

BULLETIN

of the
MAHONING COUNTY
MEDICAL SOCIETY

Volume XLIV

JULY, 1974

Number 7



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Mahoning County Medical Society Meetings — 1974

January	March	May	September	November	December
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

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From the Desk of the President

YOU ARE NOT ALONE

At the Nov. 20th meeting of the Mahoning County Medical Society, the membership voted to "completely reject the concept of the Professional Standards Review section of Public Law 92-603," and not to participate in any form of government controlled peer review.

Here are some news excerpts to let you know that you are not alone.

Support for Repeal Grows in Congress

At the present time there are 18 bills pending in the Congress calling for the outright **repeal** of PSRO — 17 in the House and one in the Senate.

—Journal, Med. Assn. of Georgia, March 15, 1974

Ohio Physicians Vote to Oppose PSRO

Delegates to the Ohio State Medical Association annual meeting May 12-15 in Cleveland rejected the concept of government-controlled PSROs and resolved to "work toward changing the onerous portions of this law by efforts directed either at direct **repeal** or a **repeal** by amendment."

—American Medical News, June 3, 1974

Briefly, here are more:

Michigan State Medical Society has called for outright **repeal**.

Arizona Medical Association House of Delegates has gone on record to work for **repeal**.

Tennessee Medical Association delegates voted 85-19 to work to effect **repeal** of PSRO.

Missouri State Medical Association's House of Delegates voted to support **repeal**.

Delegates to the Medical Association of Georgia voted overwhelmingly for **repeal**.

The South Carolina Medical Association has elected to support the AMA position to **repeal**.

The Oklahoma State Medical Association House of Delegates adopted a resolution for **repeal**.

There are many more, and the list is growing, but this should be enough to let you know that the practicing physician is being heard from at the grass-roots level — and you are not alone.

—John C. Melnick, M.D.
President



BULLETIN

of the Mahoning County Medical Society

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Volume XLIV

JULY, 1974



Number 7

The opinions and conclusions expressed herein do not necessarily represent the views of the Editorial staff nor the official views of the Mahoning County Medical Society.

EDITOR

Louis Bloomberg, M.D.

ASSOCIATE EDITORS

J. L. Fisher, M.D.

J. C. Melnick, M.D.

D. H. Levy, M.D.

F. A. Pesa, M.D.

Editorial

I am indebted to Dr. Richard Murray for most of this editorial.

VIOLETION OF MEDICAL PRIVACY

The right of privacy is just as fundamental to the independence of the American people as any other of the basic rights, including freedom of speech, press and assembly. Therefore, every citizen should be aware of and deeply concerned by a proposed new invasion of personal privacy in the field of medicine. We are all aware of the PSRO amendment for the Social Security Act which demands the evaluation of health care that is provided under federally-sponsored health plans. It empowers the government to examine patient records in doctors' offices. Until this law was passed, people were able to assume that what they told their doctor would remain confidential. Now, unless congress acts to repeal this law, this essential confidentiality of individual medical records will be destroyed. These records will be computerized and become available to too many people. Lives could be ruined. For example, old and long forgotten records of venereal indiscretions or nervous disorders might, if they became part of public records, unjustly prejudice employment and job opportunities. The very existence of such a system which puts individual medical records into a computerized information bank open to the examination of many people will eventually alter the quality of medical care. A doctor cannot always properly treat a patient who is unable to speak frankly and in complete confidence.

This same thought is recognized by the minority report of Governor Gilligan's task force on health. The public must some day make its decision concerning health costs. Does it want the best possible health care or does it want a rigid cost accounting system? True health maintenance is personal and not institutional and no amount of mass governmental spending is going to make up for the loss of that personal factor. Past experiences indicate that when government takes over such controls cost goes up and quality goes down. It is hoped that the free and independent people of this country will not tolerate the concept of governmental health control.

—Louis Bloomberg, M.D.
Editor

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DIGNITARIES: Mrs. Dena Evans, Julia Gura, Dr. William Evans, Nena LaBarbera, Laura Lockhart.



OFFICERS: Julia Gura, Dorothy Klein, Nena LaBarbera, Betty Ann Perschka, June Kyle, Joan Schuchler.



COUNCILORS: Carole McClendon, Charlotte Kramer, Peg Drabison, Jo Sammartino, June Boyle, Grace Brady.



COMMITTEE: Jean McHenry, Bea Collins, Candy Shufflebarger, June Boyle, Laura Marinelli.

Miss Nena LaBarbera was installed as President of the Mahoning County Chapter of Medical Assistants at an impressive candle-light ceremony at the Fonderlac Country Club, June 13th. Also installed were: Dorothy Klein, President-elect; Joan Schuchler, Recording Secretary; June Kyle, Corresponding Secretary; Betty Ann Perschka, Treasurer; June Boyle, Peg Drabison, Grace Brady, Charlotte Kramer, Jo Sammartino and Carole McClendon as Councilors.

The entire Advisory Board of the Medical Society were present: Dr. W. H. Evans, Dr. B. M. Brandmiller, Dr. J. Mersol and Dr. B. B. Burrowes. Dr. Evans, chairman of the group, served as the installing officer.

Julia Gura, retiring President, presented the gavel to Miss LaBarbera. The gavel has special significance for the Medical Assistants Society, having been presented to them by the late Dr. David Belinky.

Guests attending were: Laura Lockhart, AAMA Vice President; Mrs. William Evans, Dr. and Mrs. J. Mersol, Dr. B. M. Brandmiller, Dr. B. B. Burrowes, George Napoli, Howard Rempes, Mr. and Mrs. Louis D'Amico, Mr. Joseph LaBarbera, Mrs. Lillian Stambaugh and Mrs. Claire Butcher.

The Youngstown Sheet and Tube Chorus entertained with a variety of songs.

Arrangements for the dinner were handled by Candace Shufflebarger, Laura Marinelli, Bea Collins, June Boyle and Jeanne McHenry.

Mary Jane Arquilla and Pat Davis were installed as new members of the Society by membership chairman Dorothy Klein.

—Betty Ann Perschka



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"NO PILLS TO ALCOHOLICS"

(Editor's note: This article, submitted by Dr. Luke Reed, is reprinted with permission from the Orange County Medical Association Bulletin, Feb. 1974 issue.)

It seems to me that the treatment of alcoholics has changed dramatically during the twenty years that I have been in practice. Formerly, I just hated to get involved with them. They always seemed to feel they needed to be seen immediately, including the middle of the night. All they ever wanted was tranquilizers, sleeping pills, and emergency vitamin shots to come off a drunk. They didn't keep their appointments when they had one. And they didn't pay their bills anyway. Besides, I had a feeling that if word got out that I treated alcoholics, I would be swamped with them.

During the past two or three years, I have become increasingly more involved in the treatment of alcoholics, and it isn't like that at all anymore. In fact, I find it a real thrill to see an alcoholic recover, and I thoroughly enjoy treating recovered alcoholics who appear to be far more grateful, joyful, and enthusiastic than patients who recover from other diseases. Other patients seem to return, at most, to a normal or near normal status, whereas alcoholics seem to rebound to some sort of "high" or supernormal status that I find invigorating.

For me the key to the present day treatment of alcoholics seems to be: first, throw away the prescription pad; second, don't assume responsibility for keeping the patient sober or for making him comfortable in coming off a drunk unless he is in a hospital; and third, don't try to treat the patient alone.

I feel quite incapable of treating an alcoholic without outside help such as Alcoholics Anonymous or some other form of group therapy with other alcoholics. I refuse to treat, for any extended period, any patient who consistently refuses such involvement, and do not generally consider single referral to a private psychiatrist or psychologist a satisfactory substitute. In fact, AA intervention is so important that, as it takes hold, my therapeutic importance rapidly diminishes. My involvement with the patient tends to be that of deciding whether symptoms are organic or functional in origin. When they appear functional, I am able to tell the patient so, and tell him to get back to practicing his AA program more vigorously, and he generally agrees. This eliminates the need for tranquilizer pills, and the patient's acceptance of the functional nature of his symptoms (because he knows what to do about them) is, indeed refreshing.

Once I have gotten to the patient to an outside group for help, it is important that I help him to remember that it is up to him to see that it works and that his sobriety is his responsibility, not mine or the group's. Alcoholics have a way of finding reasons why AA or other groups "don't work for me", when, actually, they'll work for anyone who wants to work them.

Perhaps one of the most important things in treating alcoholics is to remember not to give them tranquilizers, sedatives, or stimulants. It appears that a great many physicians feel that it is permissible to give such drugs as long as their usage is controlled and excessive dosages avoided. Actually, in practice it appears to me that such drugs, used even in moderation, can provide just enough comfort so that the patient never gets around to seeking the help of the group; or, if he is a member of a group, makes no emotional growth because of his use of the pills. It appears as though all emotional growth is painful and a tranquilized patient who feels no emotional pain also shows no growth. I go on the theory that by the time an alcoholic comes to me, he or she has used up the right to chemical peace of mind, and needs now to find a way of life such that no person, place, thing, or situation can make him take a drink or a sedating pill.

It appears to be a medical fact of life that there is no medication yet available that is effective in the cure of alcoholism, and the giving of even placebos to an alcoholic is a way of fortifying his unspoken belief that he can

solve all sleeping and living problems by putting chemicals in his mouth. Alcoholics who are hospitalized for detoxification and sent home while still taking tranquilizers, have not really been "detoxified" and they usually return to alcohol or else join what might be called a Tranquilizer Maintenance Program of indefinite duration. Many of these patients then seem to be unable to stop the tranquilizer on their own because of the resultant anxiety, tremors, headaches, or gastrointestinal symptoms which are actually withdrawal symptoms essentially similar to those following withdrawal from alcohol.

Alcohol is a tranquilizer — the world's most commonly used tranquilizer — and, incidentally, the greatest drug problem in the United States today. Alcohol is followed by diazepam which are tranquilizers in solid form and are the most commonly prescribed drugs in the United States today. It is not much of a medical accomplishment to switch an alcoholic from his liquid tranquilizer to a solid tranquilizer. The patient merely smells better, but he isn't receiving any treatment for his basic disease. And alcoholism is a disease; it is not a moral issue, not a matter of willpower, and generally is not just a symptom of a deep-seated psychiatric problem. If you don't want to treat alcoholism, don't treat it. But don't give the alcoholic tranquilizers or sleeping pills if it is going to keep him away from more definitive care.

More and more alcoholics seem to complain that physicians don't seem to realize that "once an alcoholic, always an alcoholic," and that doctors prescribe alcohol-containing cough syrups and mind-affecting drugs in spite of the fact that the patient "told him I was an alcoholic." This has become such a common problem that now when we discharge a patient from the Alcohol Detoxification and Rehabilitation Unit after getting him off all drugs and alcohol, we give him a form that he may sign and give to his physician.

It reads:

"Dear Doctor:

Because I feel that my body does not handle alcohol well—an "allergy" in the broad sense of the word—I desire to abstain completely from it.

Because I feel that I am also hypersensitive to tranquilizers and because they interfere with my ability to "work through" my emotional problems, I desire to abstain completely from them also.

It is absolutely essential that I find non-chemical solutions to my living and sleeping problems.

Therefore, will you please refrain from prescribing for me anything containing alcohol, minor tranquilizers, sedatives, hypnotics, or stimulants.

Thank you for your interest and cooperation."

If a patient informs you that he is "an alcoholic", his sobriety and his very life may depend on whether or not you truly hear what he is saying. The fact that he or she hasn't had a drink of alcohol in several months or several years, or the fact that you plan to be careful to prevent excessive administration, may both be irrelevant.

Besides, alcoholics who have recovered and have left the "wonderful world of chemistry", seem to do so well in the drug-free state that I have begun to feel vaguely uncomfortable about the lack of therapeutic accomplishment every time I write a prescription now for tranquilizers or sedatives for even my "normal" patients.

—Paul Ohlinger, M.D., Dir.

Palm Harbor Hosp. Alcoholism Unit
Staff, Beverly Manor Alcoholism Hosp.

HOSPITALIZATION PAYMENT DUE

Doctor, have you made your payment to the Blue Cross-Blue Shield Group? Due date was July 1st. Final date for payment is July 15th. Don't risk being without coverage. Be sure the medical society office has your check when the group payment is completed on July 15th.

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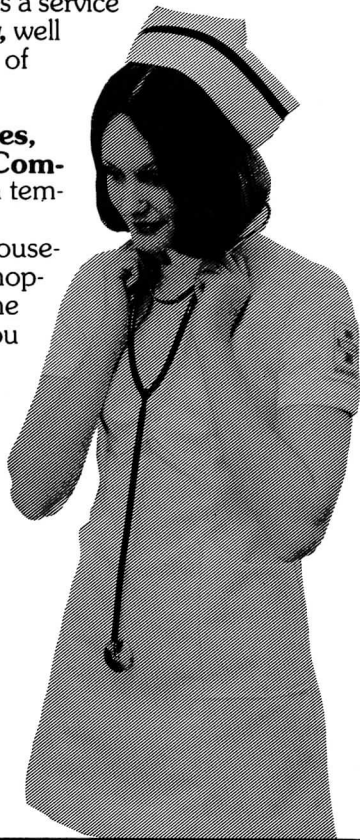
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PROCEEDINGS OF COUNCIL

June 11, 1974

The regular meeting of the council of the Mahoning County Medical Society was held on Tuesday, June 11, 1974, at the Youngstown Club.

The following applications were presented by the censors:

ACTIVE: Ramiro Albarran-Sotelo, M.D.

ASSOCIATE: Danny Chung, M.D.

Emil R. Constantinidi, M.D.

Howard X. Kramer, M.D.

Lloyd E. Slusher, M.D.

The applicants will become members of the Mahoning County Medical Society 15 days after publication in the *Bulletin*, unless objection is filed in writing with the secretary before that time.

It was announced that we now have on hand a reissued charter from the Ohio State Medical Association.

It was noted that Dr. David Levy had been appointed as representative to the Review Committee of the Youngstown Board of Education.

Two letters of thanks were noted — one from the *Vindicator* for a prize in the Spelling bee, and one from the Youngstown Public Schools for a prize at the science fair.

Dr. Deramo, chairman, made a comprehensive report for the ad hoc health care screening committee. A copy of the report will be mimeographed and sent first to all Council members, and later to Society members.

A letter was read from Mrs. Kathleen Dimoff concerning a Diabetic Fair to be held by the Mahoning County Dietetic Association in November and asking for Medical Society support. The secretary was requested to write to Mrs. Dimoff for more information, especially concerning any medical procedures to be offered.

A telephone communication was reported from Mrs. Edith Burns of the Retail Clerks union who requested help in finding a doctor who would help review claims for their Health and Welfare Fund self-insured program. The secretary was requested to place a notice in the *Bulletin*.

A letter was read from the Mahoning Valley Health Planning Association concerning the formation of a Regional Alcoholism Council. The matter was referred to Dr. Luke Reed, chairman of the Alcoholism Committee, for an opinion and recommendation.

A letter was read from the Youngstown Health Department asking for a physician to serve at the neighborhood health centers. The secretary was instructed to place a notice in the *Bulletin*.

A proposed letter of answer to Mr. Charles W. Bates, Director of the Ohio Department of Public Welfare was read. Council made some amendments and instructed the letter to be sent to Mr. Bates.

Dr. Anderson introduced discussion concerning what should the Society be doing in the area of peer review based on recommendations from the House of Delegates of the Ohio State Medical Association. The motion was made by Dr. Pichette, and properly seconded, that an ad hoc committee be appointed by the president to study a quality care review mechanism. An amendment was made by Dr. Anderson, and properly seconded, that the membership of the committee be composed of a cross section of practicing physicians in this community. Motion was passed as amended.

The motion was made by Dr. Brucoli, and properly seconded, that information gleaned by the ad hoc quality care review committee be used only by the Council of the Mahoning County Medical Society and not be provided to any outside party without approval of the Council. Motion was passed.

Dr. Mahar reported on a meeting with the Youngstown Health Department concerning the function and program of the health screening bus. He

stated that it was an ambitious program involving procedures within the domain of physicians. His report was accepted and will be combined with Dr. Deramo's report.

Meeting was adjourned.

—Howard Rempes
Executive Secretary

DR. LIEBELT IS MEDICAL SCHOOL DEAN

Robert A. Liebelt, M.D., Augusta, Ga., has been named dean of the Northeastern Ohio Universities College of Medicine, effective Aug. 1. His appointment was announced by Dr. Stanley W. Olson, provost, and will be confirmed by the Board of Trustees in July.

Dr. Liebelt is a graduate of Baylor University College of Medicine, where he received his degree with honors in 1958. Currently he is serving as Provost for the Medical College of Georgia. Previously he was chairman of the Department of Anatomy at Baylor.

Dr. Liebelt is a native of Chicago. He received his B.S. degree from Loyola University with honors in biology in 1950 and his M.S. in zoology from the State College of Washington in 1952. In 1953-54 he was a medical student at the University of Illinois College of Medicine.



His research interests include genetic, hormonal and neurogenic factors in cancer, morphology and physiology of adipose tissue and autoregulatory mechanisms of normal and neoplastic growth. He is author of more than a hundred publications.

He is a member of the Association of Anatomists, Association for Cancer Research, Society of Experimental Biology and Medicine, the New York Academy of Science, the American Society for Experimental Pathology, Aerospace Medicine Association, the Underseas Medical Society and a Fellow in the Texas Academy of Science and in the American Association for the Advancement of Science.

Mrs. Liebelt is associate professor of cell and molecular biology at the Medical College of Georgia and director of its Kirschbaum Memorial Cancer Research Laboratories. They have four children, ages 11 to 17.

VOLUNTEERS WANTED AT SCOUT CAMP

The Mahoning Valley Council, Boy Scouts of America, is seeking doctors to give an hour or two of time on a Sunday afternoon during the summer to give what they term a "medical recheck" for boys coming into the Boy Scout Camp.

Ideally, they would like to have two doctors to work together on each of the following Sunday afternoons:

July 14	Aug. 4
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July 23	Aug. 18

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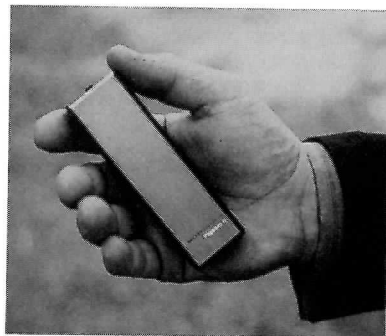
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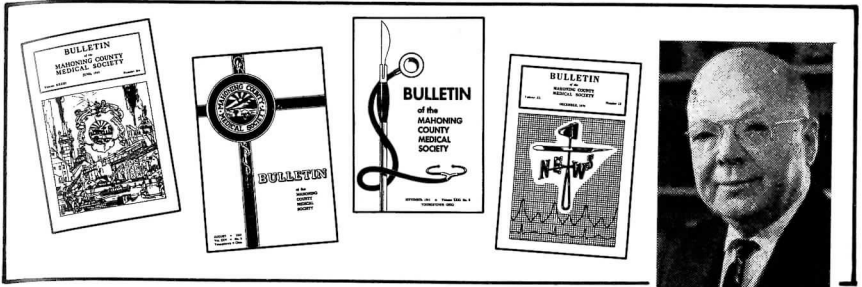


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From the Bulletin

FORTY YEARS AGO — JULY 1934

The great Depression was on and the going was hard but we were getting inured after three years of it. Physicians working in the Baby Welfare Stations presented a resolution to Council urging that (1) the stations should be conducted for well babies and (2) no therapy of illness should be practiced there and (3) attendance should be limited to families with an income of not more than \$75.00.

That was \$75.00 a month, not a week. Anything over \$75.00 was above subsistence level. If you didn't live through the Depression you "never seen nuthin'".

THIRTY YEARS AGO — JULY 1944

It was vacation time but with the war on there was little time and no gasoline for long trips. Train travel conditions were somewhat improved and restaurant eating was better. Some of the doctors ventured out on fishing trips in Canada and for those at home the Society held a Golf Meet for physicians and druggists at the Youngstown Country Club.

Doctors in the service were too busy with the grim business to write many letters to the *Bulletin*. Harold Reese had received a promotion and was transferred to Mobile, Alabama. Sears was back from England and ill in a hospital in New York. McElroy was still in Italy and getting along well.

TWENTY YEARS AGO — JULY 1954

Editor Detesco quoted the epigram, "He who throws dirt always loses a little ground."

Today, research is an important part of a medical school's program. It gets them grants from the government, contributions from the foundations and prestige in the medical milieu. As a result they are turning out researchers while the people cry for doctors to take care of the sick.

New members that month were: George L. Altman, Cary S. Peabody, Milan Halmos and James R. Sofranec.

TEN YEARS AGO — JULY 1964

President Schreiber announced that Medicare was dead for this year. But it was only playing dead and like the Phoenix, ready to spring from the ashes.

It was reunion time for ex-internes at both hospitals. A. K. Phillips and Ray Boniface gave a big party for St. Elizabeth's internes at the Youngstown Country Club.

Ex-Internes of the Youngstown Hospital had a program of lectures in the morning and after lunch everybody went to the G-F picnic grounds for baseball, horseshoes and volley ball. One old piano player got on the organ and made the rafters ring. The Dixie Docs (Paxton Jones, Hot Lips Kiskaddon, Ed Beynon and Jim Fulks) played jazz and the house staff had them rolling in the aisles with a parody of Julius Caesar, entitled "The Death of Fredrikers Gluteus Maximus". Featured actors were those noble Romans Tornellibus, Lupsus, Schlectus, Katzius, Giberius and Gujumus. Renners favorite products flowed down the Tiber after passing through the loops of Henle.

It was a good month. No Medicare, no Medicaid and no P.S.R.O. No polio, no typhoid. A little gonorrhoea and syphilis but isn't there always?

—J. L. F.

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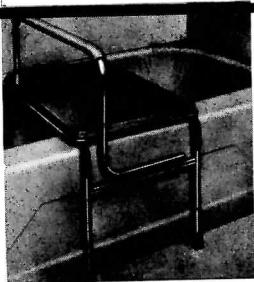
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MEDICAL EQUIPMENT, INC.

In Memoriam

DAVID A. BELINKY, M.D. 1902 - 1974

Dr. David A. Belinky, long time coroner for Mahoning County, died of a heart ailment on Tuesday, May 28, at North Side Hospital, where he had been a patient five weeks. He was 71.

Dr. Belinky was born Aug. 14, 1902 in Russia, coming here as a child. He attended Market Street School and was a graduate of Rayen School. After attending the University of Pittsburgh, he took his medical training at Temple University, receiving his degree in 1927. He began the general practice of medicine here the same year.

During World War II he served as a captain in the Army Air Corps until 1943, at which time he received a medical discharge and was named city physician for Youngstown. In 1944 he was elected coroner, a position to which he was reelected every term until his death. During this time he was extremely active in the field of safety and launched many a crusade in this area. He also campaigned for a crime laboratory, better morgue facilities and proper investigators. In 1952 he was appointed coordinator of identification and disposition for civil defense. In recent years he had been vitally interested in a program to help drug addicts, and served as medical director of the BUDA program.

A reference library on medicine was established at Youngstown University through a gift by Dr. Belinky at a testimonial dinner for him in 1961.

Dr. Belinky was a member of Rodef Sholom Temple, Jewish War Veterans, was a 32nd degree Scottish Rite Mason, a member of the Mahoning County Consistory and Tadmor Shrine in Akron. He was a past treasurer, past vice president and past president of the Ohio Coroner's Association and was past vice president of the national organization and a member of its advisory board. He was director of the International Assn. of Coroners and Medical Examiners. He was also a member of Aut Mori Grotto, St. Alban Lodge, Arco Club, B'nai B'rith, Buechner Council, East Side Kiwanis, Struthers Athletic Club, Eagles and Zionist organization.

The people of Mahoning County have lost an ardent public official as well as a fine doctor and a good friend. His passing is an occasion for sorrow for his fellow physicians.

CANFIELD FAIR PLANS MADE

With the annual Canfield Fair less than two months away, the Canfield Fair Committee has completed all preliminary work of organizing exhibitors for the medical health building. In charge of the building are Mr. Gib James, a director on the Canfield Fair Board, and Dr. Jack Schreiber, chairman of the medical society's Canfield Fair Committee.

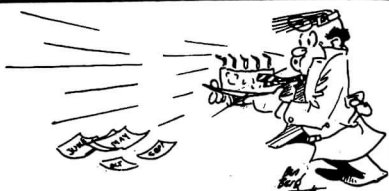
Each year the new medical health building is being brought closer to a health museum concept. Exhibitors are being encouraged to construct permanent exhibits, and two more exhibitors are expected to do so this year.

The medical health building of today is a far-cry from the old medical health tent of several years ago, not only in general all-over cleanliness and brightness, but in a much higher quality of exhibits made possible by exhibitors having a place to work and more time to plan and execute displays.

Along with its permanent "old doctor's office," the Medical Society will bring back the popular "Birth of a Baby" exhibit, shown every other year with the cooperation of the American Medical Association.

Dates for the Fair are Thursday, August 29, through Labor Day, which is Monday, Sept. 2.

HAPPY BIRTHDAY



Get your annual check-up • Is it time to renew your driver's license?

July 17

E. J. Wenaas
J. J. Lee

July 18

J. L. Finley
G. H. Dietz

July 20

J. B. Werning
S. A. Basile

July 23

B. S. Brown

July 24

V. T. Wrobel
B. L. Lipton

July 25

P. J. Mahar
J. L. Scarnecchia
R. M. Roth

July 27

N. D. Belinky
M. M. Yarmy

July 28

D. G. Corredor

July 29

S. M. Zervos

July 30

F. L. Schellhase
J. H. Fulks

Aug. 3

I. Werbner

Aug. 4

D. A. Salcedo

Aug. 6

R. S. Boniface

Aug. 7

B. J. Klahr

Aug. 8

J. N. Gordon

Aug. 9

R. B. McConnell

Aug. 10

J. Politi

Aug. 11

I. N. Dombczewsky

Aug. 14

J. L. Fisher

IT'S "OPEN DATE" FOR EMPLOYEES HOSPITALIZATION

Bills are currently being sent to members of the Medical Assistants Blue Cross Group through the medical society office. Final payment for the billing is due on August 15th. This is the annual "open date" and any employee of any physician, who is a member of the Mahoning County Medical Society and enrolled in any Blue Cross plan, may join the Medical Assistants Group at this time. Anyone failing to join at this time must wait for the next open date, which will be August 1, 1975. Further information may be obtained by calling the medical society office, 747-4956.

Classified Advertising

PHYSICIAN WANTED

Youngstown Health Department wishes to hire physician to provide ambulatory care at neighborhood health centers. Pay by the hour. Opening beginning July 5. Call Mr. Rochford
Phone 744-8988

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Mon., Tues., Wed. & Fri.

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