

The University of Maine

DigitalCommons@UMaine

---

Maine Women's Publications - All

Publications

---

6-1-1954

## The Maine RN vol. III, no. 2 (June 1954)

Maine State Nurses Association Staff

*Maine State Nurses Association*

Follow this and additional works at: [https://digitalcommons.library.umaine.edu/maine\\_women\\_pubs\\_all](https://digitalcommons.library.umaine.edu/maine_women_pubs_all)



Part of the [Women's History Commons](#)

---

### Repository Citation

Staff, Maine State Nurses Association, "The Maine RN vol. III, no. 2 (June 1954)" (1954). *Maine Women's Publications - All*. 539.

[https://digitalcommons.library.umaine.edu/maine\\_women\\_pubs\\_all/539](https://digitalcommons.library.umaine.edu/maine_women_pubs_all/539)

This Newsletter is brought to you for free and open access by DigitalCommons@UMaine. It has been accepted for inclusion in Maine Women's Publications - All by an authorized administrator of DigitalCommons@UMaine. For more information, please contact [um.library.technical.services@maine.edu](mailto:um.library.technical.services@maine.edu).

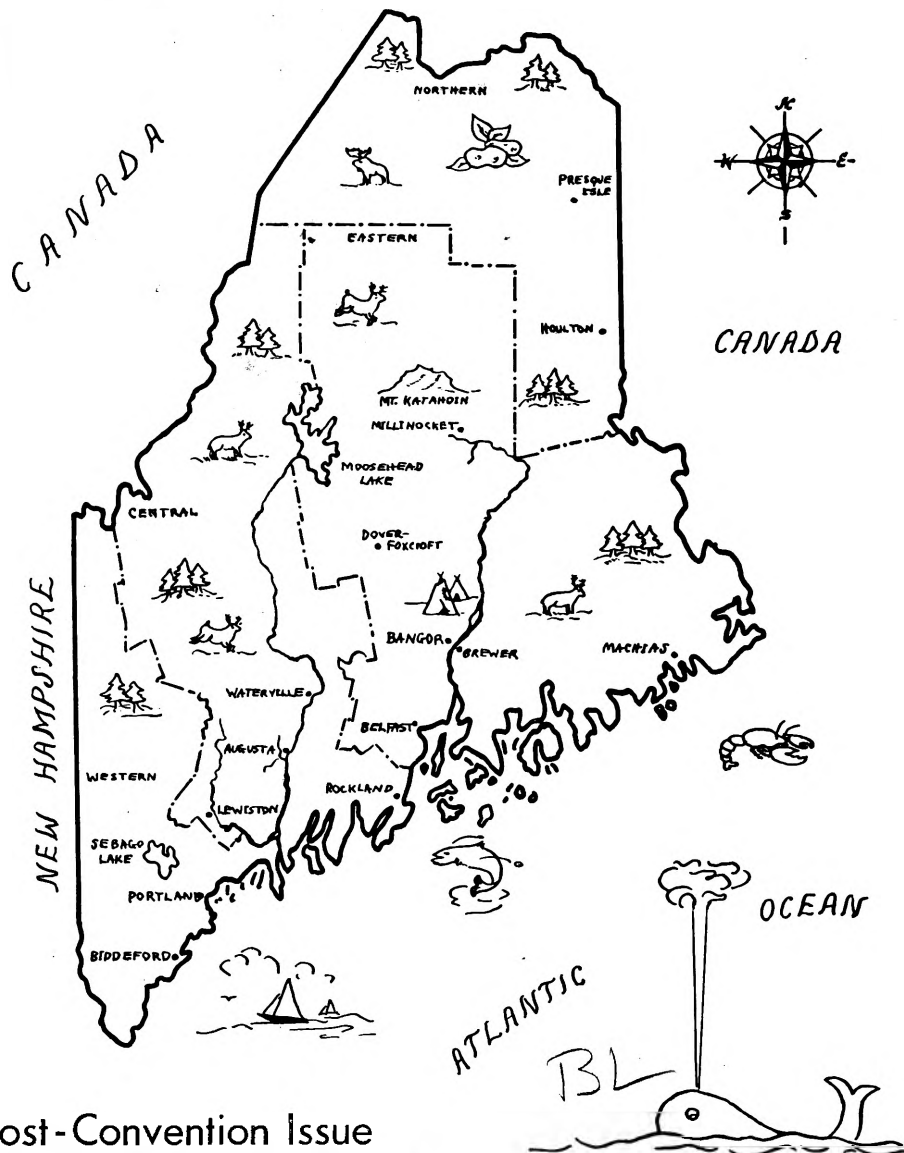
# THE DO NOT REMOVE FROM MAINE R.N.

This Reading Room

June, 1954



## University of Maine Library



Post-Convention Issue

# THE MAINE R. N.

Volume III

JUNE, 1954

Number 2

*Published by the Maine State Nurses' Association*

*March, June, September, December*

**489 State St., Bangor, Maine**

Mrs. Josephine C. Philbrick, R.N., Acting Editor

Subscription price \$1.00 per year to members; \$1.25 per year to non-members.  
Single copies .35.

## OFFICIAL DIRECTORY

### EXECUTIVE COMMITTEE—MAINE STATE NURSES' ASSOCIATION, 1953-54

**President**.....Miss Katherine Donley, R.N.  
Box 630, Houlton  
**First Vice-President**.....Mrs. Dorothy Bourgoignie, R.N.  
36 Shawmut Street, Lewiston  
**Second Vice-President**.....Miss Alice M. Tremblay, R.N.  
45 Deering Street, Portland 4  
**Secretary**.....Mrs. Doris B. Greene, R.N.  
29 Linden Street, Bangor  
**Treasurer**.....Mrs. Ina G. Bean, R.N.  
180 Longfellow Street, Portland

### EXECUTIVE SECRETARY

Mrs. Josephine C. Philbrick, R.N.  
489 State Street, Bangor

### DIRECTORS

Sister St. Jeanne Vianney, R.N.  
St. Mary's General Hospital, Lewiston  
Mrs. Susan P. McGrath, R.N.  
RFD 7, Bangor

### PRESIDENTS OF DISTRICTS

**Western**.....Mrs. Edith W. Woodman, R.N.  
27 Carlyle Street, Portland 5  
**Central**.....Miss Elizabeth F. Foyer, R.N. (Acting)  
32 Hammond Street, Lewiston  
**Eastern**.....Miss Georgina J. Patterson, R.N.  
191 Center Street, Bangor  
**Northern**.....Mrs. Honor Purvis, R.N.  
7 Katahdin Court, Presque Isle

### SECTION CHAIRMEN

(EACT) Educational Administrators, Consultants, and Teachers, Miss Frances V. O'Brien, R.N., Maine General Hospital, Portland, 4 Hill Street, Portland  
(INSA) Institutional Nursing Service Administrators, Miss Mildred Richards, R.N., 489 State Street, Bangor  
(PH) Public Health, Miss Eleanore M. Irish, R.N., 30 West Street, Portland  
(PD) Private Duty, Miss Laura Austin, R.N., RFD 1, Westbrook  
(GD) General Duty, Miss Pauline Ann Roy, R.N., 166 Bartlett Street, Lewiston

### EDUCATIONAL SECRETARY

Board of Registration of Nurses  
Mildred I. Lenz, 363 Main St., Lewiston

### STATE BOARD OF EXAMINERS

President, Mabel F. Booth, Eastern Maine General Hospital, Bangor

Secretary, Mary C. Ragan, Mercy Hospital, Portland  
Geraldine Hiller Louise M. Nawfel Frances E. Jordan

### PC&PS

State Chairman, Mary C. Ragan  
Mercy Hospital, Portland

## Table of Contents

	Page
Official Directory . . . . .	2
From the President's Desk . . . . .	3
Capsule Digest of the Chicago Convention . . . . .	4
By Action of the Executive Committee	13
Membership Chart . . . . .	15
Section Activities . . . . .	16
Polio Prevention—Progress Report . .	18
MSNA 1954 Convention . . . . .	20
Spot News from the Districts . . .	21
Help Korea Trains . . . . .	25
Partial Analysis of Recent CD Questionnaires . . . . .	26
Maine State Student Nurse Association	27
Research and Treatment of Cancer .	30
Shepherd of the Blind . . . . .	32
Red Cross Needs Field Reps. . . .	33



## from the president's desk

by Katherine Donley, President, MSNA

The theme of the 1954 American Nurses' Association Convention, "Calling American Nurses to Action" might very well be changed to "Calling Maine Nurses to Action." If the economic status of Maine nurses is to progress, if we are to benefit from ANA's plan for demonstration projects on economic security, every member and potential member must be alert to the advantages such a training project offers a state association. This project will probably be in the form of a workshop. Members of MSNA will be asked to attend this workshop and assume leadership on a state level in introducing the program to other association members. Will you volunteer to attend the workshop? If this is not possible, will you pledge your support so that a worthwhile economic security program may be established within the state association? As ANA points out, one excellent way to gain in membership is to demonstrate leadership in economic security. As our members increase, our strength will also. When we reach our potential in membership, then we will have truly "grown up."

High standards of professional practice must be extended. Nurses everywhere are working hard to better licensing laws. Considerable effort is being put forth to bring needed reform in laws covering both professional and non-professional practitioners of nursing. In 20 states during 1953, bills were introduced in the legislative bodies which provided for amendments or complete revisions of existing nurse practice laws, or for the addition of new licensure provisions. In 14 of the 20 states this legislation was initiated at the request of state nurses' associations. Here in Maine it behooves us to take a good look at our Nurse Practice Act and our Licensing Law, familiarize ourselves with their contents,

and make up our minds individually what we think about them, what steps, if any, we wish to take that could improve them and broaden their scope. The American Nurses' Association is encouraging all states to review their present Acts and come to some decision as to their adequacy in protecting the practice of nursing and nurses. Will you please come to the Annual Meeting in October prepared to discuss what action our association should take in regard to our present Nurse Practice Act and our Licensing Law? Every day more nurses complain about unfair practices which come to their attention. Now is the time to look into the matter carefully to see how and where corrections and improvements may be implemented.

At the Annual Meeting in Houlton this next October we also must come to some decision regarding our state Bulletin. The plan of increasing the membership dues \$1.00 to cover cost of publication was defeated at the last convention by a small number of dissenting votes. The bulletin has been financed during this year through voluntary contributions, a few "ads," and the amount of \$300 from the treasury. We need to give its future careful consideration, always bearing in mind the long hard hours of work already expended by its editors and the "RN" Committee to bring it to its present status. It's your bulletin and it is up to you to decide what its future status is to be. Please scrutinize this and the foregoing issues carefully and be prepared to help with the decision that must be made this fall: namely, how the bulletin is to be financed another year.

These are just two of our problems. Your support is vitally needed and earnestly solicited. The strength of your association, and its ability to broaden the scope of its activities depends on you. Will you help?

# Capsule Digest of the Chicago Convention

By JOSEPHINE C. PHILBRICK,

*Executive Secretary*

Whittling down a fat notebook of jottings to a capsule digest is no easy task. Many will dwell on the smooth-running machinery of the 39th biennial; the vast scope of planning that went into the groundwork; the generosity of the exhibitors; and the minutiae of detail which was seemingly handled as effortlessly for the record registration of 9,430 as for that of a few hundred at our smaller state conventions.

All of this was impressive, but even more—the maturity of this convention in comparison with that of Atlantic City. It was as though the previous biennial had served as a proving ground for the present conclave. This was especially evident in the House of Delegates where discussion of matters for vote was direct and to the point, showing that the delegates were well-versed in the business at hand and were eager to get on with it. This was not only gratifying, but made for an orderly, expeditious progression of affairs of state to a timely adjournment of the convention.

As this was the first convention at which the House of Delegates represented section strength, the roll call was equally commendable. There had been a question in the minds of many as to the ability of SNA's to send their full delegations, cognizant that it meant dipping to the bottom of the barrel to find means of financing them. At the final count, out of a possible 1172 delegates, 1134 were present. This in itself was indicative of the resourcefulness of the membership back home, and their interest and concern in having brought back to them "the fruit of the loom."

Considerable acclaim should be given to the Convention newspaper, without which we could not have been as well informed from first to last. Although the idea of a convention newspaper had its birthing at the Cleveland NLN convention the year before, this was the first ANA conclave to have the advantage of such superb reporting. The Public Relations Unit, which worked around the clock to make it possible for the convention-goers to have a full accounting of the vast network and ramifications of the overall program, deserve no end of praise.

Perhaps a certain amount of the quiet dignity of this convention could be attributed to the consciousness that this was the last one in which Mrs. Elizabeth Porter would be in the president's chair. In her opening address to the House of Delegates, she said, "What, you may ask, is the role of the individual nurse in these broad affairs of the Association? She has an exceedingly important role to play. The individual nurse concerned with bedside care makes her first contribution by giving the finest possible care to patients. Because of her very close association with patients, she is in a position to make a unique contribution to the development of healthy, well-balanced individuals, and of the building of an environment conducive to health. But she must do more. What she can do is to give the general public an idea of nursing as a strong social force stirs the imagination.

"Further, as she studies the policies of her professional organization, she will form her own ideas about these policies and make them known through her section at its various levels. As small tributaries feeding into the main streams make mighty rivers, so do individual nurses working intelligently and creatively at their appointed tasks give a distinctive character to our great profession."

What, then, briefly was the action taken by the House of Delegates?

## ANA PLATFORM

First of all, the organization platform, which is the warp and woof of any structure, was adopted as printed in the April, 1954 AJN. The platform is made up of eighteen planks, the three main provisions of which are:

1. Participate in the Provisions of Health Protection for the American People;
2. Aid nurses to become more effective and more secure members of their profession;
3. Promote better health care for the People of the World.

The use of collective bargaining as a technique in improving the working conditions of nurses came in for a healthy amount of debate.

## ANA BYLAWS AMENDED

Nine new standing committees were adopted, combining the duties and functions of twenty-two, and streamlining them to be more functional. Subcommittees to carry out special projects and programs may be activated within the structure of these nine standing committees. The chairman of the standing committee, together with the chairmen of the subcommittees, may constitute an executive committee, with power to act between meetings of the overall committee. (Art. IX, Sec. 2 & 4)

The clause in the bylaws which lists different membership requirements for men and women was deleted, on the grounds that since all nurses are licensed for general nursing and not for specialties, there should be no differentiation in the basic curriculum. (Art. III, Sec. 1)

The pronoun "she" was deleted in the editorial content of the bylaws.

The bylaws were amended to allow a 99% affirmative vote (in place of the previous unanimous) to insure the passage of a bill at a biennial convention. This will provide a medium for preventing the failure of an amendment to pass by a few people who are perennially on the "No" side—defeat of the majority by a small minority. (Art. 22, Sec. 2)

## TRANSFUSION FOR THE ECONOMIC SECURITY PROGRAM

In order to infuse new life into the eight-year old Economic Security Program, which seems to have reached a plateau, new approaches and methods for assisting SNA's in implementing their programs need to be explored and developed. A three-point proposal received the overwhelming approval of the House of Delegates:

1. SNA's urged to assume active leadership in the organization of local groups for the purpose of improving their employment conditions;
2. ANA Board of Directors be instructed to develop immediate plans for demonstration projects to give special assistance to SNA's in developing their economic security programs;
3. ANA Board of Directors further instructed to develop long-range plans for training personnel to work on ANA and SNA economic security programs.

## RESEARCH FOUNDATION FOR ANA

A proposal giving the ANA Board of Directors authorization to study and develop a research foundation which may accept tax-free gifts, the Board to serve as the trustees of such a trust fund, received unanimous approval. In explanation of this proposal, it was pointed out that nurses are unique in that up to now they are the only organization of their size to have financed exclusively their own research study; that an organization can reach maturity only through its research. In the last two years the ANA has launched upon an extensive program in the research field, but has been limited in the amount it could accomplish by reason of restricted funds.

## EQUAL RIGHTS AMENDMENT

## OPPOSED

Before the House of Delegates voted on the Equal Rights Amendment for Women, Janet Geister, ANA Board member, presented a long expose on the subject, in which she stated that important in the whole question is not only the risk involved in the proposed manner of achieving rights for women, but the need of special legislation to protect the rights of women. "The amendment at first sight was tempting," Miss Geister interposed. "It looked like a short cut to secure for women all the rights they have been achieving step by step, through action in state legislatures. A more critical look, however, brought to many an awareness of the great peril involved in attempting to achieve these rights through a Constitutional Amendment." She further explained that all the hard won gains in protective legislation for women would be jeopardized by the proposal. (For more detailed discussion, see April, 1954 AJN.)

## VIRGIN ISLANDS ACCEPTED AS 54th CONSTITUENT MEMBER

A group of sixty-five nurses in the Virgin Islands made formal application for membership in the ANA and asked to form a constituent unit. The House of Delegates voted to accept them with waiver, since some of the nurses have graduated from non-accredited schools of nursing. This move brings the member strength of the ANA to 48 states and 6 constituencies.

Space does not allow for a presentation of quotes from all the key speakers, but mention should be made of two outstanding ones at the Joint Program Meetings: Dr. Howard A. Rusk, Director of the Institute of Physical Medicine and Rehabilitation, New York University Bellevue Medical Center; and Milton J. Lesnik, attorney, Newark, N. J., and co-author, "Legal Aspects of Nursing," by Roberta Foote, R.N.

Dr. Rusk, who participated in a panel discussion on "The Nurse's Role in Rehabilitation," referred to that which happens between the bed and the job of a patient as "the third phase of medical care." The first phase is preventive care and the second, definitive medical and surgical care. He stressed the magnificent recuperative powers of the patient who is given the type of care he needs in recovering from an illness or adjusting to a disability. A nurse's role is primarily that of teacher in giving this care, he asserted.

Mr. Lesnik, who momentarily acquired both a doctorate and an R.N. during a bombardment of questions, was highly amused at and responsive to the eagerness which his audience manifested in legal aspects of nursing. He said the control of professions is vested in state government to protect the public. State governments appoint a group of experts in the profession to determine the qualifications for practice (i.e. the State Board of Registration for Nurses). He discussed the changing role of nursing as shown in the execution of nursing procedures and techniques that require the supervision and direction of physicians. Much medical technology is being done by and no doubt will continue to be delegated to nurses. The law cannot keep up with each new technique.

Some things do not change, however, and he pointed out that the nurse stands at the right hand of the physician even when he isn't there. Doctors and nurses have a special relationship to patients which is more important than the role of any other profession.

When queried about the scope of nurses and infringement upon the field of doctors, Mr. Lesnik replied that in most states a nurse may do anything for which she has a written order *if she understands the cause and effect of what she is doing*. However, he couldn't emphasize too strongly the vital need for mandatory legislation "for all nurse who hire."

## MAINE NURSES HAVE FULL DELEGATION

Maine's full delegation of nurses was seated in the House of Delegates at the opening roll call. In addition to our ten delegates, which we were allowed by virtue of our section strength, thirteen other Maine nurses registered during the convention. Of this number, eight were student nurses.

Now, let's move on to the other delegates and see what they have to say concerning their section meetings.

### Mildred Lenz Says

The American Nurses' Association, Educational Administrators, Consultants and Teachers Section has grown rapidly during the past year, and, as of December 3, 1953, boasts of 8,178 members. During the Biennial, 1,539 nurses registered for this section; a ratio of one member for every 5.5 national membership. The planned place for holding meetings proved to be too small and after the first two meetings we were moved to the Arena of the Coliseum. Our former national chairman stated, in effect, "... the fact that our attendance is far beyond the anticipated number justifies the existence of the section in addition to League organization."

The EACT Section held two business meetings and four program sessions.

The proposed amendments were accepted as printed on page 14 of the EACT reports booklet.

The proposed Statement of Functions of Educational Administrators, Associates, and Assistants, and of Teachers, as printed in the leaflet, "NEWS FROM EACT" issued in April 1954, was accepted.

One program meeting presented a socio-drama panel on "Getting It Straight," which related to the role of this section and that of the National League for Nursing, discussed by the faculty of a particular school. This meeting was so well attended that it was necessary to open an adjoining room where the loud speaker made it possible to hear but we could not see the action taking place.

PATRONIZE OUR ADVERTISERS

During two other program meetings we heard Dr. Gardner Murphy, Director of Research, The Menninger Foundation, Topeka, Kansas, speak on "Professional Progress Through Personal Growth"; and also heard Dr. Rollin B. Posey, Professor of Political Science, Northwestern University, Evanston, Illinois, discuss "College Professors Have Personal Problems Too." Both speakers presented scholarly material which was interesting, informative and thought-provoking.

The EACT Section also had occupational group sessions which met for one hour to discuss the Functions, Standards and Qualifications (FS&Q) for their respective occupations.

## Mildred Richards Says

To fly in the luxurious planes through even a heavily clouded sky, to attend a national meeting with nurses from all the states and constituents, to see the Oklahoma delegation in their "SOONER" sun-bonnets, and the three shining black faces from the Virgin Islands admitted to the ANA, to "come home" to an Alumnae breakfast and sit beside an ANA visitor in the beautifully draped rosebud dress of her native India, to have the privilege of voting as one of the 1,086 delegates in the ANA House of Delegates, is truly a thrilling, rewarding, inspiring, and memorable experience. It is well worth the exhaustion. Thanks very much!

Others will report on the maze of registration and the wonder of the brains capable of conceiving such an invaluable, superbly organized program. This report deals with the meetings of the Institutional Nursing Service Administrators Section.

When one thinks of a Chairman of a group of Directors and Assistant Directors of Nursing Service, supervisors, head nurses, and assistant head nurses, one thinks of a tall, austere, white-haired dynamo. This is entirely the wrong impression. Miss Evelyn Hamil, the first chairman of the INSA section, is newly elected to serve another two year term. She has her B.S. from Central State College, Edmond, Oklahoma; her M.N. from Yale University. Her present position is Chief Supervisory Nurse, Respiratory Center for

Poliomyelitis, Rancho Los Amigos, Hondo, California. She is young, about thirty-five; tall, thin, with dark brunette hair and deep, dark, unflinching eyes. She looks at you as an individual or out over the 1,500 assembled for meeting with such a benign, self-assured gaze that she inspires trust and confidence. Even when individuals attack her personally, her poise is unbroken. Her answer is calm, but her decision unchanged. It is good to know that the nursing profession has such young people in its midst and that such a person is guiding the embryonic INSA section.

It was also good to be a working part of Miss Hamil's team. As the week progressed, a picture of the INSA section on a state and national level developed. A questionnaire had been sent out to the Chairman of each state and territorial INSA section. Thirty-four of these questionnaires, including the one from Hawaii were returned, tabulated, and issued to each INSA member attending the Convention. Some states put Maine to shame with the work they have done on the economic security program, on the FS&Q Committee, and on the organization of district sections. Perhaps the best picture can be drawn of the state and national activities with a few highlights of the meetings.

Rule 4 on Membership of the INSA section as defined in the "Rules of Sections" states:

"Graduate registered professional nurses, members of the American Nurses' Association, holding any of the following positions in hospitals, sanatoria, or similar institutions for the care of the sick, now or at the time of their retirement, are eligible for membership in this section:

a. Directors of nursing service, assistant and associate directors of nursing service and those nurses whose major responsibility in nursing service is the assignment and supervision of other registered nurses and auxiliary personnel.

b. Hospital nursing service consultants."

Because of this broad definition of membership in INSA section, heated debate was stirred up by the question, "Who should belong in INSA?"



One grey-haired, sincere woman rose to ask, "Do I belong in INSA? I am a Coordinator of Nursing Activities and as such have no 'major responsibility in nursing service' by the 'assignment and supervision of other registered nurses and auxiliary personnel'. However, I work with supervisors, head nurses, and Directors of Nurses constantly. My interests lie in INSA sections? May I be counted as one of you?"

Another voice, that of a man from Florida, was heard, "As a head nurse, do I belong in INSA or in General Duty Section?" On this question, the section voted to send a statement to the General Duty Section that head nurses would be most welcome in INSA section, for their part as key persons in the administrative team was respectfully recognized. The head nurses themselves voted to leave the choice of section to the individual head nurse. She may choose either INSA or General Duty, as her need and interest dictates.

Still another person spoke, "Since, as a Director of Nursing, I have a dual function in the education of the student and the effective administration of the nursing service to the patient and have elected to be in EACT section, am I to be excluded from meetings of the INSA section? Am I not to be allowed to see the premiere of the film, 'Six Steps to Team Nursing' to be shown in your section meeting this afternoon?"

Since no true definition of membership is or has been made, since all sections are feeling their way in the new structure, and since INSA, above all other sections, is caught in the squeeze between EACT and GD, all INSA section meetings were left open to any interested persons, members of any section, or visitors from this country or other countries.

Another heated discussion followed the reading of a recommendation that the INSA section go on record as approving the bill which deals with the extension of social security to cover workers under state and national employment. Many of these people already have Retirement Plans. Some of the nurses felt it was unfair for them to vote on a subject which had not been discussed with their state membership. It almost looked as if the section would not commit itself, when, suddenly, a man from Florida with a twangy drawl announced:

"If we are to call ourselves administrators, we must be willing to make decisions. Let us not go on record as being indecisive." Miss Hamil then called for a vote and the section approved support of the extension of the Social Security Act.

Pennsylvania, California, and several other states were very disturbed because nurses were being discharged from their positions without apparent reason. One state reported that in one of its institutions three new directors of nurses had been hired in one year!!! There followed some discussion. Shirley Titus put up with this bickering as long as she could, and then rose to her full five foot two inch height and in her deep, well modulated Rooseveltian tones, said bluntly into the microphone: "I have been a Director of Nursing even though I am not one now. If these directors do not get up and do their own fighting with the sample contracts which ANA provides and with the Employment Standards which they themselves can set up under the ANA Economic Security Program; they should not expect us to do their fighting for them later."

The assembled members of the section and the visitors from other sections were stunned by the announcement of an O.R. representative that a Surgical Supply firm had called together a group of OR nurses for a meeting in New York in January and had laid the groundwork for the organization of OR nurses on a national level. The representative continued her announcement with a heartfelt plea that some intersectional conference groups be established within the fold of the mother professional organizations. "We do not want to work in a group apart from the ANA and the NLN and yet we do want to meet as a group of OR nurses." I was amazed that the Clinical Specialists who had done so much pleading for recognition of their own fields in the House of Delegates in Atlantic City and in Chicago, now raised no voice for Tuberculosis, Psychiatry, or Orthopedics. All were too stunned.

With very little further discussion, the section endorsed the formation of conference groups for nurses with clinical specialties within the INSA section on a national level, pending the approval of such action by the ANA Board of Directors. The section also voted to take part in intersectional conference groups of clinical specialties pending passage of such organization by the House of Delegates of the ANA and the Board of Directors of the ANA. Such groups received almost unanimous approval in the final meeting of the House of Delegates the next day.

One hundred fourteen supervisors from twenty-nine states met and voted to request the formation of a conference group for supervisors within INSA, pending the approval of the ANA board.

The INSA section went on record as opposing the Equal Rights Amendment to the Constitution of the United States because of the very good reasons outlined by Janet Geister in the American Journal of Nursing for April, 1954. All the hard-won gains in protective legislation for women would be placed in jeopardy by the amendment. The section voted to accept the Revised Rules with some changes made at the meeting. The functions of the Director of a School of Nursing, the Assistant Director of a School of Nursing, and a supervisor were accepted as submitted by the Committee on FS&Q of the section.

I came away from a gruelling week confident that nursing and nurses had their sights on worthy, attainable goals. However, on the return trip, I was forcibly reminded that nursing is but a small force in this world after all. The fog and rain was so dense that no planes were landing at LaGuardia. Planes from all over the world were being guided into Idlewild Airport as they landed wingtip to wingtip. The seagulls, circling until they too found a place to light, seemed to be saying, "You see, birds and man are but a small part of this universe. There is a higher power."

## Ellen Demers Says

The first meeting of the Public Health Section was called to order by the chairman, Mrs. Fannie Warnke, Monday, April 26. Three hundred nurses attended this first meeting, with every state represented.

Reports were read and accepted. The highlight of this meeting was the FS&Q report presented by Ruth Fruman. Miss Fruman pointed out the difficulty in defining the functions of rural and school nurses. Committees of these two nursing groups were organized and panel discussions were held to help define their functions. There was a good deal of lively discussion on the definitions of Public Health nurse and school nurse, but these were finally straightened out to the satisfaction of everybody.

The next meeting of the P.H. section was a round-table discussion on the "Effective Use of the ANA Professional Counseling and Placement Service." Participants were: Mrs. Bertha Byrne, R.N., Assistant Executive Secretary of the ANA PC&PS in Chicago; Mrs. Mildred Ellis, R.N., Executive Director of P.H.N.A., Indiana; school nurse, Mrs. Helen Watson, R.N., Department of Education, Hartford, Conn.; staff nurse, Patricia Pesch, R.N., Chicago. Points that were brought out were the importance of all nurses taking advantage of PC&PS in having their credentials compiled and on file, the need for interpretation of this service to nurses by and large, and the mechanics on preparation of biographies. The staff nurse on this panel told how this service had helped her and how she had used it as a guide in furthering her education.

A very interesting lecture was given by Florence Blake, R.N., Assistant Professor of Nursing Education, and Director of Advanced Pediatric Nursing at the University of Chicago, on understanding the preschool child. This was told in story form, bringing out the developmental stages.

The closing meeting of the public health section was held Thursday p. m. with the chairman, Mrs. Warnke, presiding. The school nurses presented their report to the group and their new officers were introduced. Unfinished business was attended to and the secretary's report was read, covering the 39th convention of the P.H. section. New officers were then introduced to the group. The new chairman, Mrs. Fannie Warnke, graciously accepted her office.

In closing my report as a delegate from P.H. section of the MSNA, I'd like to extend my thanks for a wonderful experience. I truly believe it should be a "must" at least once for every nurse. There were so many things gained that cannot be put down in words but will be long in my memories.

## Pauline Ann Roy Says

The theme of the American Nurses' Association 1954 Convention was "Calling American Nurses to Action." The convention certainly lived up to its theme, for there was action everywhere. With all the meetings and special programs planned, there wasn't a dull moment. Participating in the action of the House of Delegates was a wonderful experience, and one which I wish every general duty nurse could have. The question which is so often asked, "What does ANA do for me" would certainly be answered fully once and for all. Just listening to the reports of the standing and special committees makes one realize the broad scope of ANA activities. Highlighted were section reorganization, research studies, integration of minority groups, the scope of economic security, the vast interplay of legislation, the advantages to be had from PC&PS, and international relations.

One of the most thrilling moments of the convention was in the space of time before Mrs. Porter, the ANA president, began her address. One could have heard a pin drop as all assembled waited for the final address of their beloved president. Then she began, "The first challenge to nurses in this year of 1954 is that we understand so far as possible present world conditions. It is impossible to carry well our share of the responsibility for adequate service in the hospitals and homes, for joint action with allied professional and lay groups, for research projects, for 'exchange nurses' and Displaced Organization teams, unless we understand the conditions responsible for man's present ills and his impaired health."

The Advisory Forum meetings were a briefing in preparation for the House of Delegates sessions. Some of the items of special interest to General Duty chairmen were changes in the ANA platform, activities of PC&PS, and nursing in national defense. Busiest of all at the convention, it seemed, were the general duty nurses. Their meetings were many and topics of discussion varied. Of major interest probably were Economic Security and FS&Q.

The Economic Security Program, designed to help all nurses attain a standard of living and a measure of security in line with the vital professional service rendered and the educational preparation required, was adopted by the House of Delegates at the 1946 convention. Some of the features of this program: 40-hour week, \$10 minimum wage for private duty nurses working an eight-hour day, Social Security, insurance benefits, were discussed. Nurses from different states readily presented their own problems for group consideration. Nurses from states with no active Economic Security Program were urged to go back home and request such a program through their district and state representation in the House of Delegates at their annual convention. Where this program exists, the SNA provides the necessary personnel and resources to administer it. Each nurse may then designate the State association as her authorized representative in matters affecting her employment conditions. This would include signing contracts or agreements which govern salaries, hours of work, and other employment angles. The SNA assists nurses by presenting briefs substantiating requests for improved employment conditions and by supporting needed changes in legislation, applicable especially to nurses employed by state, county, and municipal governments, as well as institutional and the individual contractor. An example of this is the time and energy expended by the ANA Economic Security Unit in support of amendments to the Social Security Act. The purpose of the Reed Bill H.R. 7199 was to liberalize and improve the Old Age Survivor's Insurance System. Under the old laws, nurses occupying positions covered by retirement systems of state and local governments were barred from O.A.S.I. coverage. With the proposed changes, these government employees may be covered without impairment of their existing retirement systems.

The tentative outline of Functions of General Duty Nurses brought lively discussion when presented. These were prepared by the FS&Q Committee and were based primarily on seven legal functions, as listed by Mr. Milton Lesnik, attorney for

ANA. These functions are supported by authority of law and fall into the following categories:

- (1) Supervision.
- (2) Observation of symptoms and confined responsibility of diagnosis without prescription.
- (3) Charting and recording case history.
- (4) Supervision and direction of all auxiliary health workers.
- (5) Execution of nursing procedures and techniques.
- (6) Direction of preventive health care through educational and social agencies.
- (7) Execution of nursing procedures requiring the supervision of a licensed physician, such as administering anesthesia, intravenous injections, transfusions, and similar acts.

This tentative outline was accepted by the delegation of General Duty nurses.

Another topic of much interest was that of "Research in Nursing." The results of the four-year study on nursing functions to bring the current nurse supply more nearly to a level with increased public demand has revealed many interesting facts:

(1) The average general duty nurse spends 39.7-55.5% of her time in direct nursing care. The rest of her time is expended in keeping records, making out reports and requisitions, performing house-keeping duties, acting as a messenger, and other similar activities.

(2) In filling out questionnaires, SNA's reported as many as 400 separate activities performed by professional registered nurses. One report listed their nurses as scrubbing and polishing floors, tending the furnace, and putting out the flag.

(3) Overlapping of duties, with functions so vaguely defined that problems of adequate service for patients within hospitals were created, was a common finding.

(4) American nurses are unique in that they have invested over a quarter of a million dollars in the last four years for research on themselves. At this convention, the House of Delegates authorized the ANA Board of Directors to study and develop a foundation or trust fund which may accept tax-free gifts, to be used for socially acceptable projects in line with ANA policies. When this Foundation is established, research will play an even more vital part in the activities of our association.

## Laura Austin Says

The Private Duty Section of the M.S. N.A. was represented by Mrs. Edith Woodman and myself. First, I would like to thank the members of this section for making it possible for me to attend. It was certainly a most thrilling experience. One realizes after talking to members from other parts of the country that sectional problems in other states are much the same as those of private duty nurses in Maine. Approximately 400 private duty nurses attended the convention. Private Duty was represented by every state except Nevada, which does not have a P.D. Section.

We stayed at the Palmer House, the headquarters' hotel for the Private Duty meetings. Sunday evening, we went to a meeting of the Advisory Forum consisting of the ANA Executive Board of Private Duty section, plus all State chairmen or their alternates. I was extremely proud of our Central registry when it was pointed out that one registry in the middle west was \$3000 in debt. Monday morning, we started our regular meetings. It was gratifying to note that when the ballot was presented, there was no hesitation in finding officers to fill the chairs or members to work on the committees. I wished then that Maine could be that fortunate. On Thursday, I was honored, as were all the other state chairmen, with the presentation of an orchid.

In a discussion of group nursing, I was reminded that group nursing was intended to be for emergency use only, when additional P.D. nurses are not available. I decided that further investigation should be made to see what the national picture presented.

One of the most interesting sessions for me was that on Membership Promotion. Malcolm S. Knowles, Administrative Co-ordinator, Adult Leadership Magazine, presided at this clinic and pointed out that the organization could get more members by appealing to the unselfish side of the individual, by reversing the hardworn phrase of "What does the organization do for me?" to "What can I do for the organization?" The personal approach and personal letters are more effective than mass distribution of flyers and gatherings. Keeping the members busy by giving them specific jobs to do and following up on how effective they are in their jobs will do more than just "enlisting" numbers. However, he did point

out that "just busy work" is worse than nothing at all. A good chairman is one who can spread the work around and enlist the efforts of a great many. One state's membership committee has over a hundred nurses working on it and this committee has rolled up an outstanding score.

At another meeting, an interesting panel discussion was presented on the nursing "team." This included the Superintendent of Chicago Clinics and Director of Graduate Program in Hospital Administration, a doctor, a private duty nurse, a director of Plant Communications and Public Relations, a head nurse, general duty nurse, supervisor and a student nurse as participants, plus several members called from the floor. One of the problems discussed was "What to do about unpopular shifts!" One solution suggested was that of making the shift more attractive by offering more money. It was quite amusing, especially with such an enormous gathering of nurses in Chicago, when someone asked, "Who is taking care of the patients at this particular moment?" We were reminded that there are too many meetings, taking nurses away from their patients. The relationship between private and general duty nurses was discussed. It was recommended that joint meetings be held to discuss problems in common to both groups. All through the discussions, emphasis was placed on the Public Relations angle of bedside nursing.

At another meeting, the question arose as to the legality of a nurse doing venous punctures. Dr. Milton J. Lesnik, attorney for ANA, stated that under the present laws in most states a nurse may do anything for which she has a medical order, provided she understands the cause and effect of what she is doing. Since Private Duty nurses are their own contractors and are not protected by institutions, they should carry professional liability insurance.

*Compliments of*

**Geo. C. Frye Co.**

**Portland, Maine**

**EQUIPMENT AND SUPPLIES FOR**

**Physicians - Dentists**

**Hospitals and Nurses**

## Maine Nursing Homes Organize At State Session In Portland

The Maine Association of Nursing Homes has been organized and officers have been elected at a meeting held at the Eastland Hotel, Portland.

The organization aims to improve the standards of service and administration of nursing homes; to secure public and official recognition and approval of nursing homes; to create opportunities for the healthy growth and development of licensed nursing homes; to adopt and promote programs of education, legislation, better understanding and mutual cooperation of nursing homes throughout the State of Maine.

Mrs. Mae Murray, RN, of Camden is the first president of the Maine association. Other officers elected at the organizational meeting included: Kenneth Robinson of Gardiner, vice president; Mrs. Etta Small of Bangor, secretary; Mrs. Edna Royal of Ellsworth, assistant secretary; Mrs. Clare Bishop of Westbrook, treasurer; and Russell Leighton of Gardiner, assistant treasurer.

Named to the board of directors were: Mrs. Ottielie Murray, Auburn; Mrs. Mary Berry, Portland; E. M. Colson, Bangor; and Fred Farley, Richmond.

David Nichols of Camden was named legal advisor for the group, the corporation to be in Portland.

Attending the initial session was Celbern Edwards of Stoneham, Mass., president of the National Association of Nursing Homes, who announced that the Maine group had been accepted for national membership.

There were 47 charter members of the Maine association attending the organizational meeting. Plans were made for the next session, to be held at the Samoset Hotel, Rockland, on July 29. George Clements of Belfast will be program chairman for the meeting which will open at noon.

## By Action of the Executive Committee

The Executive Com. of the Maine State Nurses' Association met in the Alida Leese Classroom, Maine General Hospital, Portland on May 22, 1954. Miss Katherine Donley, president, presided. Thirteen of the sixteen committee members were present at the meeting.

Minutes of the Special Meeting of the Executive Com. (evening of February 12), the Advisory Council (February 13), and the regular meeting (February 13), all three held in True Library, Central Maine General Hospital, Lewiston were read and approved, with correction of roll call. Report of the treasurer was read and placed on file.

The president, Miss Donley, read her report on the Chicago Convention. District reports were given by their presidents.

Miss Mildred Richards reported on the two meetings of the Student Nurse Association, one in Lewiston on March 10 in the True Library of Central Maine General, the other a regular meeting at Mercy Hospital, Portland on May 21 (see under Student Nurse Activities for full report).

The report of the Executive Secretary was omitted for lack of time.

There were no standing or special committee reports.

### *By Action of the Committee:*

Approved a recommendation that action taken by the Executive Com. be printed in the State Association bulletin, in view of a desire expressed by many members to know what issues have come before the Committee and what action was taken.

Approved unanimously the appointment of Miss Louise Nawfel as chairman of the Committee on Constitution and Bylaws, to fill the vacancy created by the resignation of Mrs. Clare Donahue Libby.

Voted unanimously to give the State Student Nurse Association the sum of \$25 to help them get started as an organized group.

Elected by written ballot the ten nominees for ANA Standing and Special Committees from lists of names of consenting candidates submitted by each district. (Western was unable to submit a list at this time, but in view of a deadline of June 1st, it was voted to proceed with the ballot.

The following were elected:

Mrs. Laurence Arthur	Presque Isle
Mrs. Ina G. Bean	Portland
Miss Helen F. Dunn	Augusta
Miss Mildred I. Lenz	Lewiston
Mrs. Dorothy Murphy	Ashland
Miss Louise Nawfel	Bangor
Mrs. Josephine C. Philbrick	Bangor
Miss Mildred Richards	Bangor
Miss Jacqueline M. Springer	Bangor
Miss Alice R. Teague	Togus

Voted to allocate the sum of \$300 to the Governor's Committee toward underwriting the costs of publication and distribution of a popular edition of the Maine Study of Nursing Resources, in conjunction with a similar request to the Maine Medical Association, the Maine Osteopathic Association, the Maine Hospital Association, and the Maine League for Nursing. (An estimate on 5000 copies would be \$1,080, plus \$80 for mailing envelopes.) The comprehensive form has now been written in capsule form and a dummy compiled—facts, art sketches, survey recommendations—by staff of Simonds Payson Co., Portland. This edition can go into production as soon as the necessary funds to defray costs are at hand.

(N.B. The allocation of \$300 is to be inclusive of a previous commitment of \$100 set aside for the survey.)

Considered the recommendation of Sister Binette, Chairman of the MSNA Committee on Promotion of Membership, for a uniform membership application form. Sister Binette pointed out in her recommendation that each district now has its own form and all vary widely in size and format; that there would be a distinct advantage in uniformity from the standpoint of sending forms to new graduates and potential members from out-of-state. At the present time, when a would-be member writes in for an application form, it is necessary first to find out in which district her permanent residency is before we are able to comply. It was proposed that the Executive Secretary design a form that would meet with the approval of the members of the Committee on Membership Promotion and submit such a form to the presidents of the districts for presentation to their respective Boards at their next meetings; that should such a form meet with their approval, that a supply be printed and distributed from Headquarters' Office at a nominal cost to districts; and that districts continue to use present forms until they are exhausted.

Voted to, grant the petition of Mildred Richards, Chairman of the INSA Section, to organize an Eastern District INSA Section, this district having met the required number (35) of members.

Recommended that members of this Com. write to their Congressmen asking that Sec. 2 of the Taft-Hartley Law, which allows exemption for non-profit hospitals, be eliminated from the act; that Amendment S. 1906, which provides that the exemption be stricken from the act, be supported. It was further recommended that the members of this Board take back to their constituencies the request that members do likewise.

Recommended that state honorary membership (as incorporated in the MSNA by-laws) be explored.

Recommended that each member of the Com. bring to the next meeting the thoughts of the members re. section representation at the 1956 ANA House of Delegates; also, re. ways and means of financing said delegates. This recommendation was introduced because of the voiced dissatisfaction of some members with the way delegates to the 1954 Convention were chosen and the means of subsidizing the expenses of these delegates (the Committee voted at its meeting Feb. 13, 1954 to allow each section \$1.00 per member for 1954 overall budget, out of which expenses of delegates could be deducted according to the decision of the Executive Committees of those sections.)

Recommended that the MSNA Committee on Constitution and Bylaws amend the present bylaws, adhering to the Model Form as closely as possible, and have them ready to go out with the call for meeting (MSNA Convention, Houlton, October 7-8); that any suggestions or recommendations which the membership may have be submitted to the Chairman of this committee before the final draft is prepared. It was further recommended that, because of the unwieldy status of the 1951 revision and the two lots of amendments since the revision, that serious consideration be given to printing another edition of the MSNA Constitution and Bylaws following the 1954 Houlton Convention. (Funds in the amount of \$450 had been previously set aside in the MSNA treasury for this purpose.)

Approved changing the name of the Committee on Information and Publicity to Committee on Public Relations, to be in harmony with ANA.

Considered a recommendation that, inasmuch as section weaknesses continue to present themselves, necessitating clarification, interpretation, and direction, a section coordinator on a state level would be an invaluable adjunct. No action taken.

#### *Correspondence*

Reviewed correspondence re. a non-member needing medical aid. This case had come to the attention of the Nurses' Relief Fund Committee, but under the rules governing the fund was not eligible for aid from this source. Miss Foyer, Mrs. Bourgoïn, and Mrs. Woodman offered to look further into the case and see what could be done in another direction.

Reviewed a letter from a nurse asking for a job placement. Miss Irish will follow through on this one and see what can be done.

A letter from Mrs. Harold Dumont advising that she is willing to speak at the fall convention and will plan for a small exhibit of polio materials.

An invitation from Squaw Mountain Inn to hold our convention on Moosehead Lake.

A letter asking about Future Nurses' Clubs in Maine. (Referred to Mrs. Carolyn Perkins, Nurse Recruitment Officer for Western Area.)

A letter from American National Red Cross advising us that field representatives in nursing are needed for the Eastern Area, asking us to publicize this information (see letter in this bulletin.)

A letter from Portland Chamber of Commerce inviting us to hold our convention in this city again.

The next Executive Com. meeting will be held the evening before the fall convention—The Elm Room, Northland Hotel, Houlton, 7:30 P. M.

**WE RENT**  
HOSPITAL BEDS — WHEEL CHAIRS  
INVALID WALKERS

**FOR SICKROOM SUPPLIES  
CONTACT**

**Maine Surgical Supply Co.**

233 VAUGHAN STREET  
PORTLAND, MAINE

# This is What You Have Done in Membership This Year as Compared With What You Did in the Same Months Last Year

	1954				1953			
	Central		Eastern		Northern		Western	
	A		A		A		A	
January			17	1	18	1	67	15
February	146	10	74	4	17	1	138	11
March	19	4	99	4	5		105	11
April	31	7	30		5		85	3
May	36	2	52		7	1		6
	232	23	272	9	52	3	395	40

A—Associate

	1954		1953	
Active Members		951	Active Members	691
Associate Members		75	Associate Members	59
Total		1026	Total	750

## BY SECTION, IT LOOKS LIKE THIS!

	Active	Associate	Total
Private Duty	199	21	220
General Duty	321	26	347
Public Health	97	8	105
INSA	182	10	192
EACT	60	—	60
Industrial	17	—	17
Special Groups	75	10	85
	951	75	1026



## SECTION ACTIVITIES

## EACT — No Report

## INSA

489 State Street  
Bangor, Maine  
April 4, 1954

Dear INSA Member:

This meeting of the Executive Committee of the INSA Section of the MSNA was held April 2, 1954, with the following members present:

Mildred Richards, Chairman  
Nellie D. Norell  
Reta B. McInnis  
Josephine C. Philbrick

The agenda was discussed:

1. The budget was approved as written.
2. Miss Richards was approved as the delegate to the ANA Convention. (Thanks!)
3. Committees were set up on a district basis as follows:

a. Program—Eastern

Mrs. Nellie Norell—Chairman

Two other members to be chosen by her.

Mrs. Judith Whitaker, Section Coordinator at ANA Headquarters, was discussed as a possibility for the section program—Houlton, October meeting. This arrangement will have to be worked out with MSNA Board approval and with Mrs. Bourgois as Overall Program Chairman for the annual meeting.

b. Rules—Central

Miss Teague was approved as Chairman. (I will write her and see if she will serve.) The rules were discussed briefly. Mrs. Philbrick showed us a copy of new amendments to be proposed at the Chicago Convention. After this Convention, more work will have to be done on the Rules. (I will keep you informed.)

c. Functions, Standards, and Qualifications—Western

Miss Doane is willing to serve on this committee but does not wish to act as chairman. (Note! Mrs. Cyr, will you find a chairman?)

A questionnaire on the FS&Q of the Director and Assistant Director of Nursing Service which had been received by me direct from ANA

was discussed. This questionnaire will be a big help to this committee, as it will serve as a guide. I have forwarded my only copy to Mrs. Cyr with this letter. Mrs. Philbrick will attempt to obtain enough copies from ANA for each of the Board members and for the Committee. If these are forthcoming, I will forward them.

- d. Formation of an INSA Section in Eastern District was approved. We will proceed, using the Model Form as a guide in our organization.

Thanks for answering my letter so promptly.

Mildred Richards,  
Chairman

## Public Health

Two meetings of the Executive Committee of the Public Health Section have been held, both at the home of the secretary in Brunswick.

On December 18, 1953, Miss Eleanore Irish, Chairman, Hazel Conrad, 2nd Vice-Chairman, and Mrs. Esther L. Higgins, Secretary, convened for the purpose of appointing members to the various committees.

*Program Committee*

Chairman: Mrs. Clare Donahue Libby,  
Presque Isle (since resigned)  
Clye H. Ricker—Bangor  
Marea Lundberg—Portland

*Loan Fund*

Chairman: Mrs. Esther L. Higgins—  
Brunswick  
Mrs. Ada W. Ames—Rockland  
Georgina J. Patterson—Bangor

*Nominations*

Chairman: Eleanor Meserve—Machias,  
(since resigned)  
Agatha Kittrick—Caribou  
Marjorie J. Boucher—Brunswick

*Revision of Rules*

Chairman: Mrs. Esther Long—Rockland  
Mrs. Emma T. Creamer—Belfast  
Mrs. Louise D. Lambert—Houlton

*Functions, Standards, and Qualifications*

Chairman: Helen F. Dunn—Augusta  
Clarice B. Purcell—Portland  
Mrs. Velma Haley—Portland

A proposed budget was reviewed and accepted by the Executive Committee.

On March 22, 1954, the Executive Committee met again with Miss Irish, Hazel M. Conrad, and Esther L. Higgins present.

A letter of resignation from Clare Donahue Libby was read and accepted with regret. It was voted that the 2nd Vice-Chairman, Hazel Conrad, serve in her place as both the 1st Vice-Chairman and Chairman of Program Committee. It was also voted to ask Agatha Kittrick to serve as Chairman of the Nominating Committee, in place of Eleanor Meserve, who was unable to continue in office; and that Florence Poirier be asked to serve as the third member of this committee.

Miss Irish stated that she would be unable to attend the ANA Convention as the P. H. delegate. The committee voted to ask Ellen DeMers of Madawaska to serve in the chairman's place.

A letter from the State Board of Registration for Nurses was read, asking the Executive Committee to appoint a member from the section to serve on the Credential Committee. It was proposed that this appointment be referred to the membership at the October MSNA Convention.

Respectfully submitted,

Esther L. Higgins,  
Secretary

## General Duty

The officers of the General Duty Section of the Maine State Nurses' Association, met at St. Mary's Nurses' Home June 8, 1954. Officers present were: Chairman, Pauline Roy, 1st Vice-Chairman, Jacqueline Springer, 2nd Vice-Chairman, Dorothy Hamm. The meeting was called to order at 1:30 p. m. by the chairman.

The report of the annual meeting of the General Duty Section at the Bangor House, Bangor on October 9, 1953 was read and accepted.

A general discussion was held regarding various problems confronting the General Duty Section.

The ballot for 1955 was presented by Mrs. Hamm and approved as follows:  
Chairman:

Helen A. Moody—E.M.G.H., Bangor

Claire I. Cross—11 Bramhall St., Portland

Vice-Chairman:

Charlotte C. Miles—E.M.G.H., Bangor

Patricia R. Geary—U. S. Veterans Administration Center, Togus

Second Vice-Chairman:

Ida Atwood—E.M.G.H., Bangor

Aurelie Bourassa—U. S. Veterans Administration Center, Togus

Secretary:

Patricia Randall—Riverside Drive, Augusta

Barbara E. Clay—E.M.G.H., Bangor

Members-at-Large:

Pauline M. Eye and Margaret Joyce—U. S. Veterans Administration Center, Togus

Two more members-at-large will be placed on the ballot, one from E.M.G.H. and one from St. Mary's.

The Revision of the Section bylaws was read and accepted as prepared by the committee. Those serving on the Revisions Committee were: Jacqueline Springer, Chairman, Marilyn Collins, Alfreda Roy, Marion Sullivan, and Gladys Van Zant.

The program for the 1954 annual meeting in Houlton was planned, pending arrangements. It was decided to present a panel discussion on the subject, "Opportunities in Maine for the General Duty Nurse." The secretary was instructed to contact the following persons to request their participation on the panel: Nellie C. Norell, E.M.G.H., Bangor, Edith Doane, Maine Medical Center, Portland, and Eleanor B. Wade, U. S. Veterans Administration Center, Togus. The secretary was instructed to prepare tokens for presentation to the panel participants at the annual meeting.

The budget for the year 1954 was prepared, approved, and retained by the chairman.

At the conclusion of business, the meeting was adjourned at 5:00 p. m.

Respectfully submitted,

Patricia Randall,  
Secretary

## Private Duty

The Private Duty Section was represented at the ANA Convention by Mrs. Edith Woodman and Laura Austin.

The Revisions of Rules Committee has been working on the rules but they are not completed as yet.

Our P. D. secretary, Mrs. Ruth Barker, has moved from Bangor to Long Sands Road, York Village, Maine.

Mrs. Ruby Kelley is the new P. D. Chairman of Northern District.

Lost from our section through death, Mrs. Mary Milliken of West Baldwin.

Respectfully submitted,

Laura M. Austin,  
Chairman

# Polio Prevention — Progress Report

by Hart E. Van Riper, M. D.

Medical Director

The National Foundation for Infantile Paralysis

The questions parents are asking most frequently this year are: "Exactly what is polio prevention?—and how will it affect my child?"

This concern is, of course, natural and right.

But we who answer the questions must temper our replies with equal amounts of hope and caution. For this summer, we do have immense reason to hope—but we must realize that we do not know if we have a final weapon against polio.

To provide parents with specific answers to their questions, let us examine a few facts.

The Polio Prevention program sponsored by the National Foundation for Infantile Paralysis centers around two completely different medical developments.

The first of these—a trial vaccine against polio developed under a March of Dimes grant by Dr. Jonas E. Salk—has been called the outstanding scientific news of 1953.

This trial polio vaccine is being used this spring in mass field studies involving up to a million children. Throughout the summer and fall, we shall keep careful health records of children who were vaccinated as compared with children who were not. If the vaccinated children have comparatively few cases of polio—perhaps even no cases at all in some areas—as compared with non-vaccinated children, we shall know that the vaccine does help prevent paralytic polio under natural conditions of exposure.

So we have every reason to hope that these tests will be the wonderful climax to 16 years of work and faith. But here's where caution must be stressed.

We cannot expect a drastic reduction in the polio case rate for the summer of 1954, even if the trial vaccine is entirely successful, since it will have been given to relatively few children out of the total number who are most susceptible to polio.

We won't have any scientific report on results until 1955. Evaluations of the vaccine field tests will be made by an independent group of experts headed by Dr. Thomas Francis, one of this country's leading authorities on epidemics.

There will be no vaccine against polio generally available until tests have been thoroughly evaluated and the results determined. If the results show effectiveness,

then—and only then—will an anti-polio vaccine be produced for large-scale use. How near that day is, no one can tell.

In the meantime, this summer we again have helped stockpile supplies of gamma globulin (GG), the second phase of the Polio Prevention program.

GG is *not* a vaccine or a drug. It is a clear amber fluid containing antibodies from human blood, which, if given at the right time and in the right amount, furnishes passive, temporary protection against paralytic polio. GG is regarded as a stop-gap, emergency measure, used to fill the breach until a tested vaccine is available.

About three times the amount of this substance will be available this year as there was last year. The National Foundation plans to spend \$19,000,000 in March of Dimes funds to provide GG. Its distribution will again be in the hands of the Office of Defense Mobilization which will allocate it to state health officers.

Generally speaking, GG should be available more quickly to smaller "polio trouble spots" this summer—groups larger than a single family—such as schools, camps and housing developments.

It will not be allocated for "family contacts" this year since the experience of 1953 bore out our convictions that once a case is diagnosed, the other members of the family have already been exposed. When this happens, it is too late for GG to do any good. GG is, after all, a preventive, not a curative.

Through the sixteen years of the National Foundation's existence, the goal of the American people has been a preventive for polio. From all indications, we may be approaching that goal. And the victory, when it comes, will belong not only to the scientists but to everybody who worked steadfastly to support the men in the scientific laboratories.

Much needed weapons in the fight against polio have been the ingenuity and the adaptability of volunteers—who are experienced in group work. We were grateful for their inventiveness last summer during the GG mass inoculations in 23 communities, where volunteers were organized overnight to see to it that all eligible children could receive GG. We are grateful

again this spring, as volunteers are helping with the intricate procedures connected with the field trials.

We shall continue to need help in the hospital polio wards for an indefinite period of time. No one really knows how many polio epidemics we must endure and there will be thousands for whom a preventive vaccine will come too late.

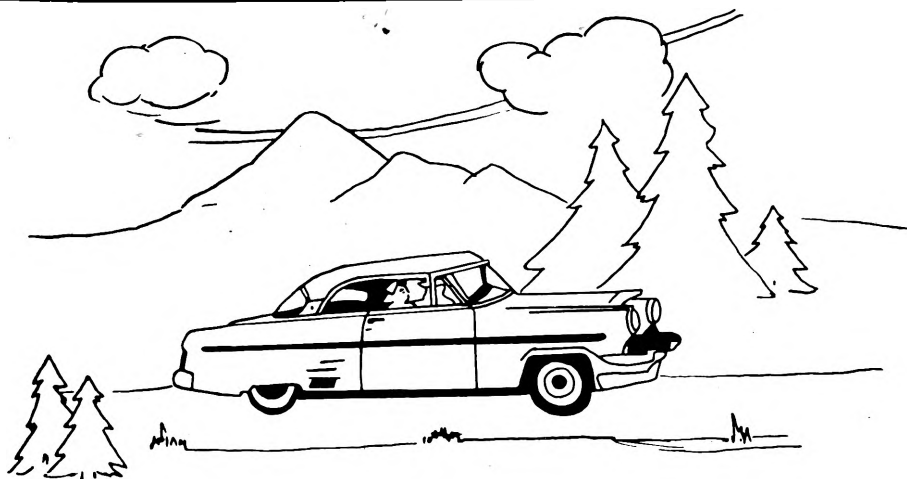
We shall continue to need help in public education. This is perhaps the most important home front campaign, as the battle against polio seems to draw nearer to a close. We can help combat unreasoning fears. We can make sure all parents know four main polio precautions: Avoid crowds, practice cleanliness, don't get overtired or chilled, and inform your doctor promptly if illness occurs during the polio season. (These should be observed even if your child receives GG or the trial vaccine.)

Most important, we need help in the task of tempering hopes that are too high, while at the same time substantiating the wonderful possibilities of the near future.

This year, with victory over polio a brighter hope, we have an obligation to those who were so unfortunate as to be stricken in the closing hours of battle. The losses immediately before a victory always seem more intensely tragic. The measure of our efforts at rehabilitation must equal the measure of our concentration on prevention.

We must face this new challenge—rehabilitation of the polio handicapped—with the same dedication and the willingness to work that have brought us this far.

(Submitted by Mrs. Harold B. Dumont, State Advisor, Women's Activities, N.F.I.P., Skowhegan, Me.)



*Clear the Way!*

*for the*

**MSNA 1954 CONVENTION**

*to be held at*

**HOULTON, MAINE • OCTOBER 7-8**

*Headquarters at*

**THE NORTHLAND**

*Registration opens Wednesday, October 6*

**Section Meetings, October 8 • House of Delegates, October 7-8**

## MSNA 1954 Convention



MRS. DOROTHY NAYER OF ANA  
Convention Speaker

The Convention Planning Committee is already laying the groundwork for the 1954 rendezvous at The Northland in Houlton, October 7-8.

Those on the committee, all in Northern District, are: Co-Chairmen, Mrs. Thelma Ross, Mrs. Louise Lambert; Mrs. Mary Conlogue, Mrs. Barbara J. Rogers, Eleanor D. Shaw, Mrs. Geraldine M. Hainer, Mrs. R. Arlene Evans, Mrs. Honor Purvis, Helen E. Fitzgerald, Betty G. Mason, Stella Bolstridge, Sister Rita.

Mrs. Dorothy Bourgojn, 1st Vice-President of MSNA, is chairman of program. We already know that we are to have Mrs. Dorothy Nayer from ANA as the speaker at the Joint Section Meeting and the section programs.

Mrs. Nayer is Assistant Executive Secretary, Educational Administrator, Consultants, and Teachers Section. She is a native of Altoona, Pa.; a graduate of Mt. Sinai School of Nursing, and has her B.S. and M.A. from Teachers College, Columbia University. Her past experience embraces that of Instructing-Supervisor, University of Michigan Hospital School of Nursing; Instructor in Nursing, College of Physicians and Surgeons, Columbia; Instructor, Division of Nursing Education, Columbia; Assistant to the Director, National Nursing Accrediting Service.

## Social Security Hearings

The printed report of hearings before the House Committee on Ways and Means on H.R. 7199, a bill to amend the Social Security Act, is now available and will furnish valuable information for SNA legislative committees.

The proposed amendments in the bill include provisions to extend coverage under the Old Age and Survivors Insurance program, to increase benefits, preserve the insurance rights of disabled individuals, and increase the amount of earnings permitted without loss of benefits.

### NURSES CONCERNED

Nurses covered by state and local retirement systems would be immediately concerned with the provision which would make social security coverage available through Federal-State agreements. The bill states:

"The protection afforded employees in positions covered under a retirement system on the date an agreement under this section is made applicable to service performed in such positions, or receiving periodic benefits under such retirement system at such time, will not be impaired as a result of making the agreement so applicable or as a result of legislative enactment in anticipation thereof."

This policy protects the rights and interests of members of existing retirement systems.

The Economic Security Unit of ANA recommends that SNA legislative committees order the report on the hearings from the Superintendent of Documents, Washington, D. C. Public employees will need to be well informed in order to support plans that will give adequate retirement programs.

(From June ANA Guide Lines)

## SPOT NEWS

### From the Districts

#### WESTERN

The Board of Directors met March 10 and April 14 at Mercy Hospital for regular monthly meetings, with a majority of the members present. The Credential Committee reported 395 active and 40 associate members, making a total of 435 to date. Plans were outlined for the District meeting at the Alida Leese Nurses' Home of the Maine Medical Center on May 26.

Attending the Chicago Convention from Western were: Mrs. Edith L. Woodman, President, and Laura Austin, Chairman of MSNA Private Duty Section. Both were delegates for the Private Duty Section. Among the student nurses attending were Kathleen Flanagan of Mercy Hospital, President of the Maine Student Nurse Association and a delegate from Maine; Elsie Doyle and Barbara Jordan, both from Mercy Hospital; and Joan Kittredge from Maine Medical Center. All were registered at the Palmer House.

Eleanor Griffith, P.H.N., Department of Health and Welfare, attended the Workshop Conference on "Public Health Aspects of Rheumatic Fever and Pediatric Cardiology" at New Haven, Conn. during the week of March 15-23.

Public Health Section of Western District met on April 29 at the Boys' Club to discuss plans for future meetings. A picnic was scheduled for June 19 at Velma Haley's cottage in Ogunquit.

Major Mary E. O'Donnell, USAF (Air Force Nurse Corps) of Portland, Maine has recently been assigned to Clovis Air Force Base, New Mexico after successfully completing a course in Nursing Administration at Fort Sam Houston, Texas. Major O'Donnell entered the military service in 1942 and has served in many capacities both here and abroad. Her overseas tours of duty include the Caribbean Theater and Alaska. She was designated a Flight Nurse at the School of Aviation Medicine, Gunter Air Force Base, Alabama in 1951. Major O'Donnell is a graduate of Queen's Hospital, Portland, Maine.

#### *Hi-lights from Maine Medical Center*

Phyllis Tryon moves to Boston this month to work at Boston Lying-In while she attends college.

Joan Craig, Assistant Science Instructor, has recently recovered from surgery and is leaving soon to attend Intercession and Summer Session at Boston University.

Virginia Burnham, Orthopedic Supervisor, and Rose Graham, Night Supervisor, are patients at this hospital.

Attending the three-day National League for Nursing Curriculum Conference in Boston, May 19-21, were Edith Doane, Director of the School of Nursing, and Frances V. O'Brien, Educational Director.

Mrs. Evangeline Lee, Obstetrical Supervisor, Grace Emerson, and Mrs. Catherine Robinson, Surgical and Medical Supervisors, will attend the Institute on Supervision in Waterville, May 25, sponsored by the New England Hospital Assembly.

On March 31, an Institute on Premature Care was held at this hospital, and was well attended.

#### *Hi-lights from Mercy Hospital*

Christine Conley, Ellen Lucas, and Lillian Plourde are all to be married in June.

Mrs. Katherine Amabile, Mrs. Beulah Chase, and Mrs. Mary Whitney have resigned.

John Milan has been a patient recently but is now back on duty.

Mary Jo Devine, now in the Navy Nurse Corps, is ill at present.

Agnes O'Donnell is a captain in the Air Corps and stationed in Wyoming.

Dorothy Chaisson is a lieutenant in the Air Corps and stationed in Oklahoma.

Jane Roy is working in Washington, D. C.

Norma McGlenn is now Mrs. O'Reilly and Joanne McCarthy is Mrs. Philip Dennis.

Mary Dobrowsky has announced her engagement.

#### EASTERN

The spring meeting of the Eastern District was held on April 21 at the Bangor State Hospital, with the Membership Committee serving as hostesses of the day. Professor Vincent A. Hartgen, University of Maine gave a discussion and demonstration of water color painting to an audience of around eighty.

Recognition of the large amount of work the Membership Committee has done in boosting the enrollment of ANA members was given by the president in the presentation of a corsage to each member of the committee. Alice Whalen received special commendation for having 100% membership on her ward at the Eastern Maine General Hospital.

Special guests on this occasion were the senior nurses of the Eastern Maine General. New members were recognized by badges and corsages. Mrs. Mary Wellman, Chairman of the Membership Committee, welcomed all new members and asked each one to take a bow as her name was read.

A social hour terminated the occasion, during which the Membership Committee mingled with the nurses, introducing new members to old.

Terming nursing "one of the humane professions," Dr. Herbert G. Espey, Commissioner of Education, called upon citizens to give both moral and financial support to all groups within the humane field at the graduation of forty-two students from the Eastern Maine General Hospital School of Nursing on June 9. Dr. Espey said that nursing has suffered neglect from the ordinary citizens along with the other humane fields of endeavor. The speaker stated that people are so interested today in war, politics, and automobiles that they fail to give much thought to religion, health, and education. He said that there is an acute shortage of nurses, teachers, and people in the other humane fields today where they are so desperately needed.

To add a few more ducats to the District fund, Eastern held a rummage sale on May 21. One of the nurses who arrived in Portland for the MSNA Executive Board meeting told of seeing through the window Alice Whalen decked in a hospital johnny holding out her arms dripping with jewelry. Alice has a lot more to add about the occasion. Although the weather was not conducive to being abroad, a pack of rummage hounds waited outside the door for the opening. When the gun went off, they barged in like a towering wave. There were not enough salesgirls around to keep an eagle eye on everybody and the thieving was appalling. One well-dressed woman tried to get away with a sparkler and, when apprehended as she was about to leave the place, said that she was taking it elsewhere to have it appraised. The gallant souls who battled the mob were for the most part old hands at rummage sales: Gertrude Hammond (now back from her winter in California), May Finnigan, Frances Benoit, "Nicky" Nickerson, Mildred Sanger, Nellie Norell, Polly Warren, Hazel Nash, and Louise Runnells.

This all reminds us of a recent article in the California Bulletin, entitled, "Any Rags—Any Bones?" An experience similar to the one recounted above was told, only in California, "the very first customer who walked in had her coat sold out from under

her." This happened to be "a dashing little red Chesterfield size 9 and new." The moral of the story was, "Never lay anything down at a rummage sale."

It was at another rummage sale of Eastern's that "Nicky" nearly lost her ironing board. She had gone forth with it that morning, thinking to do some much needed pressing of certain articles before the crowd came. In an unguarded moment, the ironing board was sold right out from under her and she only reclaimed it by virtue of the fact that the customer couldn't tote a parcel of that size down Exchange Street and had gone for her husband who was circling with the car.

The tidy sum of \$172.00 was realized at this sale, and Alice added, "Don't think we didn't have our laughs as well as our headaches. Anyone who could sell two left-handed gloves must be good."

"Jacky" Springer has been promoted to the faculty of EMGH and will assume her new duties as Nursing Arts instructor in August. Marilyn Collins will take "Jacky's" place in the Orthopedic Department.

Recent visitors to EMGH were Anne Mitton and "Ma" Perley, both here for the banquet of the graduating class. "Ma" Perley had a dual purpose in returning at this time—she is now the proud grandmother of a baby boy.

Mary Gerrish Smith has resigned from the faculty of EMGH and will be leaving the state with her husband, who has just recently completed his degree work at the University of Maine. A farewell tea was given Mrs. Smith on June 3 in the Quincy House. Members of the faculty presented her with a purse of money. Mrs. Smith was also presented a silver salver with sugar and creamer by the graduating class.

Have you some opinions you wish expressed to the membership? Write a "letter to the editor." All letters must be signed.



**NURSES PLAN MEMBERSHIP DRIVE**—A campaign for new members was organized Wednesday afternoon at a meeting of the membership committee of the Central District of the Maine State Nurses' Association at St. Mary's General Hospital.

Committee members, seated left to right, are Miss Elizabeth Foyer, District president, Mrs. Dorothy Bourgoïn, Mrs. Margaret Shaban, Mrs. Irene Cottle of Togus, Mrs. Juliette Cloutier, Miss Georgette Leduc, Mrs. Dorothy Rylander, Mrs. Corinne Lepage, Mrs. Margaret M. Toomey, Rev. Sister Binette, committee chairman, Mrs. Alice Robichaud of Rumford, Miss Mary Cassis and Miss Pauline Roy.

#### CENTRAL

The spring meeting of the Central District, Maine State Nurses' Association, was held May 5, 1954, at Augusta State Hospital, Augusta, Maine. At 10 A. M. the Executive Committee met to transact the business which had accumulated since the Annual Meeting.

In planning this meeting, the Program Committee was unaware that we were having our meeting during Mental Health Week, but the coincidence proved quite fitting. An Army film, "Shades of Gray," depicting various degrees of mental illness, was shown prior to the luncheon.

As the day was dreary and moist, we felt gratified that about seventy-five members and guests attended the luncheon and the following lecture. Dr. Allan I. Saunders of

the Augusta State Hospital staff, spoke briefly, but in a most interesting and informative manner, on "Preventative Psychology and Some of the New Aspects of Treating Mental Illness." His talk was received with interest and enthusiasm by the group.

During luncheon we were pleased to welcome Mrs. Lucy Hawkins, who has spent the winter in Maryland.

At this time Sister Binette, Chairman of the State and District Membership Committees, spoke briefly about the District program of her committee. With the assistance of the committee members chances were sold on a Bates tablecloth and napkins. This netted a gratifying sum for committee use. It was won by a student from St. Mary's General Hospital.





**NURSES PLAN MEMBERSHIP DRIVE**—A campaign for new members was organized Wednesday afternoon at a meeting of the membership committee of the Central District of the Maine State Nurses' Association at St. Mary's General Hospital.

Committee members, seated left to right, are Miss Elizabeth Foyer, District president, Mrs. Dorothy Bourgoïn, Mrs. Margaret Shaban, Mrs. Irene Cottle of Togus, Mrs. Juliette Cloutier, Miss Georgette Leduc, Mrs. Dorothy Rylander, Mrs. Corinne Lepage, Mrs. Margaret M. Toomey, Rev. Sister Binette, committee chairman, Mrs. Alice Robichaud of Rumford, Miss Mary Cassis and Miss Pauline Roy.

#### CENTRAL

The spring meeting of the Central District, Maine State Nurses' Association, was held May 5, 1954, at Augusta State Hospital, Augusta, Maine. At 10 A. M. the Executive Committee met to transact the business which had accumulated since the Annual Meeting.

In planning this meeting, the Program Committee was unaware that we were having our meeting during Mental Health Week, but the coincidence proved quite fitting. An Army film, "Shades of Gray," depicting various degrees of mental illness, was shown prior to the luncheon.

As the day was dreary and moist, we felt gratified that about seventy-five members and guests attended the luncheon and the following lecture. Dr. Allan I. Saunders of

the Augusta State Hospital staff, spoke briefly, but in a most interesting and informative manner, on "Preventative Psychology and Some of the New Aspects of Treating Mental Illness." His talk was received with interest and enthusiasm by the group.

During luncheon we were pleased to welcome Mrs. Lucy Hawkins, who has spent the winter in Maryland.

At this time Sister Binette, Chairman of the State and District Membership Committees, spoke briefly about the District program of her committee. With the assistance of the committee members chances were sold on a Bates tablecloth and napkins. This netted a gratifying sum for committee use. It was won by a student from St. Mary's General Hospital.

The District president, Elizabeth Foyer, presided at the business session which was held in the Nurses' Residence. Routine business was transacted. Our membership list shows 226 active members, 21 associate members, and many anticipated new members. The recommendation for an amendment in our Constitution and By-laws to change the fiscal year to November is to be presented to the proper committee. By vote of the group, it was decided to continue to invite all senior students to our meetings. Vacancies on district committees were filled. Nominations were made for candidates for the state slate. Members were appointed to select the delegates to the Annual MSNA Meeting. Miss Virginia Welsh is chairman of this committee. Forthcoming meetings were discussed, including the fall District meeting, which is scheduled for September 8, 1954, time and program to be announced.

We felt quite pleased and fortunate to have our Executive Secretary, Mrs. Josephine C. Philbrick, present. She spoke to many points of discussion and brought us several new outlooks from the ANA Convention.

Miss Patricia Randall, our representative to the ANA Convention, spoke briefly on the meetings of the House of Delegates. She presented many changes which we are sure will become an integral part of our future programming.

Following adjournment, tea was served by the nurses of Augusta State Hospital, from a prettily appointed table, decorated with carnations grown in the hospital greenhouse. Sister Binette and Miss Foyer poured. Several members stayed for a tour of the institution.

J. Eileen Conroy, 58 D St., South Portland, Katherine E. Lee, 183 Stevens Ave., Portland, and Mary I. Castonguay, 46 Avon St., Portland, have signed up for the Army Nurse Corps.

Stationed in Germany at the Army's Hospital in Heidelberg are 2nd Lt. Jeanette B. Theriault of Westbrook and 2nd Lt. Marilyn Worden of Bath, who trained together at the Mercy Hospital.

Margaret J. Giberson, 14½ Newland Ave., Augusta, has been assigned to active duty with the Air Force Nurse Corps.

On May 5, at the Central Maine General Hospital, Lewiston, a panel on poliomyelitis for all interested physicians, nurses, therapists and lay persons was held under the auspices of the Committee on Graduate Education and the Bingham Associates. About one hundred attended this panel discussion.

Speakers included Dr. Lewis Weinstein, Haynes Memorial Hospital, Dr. G. G. Deaver, New York University-Bellevue Medical Center Institute of Physical Medicine and Rehabilitation; Mary Kerr, Chief Polio Nursing Service, Children's Medical Center; Dr. Bertrand C. Kriete, Department of Physiology, Harvard School of Public Health. Dr. Russell Morissette, Chairman, Committee on Graduate Education, chaired the panel.

An institute for nurses, focussing on the teaching of families and patients proper procedures concerning their illnesses was held at Thayer Hospital, Waterville, April 14-15.

Planning for the institute was under the direction of Mrs. Beatrice Allen, educational director of the Boston Dispensary. Others attending were Frances Ginsberg, operating room consultant for the Bingham Associates; Geraldine Hiller, educational direction of the Maine Public Health nurses; Phyllis Caswell, nurse consultant for the Bingham Associates; Priscilla Andrews, P.H. major at Boston University; and from the Thayer staff, Pearl Fisher, Administrator; Mrs. Amy Allen, Oakland; Mrs. Cynthia Clukey, Waterville; Mrs. Barbara Walton, Oakland; and Mrs. Abis Boardman, Waterville.

Another institute was that of Premature Care, held on April 28 at the Central Maine General Hospital.

Approximately one hundred and fifteen members of the "CMG family" (past and present) were in attendance at the Martindale Country Club on May 26 to bid Eleanor Melledy farewell. Miss Melledy has resigned as Director of the School of Nursing at Central Maine General, effective as of June 1. Gifts of an overnight bag, wardrobe bag, and travel clock were presented to her by the alumnae. A buffet lunch was served.

## For Nurses who are writing

Supplement to Editing the Nurses' Bulletin tells:

How to organize notes and write a news story.

Tips on finding and writing features.

Dos and don'ts of headline writing.

How to make pictures tell a story—through selection and cropping.

Available from ANA, 2 Park Avenue, New York, at \$1.00 a copy.

## NORTHERN

The Northern District held its quarterly meeting on May 6 at the Madigan Memorial Hospital in Houlton, with Dr. Harold Rhinelander, New England Medical Center, Boston as the guest speaker. Dr. Rhinelander outlined the preparation of the physician who spends eight to ten years in acquiring his academic and medical education. He followed this with discussion of some of the recent advances in surgery, stressing especially work being done in tissue grafting. Other features of his talk were new advances in eye, cardiac, and bone surgery, as well as that of ductless glands.

At this meeting, the Convention Planning Committee was formed, and delegates with their alternates, to the annual convention, were elected. Vacancies on committees were filled, and names of nominees for ANA committees were submitted. Following the afternoon program the Private Duty Section met with Mrs. Ruby Kelley, who was elected chairman of this section.

A social hour was then enjoyed by the group.

Mrs. Dorothy Murphy, Ashland, is now Director of Nursing at the Presque Isle General Hospital.

Jean Laskey is on the staff at the Presque Isle Air Force Base Hospital.

Mrs. Ruby Kelley has recently returned from a visit with friends in Virginia.

## V-Day Starts in Bangor Area

There was no lack of nurses volunteering their services to assist in the administration of vaccine in the local schools of Bangor when V-Day came around. Mrs. Mary Gerrish Smith, chairman of the committee to line up the volunteer nurses, and currently a member of the Penobscot County NFIP Committee, had her teams ready to function long before the day swung into full circle. The first of 557 second grade children of Bangor and surrounding towns went to clinics on May 3 for their initial shots in the polio vaccine trials. Nurses assisting with this program were Irene Shannon, Kathleen Mott, Helen Parker, Barbara Roach, Louise Nawfel, and Giovanna Martini, all from the faculty of EMGH. Others who assisted were Bertha Mosher, Ida Beaulieu, Mrs. Boutelle Savage, Arleile Banks, Betty Higgins, Pauline Nickerson, and Mrs. Bernice Bolster.

## HELP KOREA TRAINS THE AMERICAN-KOREAN FOUNDATION

345 East 46th Street  
New York 17, New York

May 28, 1954

Message: To the Nurses of America  
From: Howard A. Rusk, M.D.  
Subject: The Nurses of Korea

You have already done so much and I know from talking to you that you are already full of plans to do more—for the nurses of Korea and their people.

Because of my long association with nurses, I have not been surprised at the help and encouragement that you have already given, though I shall never cease to be profoundly moved by the warm response from nurses when there is a call for help.

For this very reason the American-Korean Foundation has set up a special nursing division in connection with its national campaign and the **HELP KOREA TRAINS**.

The Nursing Division has worked out from the suggestions of nurses the ways you can continue to help Korea—and its nurses in particular—through the American-Korean Foundation. You will find literature, giving all the details, enclosed.

Thank you all for the great work you are doing toward making this a better world for all of us.

Signed: Howard A. Rusk

What can you do?

The Korean nurses need uniforms and aprons. (Cloth is scarce in Korea.)

They need watches.

They are hungry for books and circulars pertaining to nurses and nursing.

They have asked for technical books on all medical matters, to help them keep up with progress in medicine.

They welcome bobby pins, combs, compacts, toiletries,—all manner of little feminine notions.

They do not have anywhere nearly enough thermometers, tote bags—whatever you carry in your knitting bag.

Write to: Help Korea Train Nursing Division, American Korean Foundation Campaign Headquarters, 270 Park Avenue, New York 17, New York—information on how to pack, how to address, where to send.



## Partial Analysis of Recent C. D. Questionnaire

The 1953-54 questionnaire which was sent to all nurses registered in Maine between October 1 and March 13 inclusive was prepared and circulated under the direction of Mrs. Margaret Y. Hodgkins, R.N., the former Civil Defense Asst. State Nurse Deputy Director No. 3, Nursing Section. All information secured by this questionnaire is being recorded by the secretarial staff of the Office of Maine Civil Defense and Public Safety, Augusta. Three complete files will be set up: one for the state office, one for the Asst. State Nurse Deputy Director No. 3, and individual county files for each County Nurse Deputy Director No. 3.

### TABULATION

Total number of questionnaires sent out .....	5550
Number of questionnaires returned (up to March 13, 1954) .....	2557
Number of questionnaires not returned .....	2993
Number of nurses available for emergency or disaster duty .....	1401
Number not available for emergency or disaster duty .....	366
Number not available because of residence out of state .....	624

Note: Since above tabulation was made 166 more questionnaires have been returned, and the final figures will be adjusted accordingly.

Table III A, Question 11—Can we count on you in case of war disaster, epidemic, or any type of natural disaster calling for complete mobilization of nursing power?

Number available for full time .....	153
Number available for part time .....	720
Number available in local community .....	1204
Number available in local county .....	214
Number available for service elsewhere .....	55
	<hr/> 2346

Note: Most nurses expressed a desire to serve in their local communities, but few will be able to leave the state owing to the fact that many have full or part time positions, and several have small children.

Table IV A, Question 12—Are you signed with your local Civil Defense Medical Services? What is your assignment?

Number signifying that they had signed .....	132
Number signifying that they had not signed .....	807
Number having assignments .....	173
Number having no assignments .....	441
Number not answering .....	1116

Note: From reports from local and county C. D. nurse deputies it has been ascertained that few nursing assignments have been made because of the fact that in many cases the medical deputies have not drawn up their medical disaster plans under which such nursing assignments should be made.

Table VI, Question 13—Could you be ready to leave your state?

a. If it were not attacked, to report to target cities?

	Yes	No	Ans.
b. Number available 8 hours after notification .....	86	889	792
Number available 24 hours after notification .....	77	832	858
Number available later than 24 after .....	236	870	661

Table VIII, Question 16—Will you accept regular nursing work outside your community?

a. Number available for nursing outside own community .....	95
b. Number not available for nursing outside own community .....	1111
c. Number not answering .....	561
	<hr/> 1767

Table X, Question 18—Are you an enrolled Red Cross Nurse?

a. Number specifying <i>yes</i> .....	354
b. Number specifying <i>no</i> .....	410
c. Number not answering .....	948
	<hr/> 1767

Table XI, Question 19—Will you do nursing work if provision is made for the care of your children on supervised nursery schools?

a. Number specifying <i>yes</i> .....	409
b. Number specifying <i>no</i> .....	410
c. Number not answering .....	948
	<hr/> 1767

Table XII, Question 20—a. As a professional nurse have you been taught to perform venipunctures? b. Have you had practical experience in performing venipunctures?

a. Number specifying <i>yes</i> .....	715
Number specifying <i>no</i> .....	961
Number not answering.....	91
	<hr/> 1767
b. Number specifying <i>yes</i> .....	724
Number specifying <i>no</i> .....	935
Number not answering.....	88
	<hr/> 1767

(Editor's note: From this partial analysis a few facts become very evident. The Civil Defense program in Maine, from the nursing standpoint, is still very definitely in "low gear" toiling up the hill. The reason for low gear at this point is in no way a result of the efforts of our former Civil Defense State Nursing Deputy Director, Mrs. Margaret Y. Hodgkins—she has worked long and hard in handling a difficult problem. Red tape, general apathy, and a lack of cooperation in various fields has hampered her efforts. Big programs, involving people in many walks of life, are initially slow in getting into high gear, and Mrs. Hodgkins deserves a great deal of credit for her efforts and for a job well done.)

## Press Release

Returning to the United States this month is Air Force Nurse 1st Lieutenant Marie Bernier of 17 Ullman Street, Springvale, Maine. Lt. Bernier has been on duty in the Air Force Hospitals in Yakota, Japan and Clark Air Force Base, Philippines. She is a graduate of the Mother Cabrini Memorial Hospital, Chicago, Ill. and entered the United States Air Force in 1951. Her new stateside assignment is at McChord Air Force Base, Washington.

The following nurses from Maine were assigned to extended active duty with the Air Force Nurse Corps during the month of March: Laura C. Clarke, Gloria J. Moulton, Barbara J. Welch. During May—Annie M. Frost.

## Maine State Student Nurse Association

Date: March 10, 1954

Place: True Library, Central Maine General Hospital, Lewiston, Maine

Time: 1:30 P. M.

Attendance, representation, and capacity  
Graduates:

Eleanor M. Melledy, Central Maine General Hospital—President MLN,  
Chairman Coordinating Council

Gladys N. Marston, Maine Medical Center—Board, MLN

Mildred Richards, Eastern Maine General Hospital—Board, MSNA

Pauline E. Roy, St. Mary's General Hospital—Board, MSNA

Mrs. Carol L. Dolloff, St. Mary's General Hospital—Faculty Advisor

Ruth J. Kohl, Central Maine General Hospital—Faculty Advisor

Students:

Kathleen V. Flanagan, Mercy Hospital—President, MSSNA

Juliette L. Salvas, St. Mary's General Hospital—1st Vice-President

Marion Smith, Eastern Maine General Hospital—2nd Vice-President

Jean L. Hosfelt, Central Maine General Hospital—Treasurer

Mary H. Bearor, Central Maine General Hospital—Board of Directors

Jean-Dawn Jensen, Eastern Maine General Hospital—Board of Directors

Purpose: Discussion and reactivation of the Maine State Student Nurse Association.

The meeting was called to order by Eleanor Melledy.

The business discussed was:

1. The student officers and board of directors were unanimously in favor of continuing the Maine State Student Nurse Association but all made recommendations that the students be informed of the Association and be more active participants in its program.
2. The model state student nurse association bylaws as set up and approved by the National Student Nurse Association were read by Ruth J. Kohl.

3. The following officers had been elected at the annual meeting of the organization in October, 1953. For clarification, their names were read.

President: Kathleen V. Flanagan, Mercy Hospital

1st Vice-President: Juliette L. Salvias, St. Mary's

2nd Vice-President: Marion Smith, Eastern Maine General Hospital

Corresponding Secretary: Catherine Seaman, Maine Medical Center

Treasurer: Jean L. Hosfelt, Central Maine General Hospital

Auditor: Gail Colburn, Eastern Maine General Hospital

Directors: Jean-Dawn Jensen, Eastern Maine General Hospital

Carmelita Clukey, Eastern Maine General Hospital

Donna Breandle, Maine Medical Center

Carmen Thibedeau, Mercy Hospital

Mary H. Bearor, Central Maine General Hospital

4. The following committees were appointed:

a. Committee on Nominations—Eastern District

Chairman, Carmelita F. Andrews;  
Jane Quimby, Dorothy A. Tingley,  
Norma D. Cunningham, Gayle Tufts

This committee is to have the biographies of candidates for all offices ready for approval by the Board of Directors of the Maine State Student Nurse Association *three* months before the annual meeting in October. Following this approval, the list of *consenting* candidates must go to each member school one month before the annual meeting.

b. Committee on Constitution and By-laws—Western District

Chairman, Louise Woodbury,  
Maine Medical Center

Elizabeth Brawn

Joan Pinette, Maine Medical Center

Joyce Frates, Maine Medical Center

Doris Cronan

c. Committee on Program and Arrangements—Central District

Chairman, Juliette L. Salvias, St. Mary's Hospital

Glenna L. Wight, Central Maine General Hospital

Margaret Jodrey, Central Maine General Hospital

Maxine Ouellette, St. Mary's Hospital

Janine Babin, St. Mary's Hospital

d. Committee on Finance—State-wide

Chairman, Jean L. Hosfelt, State Treasurer, Central Maine General Hospital

Eleanor M. Mynahan, St. Mary's Hospital

Claire Fraser, Mercy Hospital

Lois Haley, Eastern Maine General Hospital

5. Frances Y. O'Brien was elected as the other member of the Coordinating Council to serve on the Board of the Student Nurse Association. Miss O'Brien was elected to fulfill the requirements that she be in the same geographical area as the state student president.

Miss Melledy then retired and turned the meeting over to Kathleen V. Flanagan, President, Maine State Student Nurse Association.

The business discussed was:

1. Appointment of a Recording Secretary, Beverly E. Dodge, Mercy Hospital
2. Regular meeting to be held in conjunction with the annual meeting of the MLN:

Date—May 21, 1954

Place—Lafayette Hotel, Portland, Me.

Recommendations for a program:

Each school to bring the plans for action in her own school.

Purposes of the Association to be discussed.

Students attending the Convention in Chicago to give a panel discussion on their experiences.

3. Delegate to Chicago

Kathleen V. Flanagan, President

Alternate—Juliette L. Salvias, 1st Vice-President

4. Recommendations to raise dues to \$20.00 for each school.

5. Model State Student Nurse Association Bylaws approved by the Board.

3. The following officers had been elected at the annual meeting of the organization in October, 1953. For clarification, their names were read.

President: Kathleen V. Flanagan, Mercy Hospital

1st Vice-President: Juliette L. Salvat, St. Mary's

2nd Vice-President: Marion Smith, Eastern Maine General Hospital

Corresponding Secretary: Catherine Seaman, Maine Medical Center

Treasurer: Jean L. Hosfelt, Central Maine General Hospital

Auditor: Gail Colburn, Eastern Maine General Hospital

Directors: Jean-Dawn Jensen, Eastern Maine General Hospital

Carmelita Clukey, Eastern Maine General Hospital

Donna Breandle, Maine Medical Center

Carmen Thibedeau, Mercy Hospital

Mary H. Bearor, Central Maine General Hospital

4. The following committees were appointed:

- a. Committee on Nominations—Eastern District

Chairman, Carmelita F. Andrews;  
Jane Quimby, Dorothy A. Tingley,  
Norma D. Cunningham, Gayle Tufts

This committee is to have the biographies of candidates for all offices ready for approval by the Board of Directors of the Maine State Student Nurse Association *three* months before the annual meeting in October. Following this approval, the list of *consenting* candidates must go to each member school one month before the annual meeting.

- b. Committee on Constitution and By-laws—Western District

Chairman, Louise Woodbury,  
Maine Medical Center

Elizabeth Brawn

Joan Pinette, Maine Medical Center

Joyce Frates, Maine Medical Center

Doris Cronan

- c. Committee on Program and Arrangements—Central District

Chairman, Juliette L. Salvat, St. Mary's Hospital

Glenna L. Wight, Central Maine General Hospital

Margaret Jodrey, Central Maine General Hospital

Maxine Ouellette, St. Mary's Hospital

Janine Babin, St. Mary's Hospital

- d. Committee on Finance—State-wide

Chairman, Jean L. Hosfelt, State Treasurer, Central Maine General Hospital

Eleanor M. Mynahan, St. Mary's Hospital

Claire Fraser, Mercy Hospital

Lois Haley, Eastern Maine General Hospital

5. Frances Y. O'Brien was elected as the other member of the Coordinating Council to serve on the Board of the Student Nurse Association. Miss O'Brien was elected to fulfill the requirements that she be in the same geographical area as the state student president.

Miss Melledy then retired and turned the meeting over to Kathleen V. Flanagan, President, Maine State Student Nurse Association.

The business discussed was:

1. Appointment of a Recording Secretary, Beverly E. Dodge, Mercy Hospital
2. Regular meeting to be held in conjunction with the annual meeting of the MLN:

Date—May 21, 1954

Place—Lafayette Hotel, Portland, Me.

Recommendations for a program:

Each school to bring the plans for action in her own school.

Purposes of the Association to be discussed.

Students attending the Convention in Chicago to give a panel discussion on their experiences.

3. Delegate to Chicago

Kathleen V. Flanagan, President

Alternate—Juliette L. Salvat, 1st Vice-President

4. Recommendations to raise dues to \$20.00 for each school.

5. Model State Student Nurse Association Bylaws approved by the Board.

6. Rotation of publication of the state student nurse magazine to be as follows:

Mercy Hospital—April, 1954—the name to be decided by the editors.

Central Maine General Hospital—August, 1954.

Maine Medical Center—December, 1954.

Eastern Maine General Hospital—April, 1955.

St. Mary's General Hospital—August, 1955.

7. Pauline E. Roy was elected as an ex-officio member of the student board since she had served as a past acting president of the Maine State Student Nurse Association.

The meeting adjourned at 4:00 P. M. A social hour with students of the Central Maine General Hospital serving as hostesses followed. This hour proved refreshing, enjoyable, and profitable. Ideas were exchanged for money-making projects. The cake walk, conducted by the students of St. Mary's Hospital, earned \$168.00 for them. The Eastern Maine General Hospital reported their dance with a profit of \$50.00. Other projects as food sales, raffles at the time of capping, talent shows, chances on bonds, were discussed. Each school is hoping to send at least one representative to Chicago. St. Mary's and Mercy will have two.

\* \* \* \*

May 21, 1954                      Portland, Maine  
Mercy Hospital Auditorium

The meeting was called to order at 2:15 p.m. by the President, Kathleen Flanagan. Delegates were appointed from the five schools to vote on the amended bylaws. The Secretary's and Treasurer's reports were read and approved. The following reports were submitted:

1. Nominations—none until fall.
2. Activities—Met on March 10 and planned the program for the meeting May 21. It was agreed that the representative to the Chicago Convention would moderate a panel on the activities of the convention.

3. Revisions and Bylaws sent to the students.

The following business was transacted.

1. The Junior Auxiliary was dissolved and an independent student organization was formed, MNSA, under the sponsorship of MLN and MSNA.

2. The bylaws were read by Miss Woodbury.

- a. To Article VIII, Section 5 was added to read: the President, Vice-President and Corresponding Secretary be voted from one district, and third Vice-President and Treasurer from the third district. Officers would rotate each year from Eastern to Western to Central Districts.

- b. The organization is governed by just the bylaws now as they are amended easier and by fewer votes than the Constitution.

- c. It was proposed by Juliette Salvas to delete Sec. 6 of Art. 8 because it was believed to be unfair to the schools who send more than one delegate to the elections.

- d. It was proposed by Miss Ouellette that dues be increased from 15¢ to 25¢ per capita. Miss Doyle proposed the dues be paid not later than February 15 to allow time to send in the National dues by March 15.

All other Articles were accepted as read.

3. It was proposed that the Secretary and Treasurer have new books for their records.

Respectfully submitted,

Catherine Seaman,

Secretary.

**WANTED**  
NEWS OF YOU,  
YOU AND YOU!

## DISTRICT NEWS

*When your District News is not included it is either because no news was sent in by your reporter or because it was not received in time. Every District Reporter needs the help of her membership in learning of news which should be included. Help to keep her posted. Let other Districts know what is going on in nursing in your area.*



# Research and Treatment of Cancer

## Its Implication in Nursing

By BARBARA E. ROACH, R.N.,

*Nursing Arts Instructor, Eastern Maine  
General Hospital School of Nursing,  
Bangor, Maine*

When I was offered a scholarship for a six weeks course in oncological nursing, sponsored jointly by New York University and Memorial Center for Cancer and Allied Diseases, there was no hesitation on my part in accepting the offer.

This scholarship is made available by the Maine Cancer Society, and consists of five hundred dollars to cover tuition and living expenses.

There were two other graduate nurses from Maine who took advantage of the scholarship. They were Mrs. Teresa McFail, Rumford Community Hospital, and Miss Esther Tozier, Madigan Memorial Hospital, Houlton.

We arrived in New York on March 1, and went directly to our hotel, where Mrs. Edith Wolfe, educational director at Memorial Hospital, had arranged for us to stay. There we met eight other nurses who were also taking the course. The following states were represented: New Hampshire, Connecticut, New York, and South Dakota.

I think our first glance at Memorial Center rather awed us all. It is located at 444 East 68th Street and covers an entire city block. These buildings consist of two hospitals, Memorial and James Ewing of New York City, totaling 580 beds.

James Ewing Hospital opened in the fall of 1950 and great strides have been made in expanding the clinical services and in developing an active program of definite surgical treatment for many patients; also an expanded program for research and the care and treatment of patients with advanced cancer.

Next, there is the Tower Out-patient Building. This six story structure houses the out-patient activities of Memorial Center. The floors which provide for the care and treatment of clinic patients of Memorial and James Ewing Hospitals are equipped with the most modern facilities for treatment and diagnosis. In addition,

every effort has been expanded to make the area attractive, pleasant and comfortable for the patients. With the additional facilities of the Tower Building, the staff of Memorial Center can continue to render specialized care to an increasing number of clinic patients.

As the Hospital and the Tower Building are a joint unit, the total patient care is carried on in these two structures. It is in the out-patient department that the ward patient is first seen, and many of the diagnostic and pre-treatment studies necessary for his care are performed here. Furthermore, on discharge from the Hospital, the ward patient is returned to the out-patient department where adequate facilities are available for his follow up care and treatment. This close inter-relationship of the two activities permits substantial reduction in the length of the hospital stay and consequently in the expense to both patient and hospital. It also results in more rapid turnover of hospital beds, thereby making it possible to provide specialized care to a greater number of cancer patients.

The other buildings making up Memorial Center are: the McCann Pavilion for Children, the first unit of its kind; the Strang Prevention Clinic, for cancer detection and prevention in apparently well persons, where in the past ten years over 125,000 examinations have been made of apparently well men and women. One per cent were found to have cancer; another ten per cent showed conditions which might lead to cancer if not corrected. Strang Prevention Clinic, largest of its kind, has served as a model for other detection centers, now numbering over 200. Lastly, there is the modern research facilities, the Sloan-Kettering Institute, with the Physiology Laboratory and the Kress Foundation Betatron Unit. The Physiology Laboratory, a research unit designed particularly for the study of problems in cancer surgery and radiation therapy, will house a twenty-four million electron volt betatron, as well as additional laboratories, modern operating rooms for animal surgery, and new areas for housing a part of the large animal colony necessary to many of the research functions.

In a single year, over 9,000 patients enter Memorial and James Ewing Hospitals for treatment; 112,000 out-patient visits are made to the clinics; 7,000 major operations are performed; 40,000 X-ray treatments are given; 15,000 pints of blood are administered; and 313,000 laboratory determinations are made.

From this intensive experience comes better treatment. New operations have been developed for cancers of the mouth, throat, breast, lung, uterus, stomach and prostate. Some of these are already yielding higher rates of cure. I don't think that anyone could ever leave Memorial without being greatly impressed by the radical surgery performed in this center. For instance, there is the Commando operation performed by the surgeons on Head and Neck service. This operation involves a resection of the mandible, floor of the mouth, tongue, and a radical neck dissection which includes the removal of the lymph nodes and lymphatic vessels from the lateral and anterior aspects of the neck, removal of the sternomastoid and omohyoid muscles, the internal jugular vein, and the submaxillary salivary gland. After the patient has fully recovered from the surgery, he goes to the dental clinic at Memorial, and there a dental prosthesis is made for him.

Over 8,000 chemicals have been tested for ability to restrain cancer in animals. New agents have been found which restrain temporarily the growth of certain cancers in man. Some of these, TEPA, TEM (related to nitrogen mustard), ACTH and cortisone, are in general use; others are still under study.

A new steroid, RS-711 (DHT) has been tested in some forty patients with widespread breast cancer. It has now been sent to several other groups for clinical trial. The evidence indicates that this compound effects temporary regressions of soft part deposits of breast cancer in substantially more women than testosterone.

Viruses have been discovered which can be trained to destroy completely certain cancers in animals; on trial in man, partial destruction of a few otherwise untreatable cancers has been achieved. New ways have been devised to study and compare normal and cancer cells, their requirements, their constituents and their structures.

Under the heading of wholly new discoveries, in contrast to the extension of old ones, six groups of chemotherapeutically active compounds are now at hand in the Sloan-Kettering Institute. These were unknown a year ago. All can effect substantial restraint of one or more forms of cancer in experimental animals. Of the six, four are presently going into trial in man. Furthermore, extensive programs of synthesis have been instituted in the hope of finding related compounds of possibly greater effectiveness. There is no telling yet whether any of these will be useful in man at all, or if useful, whether they will be more valuable than the compounds already available.

At Memorial Hospital an excellent program for rehabilitation has been established. Classes are given to the women who have had radical mastectomies. They are told what arm exercises they must do, why they must do them, and how often. These arm exercises are demonstrated to the patients, and they in turn redemonstrate. Each patient is given a pamphlet containing diagrams and explanations of the exercises, and she is told what type of work she can do when she returns home.

The patient with the colostomy is taught how to do his own colostomy irrigation soon after his post operative recovery, and by the time he is discharged it is simply a daily routine procedure, not something to fear and dread.

The patients who have had laryngectomies and those who have had an extremity amputated are visited by well qualified persons who have learned to speak and walk proficiently. These people visit the patients, talk to them, demonstrate their skills and explain to the patient how they once had the same fears and doubts. They also explain that they are back with their families, working at their former jobs, and life is much the same as it was before. Needless to say, this gives the patient a tremendous morale booster.

The first four weeks of our course were very well planned for us by Mrs. Wolfe and Prof. Ruth Matheney, New York University. Each morning we were assigned to a different department, where, without exception, we were welcomed cordially by the doctors and highly skilled nurses who were very willing to explain the newest treatments and procedures to us.

The last two weeks of our course were devoted to field experience in any department which particularly interested us.

I am grateful for having had the opportunity to attend this course at Memorial Center. It has not only provided me with an opportunity to obtain six credits towards a Master's degree, but enabled me to acquire knowledge which I feel will benefit not only myself, but my students, my associates and the hospital itself.

PATRONIZE OUR ADVERTISERS

## "Shepherd of the Blind"

Something else to think about in the line of human relations is a story that appeared in The New York Times sometime ago. Some of you may have read it, but, for those who didn't it bears repeating.

It seems that living in the famous old St. George Hotel on Brooklyn Heights is a thin, brisk man of 60, a retired doctor, who has been blind for eight years as the result of an accident in the laboratory. This doctor has always been an "unquenchable theatre fan" and has worked out a scheme to share his love for the theatre with other people who also have been deprived of their sight.

Once a month, a "dedicated little band of playgoers" are shepherded by this doctor down the aisle of a theatre to their seats. This audience is hand picked, as well as the plays which they may attend. The doctor first attends a performance himself to ascertain if it is something that can be enjoyed by the group.

"I make sure there isn't too much pantomime and that the dialogue doesn't leave too much to the imagination," he explained. "The show gets the seal of approval if there are sufficient dialogue links, enough to enable a blind man to understand what's going on. Good acting, of course, helps a lot."

This little group of playgoers call themselves the "K-Twelve," in deference to the benevolent founder of the organization, the little doctor. When asked what started him on this unique quest, he explained that when he was stricken so suddenly, being a bachelor with no living relatives, he had "no shoulder on which to weep." His first move was to join an organization for the blind to learn how to get around. It was while working with this group that he decided that instead of withdrawing from the world he would dedicate himself to helping the blind live more fully in it.

"The trouble is," he went on, "There are too many blind people afraid to make contact with those who can see, and either confine themselves to their own four walls or mingle exclusively with other blind people. That's what we're trying to prevent."

The theatre approach did not just happen. Following his own bent, he attended performances and tried to work out a program which would have value and compensation for his fellow cohorts. His next move was to interview a theatre manager

to see if his plan could be put into practice. He found the manager not only cooperative but enthusiastic about the idea, and from this beginning other managers have caught fire and helped promote his plan.

"Our sole aim is to have fun," he explained. The dozen play-goers are assembled on the evening designated for them and dine at a midtown restaurant. Two sighted guides accompany them. These guides, before the performance and during intermission, enlighten the group about settings, costumes, and any important pantomime movements of the cast. Whispering or low talking during the performance is forbidden.

Playgoing "not only allows these people essential mingling with the sighted, but also introduces them into a realm of sparkle," said the doctor. "Becoming a part of this realm offers a blind person security and helps further his drive to enlarge his associations with those who can see."

Our hats are off to this little doctor and his great humanitarian spirit. It has made us feel more kindly just to read about him. We would like to know him personally and to inject some of his warmth and human kindness into our own personal relations.

---

## To Members of MSNA

As this issue of the Maine R. N. goes to press, you have a new acting editor—your very able Executive Secretary Mrs. Josephine C. Philbrick.

May I take this opportunity to express to all MSNA members my appreciation for their tolerance, cooperation, and encouragement during my term as editor. My grateful thanks go particularly to those who have worked so hard and faithfully these past three years in helping publish the "RN."

And now, with every sincere wish for a better and better "RN" as each comes along, I take my leave.

Aubigne C. Smith, R.N.

## Red Cross Needs Field Reps

As you know the American Red Cross has long been active in a nursing program. Through its present nursing activities the Red Cross assists chapters with the technical and professional phases of five Nursing Services programs including home nursing; disaster nursing; Blood Program nursing, as related to the recruitment of volunteer registered nurses; volunteer nurses' aide instruction; and nurse enrollment.

At this time we have an urgent need for three nursing field representatives in the Eastern Area. This is a teaching and consultant position. It involves the technical aspects of the Nursing Services program of instruction and periodic supervision of all nursing programs and instructors. Contacts are made with chapter committees, community organizations, public health and social agencies, military and governmental personnel, professional nursing groups and physicians for the purpose of effectively promoting and interpreting the nursing program. Advice and guidance are given to chapter nursing committees and supervision is exercised over instructors of nursing courses in chapters.

You will be interested to know that administratively the Eastern Area comprises sixteen states including the eastern states from Kentucky and Virginia through the New England states and west through Indiana. Nursing field representatives are assigned to an entire state or a portion of a state. They also serve on disaster assignments when it may be necessary to be away from home for several months.

The professional requirements for the position of nursing field representative are: graduation from an accredited school of nursing with a B. S. degree; registration as a professional nurse in at least one state; some supervisory experience.

The American Red Cross offers a modern program of personnel administration and benefits to its staff members which includes: classified positions; salary administration plan which provides for yearly increases; retirement plan; free life insurance coverage after one year of employment; opportunity to join Group Hospitalization; liberal annual leave and sick leave; coverage by Social Security; and opportunity for personal counselling through Personnel Service. The minimum of the salary range for a nursing field representative is \$325 plus maintenance while in the field. A nursing field repre-

sentative is required to operate and own a car for which seven and one-half cents per mile is paid by the Red Cross.

We would greatly appreciate your making our job opportunities known to qualified nurses who may be interested in this type of position. All inquiries should be addressed to Earle H. Herbert, Director, Personnel Service, American Red Cross, Eastern Area Headquarters, 615 North St. Asaph Street, Alexandria, Virginia.

## Registered Nurses to Earn Degrees Under Army Plan

A limited number of civilian registered nurses desiring to earn a bachelor's or master's degree in any of the nursing fields may do so under Army auspices if they can complete the required studies within a year, the Department of the Army has announced.

The plan is to commission 250 selected applicants as second lieutenants in the Nurse Corps of the Army Reserve. They will receive the pay and allowances of that rank, amounting to \$338.58 per month. They will also be given allowances with which to purchase uniforms.

Each selected candidate will be matriculated as a full time student in any of the 144 colleges and universities which grant degrees in nursing, and must complete the degree requirements within a year. In exchange, each nurse will be required to serve in the Army Nurse Corps for three years, including the time spent in earning her degree.

In addition to being a registered nurse, each applicant must be a female citizen of the United States within the ages of 21 and 31, unmarried, have no dependent under age 18, physically qualified, and possess high moral and personal qualifications.

Upon completing their degree requirements these nurses will be assigned to Army medical installations in the United States or overseas to complete the three-year tour of duty.

Colonel Ruby F. Bryant, chief of the Army Nurse Corps, in commenting on the plan, stated that it was a golden opportunity for 250 registered nurses not only to further their education, but also to render patriotic service.

## Backing for Nurses Week

Our Congressmen in Washington need a little prodding. The House Joint Resolution proclaiming National Nurses' Week, the first week in October, was introduced by the Hon. Frances Payne Bolton, January 25 and referred to the House Judiciary Committee. As yet that committee has not acted on it.

Some SNA's and DNA's have written already urging action. More letters are needed. Write to your Representative or to Chauncey W. Reed, chairman of the House Judiciary Committee, House Office Building, Washington, D. C.

Immediate action on the resolution is needed to plan activities in October.

(from ANA Guide Lines)

Your Congressmen:

Representatives:

Robert Hale  
Clifford G. McIntire  
Charles Nelson

Senators:

Margaret Chase Smith  
Frederick G. Payne

Address: The Senate Building, Washington, D. C.

## ANA FINANCIAL REPORT

The 1953 financial report of the American Nurses' Association is published below, together with ANA's accompanying note of explanation, so that members may have this information.

### AMERICAN NURSES' ASSOCIATION

March 15, 1954

Dear ANA Member:

This is your copy of the financial report filed with the U. S. Department of Labor in compliance with the Labor-Management Relations Act. Non-communist affidavits from all ANA officers have been filed with the National Labor Relations Board.

Nurses, through ANA, are building a sounder future for their profession. They are striving to improve their professional practice, to raise the economic status of nursing, and to assure best use of nursing skills and experience to meet the health needs of the American people.

This monumental task requires the effort of every nurse in this country.

Sincerely yours,

(Signed) ELIZABETH K. PORTER, R. N., *President*

You can join the 175,000 ANA members in effective action to obtain gains for yourself and your profession.

### AMERICAN NURSES' ASSOCIATION

2 Park Avenue, New York 16, N. Y.

#### FINANCIAL STATEMENT

January 1, 1953-December 31, 1953

<i>Receipts</i>		<i>Disbursements</i>	
(1) Dues .....	\$846,891.50	(1) Per capita tax, assessments, allowances.....	none
(2) Fees, fines, assessments.....	none	(2) Salaries .....	\$248,391.30
(3) Other .....	8,425.30	(3) Taxes (Federal & State) .....	7,557.52
Total .....	\$855,316.80	(4) Other: Program and office administration .....	435,893.90
		Dues to other organizations .....	20,299.29
		Total .....	\$712,142.01
(5) Total assets at end of fiscal year (cash, investments, property, etc.) .....			297,810.44
(6) Total liabilities at end of fiscal year .....			52,304.12

I, duly authorized official of the above-named association, certify that the information submitted herewith is true to the best of my knowledge and belief.

(Signed) ANNABELLE PETERSEN, *Treasurer*

Paul Jones  
 100% NYLON  
 UNIFORMS  
 \$14.98

Paul Jones fashions a wonderful new weave of lightweight "Fanfare" nylon. Styled with an underarm gusset to reinforce that stress point, fashioned for professional dignity and feminine charm. Sizes 9 to 15 and sizes 10 to 18.

UNIFORMS - FASHION FLOOR

Porteous Mitchell & Braun Co.

PORTLAND, MAINE



Hay & Peabody

*Ambulance Service*

749 Congress Street

Portland, Maine

Dial 2-5464



FOUNDED BY HENRY H. HAY 1841

**HAY'S DRUG STORES**  
 PORTLAND, MAINE

— THE 3-H QUALITY MARK PROTECTS YOU —



Library  
University of Maine  
Orono, Maine

SEC. 34.66 P. L. & R.  
U. S. POSTAGE  
PAID  
BANGOR, MAINE  
PERMIT NO. 503

If not delivered, return postage will be guaranteed by  
Maine State Nurses' Association  
489 State St., Bangor, Maine

## THE MAINE STATE NURSES' ASSOCIATION

Headquarters' Office, 489 State St., Bangor  
Executive Secretary, MRS. JOSEPHINE C. PHILBRICK

### FOR YOUR INFORMATION

*If you change your address*

*If you get married*

*If you wish to transfer*

*If you change your section*

Write your Executive Secretary  
MRS. JOSEPHINE C. PHILBRICK  
489 State St., Bangor

*If you wish to register*

Write your Educational Secretary  
MISS MILDRED I. LENZ, State Board of Registration for Nurses  
363 Main St., Lewiston

*If you wish to pay dues*

Write your District Treasurer

Northern District.....Jean M. Laskey, 43 Park St., Presque Isle  
Eastern District.....Mildred Richards, 489 State St., Bangor  
Central District.....E. Patricia Randall, Riverside Drive, Augusta  
Western District.....Mrs. Mary W. Graffam, 23 Ocean Ave., Portland 5

*If you have news*

Send it to Headquarters Office

*If you want information*

Write your Executive Secretary

PECK'S  
Lewiston

Headquarters for Famous  
WHITE SWAN UNIFORMS

Clinic Shoes for Nurses

MAYNARD'S BOOT SHOP  
Lewiston, Maine