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OFFICERS

GRACE-NEW HAVEN COMMUNITY HOSPITAL

September 30, 1956

President
George S. Stevenson

Vice-President
Frederick D. Grave

Vice-President
Robert S. Judd

Secretary
Stanley Daggett

Treasurer
The Union and New Haven Trust Co.

Auditors
Seward and Monde

Directors whose terms of office expire respectively in

February 1957
Spencer M. Berger
Lewis E. Caplan
William C. Celentano
A. Bryan Clark
Charles H. Costello
Robert N. Giaimo
Herman R. Giese
Frederick D. Grave
George S. Hawley
Louis L. Hemingway
I. J. Hoffman
Thomas Hooker
Wilbur G. Hoye
Richard S. Jackson
Leslie H. Jockmus
Daniel W. Kops
G. Vincent Maconi
Ellis C. Maxcy
Joseph S. Miller
Robbins H. Miller
Robert S. Reigeluth
Lucius S. Rowe
Richard M. Thalheimer
Arnon D. Thomas
Raynham Townshend
Stanley S. Trotman
Abraham S. Ullman
G. Harold Welch

February 1958
Thomas T. Amatruda
Frank S. Brainard
Walter W. Bronson, II
H. Wick Chambers, Jr.
James W. Cooper
George B. Darling
John I. Ely
John E. English
Philip H. English
Carl G. Freese
Henry L. Galpin
William B. Gumbart
Mrs. Samuel C. Harvey
William Horowitz
H. Everton Hosley, Jr.
William M. Hurley
James S. Johnson
Herbert S. MacDonald
Donato Maisano
Charles Oppe
Philip Paolella
Robert E. Ramsay
Orville F. Rogers, M.D.
Charles E. Rolfe
Louis M. Rosenbluth
Joseph A. Schiavone
James A. Shanley
George S. Stevenson
Carlos F. Stoddard, Jr.
Edgar Tullock
William F. Verdi, M.D.
Frederick H. Wiggin
Charles A. Williams

February 1959
John W. Barclay
George F. Barnes
D. Spencer Berger
George W. Berger
Peter J. Berry
Roland M. Bixler
Milton P. Bradley
Henry P. Brightwell
Lewis H. Bronson
Charles A. Cahn
Mrs. Edith V. Cook
Stanley Daggett
Franklin Farrell, III
Robert J. Hodge
Reuben A. Holden
Frederic E. Hudson
Wallace C. Hutton
Henry W. Jones, Jr.
Robert S. Judd
F. Thatcher Lane
Frederick W. Loeser
James F. McClelland
Spencer F. Miller
Rollin G. Osterweis
Thomas H. Russell, M.D.
Robert R. Savitt
William A. Thomson, Jr.
Henry H. Townshend, Jr.
Merritt D. Vanderbilt
Paul M. Zorn

Mayor Richard C. Lee (ex-officio)

Mrs. Robert M. Lewis (ex-officio)
COMMITTEES OF THE BOARD OF DIRECTORS

Executive Committee
Robert E. Ramsay, Chairman
Richard C. Lee (ex-officio)
Stanley Daggett
Henry L. Galpin
Frederick D. Grave
Robert S. Judd
Spencer F. Miller
George S. Stevenson
Arnon D. Thomas
G. Harold Welch
Paul M. Zorn

Finance and Budget Committee
G. Harold Welch, Chairman
Carl G. Freese
Thomas Hooker
H. Everton Hosley, Jr.
Stanley S. Trotman

Investment and Trust Administration Committee
Henry L. Galpin, Chairman
John I. Ely
Carl G. Freese
G. Harold Welch

Personnel Committee
Frederick D. Grave, Chairman
Spencer M. Berger
Herman R. Giese
Richard Thalhaimer
Paul M. Zorn

Medical Committee
George S. Stevenson, Chairman
Charles H. Costello
William Horowitz
Robert S. Judd
Philip Paolella

Nursing School Committee
Stanley Daggett, Chairman
Henry P. Brightwell
George F. Barnes
Miss Elizabeth S. Bixler
L. E. Celentano, M.D.
George B. Darling
Mrs. Samuel J. Goldberg, Sr.
Miss Elizabeth Hartnett
August Hollingshead
Wallace C. Hutton
Miss Irma King
Mrs. Henry J. Steeneck

Public Relations Committee
Roland M. Bixler, Chairman
Henry P. Brightwell
Reuben A. Holden
Richard S. Jackson
Daniel W. Kops
Charles A. Williams

Traffic and Parking Committee
Robert S. Reigeluth, Chairman
Charles A. Cahn
GRACE-NEW HAVEN COMMUNITY HOSPITAL

EXECUTIVE STAFF

September 30, 1956

Director
Albert W. Snoke, M.D.

Associate Director
John T. Law

Assistant Directors
Richard H. Judd
Gerard A. Ouellette
Betty L. Horne
Anna E. Ryle

Administrative Assistant
John E. Ives

Director of Public Relations
Alfred H. Marshall

Director of Personnel
Mabel G. Martin

Admitting
Helen B. Bray

Anesthesia
Nicholas M. Greene, M.D.

Business Office
Edward J. Hammerbacher

Clinics
Caroline E. Falls
Dietary
Doris Johnson

Information
Catherine C. Willis

Maintenance, Housekeeping, Laundry
John W. Manz

Medical Records
A. Louise Kelsey

Microbiological Laboratories
Leanor D. Haley

Nursing
Anna E. Ryle

Pharmacy
Ugo F. Caruso

Physical Medicine and Rehabilitation
Thomas F. Hines, M. D.

Purchasing
J. Hasbrouck Wallace

Radiology
Arnold H. Janzen, M. D.
Robert M. Lowman, M. D.

Social Service
Emily J. Nichols

Switchboard
Beulah B. Furbush

Volunteers
Bettina Jones
Whenever I start to write an annual report I am always faced with the dilemma of how much attention I should devote to what has been done as contrasted to what is being done and what should be done in the future.

It is also difficult to frame a twelve-month period and within that frame to tell of startling new accomplishments; so many developments are gradual and need the perspective of several years for true measurement of their progress.

In this report I will try to cover the past and the present as thoroughly as space allows and hope you will forgive an occasional nod to the future which lies a little beyond the framework of the current year.

For the year which closed on the last day of September, 1956, the Hospital continued to expand its service to the community. Inpatient days were slightly higher than in the previous year, more individuals were cared for in the Hospital, while visits to the Out-Patient Department, -and particularly to the Emergency Service-, increased also. A record number of babies were born in the institution and there is little doubt that the coming year will see even more activity on this service.

Comparison of salary expense of the Hospital with that of previous years makes it apparent that major strides are being taken by the Hospital to provide a more realistic wage scale for its employees. Hospitals have long been known for the relatively low wages paid their employees; historically, the latter have provided a substantial part of their service on a philanthropic basis. This cannot and should not be expected today.

The salary expense of the Hospital for the past year was $4,265,034 as contrasted to $3,721,371 two years ago. The rise is largely due to wage increases rather than to addition of personnel.

We have no illusions regarding the adequacy of our salary scales in the Hospital today. Others have not stood still while we moved ahead. But the limiting factor of necessary charges to patients continually keeps the Hospital between the Devil and the Deep Blue Sea. While
we try to get our wage rates up to community levels, we are also trying to improve service to patients, both costing more money, and at the same time we must always do our best to hold our cost as low as possible because of the continuing difficulty of many patients in paying for essential services.

This Medical Center cannot stand still. Medical knowledge is constantly increasing and new community services are continually being sought.

During the past year substantial contributions have been made to the total health service of the community.

Perhaps the outstanding one was the enlargement and improvement of the Women's Clinic made possible through generous support by the Women's Auxiliary of the Hospital and by Hill-Burton funds from the United States Public Health Service.

A new Dermatology Clinic has been completed; a new 110-car parking lot has been constructed across Howard Avenue from the New Haven Unit and is in operation under a concessionaire; we have just expanded and renovated the Psychiatric Out-Patient Clinic; and as the year closed work was well on the way for major expansion of the William Wirt Winchester Chest Clinic and a new and larger Hearing and Speech Center.

All of these facilities will offer expanded services not only to patients and their physicians but to the Yale School of Medicine as well.

The Hospital's educational program, apart from that of Yale University, has also been expanded. Currently we are working out plans for continued association with the University of Connecticut School of Nursing which should prove of mutual benefit. The change of emphasis by the Yale School of Nursing to graduate nursing education only in the future has caused the Hospital to concentrate its attention on its two "home" schools, -the collegiate program of the University of Connecticut, and the diploma program of the Grace-New Haven School of Nursing. With the State of Connecticut's one-year program for licensed practical nurses, and Yale's Master's Degree program, the Medical Center will continue to offer as broad a spectrum of nurse training as exists anywhere in the country.

The Hospital is continuing its extensive programs for training food service supervisors, X-Ray technicians and medical technologists, and the Executive Committee has recently approved the recommendation of Miss Doris Johnson, Director of Dietetics, that a dietary internship program be inaugurated in the Fall.
Just as the Medical School considers that research must accompany teaching and service in a properly-rounded medical care program, the Hospital has added to its service and teaching functions active participation in the research on hospital function and design in collaboration with the Department of Public Health and Hospital Administration of the Medical School with funds granted by the United States Public Health Service.

I am often reluctant to talk about future activities and future problems, for I feel that the administrative staff and department heads of the Hospital are kept so busy meeting the daily crises which beset our complex organization that it is unfair to add more complications to their daily lives.

However, this Hospital like all major health centers, is facing extensive problems of growth, of expansion of service, of financing, etc., and of necessity we must plan for the future before embarking into unfamiliar areas.

1. FINANCES

Most of our plans for the future and limitations for the present are dependent upon dollars and cents.

The Hospital receives 94% of its income from third-parties and from self-paying patients, - only 6% from gifts, grants and endowments.

Free care was given to in-patients and out-patients during the past year in the amount of $527,065 as follows:

- Semi-Private Patients $5,802
- Ward Patients 136,767
- Newborn 21,468
- Out-Patient Clinics 357,776
- Emergency Service 11,054

As is readily evident, the great majority of free care is being given to indigent or medically-indigent patients in the Clinics, on the Wards and in the Emergency Service.

Since one of the main sources of supplementary funds for this subsidy must be the income from the private patient, Hospital charges must be set somewhat above the cost of rendering private patient service. I regard this taxing of the sick patient to pay for the care of his indigent neighbor as most inequitable, but we have not yet been able to produce a practical alternative.
It is estimated that if the full cost for the care of just those patients who are completely indigent were paid for by local or state governmental funds, a saving of $151,500 a year could be effected in the Hospital's expenses which could be applied to increased wages or to decreased charges, or to both.

Another essential service which must be substantially underwritten by income from patients is the education of student nurses. The Hospital, of course, receives valuable and truly indispensable service from these young women in the course of their training, but the cost of providing maintenance to the students of both the University of Connecticut and the Grace-New Haven Schools of Nursing, and of furnishing instruction as well to students of the latter school, is large. Estimates indicate that there is a net educational cost to the Hospital for these two schools of approximately $293,175 a year.

The philosophy of how hospital bills should be met is admittedly complicated, and points-of-view differ markedly dependent upon one's relationship to insurance, to welfare agencies, to hospitals or to patients.

I believe that the full cost of care for the indigent who is a direct responsibility of a political unit should be met through tax funds. I believe that the cost of care for the individual who is medically indigent (that is, who is able to look after himself except in emergencies caused by illness or accident) should be met by gifts, grants and endowments of the hospital to the limit of these resources. The balance of the cost for the medically indigent should not be paid by private and semi-private patients, but by Society in general. Today, this deficit is being met by charges to private and semi-private patients and by the average hospital employee who contributes by working for a lower salary than he should really get.

If the cost of education and the remaining expense for care of the medically indigent were paid for by Society as a whole, - Government, if you will-, hospital finances could be handled on a far more realistic basis.

2. NURSING

Although finances continue to be a limiting factor in many of our plans, the most important single problem upon which the economy of the Hospital depends is adequate numbers and quality of personnel, particularly of nurses and other professional women.

If sufficient nursing personnel were available, additional patients could be admitted with a resultant improvement in Hospital finances; services could be expanded in many additional areas appropriate to a Medical Center like ours; and our present service to
patients and physicians alike could be appreciably improved.

Every effort is being made to increase the supply of nurses in the Medical Center: personnel practices and wages are being continuously reviewed; graduate nurses are being relieved of non-nursing duties by substitution of other trained personnel; and student nurses are being actively recruited and trained in larger numbers.

I am convinced that increasing the numbers of graduate nurses on patient divisions will not only directly improve the morale of working nurses by relieving them from frequent evening, night and week-end rotation but, perhaps even more important, it will enable our nurses to care for patients as they have been taught to do, as they want to do, and as the patients want them to do.

Nursing personnel must be recruited and trained in ever-increasing numbers if we are to care for the growing health needs of this country. They must also be given the satisfaction of being able to care properly for their patients and of being properly reimbursed. This is our major task during the coming years.

3. HOSPITAL SERVICE

Major attention is being given and will continue to be given to improvement and expansion of our Hospital's health service to the community.

It is expected that planning and financing of the High Voltage Radiation Center will be completed by the end of the year. This will be a major addition to our community service.

Continued thought and effort will be devoted to offering additional hospital services to those who are not acutely-ill bed-patients. Improvement of laboratory and ambulatory X-Ray services is desirable so that more patients can obtain these diagnostic services without having to be admitted to a hospital bed.

Serious consideration is being given to some stratification within the Hospital so that very acutely ill patients may receive special care on an acutely-ill division, somewhat like an extension of our two post-surgical recovery rooms, while a less-acute unit would offer an abbreviated service to those who do not require constant nursing attention but who should still remain in the Hospital.

However, it should be emphasized that similar programs conducted elsewhere have not yet demonstrated any total saving in either nursing personnel or cost. It is possible that overall care is improved, but careful study is required.
Consideration will be given to an extension of the association which the Medical Center has developed with Gaylord Farm Sanatorium and Woodruff Rehabilitation Center through which our patients needing convalescent or long-term chronic care may be referred to a facility which can provide such care at a lower cost than obtains in an acute general hospital. This presents possibilities which might well be developed as patterns for future institutional care of patients with complicated chronic diseases.

4. AMBULATORY SERVICE

The Medical Center is taking a new look at its role in ambulatory care. With the increase in cost of in-patient care, every effort should be made to provide diagnostic and therapeutic services to patients on an ambulatory basis rather than requiring them to come into the Hospital.

We hope to make it simpler for physicians to refer patients to the Medical Center for specialized laboratory service and radiological examinations, and to insure getting accurate reports back to the physicians promptly. We also hope to improve the physical surroundings and the service, both to physicians and their patients, in our Out-Patient Clinics so that these resources may be more extensively used by the community on a referral or continuing basis.

The joint appointment by the Medical School and the Hospital of Dr. Raymond S. Duff as Assistant Director in charge of the Out-Patient Service should provide continuity of leadership in our ambulatory care program which has long been needed. Particular attention is being directed toward service in the emergency department.

With the growth of voluntary pre-payment plans for in-patient hospital care there has been a marked increase in the economic pressure to hospitalize patients for certain diagnostic procedures such as X-Ray and laboratory examinations which could well be offered on an ambulatory basis. Most physicians are convinced that there is serious abuse of this in the form of unnecessary hospitalization, although in our own case the great demand for hospital beds which generally prohibits admission of the less acutely ill has so far prevented a demonstration of this abuse.

I believe that much more diagnostic work could be done on an ambulatory basis, and it is hoped that the Connecticut Blue Cross will try to develop ambulatory diagnostic programs such as are being tried in other Blue Cross plans in this country.

Attention should be directed to the need for exerting Hospital influence to persuade the Connecticut Medical Service (Blue Shield) to provide partial payments for X-Rays on an ambulatory basis to clinic
patients. For some reason that is completely mysterious to me, payment is made for an X-Ray if a patient walks into a private doctor's office; but if the same patient walks into a doctor's office that happens to be located in a hospital rather than across the street, payment is refused. This discriminatory policy is contrary to the national trend of developing hospitals as community centers of health service, and is unique among Blue Shield plans in this country.

This policy creates a particular hardship upon many medically indigent patients who attend our Out-Patient Clinics and who get all of their medical care in the Clinics, but who must go elsewhere to get their X-Rays.

5. EXPANSION OF SERVICES

A Medical Center of our type can never cease expanding its services. New laboratory procedures start out on a research basis and in time become an indispensable part of direct service. Particular clinical interests become more and more specialized, and special procedures, clinics, residencies and even separate patient divisions develop from them.

These growing services require special equipment and space, additional specially-trained personnel, rearrangement of in-patient or out-patient divisions and schedules, and sometimes actual major physical additions to plant.

The enlarged William Wirt Winchester Chest Clinic, the new Cardio-Pulmonary Physiology Laboratory and the Hearing and Speech Center are recent examples of this development.

6. FUTURE NEEDS

In-Patient Psychiatric Service is a major need still to be met in the community. The Yale Psychiatric In-Patient Clinic meets this need to a certain extent, but is not designed for the typical community general hospital patient who requires short-term psychiatric diagnostic and therapeutic services, particularly when the psychiatric problem is associated with an acute medical or surgical problem. The Hospital Board and staff must give careful thought to this need during the next few years.

The disturbing trend toward an increasing waiting list of patients needing elective hospitalization points up the necessity for a careful review of the need for hospital beds in the community, and particularly the needs of this Hospital during the coming years.
It is distinctly possible that additional obstetrical beds and nursery facilities will be required as the number of babies born in the Hospital increases year by year. The obvious place for expansion of obstetrical beds is the eighth floor of the Memorial Unit. A part of the plan might be development of the additional area as a surgical division in which would be concentrated all the in-patient gynecological activities of the Hospital.

This is only in the discussion stage at present, but we must be thinking about it now, for to translate dreams into bricks, mortar and personnel takes years. We are anxious to anticipate needs,- not plug gaps after they occur.

7. CONCLUSION

Hospital administration is a complicated activity, and this year my additional responsibilities with the American Hospital Association have really made life a little hectic.

The understanding and support of the combined Medical Boards and of the Hospital Board of Directors has been generous and greatly appreciated.

I am particularly grateful to the Administrative Staff and to the Department Heads of the Hospital. They are the ones who are carrying the major administrative and operating load, and their quiet tolerance of my weekly-to-daily new idea, and their patient adjustments of my theories into practice is duly acknowledged and appreciated.

Albert W. Snoke, M.D.
Director
## COMPARATIVE STATISTICS

Year Ended September 30

<table>
<thead>
<tr>
<th></th>
<th>1955</th>
<th>1956</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients in Hospital start of period</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admitted</td>
<td>23,997</td>
<td>24,587</td>
</tr>
<tr>
<td>Total Patients cared for</td>
<td>24,570</td>
<td>25,212</td>
</tr>
<tr>
<td>Discharged</td>
<td>23,945</td>
<td>24,624</td>
</tr>
<tr>
<td>Patients in Hospital end of Period</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>625</td>
<td>588</td>
</tr>
<tr>
<td>Total number days including Psychiatric Clinic</td>
<td>223,081</td>
<td>224,480</td>
</tr>
<tr>
<td>Average length of patients' stay</td>
<td>9.32</td>
<td>9.12</td>
</tr>
<tr>
<td>Daily average number of patients</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>611</td>
<td>613</td>
</tr>
<tr>
<td>Stillbirths not included in admissions</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>42</td>
<td>40</td>
</tr>
<tr>
<td>Deaths</td>
<td>800</td>
<td>928</td>
</tr>
<tr>
<td>Total number of visits to Dispensary</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>78,798</td>
<td>77,391</td>
</tr>
</tbody>
</table>

### Departmental Services

- **Operations including urological treatments**: 13,776, 13,325
- **Deliveries**: 4,089, 4,169
- **Anesthesias rendered**: 12,402, 12,355
- **X-Ray Examinations**: 52,458, 54,592
- **Laboratory Examinations**: 270,563, 261,416
- **X-Ray Therapy Treatments**: 6,228, 7,188
- **Physical Therapy Treatments**: 26,521, 23,207
- **Emergency Out-Patient Visits**: 28,177, 29,043
- **Prescriptions Filled**: 64,620, 70,354
- **Meals Served**: 1,147,189, 1,107,012
- **Pounds Laundered**: 4,060,978, 4,107,701

### Admissions by Class

- **Private**: 2,809, 2,974
- **Semi-Private**: 15,425, 16,098
- **Ward**: 5,711, 5,481
- **Total excluding Psychiatric**: 23,945, 24,553
- **Psychiatric**: 52, 34
- **Total**: 23,997, 24,587
### Year Ended September 30

#### Discharges by Professional Service

<table>
<thead>
<tr>
<th>Professional Service</th>
<th>1955</th>
<th>1956</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gynecological</td>
<td>2,109</td>
<td>2,094</td>
</tr>
<tr>
<td>Obstetrical</td>
<td>4,623</td>
<td>4,783</td>
</tr>
<tr>
<td>Medical - General</td>
<td>3,456</td>
<td>3,925</td>
</tr>
<tr>
<td>Metabolism</td>
<td>214</td>
<td>105</td>
</tr>
<tr>
<td>Physical Medicine and Rehabilitation</td>
<td>77</td>
<td>76</td>
</tr>
<tr>
<td>Pediatric - General</td>
<td>953</td>
<td>870</td>
</tr>
<tr>
<td>Pediatric - Newborn</td>
<td>4,355</td>
<td>4,459</td>
</tr>
<tr>
<td>Surgical - General</td>
<td>3,964</td>
<td>3,845</td>
</tr>
<tr>
<td>Dental Surgery</td>
<td>141</td>
<td>140</td>
</tr>
<tr>
<td>Neurosurgery</td>
<td>552</td>
<td>535</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>415</td>
<td>494</td>
</tr>
<tr>
<td>Orthopedic</td>
<td>949</td>
<td>974</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>668</td>
<td>812</td>
</tr>
<tr>
<td>Thoracic Surgery</td>
<td>536</td>
<td>565</td>
</tr>
<tr>
<td>Urology</td>
<td>884</td>
<td>908</td>
</tr>
<tr>
<td>Psychiatric - Mental Hygiene</td>
<td>49</td>
<td>39</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>23,945</strong></td>
<td><strong>24,624</strong></td>
</tr>
</tbody>
</table>

#### Patient Class

<table>
<thead>
<tr>
<th>Patient Class</th>
<th>Days Service</th>
<th>Daily Average</th>
<th>Percentage of Occupancy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private</td>
<td>26,678</td>
<td>27,509</td>
<td>73.09</td>
</tr>
<tr>
<td>Semi-Private</td>
<td>97,660</td>
<td>101,939</td>
<td>267.56</td>
</tr>
<tr>
<td>Ward</td>
<td>60,932</td>
<td>56,591</td>
<td>166.94</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>185,270</td>
<td>186,039</td>
<td>507.59</td>
</tr>
<tr>
<td>Newborn</td>
<td>25,295</td>
<td>25,736</td>
<td>69.30</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>210,565</td>
<td>211,775</td>
<td>576.89</td>
</tr>
<tr>
<td>Psychiatric Clinic</td>
<td>12,516</td>
<td>12,705</td>
<td>34.30</td>
</tr>
<tr>
<td><strong>Total all Patients</strong></td>
<td>223,081</td>
<td>224,480</td>
<td>611.19</td>
</tr>
</tbody>
</table>
**CLINIC VISITS**

**OUT-PATIENT DEPARTMENT**

<table>
<thead>
<tr>
<th></th>
<th>1955</th>
<th>1956</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medicine</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General</td>
<td>8,164</td>
<td>7,884</td>
</tr>
<tr>
<td>General (G)</td>
<td>217</td>
<td>57</td>
</tr>
<tr>
<td>Skin</td>
<td>1,780</td>
<td>2,159</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>1,930</td>
<td>1,733</td>
</tr>
<tr>
<td>Allergy</td>
<td>2,547</td>
<td>2,538</td>
</tr>
<tr>
<td>Cardiac</td>
<td>1,050</td>
<td>965</td>
</tr>
<tr>
<td>Cardiac Pulmonary</td>
<td>168</td>
<td>524</td>
</tr>
<tr>
<td>Cardiac Evaluation</td>
<td>10</td>
<td>--</td>
</tr>
<tr>
<td>Hematology</td>
<td>657</td>
<td>668</td>
</tr>
<tr>
<td>Arthritis</td>
<td>682</td>
<td>775</td>
</tr>
<tr>
<td>Metabolism</td>
<td>1,704</td>
<td>1,853</td>
</tr>
<tr>
<td>Metabolism (G) incl. Chiropody</td>
<td>349</td>
<td>305</td>
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<tr>
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<td>Rehabilitation</td>
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<tr>
<td>Gastro-intestinal</td>
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<td>Retinal Photography</td>
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<td>Minor Surgery and Visual Fields</td>
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<td>Minor</td>
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### Obstetrics and Gynecology

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<td>Pre-natal</td>
<td>6,521</td>
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<td>Post-partum</td>
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<tr>
<td>Gynecology</td>
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<td>2,723</td>
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<td>Resident's Clinic Pre-natal</td>
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<td>Gynecology Tumor</td>
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<td>Infertility and Endocrine</td>
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<td>Medical Complications</td>
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<td>Psychiatric Consultations</td>
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<td><strong>Total</strong></td>
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### Pediatrics

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<td>Cardiac</td>
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<td>Arthritis</td>
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<td>Skin</td>
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<td>Third Pediatric</td>
<td>238</td>
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<td>Newborn</td>
<td>556</td>
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<td>Hospital follow-up</td>
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<td>Endocrine</td>
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<td>Cardiac Adolescent</td>
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<tr>
<td><strong>Total</strong></td>
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### Psychiatry

<table>
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<tbody>
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<td>Psychiatry</td>
<td>5,305</td>
<td>5,408</td>
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**GRAND TOTAL**                    | 78,798| 77,391|
<table>
<thead>
<tr>
<th>Gross Income from Patients</th>
<th>Year Ended September 30</th>
<th>1955</th>
<th>1956</th>
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<tr>
<td>In-Patient Charges</td>
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<td>Private</td>
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<td>$1,056,432</td>
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<td>Semi-Private</td>
<td>2,976,847</td>
<td>3,306,039</td>
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<td>Ward</td>
<td>1,693,248</td>
<td>1,648,556</td>
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<tr>
<td>Newborn</td>
<td>134,397</td>
<td>190,451</td>
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<td>Total</td>
<td>5,741,740</td>
<td>6,201,478</td>
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<td>Out-Patient Charges</td>
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<td>661,391</td>
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<td>Total</td>
<td></td>
<td>6,403,131</td>
<td>6,978,272</td>
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</table>

Deduction from Gross Income

| Allowances                  | 476,960                 | 552,415  |
| Provision for Bad Debts     | 142,958                 | 117,755  |
| (net of recoveries)         |                         |          |
| Total                      | 619,918                 | 670,170  |

Net Income from Patients

| 5,783,213                   | 6,308,102               |

Operating Expenses

| 5,764,814                   | 6,170,876               |

Depreciation

| 480,639                     | 491,182                 |

Total Operating Expenses

| 6,245,453                   | 6,662,058               |

Operating Loss

| 462,240                     | 353,956                 |

Other Expense

| 23,603                      | 25,239                  |

Interest

| 134,982                     | 110,465                 |

Total Loss

| 620,825                     | 489,660                 |

Supplementary Income

| Endowment Income            | 170,658                 | 182,632  |
| Other Income                | 192,564                 | 174,650  |
| Yale University Appropriation| 56,975                  | 76,066   |
| Total                       | 420,197                 | 433,348  |

Net Loss - Charged to Working Capital

| $200,628                    | $56,312                 |
GRACE-NEW HAVEN COMMUNITY HOSPITAL

GENERAL SERVICE MEDICAL STAFF

September 30, 1956

Chief of Staff
Luther K. Musselman

Staff Executive Committee

Luther K. Musselman, Chairman
Courtney C. Bishop
Arthur J. Connolly

Theodore S. Evans
Joseph A. Fiorito
Robert M. Lowman

William B. McAllister, Jr
Albert W. Snoke
William R. Wilson

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Chief of Medicine
Theodore S. Evans

Assistant Chief of Medicine
Robert H. Jordan

Honorary
George Blumer

Wilder Tileston

Consulting
Paul B. Beeson
A. Bliss Dayton
Samuel J. Goldberg, Sr.

John S. Hathaway
Ira V. Hiscock
David R. Lyman
Orville F. Rogers

Walter I. Russell
Marvin Scarbrough
Max Smirnow

Attending
Jack J. Albom (Dermatology)
John H. Bumstead
Howard S. Colwell
Joseph N. D'Esopo
Hugh L. Dwyer, Jr.
Theodore S. Evans
Arthur J. Geiger
Barnett Greenhouse

Benedict R. Harris
Jesse S. Harris
Marion Howard
Robert H. Jordan
Harvey W. Kaetz
Samuel D. Kushlan
Paul H. Lavietes
Daniel F. Levy
Harold M. Marvin

Joseph Mignone
Louis H. Nahum
Allan K. Poole
Arnold B. Rilance
Robert F. Scholl
Samuel Spinner
Maurice J. Strauss
Robert M. White
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<td>Albert L. Hendricks</td>
<td>Oscar Roth</td>
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<td>Charles H. Hodgkins</td>
<td>Gustave Sirot</td>
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<td>Joseph L. Kaplowe</td>
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C. Kenneth Deming
Albert H. Dolinsky
Michael Dzubaty
Richard B. Elgosin
F. R. Ematrudo
Meyer Etkind
James F. Ferguson, Jr.

Courtesy (continued)

C. Kenneth Deming
Albert H. Dolinsky
Michael Dzubaty
Richard B. Elgosin
F. R. Ematrudo
Meyer Etkind
James F. Ferguson, Jr.

Bertrand E. Lowenstein
Philip A. Marinoff
Irving J. Marshak
Carter Marshall
Louis R. Mattie
John J. Milici

J. C. Varrone
Arthur Weil
Otto Willner
Paul Winer
Herbert Wyatt
Raymond J. Zagraniski
Charles Zale

PSYCHIATRY

Consulting

Theodore Lidz

Frederick C. Redlich

Attending

William B. Curtis
Stanley Leavy

Richard Newman
Maxwell Pasternak

Everett S. Rademacher
Bernhard A. Rogowski

Assistant Attending

Sidney Berman

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

Chief of Obstetrics and Gynecology

Joseph A. Fiorito

Assistant Chief of Obstetrics and Gynecology

Charles B. Cheney

Honorary

A. Nowell Creadick

Richard F. Rand

Consulting

C. Lee Buxton

Harry Conte

Herbert Thomps

Attending

Arthur J. Connolly
Jachin B. Davis
Joseph A. Fiorito

Irving Friedman
John C. Haley
Orvan A. Hess
Clayton S. Hitchins

Carl E. Johnson
Luther K. Musselman
Arthur G. Wilkinson
Assistant Attending

Maurice F. Beauchamp
Charles B. Cheney
Joseph B. Forman
Fred Gibson
Max Berlowe
William C. Billings
George A. Bonner
Bernard L. Conte
Stanley Lavietes

Milton S. Godfried
Gabriel Ingenitio
Emil D. Karlovsky

Florence Keller
Gerald Krosnick
Frank E. Lach

Junior Assistant Attending

David J. Kreis

Max Berlowe
William C. Billings
George A. Bonner
Bernard L. Conte

Courtesy

David F. Conway, Jr.
Michael Lavorgna
Robert M. Lewis
Edward B. O'Connell
William R. Richards

William D. Riordan
Virginia M. Stuermer
Bernard R. Swan
Gertrude J. Vermonde

Associate

Vincent W. Palluotto

Stanley Lavietes

Normal Obstetrics

Frank G. Amatruda
Vincent Balletto
Donald M. Beckwith
Hyman B. Birnbaum
Dana L. Blanchard
A. K. Boardman
Gunar N. Bohan
Robert S. Boyd
Richard W. Breck
Edward V. Carangelo
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M. J. Carpinella
Justin Cashman
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John A. Chasnoff
Marvin L. Cousins
Eugene Cozzolino
Gabriel Cusanelli
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Marvin L. Cousins
Eugene Cozzolino
Gabriel Cusanelli
Hermann S. Cutler
F. R. Ematrudo

Meyer Etkind
James F. Ferguson, Jr.
Henry R. Finn
Alexander Fischer
Peter W. Fiskio
Morris Freedman
C. W. Gaylord
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Roy J. Gilmer
Morris Glazer
Morris A. Granoff
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Sam Kirby
Leo W. Koster
Nicholas LaFemina
Benno Lipton

Philip A. Marinoff
Irving J. Marshak
John J. Milici
Samuel R. Milici
Frank Mongillo
Harry G. Moss
A. Alexander Neuwirth
Nickolas Nickou
Louis A. Parrella
Kurt S. Pelz
Samuel Philipson
Wilson Powell
Daniel Slater
Morris Slater
Robert Taylor
Sterling Taylor
Richard H. Timpson, Jr.
J. C. Varrone
Herbert Wyatt
Charles Zale
DEPARTMENT OF PATHOLOGY

Chief of Pathology
William B. McAllister, Jr.

Consulting
Averill A. Liebow
Levin L. Waters

Attending
William B. McAllister, Jr.

DEPARTMENT OF PEDIATRICS

Chief of Pediatrics
William R. Wilson

Assistant Chief of Pediatrics
David H. Clement

Honorary
Arnold A. Gesell

Consulting
Grover F. Powers
Milton J. E. Senn

Attending
David H. Clement
Charles S. Culotta
Morris Goldstein
Elizabeth Harrison

Maurice M. Hillman
Morris Y. Krosnick
Paul F. McAlenney, Jr.

Assistant Attending
Francis J. Albin
Michael D. Albin
Harry L. Filer

William Glaser
Lawrence Michel
Robert F. Newton

Junior Assistant Attending
Merrill A. Baratz
Paul S. Goldstein

Richard H. Granger

*Leave of absence

Charles Scholhamer
*Carter Stilson
Morris Wessel

Sidney Hurwitz
John Morrison
DEPARTMENT OF RADIOLOGY

Chief of Radiology
Robert M. Lowman
Attending
Alfred J. Kummer
Assistant Attending
Richard Barach

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Chief of Surgery
Courtney C. Bishop
Assistant Chief of Surgery
Robert R. Berneike

GENERAL SURGERY

Honorary
William F. Verdi
Consulting
William J. German
Maxwell Lear

**John C. Mendillo,
Chairman of Section
Courtney C. Bishop
Bernard S. Brody (Neurology)
Max Carter (Thoracic)

Attending
Louie N. Claiborn
Gervase J. Connor
Eugene J. Fitzpatrick
Lewis C. Foster
William L. Glenn
Mark A. Hayes

**Includes elective Gynecology

**Ralph W. Nichols
**Thomas H. Russell

Victor Szanton
Walter Tietz
Francis W. Westneat

Robert M. Hamburger
Jack P. Keeve
Robert G. LaCamera
Alan C. Mermann

Robert M. Lowman

Harrison Shapiro

Anthony J. Mendillo
Max Taffel
Paul W. Vestal

William Mendelsohn
Ashley W. Oughterson
Frederick W. Roberts
Max Taffel
Paul W. Vestal
Donald B. Alderman
William E. Bloomer
Stanley S. Brodoff
Lycurgus M. Davey
(Neurology)

Assistant Attending
Alphonse F. Gencarelli
Isao Hirata, Jr.
Robert R. McDonnell
(Neurology)

Junior Assistant Attending
Samuel A. Jaffe

Samuel Climo (Plastic)
Ernest H. Ferrell
John H. Flynn

Courtesy
Henry J. Giamarino
William Koufman
Stephen R. Magyar
John J. Mendillo

Associate
Anthony J. Parisi

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Consulting
Eugene M. Blake

Attending
Clement C. Clarke,
Chairman of Section
Rocko M. Fasanella

Assistant Attending
Frederick E. Mott

Courtesy
Genesis F. Carelli

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Consulting
Carl W. Henze

John P. Riesman
Franklin Robinson
(Department of Neurology)
Donald P. Shedd

Robert Lowenberg

Orlando Pelliccia, Jr.
C. Seaver Smith
George L. Wilson

Michael E. Vegliante
Frederick A. Wies
Arthur M. Yudkin

Carlton C. Phillips

Herman C. Little

James F. Cobey
Attending

Denis S. O'Connor,
Chairman of Section
Alexander L. Bassin

Eugene J. Frechette

Charles K. Skreczko

OTORHINOLARYNGOLOGY

Consulting
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Attending
Samuel J. Silverberg,
Chairman of Section
Harry L. Berman
Norton Canfield

Junior Assistant Attending
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Courtesy

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UROLOGY

Consulting

Clyde L. Deming

Attending
John B. Goetsch,
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Robert R. Berneike
Bell M. Harvard, Jr.

Courtesy

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Albert Howard

Associate

Frank Tortora

Earl J. Rhoades
A. Lewis Shure
Ned M. Shutkin

Harold M. Frost

Martin L. Sumner

Paul B. MacCready
Charles Petrillo

Norman N. Smith

Lloyd L. Maurer

Hyman A. Levin
Harry R. Newman

Thomas A. Ray
PROCTOLOGY

Courtesy

Simon B. Kleiner

DENTAL SURGERY

Consulting

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Attending

Morton J. Loeb

Wilbur D. Johnston,
Chairman of Section
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William R. Dunleavy

Attending

Donald F. Johnston
William Kirschner
Walter S. Langston

Assistant Attending

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James P. Pigott
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Henry J. Gemski

Terry E. Hiltunen
George M. Montano

Junior Assistant Attending

Herman B. Tenin

*William J. Deighan, Jr.
Newton F. Faulkner

Peter Iaccarino

Junior Assistant Attending

Milton Lisansky
James Piccolo

Louis Angell
Edwin F. Cory
Joseph J. Dickstein
Wilbur N. Falk
Sherman A. Flaks
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Harry Goldner
Philip S. Gordon

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William M. Lawrence
Richard F. McGuire
Daniel C. McMahon
James V. Mendillo
Irving W. Mohr
Harold T. Moore
Francis R. Mullen

William D. Nesbit, Jr.
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Samuel H. Pinn
Walter S. Quin
David A. Rozen
Lester S. Sarkady
Jacob Sharp
Angus White

Alestair Gillies

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Frederick W. Hehre

*Leave of absence
GRACE-NEW HAVEN COMMUNITY HOSPITAL

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September 30, 1956

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Asst. Resident: H. Kamenetz
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Morris Green
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Sally Ann Provence
Henry Silver
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Albert J. Solnit
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Katherine M. Wolf
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David H. Clement
Charles S. Culotta
Herbert S. Harned, Jr.

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Edith B. Jackson
Roswell D. Johnson
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Paul F. McAlenney
Robert Salinger

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Morris Goldstein
Paul S. Goldstein
Richard H. Granger
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Sidney Hurwitz
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John B. Morrison
Robert F. Newton

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Richard J. Waters
Joseph Weiner
Morris A. Wessel

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C. Grant LaFarge

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Samuel R. Leavitt
Melvin Lewis

Arthur Nehrer
Baird S. Ritter
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Bertram S. Brown

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George L. Mizner

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Barbara Williams
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Rafael Moses
Martin L. Pilot
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Edwin C. Severinghaus

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Irving Schneider
Frederick Snyder
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Aaron Stern
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William W. L. Glenn

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Louis N. Claiborn

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Henry N. Blansfield
Joseph B. Cherry
Charles F. Dyer
Eugene J. Fitzpatrick, Jr.

Assistant Surgeons
Dicran Goulian, Jr.

Resident Surgeons
Ira S. Goldenberg

Assistant Residents
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George E. Becker, Jr.
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Edward D. Coppola
Arthur C. Crovatto

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Marianne A. Beatrice
Raymond K. Bopp
Hubert B. Bradburn, Jr.
James C. Collias

Mark A. Hayes
Michael Hume
Donald P. Shedd

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Simon B. Kleiner
(Proctology)

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Max Taffel

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Sherwin B. Nuland

Jose F. Patino

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Stevenson Flanigan
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Robert O. Jensen

Suzanne H. Conrad
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William A. Gryboski
Peter Hutchin
Evan F. Lindberg

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Seymour C. Nash
Edgar B. Thompson, III
Bruce Trembly
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Dorothy J. Whittaker

Residents
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Kurt F. Schmidt

Assistant Resident
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E. Louise Payne

DENTAL SURGERY

Associate Surgeon and Chief of Section
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Attending Surgeons
Wilbur D. Johnston
William H. Kirschner
James P. Pigott

Assistant Attending Surgeons
William R. Dunleavy
Walter S. Langston
John B. Noll
Salvatore J. Esposito
William M. Lawrence
Gerald L. St. Marie
Newton E. Faulkner
Harold T. Moore
David Stamm
Terry E. Hiltunen
Francis R. Mullen
John B. Weimer

Assistant Resident
Hernando Mendoza

Interne
Lennart S. Fahlgren
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Associate Surgeon

Saul A. Frankel

Attending Surgeon

Bernard S. Brody

Assistant Attending Surgeons

Lycurgus M. Davey

Robert R. McDonnell

Franklin Robinson

Irving J. Sherman

Assistant Surgeons

Nicholas P. Kitrinos

Harvey R. Leventhal

Robert E. Steiner

Resident

Norman L. Cobb

Assistant Resident

Sidney N. Paly

OPHTHALMOLOGY

Chief of Section

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Attending Surgeons

Clement C. Clarke

Arthur M. Yudkin

Assistant Attending Surgeons

Ilona K. de Suto-Nagy

Louise J. C. Lovekin

Stephen Troubalos

David Freeman

Jacob Nodelman

J. Alexander VanHeuven

William I. Glass

Harold C. Patterson

Michael E. Vegliante

Francis P. Guida

Carlton C. Phillips

Frederick A. Wies

Leon Kaplan

Ernest Rosenthal

Frederick D. Williams

Herman C. Little

Daniel M. Taylor

Andrew S. Wong

Resident

Bernard D. Zuckerman

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Raymond J. Zagraniski
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Associate Surgeon

Harold M. Frost, Jr.

Attending Surgeons

Malcolm S. Eveleth

Denis S. O'Connor

Walter A. Dalmain

Walter F. Jennings

Alfonso Della Pietra

Sidney R. McPherson

Charles T. Flynn, Jr.

A. David Poverman

George G. Fox

Earl J. Rhodes

George G. Fox

A. Lewis Shure

Russell V. Fuldner

Resident

Walter F. Jennings

Gerald S. Greene

Ned M. Shutkin

Leland R. Lugar

Sidney R. McPherson

Charles K. Skreczko

William S. Perham

Charles L. Spear

A. David Poverman

Philip L. Staub

Earl J. Rhodes

Luther M. Strayer, Jr.

A. Lewis Shure

Martin L. Sumner

Resident

Willard F. Greenwald, Jr.

Assistant Residents

Leland R. Lugar

George D. Stilwell

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Associate Surgeon and Chief of Section

John A. Kirchner

Attending Surgeons

Norton Canfield

Paul B. MacCready

Charles Petrillo

Samuel J. Silverberg

Assistant Attending Surgeons

Gregory K. Dwyer

Joseph C. Elia

Henry Merriman

Lawrence G. M. Lydon

Resident

Howard W. Smith

Assistant Residents

Gregory K. Dwyer

Decio M. deEscobar

Eiji Yanagisawa
Audiologist
H. I. Pomerantz

UROLOGY
Associate Surgeon and Chief of Section
Bell M. Harvard, Jr.

Associate Surgeon
Thomas A. Ray

Attending Surgeon
Ralph A. Jenkins

Assistant Attending Surgeons
Robert R. Berneike
John B. Goetsch
Harry R. Newman

Resident
Thomas A. Ray

Assistant Resident
Arnold M. Baskin

OBSTETRICS AND GYNECOLOGY
Obstetrician and Gynecologist-in-Chief
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Associate Gynecologist
John M. Morris

Associate Obstetricians and Gynecologists
Walter Herrmann
Edward H. G. Hon
Luigi Mastroianni, Jr.

Assistant Obstetrician and Gynecologist
R. N. P. Lowi

Attending Obstetricians and Gynecologists
Joseph A. Fiorito
Carl E. Johnson
Luther K. Musselman
### Assistant Attending Obstetricians and Gynecologists

<table>
<thead>
<tr>
<th>Maurice F. Beauchamp</th>
<th>Milton S. Godfried</th>
<th>David J. Kreis</th>
</tr>
</thead>
<tbody>
<tr>
<td>William C. Billings</td>
<td>John C. Haley</td>
<td>Gerald Krosnick</td>
</tr>
<tr>
<td>Charles B. Cheney</td>
<td>Orvan W. Hess</td>
<td>Frank E. Lach</td>
</tr>
<tr>
<td>Arthur J. Connolly</td>
<td>Clayton S. Hitchins</td>
<td>Stewart J. Petrie</td>
</tr>
<tr>
<td>Jachin B. Davis</td>
<td>Gabriel A. Ingenito</td>
<td>Stefanie Z. Roth</td>
</tr>
<tr>
<td>Joseph B. Forman</td>
<td>Emil D. Karlovsky</td>
<td>Virginia M. Stuermer</td>
</tr>
<tr>
<td>Irving Friedman</td>
<td>Florence Keller</td>
<td>Arthur G. Wilkinson</td>
</tr>
</tbody>
</table>

### Residents

| Richard S. Banfield, Jr.      |

### Assistant Residents

| Fillmore Buckner              | John G. Daley                 | Lois M. Mosey           |
| Frank Chung                   | Richard U. Hausknecht         | Arnaldo L. Munoz        |
| George G. Couch               | Orlando J. Miller             | Victor M. Rodriguez     |
|                               | Robert T. Miller              |

### Radiology

#### Radiologist-in-Chief

| Arnold H. Janzen |

#### Associate Radiologists

<table>
<thead>
<tr>
<th>Elisha Atkins</th>
<th>Chu Huai Chang</th>
<th>Robert M. Lowman</th>
</tr>
</thead>
<tbody>
<tr>
<td>Richard L. Barach</td>
<td>Alfred J. Kummer</td>
<td>Harrison Shapiro</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

#### Physicist

| Franklin Hutchinson        |                               | Paul J. Rosenbaum       |

#### Attending Radiologist

| Michael D’Amico            |

#### Assistant Attending Radiologists

| Aloys G. Ansprenger        | Dorothea R. Peck              | Alan B. Skorneck        |
| Sumner Goldenthal          | Robert Shapiro                | Wayne P. Whitcomb       |
| Richard B. Harvey          |                               | Frederick Zaff          |
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Spinks H. Marsh

Assistant Residents
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James T. DeLuca
Marvin J. Friedenberg

Orlando F. Gabriele
Francis E. Korn, Jr.

Robert C. Lawson
James Lum
Sam E. Morris

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Wilhelm S. Albrink
Milton R. Hales

Donald W. King, Jr.
Elias E. Manuelidis

William B. McAllister, Jr.
J. Haskell Milstone
Levin L. Waters

Assistant Pathologist
Harold J. White

Resident
Virginia S. Green

Assistant Residents
Frank A. Carone

Fred W. Doyle

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Haroutune D. Kaloustian
Burt K. Kusserow

Erwin R. Rabin

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Doris Johnson
GRACE-NEW HAVEN COMMUNITY HOSPITAL

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September 30, 1956

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Shirley Parkhill

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Assistant Director
Kathleen Barrett

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Josephine Pecoraro

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Monica Shields
Eleanor Swanson
Rosalie Wilson

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Helen Chuan
Marie Costanzo
Barbara Dobie

Jane Griffin
Marjorie O'Donnell
Margaret O'Neil
Clare Plunkett
Barbara Pratt

Genevieve Santacroce
Elizabeth Swanson
Myrtle Swanson
Emma Stanio
Jean Weed
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Rosalie Gabriel
Claudia Guschel
Katherine Keegan
Dorothy MacLennan
Eleanor Perfette*
Jennie Wajnowski
Head Nurses
Laurel Cohen
Mary Diamante
Margaret George
Lucille Kimball
Myrthel Nelson
Sarah Rowley
CHILDREN'S
Supervisors
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Teresa Dennehy
Irene Miglis
Edith Olson
Evelyn Sturmer*
Head Nurses
Helen Bennett
Katherine Davis
Marilyn Goldstein
Jane Stana
Dorothy Taylor
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Edna L'Heureux
Ruth Link
Elizabeth McGarry
Head Nurses
Jean Burz
Helen Kelly
Nathalie Lachappelle
Frances Stoll
Dorothy Taylor
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Supervisors
Marguerite duMortier
Luba Kozak
Inservice Instructor
Margaret Scherer
Head Nurses
Gertrude Bildstein
Lois Brady
Mary Branchini
Gladys Prendergast
*On leave of absence
PERSONNEL HEALTH SERVICE
Leila Patterson

STUDENT HEALTH SERVICE
Helene Fitzgerald Shirley Horsman Margaret Maddocks Louise Valchine

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Gertrude Sanborn Clara Wheeler
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September 30, 1956

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Associate Director
Marie U. Archibald

Assistant Director
Martha Boisvert

Fundamentals of Nursing
Instructor
Rowena Nadig

Assistant Instructors
Rauha Koski
Doris Richter

Science Instructors

Mary Bilcheck

Enid Young

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Theodore Anderson

Instructor - Medical Nursing
Adele Findlay

Instructors - Surgical Nursing

Julia Bear

Ellen Viscount

Instructor - Maternity Nursing
Angelina Occhiboi

Instructor - Dietetics
Patricia Cuddy
Instructor - Operating Room

Rita Naranjo

Instructors - Nursing Care of Children

Cynthia Moller
Margaret Scherm
Marion Weinberger

Librarian

Audrey Young

Residence Director

Catherine Konyn
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Licensed Practical Nurse Program - State Department of Education

Supervisor

Miss Helen Marchant

Licensed Practical Nurse Program - State Department of Education

Nursing Instructor

Miss Elizabeth Plummer

Licensed Practical Nurse Program - Grace-New Haven Community Hospital

Assistant Director

Miss Kathleen Barrett

Licensed Practical Nurse Program - Grace-New Haven Community Hospital

Assistant Supervisors

Miss Elizabeth Cole
Mrs. Henrietta Garrahan
Mrs. Josephine Pecoraro
THE UNIVERSITY OF CONNECTICUT SCHOOL OF NURSING

September 30, 1956

Dean
Carolyn L. Widmer

Clinical Coordinator
Elaine Raymond

Clinical Instructors

<table>
<thead>
<tr>
<th>Clara Anderson (Medical Nursing Fundamentals of Nursing)</th>
<th>Barbara Brookes (Medical Nursing, Fundamentals of Nursing)</th>
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<tr>
<td>Carol Hayes (Medical and Surgical Nursing II)</td>
<td>Jacquelyn Montefalco (Surgical Nursing, Fundamentals of Nursing)</td>
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<tr>
<td>Joanne Matheson (Pediatric Nursing)</td>
<td>Florence Roman (Surgical Nursing, Fundamentals of Nursing)</td>
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YALE UNIVERSITY SCHOOL OF NURSING

September 30, 1956

Dean of the School of Nursing and Professor of Nursing

Elizabeth S. Bixler

Professor of Nursing Education

Jean MacLean

Professor of Nursing

Hedwig Toelle

Assistant Dean of the School of Nursing and Associate Professor of Nursing Education

Eleanor A. Hall

Associate Professor of Mental Health Nursing

Marion E. Russell

Associate Professor of Nursing (Public Health)

M. Elizabeth Tennant

Assistant Professor of the Nursing Care of Children

Trude R. Aufhauser

Assistant Professor of Public Health (Occupational Health Nursing)

Mary L. Brown

Assistant Professor of Microbiology

Leanor D. Haley, Ph.D.

Assistant Professor of Surgical Nursing

Elizabeth L. Hart

Assistant Professor of Physiological Chemistry and Nutrition

Myrtie E. Kinney
Assistant Professor of Medical Nursing
Margaret J. Magee

Assistant Professor of Rehabilitation Nursing
Edith V. Olson

Assistant Professor of Obstetrical Nursing
Ernestine Wiedenbach

Research Associate in Mental Health Nursing
Ida J. Orlando

Instructors in Clinical Nursing
Elizabeth W. Badgeley (Children's Service)
Virginia M. Brantl (Surgical)
LaVerne Fakkema (Children's Service)
Mary'Vesta Marston (Medical)
Judith Nigro (Obstetrics)

Instructors in Nursing Arts
Jean L. Hopkins
Jane Stacy
Yuki Takagi

Instructor in the Basic Sciences
Martha Pitel, Ph.D.

Clinical Instructor (Director, Student Health Service)
Helene M. Fitzgerald

Registrar of the School of Nursing
Antoinette H. Daniels

Assistant in Instruction in Nursing (Arts)
Ann C. Featherston

Assistants in Instruction in Clinical Nursing
Helen H. Downing (Operating Room)
June T. Veckerelli (Obstetrics)