to Winnipeg with his parents as a young boy. After completing his schooling at Kelvin High, he joined the small company of Robinson and Webber (manufacturers' agents) in 1923. The following year he took over the company and together with his father and younger brother, Harold, built the business up

into a fairly large concern which today handles all sorts of small products ranging from chemicals, drugs and paints to

glassware, porcelain figurines and floor polish.

Aside from his own business activities (which he conducts from a small, hideaway office in the warehouse section of his building) Mr. Baldner takes an active part in various business organizations. He is an executive member and former chairman of the Manitoba division of the Canadian Manufacturers' Association, a member of the Chamber of Commerce, and a member and past chairman of the Board of Directors of the Manitoba Transportation Commission.

Mr. Baldner is married and he and his wife Viney have three attractive daughters and 10 even more attractive grandchildren. A hunting and skeet shooting enthusiast, he is a member of the Manitoba Gun Dog Club, the Motor Country Club and the Manitoba Club.

#### GORDON STINSON

Gordon Stinson, chief engineer at Manitoba Sanatorium since June, 1957, is a big, brawny man whose shy manner belies an adventurous career which has led him from rural Manitoba to the rugged Arctic to construction projects throughout Western and Central Canada.

The youngest of four boys and two girls, Mr. Stinson grew up on a 2½ section farm near Hargrave, Manitoba. In

1919, after finishing school, he left the family farm to enter Manitoba Agricultural College but discovered he had a greater liking for engineering and travel than farming. A few months later he headed northwest to Fort McMurray in Alberta, freighted fish there for the winter, then moved further north to the Mackenzie. For the next two years he worked as a fireman on the old Mac-



kenzie sternwheelers, carrying supplies up the river to Fort

Good Hope.

Returning south in 1922, Mr. Stinson began working on various construction projects in Northern Ontario, Quebec and Manitoba. During this time he studied for his steam engineering certificates, attaining his First Class Stationary Engineers Certificate in 1940. In the late thirties, after completing construction work on a power plant at Gods Lake, he joined the Manitoba Power Commission in Brandon and during the next four years worked his way up from a steam electric engineer to assistant plant superintendent.

During World War II he started work for CIL (later Canadian Salt) in Neepawa and remained there for over 15 years. In 1957 he gave up his position as chief power en-

gineer to come to Ninette.

Mr. Stinson is married and has two children, Mrs. George (Winona) Gow, a registered nurse who lives in Winnipeg, and Alan, still at school. He lives in a pretty little bungalow on the shore of Pelican Lake and numbers mechanics and reading as his favorite hobbies. He is a member at large of the Lions Club of Neepawa and a member of the Manitoba Association of Fire Chiefs.

#### Tremendous Problem

Tuberculosis is still a tremendous health problem in many countries of the world. For example, in the tiny island cosmopolis of Singapore approximately one in every 27 persons over 14 years of age has active TB.

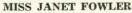
In the most densely populated districts of Singapore

city, the incidence rises to as many as one in every 20.

Overcrowding following an extremely rapid increase in population (a quarter of the people in Singapore are under five years of age - half are under 18 years), undernutrition, and absolute neglect of the problem are the chief causes of the situation.

## New SBM Appointments







MRS. JOSEPHINE JACKSON

Three women were appointed to new positions on the Sanatorium Board staff during the past month. They are Miss Elizabeth Peters, charge physiotherapist at Clearwater Lake Hospital, The Pas; Miss Janet Fowler, occupational therapist at Assiniboine Hospital, Brandon; and Mrs. Josephine (Jody) Jackson,

new welfare co-ordinator at Assiniboine Hospital.

A native of England, Miss Peters is a 1955 graduate of the Leeds School of Physiotherapy. She was formerly associated with the physiotherapy department at the Royal Hospital in Chesterfield, England, and prior to that worked in Canada with the Canadian Arthritis and Rheumatism Society in Winnipeg, Downsview Hospital in Toronto, and the Clinic of Rehabilitation in Quebec

Miss Peters assumed her new position at Clearwater Lake Hospital on May 26. She will have charge of a fully modern physiotherapy department recently established for patients suffering from both short and long term illnesses. The treatments offered include hydrotherapy, remedial exercises, electrotherapy, infra-red and shortwave treatments and others aimed at restoring muscular function.

Miss Fowler, who comes from Harrogate, England, is a 1959 graduate of the Derby School of Occupational Therapy, and prior to her appointment worked in the occupational therapy department at Royal Bath Hospital in Harrogate.

At Assiniboine Hospital she will teach creative and manual skills to help restore function and, at the same time, occupy the patient's mind by providing him with things to do.

She will also train the patients in the various activities of daily living.

Mrs. Jackson, who assumed her new position on June 1, was formerly on the staff at Assiniboine Hospital as secretary to the business manager. Now, as welfare coordinator, she will be concerned with the happiness and general well-being of each patient.

She will be the link between the patient's past, present and future life, the link between the hospital and the home. By interviewing and listening to the patient. she will try to help him with any family, financial or other personal worries - yet at the same time help him to remain as independent as possible.

She will make use of all the available community resources to help the patient continue his treatment and re-adjust to home and community life.

#### TB Germ

The tuberculosis germ or tubercle bacillus is so small that it can't be seen without a microscope. Even when it is enlarged it has to be dyed to be seen. When dyed and magnified thousands of times, the TB germs look like tiny rods. They are so small that thousands could be placed upon the head of a pin.

Though the TB germs are small they are tough. They have a waxy coating that slows up drying. Because of this they can stay alive in damp dark places for months. Inside the lungs they can lie dormant indefinitely.

Tuberculosis germs do not have legs or wings so they can't get around under their own power. They depend on human beings for transportation. The germs, being so small, can travel on tiny droplets of moisture spread into the air when a person coughs, sneezes or breathes.

#### Rescues

(Continued from page 1)

hospital staff was involved in a terrible traffic accident at Jackfish Creek on the highway north of Clearwater Lake. A car veered off the highway killing one wome and three children who w standing by the creek. Dr. Carey and Dr. R. G. Gerrie, a member of the hospital staff, were called to the scene of the accident and arrived there about eight minutes after it happened.

They carried two of the children back to Clearwater Hospital on a stretcher, but one of the children, a boy who, among other things, had a crushed chest, died three minutes after admission. Tenyear-old Gay Ann Corbett, however, is making a good recovery. She suffered from multiple fractures of the leg and shock.

This accident is reminiscent of another traffic accident that took place near same spot last fall. At ti. time there was a serious head-on collision between a one-half ton truck and a private vehicle carrying seven teen-age children home from a church picnic.

Dr. Carey arrived at the scene of the accident a few minutes after it took place.

A badly injured girl was taken to The Pas hospital as a surgical emergency, but the other six were treated at Clearwater Lake Hospital. The treatment for multiple cuts and fractures was carried out by Dr. Carey, Dr. A. P. Chornomoretz and the nursing staff until 3 a.m. Eventually all of them were sent home fully recovered

The Sanatorium Boa commends Dr. Carey and the other members of the medical and nursing staff of Clearwater Lake Hospital for the fine work they have done in making this emergency service available to the people of Northern Manitoba.

### Survey Results

The final results of a tuberculin and chest x-ray survev conducted at Portage la Prairie in April and May were released early this month by Dr. E. L. Ross, medical director of the Sanatorium Board.

Of the 10,715 people who returned for a reading of the tests, 20% showed a positive reaction, (i.e. have TB ge in their bodies). This is abo average for the rest of the province, which was 18% for the total population tested in 1960.

There were no new discoveries of tuberculosis.

### Ex-Patient Is Honors Graduate From U. of M. Medical School

One of the rehabilitation department's most outstandsuccess stories reached a ax on Thursday, May 26, we have expatient Maie Kaarsoo received her degree as doctor of medicine at the University of Manitoba Convocation.

It was a proud day for 25-year-old Maie, and her family and friends, for not only did she graduate with honors, but she also received the F. W. Horner Award for the best case report on the effect of environment on pediatric illness.

For Maie, graduation day meant the end of a long, personal battle that started a number of years ago. An Estonian by birth, she left her war-torn homeland in 1949 and emigrated to Canada with her parents and older her. Her father, who had been a lawyer in Estonia, found work in Winnipeg as a leather craftsman.

Maie started school in Winnipeg, and by 1950 completed her Grade 8 with an 85% standing. That same year, however, she became ill with pulmonary tuberculosis and was admitted to Manitoba Sanatorium. During the 13 months she spent in hospital she completed five Grade 9 subjects — this time with an average of 86%.

Released in July, 1951, she continued her studies at home, then went back to school. Three years later, however, Maie's health failed again and she had to return to anatorium for another treatment.

When she was admitted to Ninette in February, 1954, Maie had finished her first year of Arts at the University of Manitoba. In sanatorium she completed her second year German, English and Mathematics through correspondence courses. She returned to university in the fall of '55.

In September, 1957, Maie won her way into Medical School with a scholarship, and later the Rehabilitation Division presented her case for financial assistance through "Schedule R", a dominion-provincial agreement. She also worked summers to help cover the high expense.

It was difficult all the way Maie, but the crowning acmevement on graduation day more than compensated for her struggle against illness and financial expense.

"I am surely an example," she recently wrote, "of the person who never would



MISS MAIE KAARSOO

have been able to attempt, let alone finish, a course in medicine had it not been for the combined help and encouragement of many well-meaning and interested people. To them I am grateful."

The Rehabilitation Division of the Sanatorium Board takes great pride in Maie's achievement, and wishes her a long and happy career in the medical profession.

The Sanatorium Board also extends warm congratulations to a number of other people who took part in the University of Manitoba Convocation on May 26. Among them were:

Donald John Scott of Winnipeg, who received his degree in medicine. The new Dr. Scott is the son of Dr. D. L. Scott, assistant medical director of the Sanatorium Board, and medical superintendent of the Central Tuberculosis Clinic.

Dr. Wasyl Zajcew, a former member of the medical staff of Assiniboine Hospital (now a consultant) who received his diploma in anaesthesiology.

Kenneth Wu, a former patient at Manitoba Sanatorium, who received his B.Sc. in Engineering (Electrical).

Albert Simeon, a former member of the SBM Survey Department, who also received a B.Sc. in Engineering (Physics).

Adolph Ens, a former patient at Manitoba Sanatorium, who received a Bachelor of Pedagogy.

Also of interest was the graduation on May 19 of Miss Victoria Procyk from the St. Boniface General Hospital School of Nursing. Miss Procyk is a former member of Manitoba Sanatorium's auxiliary nursing staff.

# Nurses' Assistants (Continued from page 1)

tuberculosis hospital to an extended treatment centre.

"It was a difficult period for all of you," he said, "but you came through with flying colors and together you have built up a fine hospital."

Miss Bente Hejlsted, director of nursing services for the Board, who was responsible for the establishment of NATP, also congratulated the class for their fine work. She reminded them that they will continue to receive instruction as new things in the field of nursing crop up.

Following the presentation of certificates by Mrs. I. A. Cruikshank, superintendent of nurses, and Mrs. Marjorie Klimczak, day supervisor, Gene Chambers, nursing orderly, thanked the members of the Sanatorium Board for providing the course.

Refreshments were then served.

#### **Bowling Trophies Awarded At Ninette**

Manitoba Sanatorium Mixed Bowling League held their annual "wind-up" on Tuesday, May 9, with 20 teams having completed a successful six-month season.

N. Kilburg, business manager for the sanatorium, assisted by William Amos, presented trophies to the following winners:

Sanatorium Board Trophy—J. Hamlin, Mrs. E. Hamlin, Mrs. E. Hamlin, Mrs. G. Ward

Runner Up Team—A. Sader, Mrs. L. Sader, Patricia Bingham and Kenneth Houston.

Ladies' High Average (186)
—Marion Hine.

Men's High Average (214) —Murray Maxwell. Ladies' High Single Game

Ladies' High Single Game (328)—Mrs. Ada Bradford. Men's High Single Game

(335)—Terry O'Brien. Ladies' High Two Games (537)—Mrs. Lydia Sader.

Men's High Two Games (548)—Kenneth Houston.

The pinsetters, Jack Booth, Jimmy Brown, Billy Beanland and Eddie Kardal, also received special awards.

#### Wins Award

The Sanatorium Board extends warm congratulations to Joseph Bespalko of Winnipeg who won the J. S. Little A ward for outstanding achievement in progress in studies at Earl Grey Junior High School.

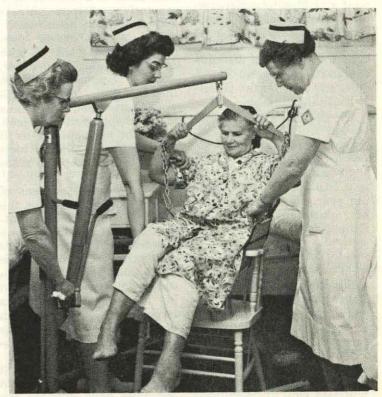
Joseph, 17, a patient at the Central Tuberculosis Clinic, was born of Polish parents in Uganda, Africa. At the age of five moved with his parents to Venezuela, and in 1956 came to Winnipeg.



One of the main reasons for the establishment of the 12-week Nurses' Assistants Training Program is to make sure that the patients in our hospitals receive nursing care of the highest possible quality. Here Mrs. Stana McGregor, a patient at Manitoba Sanatorium, receives tender care from Miss Joyce Temple (left) and Mrs. Ruby Hemery.



Mrs. Violet Smith, also a patient at Manitoba Sanatorium, Ninette, is wheeled to the sunroom by nurses' assistant Miss Edna Whitmore, a pre-medical student working at the sanatorium for the summer. By performing many duties like this, the nurses' assistants prove to be of invaluable help to the extremely busy professional nursing staff.



Through NATP, nurses' assistants are helped to understand the "why" as well as the "how" in carrying out the various procedures. At Assiniboine Hospital in Brandon, new graduates (left to right) Mrs. Verlie Forbes, Mrs. Alice Robinson and Mrs. Ora Martin make expert use of a Hoyer lift to help Mrs. Stella Simbolisk into a chair.

-Photos by David Portigal & Company

### Become Certified Orderlies



Stanley Synowski (centre) and Anton Bogden (right) proudly look over their new certificate with Richard Vandenbergh, instructor.

Four more ex-patients were graduated from the three-month Orderly Training Course at Winnipeg General Hospital on Friday June 9. The new Certified Orderlies are Stanley Synowski and Anton Bogden of Winnipeg, Elijah McKay of Sachigo Lake, Ontario, and Gaspard Ballentyne of Pukatawagon, Manitoba.

Representatives of the Sanatorium Board's rehabilitation departments were on hand to witness the presentation of the certificates by Dr. L. O. Bradley, hospital administrator. Also taking part were Miss Margaret Cameron, director of nursing, and Richard Vandenbergh, male nurse in charge of orderlies.

For all of these men, their graduation as certified orderlies should mean a big step forward in their lives.

Mr. Synowski, who came to Canada from Poland in 1912, had been a TB patient at both King Edward Memorial Hospital and Manitoba Sanatorium for many years. While in sanatorium he was able to continue his academic education and following his discharge he was given the opportunity to enter the Orderly Training Program.

Mr. Bogden, a former millworker and army man, emigrated to Canada from Yugoslavia in November, 1958, and was admitted to St. Boniface Sanatorium the following year. He, too, upgraded his education through the Rehabilitation Division and worked part-time at the sanatorium before he entered the course.

Elijah McKay and Gaspard Ballentyne are the seventh and eighth Indian rehabilitants to graduate from the program. Both are former TB patients and both spent some time in the Sanatorium Board's special Indian Rehabilitation Unit at Assiniboine Hospital before entering the course.

All four men are now on the full-time staff of the Winnipeg General Hospital.

### All TB Patients Need Treatment In a Hospital

Many months ago a young Winnipeg man was told by his doctor that he had active tuberculosis. It was, of course, upsetting for him to learn that he must leave his work and family to spend a few months in sanatorium. His business would suffer, he said. He wasn't financially prepared for a long illness. Besides, he didn't feel particularly sick.

The upshot was that the man refused treatment in a sanatorium, despite threats and pleas from health authorities. As his disease progressed, he started to take drugs irregularly at home, making occasional visits to the TB clinic for examinations. After about 10 months of this haphazard self-treatment, the man became so ill that he finally allowed himself to be carried off to sanatorium.

This story, and dozens of others like it, illustrates the importance of prompt treatment in a sanatorium once a new case of tuberculosis is discovered. In the case of this man, what had once been a comparatively small lesion in his lung had grown into a large cavity, more than double in size, before he was ready to accept hospitalization

Where a few months of rest and drug treatment might at one time have arrested the disease, nothing short of surgery and a year or more in sanatorium would probably save him now. What's perhaps worse, his sputum had

### Rest Is Important

General body rest is still basic treatment for all cases of active tuberculosis, whether in or outside a TB hospital.

Everything that is not rest is exercise. Exercise requires expenditure of energy. Every little thing you do requires the body to expend a certain amount of energy.

amount of energy.

Everything that is not exercise is rest. General body rest conserves energy — it is nature's way of combatting most infections and many other illnesses. That is why it is prescribed for tuberculosis.

People differ a great deal in the amount of tuberculosis they have when they come to the sanatorium. They will differ correspondingly as to how much rest they will need to make a satisfactory recov-

People also differ greatly in their inherent ability to resist or overcome tuberculosis, and this also must be taken into account by the physician in prescribing treatment. Sometimes a patient with twice as much tuberculosis as another patient will respond more quickly to the same treatment.

You can't tell, and the doctors can't tell, just by looking at the fellow in the bed next to yours how much disease he has or how much rest he needs. So don't try to pass judgment on your neighbor's needs — that's the doctor's business.

become positive while he was still at home. No telling to whom he might have spread infection

All TB patients need to spend some time in a sanatorium, particularly during the early part of their illness. Any doctor will tell you that the sooner is the disease diagnosed and treated, the faster and more effective the cure.

Hospital treatment permits the patient to be under 'round-the-clock medical supervision. Here he can be assured of proper rest and diet, away from the pressure of day to day living. He will receive his drugs regularly, and adverse reactions to the drugs can be detected almost immediately. In addition, the laboratories can make all the necessary tests to help the doctor plan adequate treatment.

Hospitalization is, of course, clearly necessary for surgery, and it also provides a better opportunity for rehabilitation and education.

In fact, it has has been proven time and time again that TB patients get well faster and more safely when they accept prompt treatment in a sanatorium.

The doctor finds out how you and other patients are getting along mostly by looking at X-ray pictures of your lungs. It is impossible to tell how well a patient is merely by looking at him.

And you can't tell about yourself either, just by the way you feel, or how many pounds you have gained since you came to hospital.

Cure-taking is a 24-hour proposition. It's how much rest the patient gets each day that counts. It is true that for most patients the total amount of body rest prescribed each 24 hours is not nearly as great as it was before modern drugs and surgery became available. But the smaller amount of rest that still must be prescribed is just as important as it ever was.

Remember — the chief difference between taking half as much rest as you need, and taking almost enough is that in the latter instance you get worse more slowly — much like jumping from the fire into the frying pan! One of the best ways to get advanced tuberculosis is to take not quite enough treatment for the disease in its earlier stages.

Should your neighbor in the next bed, or your roommate, require more rest than you need, be happy you don't need as much. Help him to get the full amount his doctor has ordered. Don't disturb him when he is trying to rest. Don't tempt him to cheat.

If your neighbor has more privileges and more "up time" than you, be glad for him. Don't be envious or impatient.

The only way to cure your tuberculosis is to take the amount of rest you need. TB germs can't tell whether or not you are asleep. Nor do they know whether or not you are worrying. But they do notice a big difference if you permit yourself to toss and turn, and thrash about as a result of not sleeping—for in these ways you waste precious energy — and give the germs a new lease on life.

The same thing with worry. It would be all right if you could worry without your muscles becoming knotted and tense — interfering with digestion, and generally expending physical energy you can ill afford to waste. But you can't worry without these other things happening, too

So try not to worry. If you have troubles, talk them over with the doctor, the nurse or rehabilitation officer.

—R. G. MOLES, M.D.
McKnight State Tuberculosis
Hospital, Texas.

### Bulletin Board

Patients at Manitoba Sanatorium received other special treat rec ly when 22 members the Professional Engaeers' Wives Association drove out from Winnipeg to present two half-hour plays. The amusing comedies were skilfully directed by Mrs. Walter Watt, and intermission music was provided by the sanatorium orchestra.

One of the committee reports at the annual meeting of the Manitoba Association of Registered Nurses last month was presented by Bente Heilsted, director of nursing services for the Sanatorium Board. As chairman of the employment relations committee, she presented revised personnel policifor registered nurses.

Another speaker at the meeting was Edward Dubinsky, administrative assistant of the Sanatorium Board, who presented greetings on behalf of the Associated Hospitals of Manitoba.

Mrs. Vera Grimshaw, food supervisor at Manitoba Sanatorium, recently completed an emergency feeding course given by the Defense College at Arnprior, Ontario. The course was attended by people from all over the country, and diplomas were awarded.

Among those who attended the Institute on Terculosis Nursing at University of Western on tario, June 5 to 10, were Miss Janet Smith, supervisor of the Central Tuberculosis Registry, and Miss Anna Stefanson, a member of the nursing staff of Manitoba Sanatorium.

R. F. Marks, SBM comptroller, is presently attending a four-week session in hospital organization and management at the University of Manitoba. The course is part of a two-year program sponsored by the Canadian Hospital Association.

The Sanatorium Board has learned with deep regret of the death of May Elliott, former has keeper at the Ce Tuberculosis Clinic. Elliott, who was a member of the SBM staff from October, 1946, to October, 1955, died at her home in Erith, England, on May 11.