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Digest of the Philadelphia College of Osteopathic Medicine (Spring 1986)

Philadelphia College of Osteopathic Medicine

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Thus the sum
of things
is ever
being renewed,
and mortals live
dependent one
upon another.
Some increase,
others diminish,
and in
a short space
the generations
of living creatures
are changed
and like runners
pass on
the torch of life.

Lucretius
The Digest of Philadelphia College of Osteopathic Medicine

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PCOM’S Dean
Joseph A. Dieterle is physician, educator, administrator, advocate.

Text & Photography By Harry Gehlert

A new dean of PCOM was appointed by President J. Peter Tilley, DO, in June, 1985. At that time, because of the many changes in the administration of OMCP occasioned by the death of former president Thomas M. Rowland, little was written about the man chosen to administer the nation’s largest school of osteopathic medicine.

Now, one year later, both Joseph A. Dieterle, DO, ninth dean of the Philadelphia College of Osteopathic Medicine, and the College are meeting the challenges of change: change in the way health care is provided and change in the way the College is funded.

When Dieterle agreed to become dean of PCOM, it was one more step in the evolution of a career that had been shifting its center from the private practice of pediatrics toward one of teaching and administration. It was taken at a time when the nation’s health care system was beginning to change from one composed of essentially private practices into one organized into fewer and larger corporate entities—a development with profound implications for the health care system and for PCOM.

Of his own decision to give more to osteopathic education, Dieterle says: “I am here at the College because I like to teach. When the office of dean was offered to me I saw it as a chance to become a more widely effective educator—to be able to integrate personal and professional values. My deeply held beliefs in the importance of the family unit and correctness of the osteopathic emphasis on holism and wellness are entirely compatible.”

Dieterle is a 1970 graduate of PCOM. Except for his internship at Flint Osteopathic Hospital, in Michigan, his medical education and career are products of Philadelphia—from St. Joseph’s Preparatory School, through LaSalle College, and a three-year residency in pediatrics at St. Christopher’s Hospital for Children, which he completed in June, 1974, as chief resident. He joined PCOM’s faculty that same year as assistant professor of pediatrics. Earning certification by both the American Board of Pediatrics and the American Osteopathic Board of Pediatrics, he became associate professor and vice-chairman of Pediatrics in 1978, and professor and chairman in 1980. In 1983 he was named director of medical education. Dr. Dieterle is president-elect of the American College of Osteopathic Pediatricians and an officer of the American Board of Osteopathic Pediatricians. He is president of the Philadelphia Pediatric Society.

Dieterle’s Philadelphia roots nourish an enthusiasm for PCOM and its traditions that serves him well in his role of advocate for the school—one of several skills he must continue to develop if the institution is to remain effective in an increasingly competitive environment. He sees health care delivery as becoming a big business controlled by corporate America, often displacing individual doctors practicing out of private offices. He is concerned that PCOM be able to train osteopathic physicians who will be able to provide quality health care within a system whose future form cannot be entirely known.
Making rounds.
One-on-one teaching remains important.

Equally intriguing to the dean—because he believes the College can be an important instrument in the process—is the integration of osteopathic principles into research, providing both a focus for the entire curriculum and a marketing niche for every new DO.

Tomorrow's osteopathic physicians, Dieterle believes, will have to be better trained to care for the increasing proportion of Americans who are living longer. Recent changes in the curriculum made in response to evolving medical priorities include the addition of courses in geriatrics and nutrition—subjects often neglected by medical schools. The curriculum also includes a course in law that addresses several present concerns—not only malpractice, but government regulation, real estate, and practicing in hospitals. Also available are courses in community medicine in which PCOM executives discuss capitation, the physician in the military, ethical issues, and medical practice in general.

The dean is concerned that osteopathic physicians be able to cope with the ethical questions of life and death raised by technologies that can extend life but not necessarily assure its quality. A seminar course in biomedical ethics now being offered could soon become part of the required studies. And Dieterle would like to have graduates better prepared to assess and absorb more of the staggering quantities of medical and statistical information generated by each new technological breakthrough.

"Alumni," he says, "will remain an indispensable part of the educational process. This profession and this school have grown because of them. We continue to look to them for heavy financial support. We know there is always financial pressure on alumni. As one myself, I sympathize. Even more important than the amount of each donation is the number of alumni who donate. When we ask
large corporations and foundations for money, it's important to be able to show that we have wide support from our own graduates. Of course the school has to give something back. And that's why we go to regional and national meetings. Our alumni need to see us and hear from us. We can't simply ask and ask without being present to explain what's happening and where things are going. We have to help maintain pride in our alma mater."

According to Dieterle, the College must attain several important goals in the next few years. "We want to have a curriculum," he says, "that acquaints students with where the health care system is going, and how we might meet its needs.

"We want to maintain a reasonable tuition. We must not return to the days when only the children of the wealthy could afford a medical education. To avoid that we need a wider financial base, with more of it provided by resource development, so that we are less dependent upon state appropriations. It has become increasingly important to develop our scholarship and student loan fund as an alternative to high interest loans.

"We want a hospital that's filled with patients and is a good teaching base.

"We want to maintain a better relationship with our affiliated hospitals.

"And we want to maintain a strong faculty that can help accomplish this. That's why we are, on July 1, installing PCOM's Clinical Faculty Practice Plan. It will enable the College to continue hiring the finest faculty by providing salaries that are competitive. We can't pay a faculty member as much as he or she could make as a private physician, and the practice plan will help eliminate that discrepancy."

Dieterle is very much a private, family man, and his family is a tightly knit team. His wife, Peggy, is a nurse, with a master's degree in Maternal Child Health. "We work well together," says Dieterle. "She understands my life and gives me a lot of support." His children, Joseph, 17, Kara, 15, and Megan, 5 months, get similar support from their parents, who rarely miss attending an athletic event, a piano recital, or a class play in which any of them participate.

Dieterle changes pace by doing much of the physical work of maintaining his home in Phoenixville, Pa. Sports, always important, remain so when time permits. He has been a swimmer since high school, a baseball player, and a competitor in the triathlon of running, swimming and shooting. "I still like to run," he says. "I like to have my body get back down to earth after being constantly on the go all day. Jogging is a good way to clear the cobwebs."

Joe, Jr. is interested in pursuing a medical career. Dieterle believes that managerial competence is indispensable if a medical practice is to be effective, and has advised his son to work for an MBA as well as a DO, so that he can better cope with the changing economics of the medical profession. Business training, he is convinced, can enable physicians to become better organized and more effective as providers of health care.

"Medical skills can be applied more effectively when they are enhanced by good business management," Dieterle says, "The development of business skills must remain a secondary interest in a strong personal commitment to medicine. But they can help the physician help people. And it is one of the reasons why we are working hard to develop effective organizational structures within PCOM—not to change our mission of training the finest osteopathic physicians, but to enhance our ability to fulfill it."
Bridging It

The bridge across the Delaware River, flung from Camden, NJ, across to Philadelphia and named for one of the Revolution's best loved mentors, thrusts its majestic towers into the mists of a nasty day in early April and awaits the tintinabulation of 800 feet dancing purposefully across the westbound lanes. Presently, they come. Serious runners first, toes hardly touching the rain-glazed macadam, arms pumping rhythmically, muscles working eagerly in the early morning adrenalin-charged rush to span the river. Rain slanting in earnest sheets heads downstream, dousing the bridge and its human cargo in passing.

At Philadelphia's foot of the Ben Franklin Bridge, spectators gaze east toward the huge steel cables, anchored securely, that dangle the tons of steel and concrete and sweating bodies above the inhospitable waters of the Delaware. Few in the beginning, then in waves, men and women runners flood the foreground before making a tight turn taking them back down city streets toward the river. It is a contrast of engineering triumphs: these runners, and this bridge.

At a spot midway along the eastern side of the square that separates the Liberty Bell from Independence Hall, George Papanicolaou, '89, and Craig Turner, '88, are busy setting up the finish line, organizing students and tasks for the time, just minutes away, when 400 runners and their families descend upon an unsuspecting Philadelphia Bourse. George could remember when even this rain-soaked result was in doubt.

The Ben Franklin Bridge 10K run, designed to benefit the Greater Delaware Valley chapter of the National Multiple Sclerosis Society, became a coordinated event with the students of PCOM first in 1985. Larry Finkelstein, Allen Bilovsky and Steve Topfer were among the students who had directed the school's participation. It came in place of an earlier run along Philadelphia's West River Drive, which commonly drew 150 runners and grossed $1,000 for student council. That run was preceded by a benefit volleyball game. The roots run deep.

By the time George Papanicolaou and Craig Turner heard from MS this year there were potential trouble spots for the race. An on-again, off-again sponsorship cost the race directors momentum and confidence, but a month before the starting gun they told MS the race would be promoted without a sponsor.
Planning for months to hold the event April 27, the students suddenly discovered the city had denied them a permit for that date, shifting the run to three weeks earlier. Rushing to change registration notices and pre-race publicity, they ran headlong into another obstacle: the new date, April 6, was the day preceding major tests for both first and second-year classes. They would have little chance to recruit the necessary manpower to staff every intersection, supply water stations, and refreshments at the finish, handle registration and tally results. The race seemed doomed.

Bob Cuzzolino, assistant director of admissions, responded to the race organizers' call for help with an appearance before both classes to urge their participation. In spite of the tests, in spite of the short notice, a quality response was required. It was, declared Cuzzolino, a tradition.

"I want to present the school as a place with a caring, giving spirit," Papanicolaou told both classes. "We are a family, supported by this school and by the osteopathic community around us."

The message got through. By race's end, some 70 members of the Classes of '88 and '89 had braved miserable weather, crowds and confusion to snatch victory from the clammy jaws of mediocrity. They managed traffic, sliced oranges and tallied times. Their grittiness, George Papanicolaou had to admit, surprised even him.

Between winner Gonzalo Huggins, husband of Kathy Huggins, a member of OMCP's nursing pool in Medical Oncology, and Leonard Finkelstein, DO, who cruised the course with sufficient alacrity to keep most of his competition in view, 387 other finishers agreed that it wasn't the time that mattered but the spirit of the thing. Several PCOM students who ran those 10,000 meters affirmed the feeling. Marty Loscalzo and Renee Morrow, both '89, were the top student finishers.

Inside: the cavernous Philadelphia Bourse, when the glare of the television lights had shifted from PCOM President J. Peter Tilley, DO, and MS newsman advocate Larry Kane, there to hand out medals and laurels were George Papanicolaou and Craig Turner.

"There are no politics involved here," George would observe later. "It's clear, it's clean, it's beautiful. It's not run by anybody but the students, it benefits a good cause, and it makes PCOM look good."

And even an early riser like Ben Franklin could see the wisdom of that.
Caribbean CME—
The Magic of Bolongo Bay

“You’re walking the beach in your cut-offs, Doc, and you’re the most important person who’s here.”

The mental image conjured up by these words from PCOM’s Hale Peffall, Jr., executive director of alumni affairs, took visible form in the color photos of Bolongo Bay, St. Thomas, U.S.V.I., that began circulating through the alumni in February. Proof, agreed some skeptics, that all CME credits are not acquired with the requisite amount of pain and suffering.

Louis W. Martini, DO, ’58, had helped orchestrate the Second Annual PCOM Post Founder’s Day CME Seminar January 26 to February 2. Taking the best ideas in the off-site medical education handbook as his guide, Martini set about the task of establishing an eight-day, seven-night 40 credit mind expansion for nearly five dozen fortunate osteopathic physicians.

Geared toward the family practitioner, the seminar format took clinical specialties such as nephrology and approached them from such disciplines as pediatrics, geriatrics, surgery, radiology, psychiatry and osteopathic principles in 20-minute bursts. With such formal presentations each morning, afternoons could be spent in fervent search of sea urchins, chasing golf or tennis balls, or extending professional learning with informal case histories at poolside. Martini’s goal, “Everybody learning something most of the time and nobody bored any of the time,” worked like magic.

Proof of its value to this year’s attendees is the advance registration for an even larger group in 1987. “We’re already half-booked,” Peffall said, “and we haven’t even reminded people to enroll yet.”

Knowing that success can spoil even the best of CMEs, Martini and Peffall want to limit the size of the seminar to keep it small enough to generate “family ties” as physicians and their guests come to know each other. Both learning environment and hotel would have to change if the group grew large. “That isn’t going to happen,” Peffall asserts.

Bolongo Bay also is just the right distance from the important stuff. Martini believes, “This is where Robinson Crusoe would go for a CME,” he says. “It’s a conference in style for people who can appreciate it. Twenty minutes from town or the airport, six steps from the lecture hall to the water.”

Considering what most of us have to anticipate in January, those logistics might begin to make a great deal of sense.
dance drums were at work in the darkness, a Saturday night ritual we'd come to expect in the small northern city of Limbe, Haiti. The voodoo priests were busy inducing their subjects into a trance, to be possessed by spirits, and, if they were successful, to avert the curse of the voodoo gods.

These remnants of Haitian ancient religion were just as present in the daylight culture of this impoverished island nation, which lies just east of Cuba, sharing its landmass with the Dominican Republic, together forming the island of Hispanola.

Dr. Bill Hodges, my preceptor in Haiti, would say, "Religion is to culture as physiology is to the body." His laboratory for this bit of wisdom was the hospital in Limbe called "Le Bon Samaritain," and it was here that my wife Cindy and I came late in January to begin a two-month rotation.

As the daily practice of medicine there was to reveal, "The Good Samaritan" called to mind an entire group of people who had suffered much in their history, wounds of slavery, humiliation, injustice and disease. I believed that for a short time, at least, I could assist in the task of healing.

Cindy and I were testing what we sensed might be a call to a long-term commitment in an underserved medical area, and possibly a foreign one. She had taken a leave of absence to join me, and her work here focused mainly in the pediatrics wards. I had braced for my first day at the clinic where Dr. Hodges had made rounds for 27 years, but nothing had prepared me for the numbers of sick and injured.

Patients were waiting in the triage area as we began, their eyes following our movements as we consulted them briefly. Each morning, between one and two hundred people would wait to be seen, and the more acute cases were given priority that day. The remainder would be asked to return later. After brief consultations, we moved on to the clinic, where 300-450 patients were consulted daily. I remember seeing one albino patient the first day in clinic. His neck held an obvious squamous cell carcinoma, the size of a pie. His friends had brought him in hopes of a cure, but we sadly explained it had gone too far. Another patient, as stiff as a board, was carried in by a friend, suffering from tetanus and screaming in pain as opposing muscles contracted. He survived with therapy, unlike others with sustained contractions of the diaphragm.

Tuberculosis was common, with 10-15 new cases confirmed each day by x-ray. The difficulty in treatment arises because monthly follow-up requires a charge of $3, and in a land where the annual income ranges between $100 and $200, some patients cannot afford the luxury of treatment. Credit for clinical consultation is sometimes refused by Haitians, and they may fail to return for needed follow-up visits due to lack of cash.

Only rarely could patients be admitted to the wards. Severe kwashiorkor, severe typhoid, malaria and meningitis qualified. But pneumonia, A.I.D.S., TB and even malignant HPT patients were generally treated on an ambulatory basis. For those who were hospitalized, a family member or friend needed to stay with them to cook, empty bedpans, launder clothes and find help if problems arose. In many ways, it was good to see these support persons care for and encourage their family mem-
bers by their presence. I believe they provided much more for their patient than reduced medical costs. I was encouraged more than once by the melody of Haitian hymns sung by a roomful of patients and their friends.

In the maternity ward, local midwives were trained by an American midwife for normal deliveries. Those with difficulty were taken to Cap Haitien, a town 20 miles distant, for surgery. One of my first cases was a mother who had just delivered on the earth floor of her home. Covered with mud, she had come to the hospital after hours of unsuccessful labor trying to deliver the second "twin." We were able to induce delivery, and then heard another heartbeat inside! Only one of the triplets survived, despite our best efforts, "saved for a reason," the local nurses said.

Many of the children in our pediatrics ward had lost parents and become malnourished, while others had developed TB, typhoid, malaria, or needed traction for broken legs. Parents often wanted to visit their sick children but could not afford transportation. Some feared that they were the cause of the child's sickness, and did not want to bring back the evil curse by visiting.

At times, when we were feeling the weight of our work resting heavily, we would talk to these children and suddenly feel refreshed by their honesty and hope. Many were in poor health, some were separated from their parents by death or abandonment, yet they laughed. They helped me as much or more than I helped them.

The change in government midway in our experience in Haiti came with some uncertainty. Curfews were ordered for several days, but the hospital staff was granted special passage on the streets allowing the hospital to function as usual. With the departure of Jean Claude Duvalier there was a smooth transition as members of the military assumed control of the government.

Too soon it was time to leave Haiti, and as we packed for the trip home I asked again, "Why am I here, and what will it lead to?" Beyond my ability to help a few Haitian people, I had found a task needing to be filled, and a style of living compatible with my values and hopes. I know now that I could enjoy working among people like these who are in dire need of someone to care for their medical, spiritual and social well-being.

Our trip was funded in large part by Medical Assistance Programs International and by Mennonite Medical Association, both of which regularly grant international medical education scholarships. We're very grateful for their support.
A Family Affair

By Harry Gehlert

D’Alonzos by marriage and by birth assemble at the College, a hub of their individual energies for almost 60 years.

From left are Albert D’Alonzo, ’56, and his wife Harriet; Henry D’Alonzo, ’51, with his wife, Eva, ’65. At far right is Rita D’Alonzo Chadwick, sister and medical technologist. Patriarch of the family, Henry Ernest D’Alonzo, ’27, served on the general practice staff of the College for 35 years. He died in 1961.

D’Alonzos have been associated with PCOM since 1923, when Henry D’Alonzo Sr. began his studies at the Philadelphia College of Osteopathy, as the College was then named. Henry could not have known that in be-
coming a student at PCO he had taken the first step toward establishing a connection between the D’Alonzo name and the College that would become deeper and stronger over the succeeding 63 years. He would have been surprised to learn that his sons would also graduate from PCOM, or that his older son, Henry, would marry Eva Jasinski, a member of PCOM’s class of 1965. Yet his pleasure might have been complete had he been aware that the youngest of his children would join her brothers in the medical profession by becoming a medical technologist and contributing in other ways while PCOM was becoming the largest osteopathic training facility in the United States.

Today the three D’Alonzo DOs are part of a PCOM tradition that values continuity of standards and service.
All are products of Philadelphia and its educational institutions, with but one exception.

Henry was the first of his generation of D’Alonzos to graduate from PCOM, in 1951. A residency and internship at its hospital on 48th Street followed, with his M.Sc. of Surgery acquired in 1954. Henry has been a member of the faculty since 1955, when he joined as clinical assistant. He is certified in general surgery, and a Fellow of the American College of Surgeons. He was named both Clinical Professor of Surgery and a member of the PCOM board of trustees in 1984. In 1985 he became chairman of the Hospital’s professional staff.

Albert D’Alonzo, while attending Philadelphia’s Northeast High School, won a scholarship to Philadelphia’s Temple University, but chose to attend Duke University, where he acquired his B.A. His D.O. is from PCOM, (1956), as is his M.Sc. in internal medicine (1960). And PCOM was where he served his internship and residency.

In rare leisure moments when neither Henry nor Albert is occupied with his profession or with OMCP, music and sports provide diversions. Both men retain a lively interest in baseball and music. Music was a heritage from their father, who was a virtuoso performer on the mandolin, an instrument popular in the family’s ancestral home of Roccasalenga, in the Abruzzi region of Italy. Their enthusiasm for baseball is a holdover from the days when the family lived in the Kensington section of Philadelphia, where the brothers formed a sandlot team and solicited funds for uniforms from local businesses. Al got so good at the game that later, in his pre-medical school days, he played first base with a farm team of the Chicago White Sox. A musician, he plays piano, guitar and mandolin. Henry is an opera enthusiast, and mentioning either baseball or opera will elicit his strongly held opinions on whether Steve Carlton’s pitching skills equal those of former A’s and Yankees pitcher Bobby Shantz—or if the tones produced by tenor Luciano Pavarotti are as mellifluous as those once created by Jussi Bjoerling.

A third generation of D’Alonzo D.O.’s is getting ready to move into the medical scene. Of the seven D’Alonzo children (Albert, 3, Henry, 4) one, Henry and Eva’s 18-year old daughter, Bona Lisa, is a pre-med student at Smith College, preparing to continue the D’Alonzo-PCOM tradition.

Cardiologist Albert D’Alonzo examines daily EKGs, evaluates their interpretation by students and residents.
Henry D’Alonzo, a versatile surgeon is called upon most often for thoracic and vascular work. He did the first pacemaker implants for PCOM, in the early 1960s. Below, with Jerome H. Sulman, DO, PCOM ’59, the referring physician, he attends a patient on whom he has operated.

The D’Alonzos’ private offices remain near to their alma mater. The PCOM campus can be seen from the window. Rita, trained as a medical technologist, shares the workload.
PCOM Corporation Approves Reorganization Plan

In a meeting held on campus April 9, members of the Philadelphia College of Osteopathic Medicine corporation voted 38-2 in favor of a major corporate reorganization, to be accomplished by July 1.

Under the new structure six new corporations would be created:
- OMCP Foundation, a parent holding company comprising the foundation and corporate staff;
- The Philadelphia College of Osteopathic Medicine;
- The Hospital;
- OMCP Clinical Associates, the practice plan;
- OMCP Management Services, a not-for-profit corporation offering support systems and services to other subsidiaries; and
- OMCP Diversified Services, a for-profit corporation designed to develop capital formation activities and to fund new ventures.

OMCP's PSYCHIATRIC WING, ONE-WEST, formally took flight April 11 at the hand of its promoter, George H. Guest, DO, and Vice Chairman of the Board Glenn J. Hoffman, who chairs PCOM's hospital committee. Walter Brand, hospital administrator, and other members of the department of psychiatry offer approval.

Annual Fund and OPF Separate Programs

OPF contributions generally are channeled through the National Osteopathic Foundation (NOF) of the American Osteopathic Association to osteopathic colleges throughout the country. Donors must specify those schools to which they wish their contributions sent, or else their monies are pooled for equal distribution among all 15 osteopathic colleges.

OPF dues support the varied benefits and services provided by both the AOA and state associations.

In contrast, the Annual Fund is administered directly by PCOM. All dollars contributed to the Fund are used to support PCOM and its activities.

The Office of the Vice President for Resource Development (215-581-6257) and the Alumni Relations Office (215-581-6522) will gladly answer further questions about giving to these programs.

Phonathon Signals Spring

Students at PCOM recently concluded the 2nd Annual "Spring Breakout" Phonathon, from Sunday, April 27 through Thursday, May 1. Approximately 2000 calls were made to alumni, principally in the Delaware Valley/New Jersey area, to raise funds for the Student Loan Fund.

Last year, the Phonathon raised about $30,000, which was made available in the form of loans to students in all four years. The 1986 goal is $40,000, and any alumni who have outstanding pledges are requested to mail their payments prior to June 30, 1986.

The Phonathon is a student initiative, undertaken with the support and participation of PCOM administration and faculty.

Leonard P. Harmon, DO, '72 will endow a $10,000 scholarship fund, according to Mark Ebersole, vice president for resource development. PCOM will invest Dr. Harmon's gift, then make available an annual scholarship award in the amount of the interest earned by the investment.

Commenting on the scholarship, Dean Joseph A. Dieterle, DO, told Dr. Harmon: "...I am touched by the singularly generous nature of the contribution. It brings back memories of "our time" as students here, when tuition was around $1,100. It was hard for us then...and it's still hard."

To be eligible for the award, a student must be married and have children, demonstrate academic promise, and show financial need.
**Faculty In Focus**

**William A. Nickey**, DO, has been named chairman of the Department of Internal Medicine. **Carl A. Giombetti**, DO has been named vice chairman of the Department of Pediatrics. The appointments were announced by **Joseph A. Dieterle**, DO, dean. Dr. Nickey’s appointment was effective January 1, Dr. Giombetti’s January 13.

Dr. Nickey has appointed **Albert F. D’Alonzo**, DO, FACOI, clinical professor of surgery, to the posts of clinical professor, Dept. of Internal Medicine, and director, Clinical Medicine. **John Simelaro**, DO, chairman, Division of Pulmonary Medicine, has been named vice chairman, Department of Internal Medicine.

**Robert Berger**, DO, associate professor and vice chairman of the department of pediatrics, has been appointed assistant dean for clinical education, succeeding **Donald Thome**, DO, who leaves the position in July to concentrate full-time as chairman of ophthalmology. Dr. Thome had held dual responsibilities for clinical education and ophthalmology jobs for the past 10 years. Dr. Berger will continue his work in developmental pediatrics, a specialty which coordinates efforts to treat psychiatric, audiology and speech, and physical impairments in children.

A $20,000 grant has been awarded to PCOM for work by **Jere M. Boyer**, Ph.D., vice chairman, Microbiology Dept. The grant is from Advanced Technology Center of Southeastern Pennsylvania, and SmithKline Beckman. PCOM was awarded a $5800 grant in 1984 for earlier stages of Boyer’s project: the testing of new anti fungal compounds for their effectiveness against a battery of known, fungal pathogens. The new grant will fund the work through 1986.

As part of its services, PCOM’s microbiology lab provides fungal susceptibility testing for anyone requiring it.

**William Nickey**, D.O., chairman of the Dept. of Internal Medicine, has written an article that was included in the Primary Cardiology Special Edition #2. It is titled *Applying the Principles of the Joint National Committee Report on Private Practice*.

**Michael L. Mansi**, DO chairman of OB/GYN, was elected to the board of trustees of the American College of Osteopathic Obstetricians and Gynecologists. The election was held during the March meeting of the ACOOG, in Tucson, Arizona.

**Carl Giombetti**, DO, chairman of pediatrics, was guest physician on a Philadelphia television talk show February 20 to discuss the medical aspects of child abuse.

**John Angeloni**, DO, chairman of the Department of Family Medicine; **Ronald Goldberg**, DO, clinical assistant professor of General Practice; and **Michael Avallone**, DO, PCOM ’59 and a member of the staff of Parkview Hospital; were elected to the Board of Governors of the American College of Osteopathic General Practitioners during its March meeting in San Diego. They will serve for two years.

**Emanuel Fliegelman**, DO, lectured to the St. George Medical Society of the American Cancer Society, on breast carcinoma and gynecologic carcinoma. During an extended stay in Florida he presented a lecture entitled “The Female Patient is Human,” at the Southeastern College of Osteopathic Medicine.

**R. Michael Gallagher**, DO, Moorestown, NJ, a clinical assistant professor at PCOM, has authored an article in the February issue of the journal, *Headache*, entitled “Emergency Treatment of Intractable Migraine,” and in April spoke on the subject of headaches, one of a number of “Medical Controversies” sponsored by Kennedy Memorial Hospital of New Jersey and Laurel Medical seminars in St. John, VirginIsles.

**Susan M. Poserina**, ’86, Philadelphia, has been commissioned as the Medical Mission Sisters’ first Samaritan Lay Missioner, to serve for three months after graduation with the order in Richland, GA. She will begin family practice at a rural health clinic and in follow-up home care.

**Debbie Stroz**, a second year PCOM student, was awarded $300 by the AOA Bureau of Research for the best paper presented by a student at its 30th annual research conference, held March 12-15, 1986 in Chicago.

**John R. Gimpel**, ’88, was chosen as PCOM student council president in the election held on March 25. He will serve a one year term.
Randall Woods, DO, of Clinton, Mo., inventor of Woods' Concept Intraocular Lens. He is a 1973 graduate of Kirksville College of Osteopathic Medicine.

Inventor of Woods' Concept IOL Visits PCOM

Randall Woods, DO, visited PCOM in March to demonstrate his unique design for the haptics of an intraocular lens. His patented modifications make the lens easier to insert and render it self-centering. The haptics are spring loaded by inserting hooks at their ends into holes drilled in the lens. Additional holes in the lens at right angles to the haptics provide points where forceps may grasp and control it. These make it easier to insert and move the lens, and to release the haptics. After release, the haptics provide automatic centering of the lens through the spring pressure they exert against the edges of the capsular fornix.
1935
Edith Incababian, Wilmington, DE, retired in January from active practice at Wilmington’s Riverside Hospital, where she was an attending staff physician.

1946
Boris H. Traven, Langhorne, PA, was unstoppable in his efforts to gather the Class of '46 together for its 40th reunion on Friday, January 24 at The Tavern in Bala Cynwyd. His results speak for themselves. The crowd of 22 classmates declared the Pre-Founders Day festivities a huge success and suggested that other class hustlers encourage similar functions during landmark anniversaries. (Note: The Alumni office will provide assistance).

1956
David A. Patriquin, Athens, OH, head of the osteopathic principles and practice section of the Ohio University College of Osteopathic Medicine, has been selected as the college’s “Outstanding Faculty Employee of 1985.” Dr. Patriquin, a professor in family medicine, was cited for developing effective interaction at OU-COM. Promoting the college and osteopathic medicine, leadership and diplomacy also contributed to his selection.

1958
Alexander Rodi, Hammonton, NJ, a retired air force colonel, has received a second cluster to the Air Force Meritorious Service Medal at a McGuire AFB ceremony. Prior to retirement in 1984, Dr. Rodi served as senior flight surgeon at Dobbins Air Force Base, GA. Now in private practice, he is affiliated with Kessler Memorial Hospital in Hammonton.

M. Paul Simon, Millburn, NJ, has been elected to his sixth consecutive term as president of the medical staff at West Essex General Hospital, Livingston. A founding physician at the hospital since its opening at 1960, Dr. Simon will continue to direct policy for a professional staff of 300.

1960
Frank A. E. Bonifacio, Hammonton, NJ, has been elected vice president of the New Jersey Association of Military Surgeons; serves on three committees of the American Academy of Psychiatry and Law; is a member of the Atlantic County Mental Health board; serves on four committees of the New Jersey Psychiatric Association, and has been appointed chief psychiatrist in the New Jersey Department of Corrections.

Stuart Zuckerman, Ventnor, NJ, has been elected vice president of the New Jersey Association of Military Surgeons; serves on three committees of the American Academy of Psychiatry and Law; is a member of the Atlantic County Mental Health board; serves on four committees of the New Jersey Psychiatric Association, and has been appointed chief psychiatrist in the New Jersey Department of Corrections.
1962
Lawrence Nessman, Wayne, NJ, as chairman of the Jewish National Fund, recently honored Newark mayor Gibson at a dinner held in West Orange, for his stand against anti-semitism and for advancing understanding in America.

1963
Joan Abar, Cranston, RI, has been appointed by the governor of the state board of examiners in osteopathic medicine. A family practitioner in Providence, Dr. Abar is a trustee of Cranston General Hospital and serves as vice president of the Staff Physicians Association of Rhode Island, as well as on the board of the Visiting Nurses Association.

1965
Ralph C. Lanciano, Haddonfield, NJ, was luncheon speaker at the Extracranial Cerebrovascular Insufficiency conference held April 11 in Atlantic City. Dr. Lanciano, an ophthalmologist, is affiliated with the department of surgery, University of New Jersey, School of Osteopathic Medicine, and is clinical assistant professor in ophthalmology, University of Pennsylvania School of Medicine.

1966
Clayton C. Lindemullu, Erie, PA, has been re-elected chief of the medical staff at Erie’s Metro Health Center. A surgeon, he chairs the department of thoracic and vascular surgery.

1967
Thomas F. Santucci, Voorhees, NJ received the 1985 Community Service Award given by the Cosmopolitan Club of the Delaware Valley, for his work with the South Jersey Perinatal Cooperative to develop treatment programs for premature and high-risk newborns. Dr. Santucci is chairman and professor of pediatrics at the University of Medicine and Dentistry of New Jersey - School of Osteopathic Medicine, and president of the National Board of Examiners for Osteopathic Physicians and Surgeons.

1968
David B. Plone, Phoenix, AZ, was guest speaker in February at a national sales meeting of Siemens Corporation, the world’s largest manufacturer of medical imaging devices, on “The Comparison of Nuclear Medicine, CT and Magnetic Resonance Imaging.” Dr. Plone is a director of nuclear medicine at Phoenix General Hospital.

1969
Robert A. Barnes, Emmaus, PA, has received board certification in general practice from the American College of General Practice in Osteopathic Medicine and Surgery as a member of the Allentown Osteopathic Medical Center. Dr. Barnes is a member of the medical center’s executive committee and serves on its board of trustees.

Steven L. Edell, Wilmington, DE, chairman of radiology at Wilmington’s Riverside Hospital, was a guest speaker at the Advanced Practicum in Ultrasound at the Johns Hopkins University Hospital in December. Dr. Edell is clinical instructor in Radiology at Johns Hopkins University School of Medicine.

Barry M. Hoffman, Cherry Hill, NJ, has joined the affiliate staff of West Jersey Hospital’s department of family medicine.
Sally Ann Rex, Slatington, PA, has expanded her practice in the Allentown, Bethlehem and Slatington area to include occupational, preventive and family medicine. Dr. Rex will treat industrial patients and provide diagnostic care with fully equipped vans to visit plant sites. The vans will aid in the delivery of medical, dental, vision and hearing services.

1970
Charles J. Kaczey, Duncansville, PA was elected president of the American College of Neuropsychiatrists at its November meeting at the AOA in Atlanta. He chaired the organization's 1985 scientific sessions. Dr. Kaczey is board certified in psychiatry, is a consultant to Home Nursing Agency Partial Care Program and medical director to the Specialized Partial Care Program at Bedford-Somerset Community Mental Health Center, in addition to psychiatric affiliation with Altoona Hospital.

1971
A. Wayne Abbott, Dayton, OH, provided the setting, and five other members of The

Class of 1971 provided the laughs, as a PCOM Mid-west reunion took place January 11, in Dayton. From left are: Victor Gregory, a Dayton radiologist; Wayne Abbott, specializing in OB/GYN; Darryl Robbins, a Columbus pediatrician; Gerard Papp, a Columbus orthopedic surgeon: Dave Goldberg, general practitioner and William Wentling, an ophthalmologist, both from Dayton.

1972
L. Edward Antosek, Charlotte, NC, a board certified family practitioner and the only DO in Charlotte, for the past 18 months has undertaken a twice-weekly television news program, "Doctor on Call." Besides regular telecasts, Dr. Antosek is available for medical news as it occurs. He reaches 700,000 viewers in seven North and South Carolina counties. He is currently active on a number of medical, civic and community boards, and serves as a U.S. Naval Reserve flight surgeon.

Robert Auerbach, Philadelphia, PA, has been elected to a one-year term as assistant secretary for the Philadelphia Coloscopy Society. An attending physician at Albert Einstein Medical Center, Dr. Auerbach also is on staff at Delaware Valley Medical Center in Langhorne.

Bernard C. McDonnell, Langhorne, PA has joined the medical staff of Delaware Valley Medical Center in Langhorne as an ENT specialist in the department of surgery. Dr. McDonnell is an assistant clinical professor in Otorhinolaryngology at PCOM.

H. Allen Strunk, Altoona, PA, has joined Altoona Hospital's staff in cardiology. He is board certified in internal medicine. He serves on the staff of Indiana (PA) Hospital, Blair Memorial in Huntingdon and Altoona Hospital's Clinical Service of Cardiology.

1977
John Guluzian, Columbus, OH, has opened a new medical facility at South High Street Medical Center in Columbus.

Sol Lizerbram, San Diego, CA, has been elected chairman of the Provider Advisory Board, a division of the California Medical Assistance Commission. Dr. Lizerbram, a family practitioner, will preside over the installation of Expanded Choice, an HMO-type system that aims to eliminate abuse of the current state medical assistance program.
Eugene Mochan, Media, PA, has been named chairman of the department of family practice at the University of Medicine and Dentistry of New Jersey in Camden. The recipient of numerous research grants, Dr. Mochan heads a research project in rheumatoid arthritis. He has served three consecutive National Institutes of Health postdoctoral fellowships in biochemistry and cell biology at the University of Pennsylvania.

Judith L. Benscoter, Lafayette Hill, PA, has been inducted into the Women's Hall of Fame at Temple University for accomplishments in orthopedic surgery, sports medicine for women, and prior involvement as a player and coach of women's athletics. Her college sports, field hockey, lacrosse and swimming prepared her for participation in national touring teams and teaching basketball and field hockey at Chestnut Hill College. She is a member of the Special Olympics Advisory Committee, and received its Volunteer Recognition Award in 1983.

Keith F. Henderson, York, PA, has joined the staff of Hanover General Hospital as director of emergency medicine. Dr. Henderson also will serve as medical director of the hospital's Advanced Life Support unit.

1979

Larry M. Marder, Bryn Mawr, PA, has been appointed to the active staff of Brandywine Hospital's department of surgery. He will specialize in plastic and reconstructive surgery, and hand surgery. Dr. Marder was a member of the hospital's emergency medicine department for the past three years.

Drake P. DeHart, York, PA has been appointed to serve a second one-year term as vice chairman of Memorial Hospital's general practice department. Dr. Hart is an associate clinical professor of family practice at PCOM.

Nelson P. Kopyt, Easton, PA, has joined the active staff of Allentown Osteopathic Medical Center in the practice of nephrology and hypertension.

1980

Nancy K. Bridgens, Phoenixville, PA, holder of a fellowship in maternal-fetal medicine at Pennsylvania Hospital. Dr. Bridgens is an instructor in obstetrics and gynecology at the Hospital of the University of Pennsylvania.

Dominic Ruggiero, Scranton, PA, has joined with another physician to open an internal medicine and family practice office in Scranton. Board certified in emergency medicine, Dr. Ruggiero has been active in training paramedics. He and his partner also operate a practice office in Clarks Summit.

Saul E. Schreiber, Las Vegas, NV, has been accorded board certification in dermatology. Dr. Schreiber is a staff member of the Desert Springs Hospital in Las Vegas.

1981

Samuel Alfano, Wilkes Barre, PA, has been board certified in internal medicine. Dr. Alfano is a primary care physician at the Geisinger Family Health Center in Moosic.

Craig T. Johnston, Erie, PA, has been re-elected secretary/treasurer of the medical staff at Metro Health Center. Dr. Johnston is a member of the department of general practice.

William C. LeMasters, Danville, PA, has joined the associate medical staff of Evangelical Community Hospital in Lewisburg. An ophthalmologist, Dr. LeMasters also serves on the staffs of Sunbury Community and Shamokin State General hospitals.
Barook J. Masuda, DDS, Philadelphia died January 9. Dr. Masuda was a member of PCOM's department of ENT for many years as a dental surgeon. But his real love was foods and customs of the Middle East, and he cooked and lectured on these topics internationally. A native of Cairo, Egypt, Dr. Masuda was raised on such dishes as kibba, okra, yakhy, ads, fool medammes and kinafa. When he came to the U.S. in 1915, he expected to find those dishes and many others, such as farcie and tass kabab. Instead, he said he found little but fried meat and boiled potatoes. In self-defense, he took up cooking. Those who sampled his fare asked for recipes and sought instruction. He made it a spare-time career, speaking, reading and writing in 11 languages, before school groups, clubs and civic associations. Before women's groups, he often donned desert robes and burnoose to cook, spicing his performances with feats of magic, psychic readings and discussions of American men as "sheiks." Dr. Masuda, 84, liked to say that he was educated in the world. He won his first degree at Heidelberg University, his second at Ohio State, a third at Texas A&M, and after a teaching stint back in Cairo, returned to the University of Pennsylvania for a degree in oral surgery, his fourth.

Marie O'Brien '32, West Roxbury, MA, died in December. She was 79. Born in Boston and educated at Radcliffe before graduating from PCOM, Dr. O'Brien practiced in Bloomfield, NJ, before her marriage in 1941.

Theodore R. Cohen '33, Yardley, PA, died January 7 at Delaware Valley Medical Center in Langhorne, which he had helped found. Dr. Cohen had practiced in Morrisville, NJ for 52 years, with specialties in ophthalmology, rheumatology and otolaryngology.

Jacob Spungin '38, Auburn, MA, died in March. Dr. Spungin was an associate member of the Worcester, MA Hahnemann Hospital.

Kermit H. Lyman '40, West Chester, PA died in March.

Patrick F. McCarthy '65, Bethlehem, PA, died February 16 suddenly. Dr. McCarthy was executive vice president of United States Physicians Care, a subsidiary of HMO-PA's parent organization in Blue Bell, PA. He had joined a practice in Allentown shortly after internship, and in 1973 formed the Macungie Medical Group, where he practiced until joining the HMO in 1982. He had been a PCOM instructor in general practice in 1975.

Paul G. Moscato '87, Emporium, PA, was killed driving home from clinical rotation at Pittsburgh's West Allegheny Hospital March 7, when his car skidded on snow into the path of a tractor trailer. He was a magna cum laude graduate of Indiana University of Pennsylvania.

Robert D. Phelps '53, Buffalo, NY, died in March. Dr. Phelps was on staff at the Sisters of Charity Hospital in Buffalo.

Albert Tini '58, Milmont Park, PA, died March 14 after an extended illness. From 1976 to 1978, he had been director of the professional staff and director of medical education at PCOM, contributing significant efforts to the overhaul of medical records and tumor registry at the Hospital. Dr. Tini had practiced obstetrics for 12 years at Tri-County Hospital, now Metropolitan-Springfield, and served as chief of staff there in 1966-67. He was named general practitioner of the year in 1967 by the intern class at the hospital. He had served as a prison physician, a trainer in high school athletics, and as director of medical education at Metropolitan-Springfield for several years before his retirement in 1985.
### Coming Events

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<td>May 17</td>
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<td>May 31</td>
<td>Commencement Dinner Dance</td>
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<td>Alumni Board of Directors Meeting</td>
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<td>June 1</td>
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