

# update

Vol. 3 No.16

September 2, 1980

**A&SHHC to go MASH**

## Helicopter transport planned; director named

In the last decade, emergency medical care and its availability to local communities has grown in importance to the American public.

Emergency Medical Service Councils, E.R. physicians, trauma centers, paramedics, rescue teams, helicopters -- these are just a few of the many facets involved in making a lifesaving system work, and many states are developing these systems.

In the Lehigh Valley, The Eastern Pennsylvania Emergency Medical Services Council has been hard at work developing such a system via local hospitals and ambulance corps. Now, a plan to include helicopter transport of severely injured accident victims is on its way to reality in the Valley and its surrounding six-county region to augment the available services provided by the local ambulance crews.

Such a plan calls for helicopter service to be based at the Hospital Center. It will provide for rapid transport of injured to the most appropriate medical institution within the six counties.

Coordinating the development of this plan is a director for pre-hospital emergency services and flight operations supported by a Dorothy Rider Pool Health Care Trust grant.

John D. Stafford, M.D., instrumental in the formation of Maryland's excellent trauma and communications system for emergency medical services, has been given the task of doing it all over again for our region.

Initially, the plan will establish a division of pre-hospital emergency services and helicopter flight operations as a support service that will work with The Eastern Penn-

sylvania EMS Council, The Medical Control Officer, area physicians and hospitals, police, fire, paramedics, and state and local agencies.

The anticipated outcome, of course, is the lowering of the morbidity and mortality rates associated with traumas and medical emergencies occurring within the six-county region. When implemented properly, such a system works. For example, in 1968, before the Maryland system was in operation, 70% of all seriously injured accident victims in Baltimore were dead on arrival or died during hospitalization. This mortality rate was reversed by 1976, two years after the inception of their coordinated system. 84% of the most seriously injured now survive by being transported quickly to the most appropriate medical facility for care.

This plan will also work with existing programs, such as the paramedic program at Sacred Heart Hospital, to train emergency personnel in all procedures related to the dispatch of emergency vehicles and helicopters, treatment at the scene and enroute, classification and transportation of patients to appropriate facilities and communication between physicians, hospitals, and E.R. personnel.

A regional UHF communications network as well as marketing and financial strategies are also designated as priorities to the success of the plan.



*Helicopter transport of the critically injured has become a vital part of emergency medical care available in a growing number of states. First used during the Korean conflict, the helicopter went on to become instrumental in saving the lives of severely wounded soldiers.*

.....  
**John D. Stafford, M.D., M.P.H.,**  
Director for Pre-hospital Emergency Services and Flight Operations, is a graduate of The University of Maryland Medical School, Baltimore, and has a Master's Degree in Public Health from Johns Hopkins School of Hygiene and Public Health, Baltimore.

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#### To Dietary

Sharon Bohannon  
Peter Evans  
Jose' Pimentel

#### To Nursing Services

Doris Gebhard  
Roxann Kokinda  
Mary Royer  
Maryann Shema

#### To Pharmacy

Lenaire Ahlum  
Grace Dominic

#### To Radiology

Diane Baer  
Michelle Maini

#### To Security

Clifford Miller

#### To SPD

Kirk Greenawald

## An editorial...

As you are all aware, there has been another flurry of allegations about the governance problems of the Hospital Center following the recent Allentown Hospital submission of their modernization project.

I think it is important to realize that despite many alleged and some real problems, we in Allentown have a level of cooperation and shared services far ahead of most communities in the country. Sometimes, when issues do arise, we develop a set of blinders and only see the problems working together has brought, rather than positive things the system has accomplished and the problems we have solved.

This institution was born and nurtured in the three-hospital system. We are providing excellent and high level care to the Allentown area and the region beyond. I can attest to this because I, myself, have just been hospitalized, as you can see in my letter, and received the type of care we can all be proud of.

A&SHHC has learned to live with a split organization and I am sure we will continue to progress during this round of activity. We have been assured by the Sacred Heart Class of our Board of Directors that our approved projects will be continued and implemented. From working with these individuals, I am also positive that they would never make any decisions which would negatively impact on the level of health care available in this community, either in the present or the future. I am only sorry that we have not been able to work things out within the original and existing organizational structure which was specifically set up as a means through which problems between our respective hospitals could be resolved.

## and commentary...

Our courageous administrator recently "volunteered" to break his left leg (a comminuted fracture of the distal tibia and fibula, the chart reads) in an effort to do an extensive in-depth study of quality care and to gain insight into what life is like for a patient visiting our facility. Here are some of his observations:

"Being admitted to a hospital, A&SHHC or anywhere else, is indeed an unwanted experience for anyone, especially me! And I have discovered, first hand, how fine and competent our staff is and why in fact, I hear so few complaints about this institution.

The number of friendly, interested people who introduced themselves and explained the procedures they performed on me was impressive.

The quality of care, the cleanliness of the rooms, the excellent food -- it all adds up to a hospital that cares for its patients, and isn't shy in showing it.

An "extra" that I enjoyed was being able to participate in nursing's pilot study on primary nursing. I am also very thankful for the amount of privacy I was afforded, and grateful to all who helped minimize the trauma and anxiety brought on by my three visits to the O.R. I was even able to make a contribution to the selection of music available to future patients (a classical station is now available on the bedside radio).

My stay, without exception, was indeed a pleasant one. I just don't want to do it again. But if I must, I want it to be here.

Once again, my sincere appreciation to the entire Hospital Center staff."

**Ellwyn D. Spiker, Administrator**

## Poison workshop for E.R. nurses

The Lehigh Valley Poison Center will be sponsoring "P is for Poison" -- a workshop for Emergency Room nurses, on Wednesday, October 1, 9:00 - 11:00 A.M., in the O.R. Conference Room at Allentown Hospital.

The program will highlight the management and treatment of poison emergencies. For more information, contact the L.V. Poison Center at 821-2368.



Gale Schmidt — Editor  
Jim Higgins — Associate Editor  
Janet Laudenslager — Staff Assistant  
Jack Dittbrenner — Photography  
Darla Molnar — Photography





**John Stafford, M.D.**



**Marilyn Rourke**



**Alverta Stichter**

**Marilyn Rourke, B.S.N.**, has been appointed Administrative Charge Nurse, Critical Care Division, on the 11:00 P.M. - 7:30 A.M. shift.

A graduate of Trenton State College, Trenton, New Jersey, with a B.S. in Nursing, Marilyn has had critical care experience at Easton Hospital and at Warren Hospital, Phillipsburg, New Jersey.

**Alverta Stichter, R.N.**, has been named Director of the Medical/Surgical Division of Nursing Services. A graduate of Reading Hospital School of Nursing, Alverta received her B.S. in Nursing Education from Wilkes College, Wilkes-Barre, and a Master's Degree in Science from the University of Delaware. She had been Vice President of Patient Services at Allentown Osteopathic Hospital and was Clinical Coordinator of Inservice Education at St. Luke's Hospital, Bethlehem.

Alverta will direct and coordinate the clinical and administrative activities of the 10 medical/surgical units.

**Helen Prosack, L.P.N.**, on 5C since October, 1974, is retiring. A graduate of Allentown Hospital School of Nursing, she has nursing experience at Allentown Hospital, working there from June, 1962, until her employment here.

Helen was honored recently by her co-workers from A&SHHC and Allentown Hospital with a retirement dinner at The Brass Rail Restaurant. Helen plans to use retirement to travel and to spend time with her three grandchildren. Good Luck!

## Dr. Stafford

*continued*

He has extensive experience in emergency medical services, most recently as Director for EMS Systems Program at the Maryland Institute for Emergency Medical Service Systems in Baltimore, and as Director for Professional Services, Division of Emergency Medical Services, Maryland State Department of Health and Mental Hygiene.

Dr. Stafford has also been Regional EMS Director for Baltimore Metropolitan Region, in the Division of Emergency Medical Services, and Executive Director, Emergency Medical Services Development, Inc., a non-profit corporation which implemented HEW funds for development of Baltimore's EMS System.

In addition to his involvement in Maryland's EMS, Dr. Stafford is Acting Medical Director, Maryland Poison Information Center, University of Maryland, School of Pharmacy; and a Lecturer for Johns Hopkins School of Medicine (Department of Emergency Medicine) and School of Hygiene and Public Health (Department of Epidemiology).

He is Board Certified by the American Board of Preventive Medicine, and is member of the Board of Directors for the Maryland Chapter of the American College of Emergency Physicians.

## Day care availability

The availability of area day care services which meet the needs of A&SHHC employees has been a topic of discussion at many Coffee with Administration sessions and departmental meetings. In response to employees' concerns, administration asked Linda Leddy, Director of Volunteers, who has experience in day care management, to put together a list of licensed day care facilities, their capacity, hours, waiting list, if any, and ages of children they will accept. The list has been made available to all department heads.

The purpose of compiling the list is two-fold: first, to inform employees of the day care services which are available in our area; and second, to ask employees to provide feedback to their department heads which will enable the hospital to assess the adequacy of these services in meeting employees' needs. Therefore, all employees who utilize or have utilized day care or who have child caring needs are asked to obtain copies of the list from their department head and let the department head know if they have any concerns or problems with either the availability or adequacy of day care services.



**Career Day** - Over 100 junior volunteers and work study students from A&SHHC, Allentown Hospital, Sacred Heart Hospital, St. Luke's Hospital, and Muhlenberg Medical Center attended "Career Day" at A&SHHC.

The youths heard descriptions and details of the day to day activities of medical and non-medical careers from A&SHHC department heads.

Above, Dennis Ruhf, work/study student, surgery, explains his experiences to the Jr. volunteers.





## Ski Trip

The 3rd Rec Committee sponsored A&SHHC Ski Club Trip to Killington, Vermont, will be held on January 30, 31, and February 1.

Price is \$165.00 per person and includes 2 nights lodging, 3 meals, lift tickets for 3 days, and bus transportation. Any ski equipment rentals are extra.

The bus will leave A&SHHC at 1:00 A.M., Friday, January 30, and will return to A&SHHC at midnight, Sunday, February 1.

For reservations, \$100.00 deposit is needed by Friday, October 17. The trip is limited to 44 people, so hurry and sign up now.

For more information, contact Public Relations, ext. 3084.

## Reminder

Anyone who ordered pizzas from the Rec Committee should pick up their orders on Saturday, September 13, between 12:00 Noon and 1:00 P.M., in Classrooms I and II.

## Softball

The season is over for the A&SHHC Men's Softball Team, and it was an encouraging one. The team, playing in the East Penn Modified Pitch League, finished with 8 wins, 16 losses, for 4th place in their division (out of 6 teams). Last year, you may recall, the team went 2-16, so it was a rebuilding year, as coach Barry Howells, Histology, is quick to point out!

Leading team effort at batting was Pete Carpenter, R.N., SCU<sub>1</sub> with a .639 batting average.

Scott Williams, N.A., 5A, led the team with 3 homeruns, followed by Dean Fritch, Chemistry, Bob Kraus, M.D., and Ron Springel, M.D., with 2 each. Steve Berman was the team's leading pitcher, picking up 7 wins, 13 losses.

Team Roster for the year:

Coach - Barry Howells, Histology

Pitcher - Steve Berman, Histology

Catcher - Carl Hein

1st Base - Eric Bakow, Respiratory Therapy

Brian Mory, Mailroom

Dale Mory, Radiology

2nd Base - Brian Wilson, Histology

Short Stop - Bob Kraus, M.D.

3rd Base - Bill Hoffert, Pulmonary Function

Ron Springel, M.D.

Outfield - Pete Barbour, M.D.

Greg Black, Cardiac Catheterization Lab

Charles Brooks, M.D.

Pete Carpenter, R.N.

Dean Fritch, Chemistry

Jim Higgins, Public Relations, Team Manager

John Jaffe, M.D.

Scott Williams, 5A

The team would like to thank our diehard fans who came out and cheered and inspired us in our victories, and supported us even in defeat! Thank you all! Wait till next year!

## Election Ballot - Rec Committee Officers

**1980-81** Vote by circling one candidate per office

**Nominated**

**Other (write in)**

**President:** Janet Laudenslager, Public Relations \_\_\_\_\_

**Vice President:** Colleen Wesnak, Medical Records \_\_\_\_\_

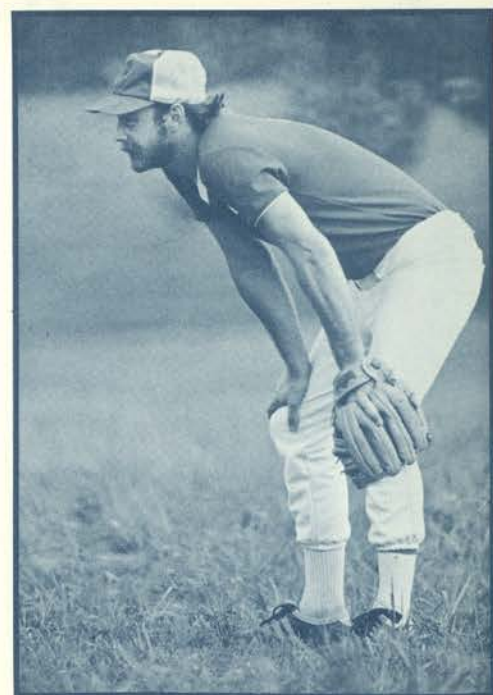
**Secretary:** Jeanne Fignar, Financial Services \_\_\_\_\_

**Treasurer:** Donna Hedash, R.N., ACU/SCU \_\_\_\_\_

Return to Jim Higgins, Public Relations, by Monday, September 15. Results will be published in the September 29 issue of Update.







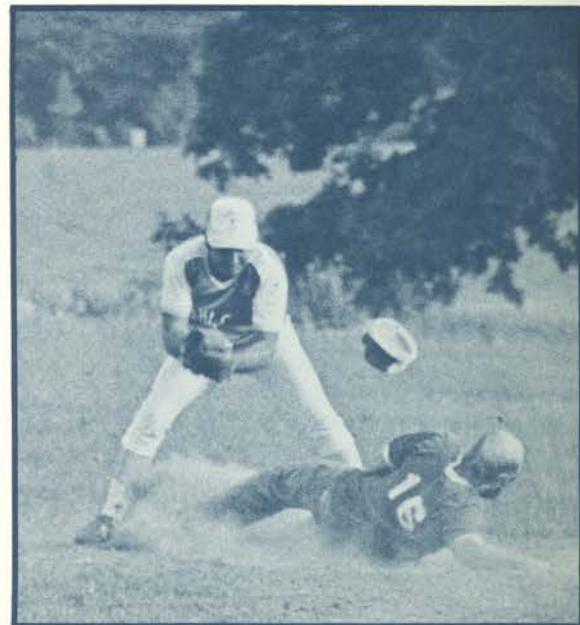
## The A&SHHC Men's Softball Team Scrapbook 1980

*Top row: Barry, Bill,  
Dale, Greg.*

*Left: Steve, Bob,  
Jim*

*Bottom: Ron, Scott,  
Dean*

*Photos: Eric Bakow,  
Jack Dittbrenner*







## Jasmine Tea with Wellness Director Jeff Burtaine

**Q - I'm still not sure I understand what Wellness Center is. If I feel okay, why should I join in the program?**

A - Wellness is more than simply feeling "okay." It's a feeling you can't get from a "wonder drug", a miracle food, or your best friend. You can only achieve optimal health, or wellness, by giving your body the treatment it deserves. That means asking yourself today how your present lifestyle will increase your risk of illness in the future.

**Q - But I don't smoke cigarettes or have a weight problem. What does your program have to offer me?**

A - We have cooking courses which will be designed to meet the needs of the wide range of hospital employees. For working mothers and wives, we will provide complete meal recipes which can be prepared in 30 minutes. For those who are single, we are offering tips on how to cook for one person, as well as quick, easy, and inexpensive gourmet recipes. We will have Chinese and natural food cooking (and tasting) demonstrations in addition to assisting those who have a family member requiring a special diet.

**Q - What else could I participate in?**

A - The stress management program will include sessions on decision-making, how to deal with sudden life crises such as a death of a family member, an impending retirement, a marital conflict. After all, stress is related to ill health just as any virus or the breakdown of a body organ. If you are faced with one of life's many stressful events, whether it be a teenager on drugs or deciding what to do with an elderly parent, it is important that you are aware of effective coping and relaxation skills.

The Center will also be offering courses in assertiveness for men and women -- exploring why we say "yes" when we mean "no" and how to assert one's self without being "aggressive."

**Q - But I can't make a nine month commitment.**

A - Actually, we requested a nine-month commitment so those employees who were certain that they would be moving out of the Lehigh Valley in nine months would not sign up. In addition, we did not want people signing up who had no intention of completing one of the programs. The programs range from 4 weeks to 16 weeks, so the time commitment varies with your interest. Don't let the nine-month commitment scare you off. The time commitment is actually a lot less than nine months.

**Q - I can't decide what program I want to participate in.**

A - You don't have to decide on a particular program until after you've been randomly selected for the Wellness project. In fact, if you are chosen, one of the members of the Wellness staff will sit down with you and describe in detail what we have to offer your particular needs and interests.

**Q - What is the "random selection" and why isn't the Wellness Center open to all hospital employees?**

A - For the first nine months of operation, the Wellness Center needs to compare two groups of interested hospital employees. We will "randomly select" 150 individuals to be an active part of the program and another 150 to serve as a comparison group. "Random selection" simply means that we will place all the sign up sheets in a large box

and draw the first 300 names. Every other name chosen will be enrolled as active program participants.

**Q - I'm on night duty. What do you have for me?**

A - Our programs will attempt to be as flexible and diverse as the participants. We have not established a set time schedule because we want to allow for employees on every shift. We will offer the courses at the times most requested by those participating in the program.

**Q - But isn't the Wellness Center only open from 8:30 A.M. to 5:00 P.M.?**

A - The Wellness Center's administrative offices are open from 8:30 A.M. to 5:00 P.M. However, the gym and classroom facilities are tentatively scheduled to open from 6:00 A.M. to 11:00 P.M.

**Q - Is there a cost to the participants?**

A - The cost is minimal - probably \$10, most of which will be refunded upon completion of one program.

**Q - Is the program open to all hospital employees?**

A - Yes, all paid A&SHHC employees are welcome to sign up.

**Q - Can I sign up for only one course?**

A - Yes. You can sign up for one or 6 if you'd like.

**Q - How long are the course sessions? I can only attend one night a week.**

A - Again, course sessions will be as flexible as the employees. Some courses will be held once a week, while others will be held twice a week, depending on how much time the participant can offer.

**Q - And all we have to do is sign up on the Wellness Center Sign-up sheet?**

A - That's right, just like the one below and send it to the Wellness Center. **Consider it done!**

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 Home Phone (optional) \_\_\_\_\_  
 Hospital Phone \_\_\_\_\_  
 Hospital Department \_\_\_\_\_  
 Hospital Position \_\_\_\_\_



# Pssst ... Did you know?

1. The average American consumes more than 120 pounds of sugar a year? (That's almost 35 teaspoons a day!)
2. The more processed the food, the more likely it is to contain added sugar.
3. Pure, white refined sugar is as pure as its makers claim. The refining process removes every last trace of vitamins, minerals, protein, and fiber. That's why sugar is often called the "empty calorie" food.
4. If you drink an 8 oz. glass of fresh orange juice, you consume 110 calories plus vitamin A, vitamin C, and a small amount of iron, B vitamins, and calcium. If you drink an 8 oz. glass of cola, you consume 145 calories and no other nutrients.
5. There is no denying that sugar and sweetened foods taste good and supply energy. But the average American has gone overboard in their affection for sugar. So try reaching for a fresh orange the next time you have an urge for something sweet or try out one of the wellness recipes below.

## How to cut down on sugar!

1. Read labels carefully. The list of food ingredients is ranked in **descending** order. For example, the Thousand Island Dressing food label lists the following ingredients: soybean oil, water, **sugar**, tomato paste, chopped pickle, vinegar, egg yolk, salt, mustard, flour, propylene glycolalginatate, dehydrated onion, spice, calcium disodium, EDTA to protect flavor, natural flavor. Sugar is the **third** most abundant ingredient in this salad dressing. (By the way, natural flavor is the **least** found ingredient!)
2. Watch for food items labeled "low calorie," "reduced calorie," "sugarless," and "low sugar." "Low calorie" foods may not contain any more than 40 calories per serving (be sure to compare serving sizes). "Reduced calorie" foods must contain at least 1/3 less calories than the foods they are substituting. "Sugarless" or "sugarfree" foods must contain no sugar and also fall into the category of "low calorie" or "reduced calorie" according to the United States Food and Drug Administration (US FDA).
3. Try to avoid pre-sweetened fruit juices such as lemonade, Tang, Hawaiian Punch and drinks labeled "orange flavored drink" or artificially flavored lemonade, which often contain **no** real juices. And the consumer pays a premium for pre-sweetened foods such as cereals, kool-aid, and cookies.
4. If you are a "snacker," be creative. Homemade (not pre-sweetened) fruit juice popsicles, fresh fruit salad, unsalted nuts, raw vegetables (try raw green beans or cauliflower

for a change), plain yogurt with a 1/2 teaspoon of vanilla, almond or maple extract, or orange slices, cinnamon and apples.

5. Although honey and molasses are also sugars, they have a more concentrated sweet taste than table sugar. A small amount of honey or molasses can make something just as sweet, plus add a different flavoring!

As always, if you have specific questions, ask your family doctor.

## Favorite Wellness Recipe of the Month

### Barbara's GRANOLA BARS

**3 1/2 cups toasted oats**  
**1 cup raisins**  
**1 cup chopped nuts**  
**1/2 cup coconut**  
**1/2 cup instant non-fat dry powder milk**  
**2/3 cup melted margarine**  
**1/2 cup firmly packed brown sugar**  
**1/2 cup honey or molasses**  
**2 eggs (beaten)**  
**1 teaspoon vanilla**  
**1/2 teaspoon salt**

**Bake oats at 350° for 15 minutes. Combine all ingredients, place in a well greased 15" x 10" pan. Bake at 350° for 20 minutes. Cut into 2 1/2" x 2" bars, yields 30 bars, each bar contains 138 calories and 3 1/2 grams of protein.**



**Nutrition displays - you couldn't miss any of the The Wellness Center's food and nutrition information displays outside the cafeteria recently. Above (from left), Anita Hirsch, nutritionist, and Judy Stavisky, Marketing and Research Coordinator for The Wellness Center, encourage Nancy Snyder, R.N., and surgical resident Fred Denstman, M.D., to sample raw sweet potatoes and cheddar cheese dip.**



# Nutrition lectures scheduled

The past June, a new service designed to provide consultation and resources in nutritional assessment and support, was begun at A&SHHC and at Allentown Hospital.

The Nutritional Support Service, located on 7A14, is a two-year Pool Trust funded project designed to improve the nutritional care of the hospitalized patient by increasing the awareness of all health care professionals to the risks of protein-calorie malnutrition.

With this goal in mind, the Nutritional Support Service will institute a lecture series, covering a variety of topics, beginning with "Obesity: Medical and Surgical Management", by Dr. Stanley Banach and Dr. George Hartzell, on October 1, at 1:00 P.M., in the Hospital Center Auditorium.

Other programs to be presented in the Auditorium at 1:00 P.M., include: October 15 - Hyperalimentation in Liver Disease, Christopher Rock, R.Ph.; October 29 - Hyperalimentation and Trauma, Dr. Michael Rhodes and Dr. Charles Scagliotti; November 12 - Intravenous Nutritional Support of the Small Premature Infant, Dr. Judy Gibbs; December 3, Nutrition and the Burn Patient, Dr. Joseph Candio; December 17 - Enteral Hyperalimentation as a Method of Nutritional Support, Dr. Larry Feldman and Judy Holaska, R.D.

The lecture series will also include Journal Club on October 8, 1:00 P.M., Conference Dining Room, A&SHHC; November 5, 1:00 P.M., Hospital Center Board Room; and December 10, 1:00 P.M., in the Conference Dining Room.

Two case presentations will be held: October 22, and November 19, both at 1:00 P.M., in the Conference Dining Room.

The Nutritional Support Service's program director is Joseph Prorok, M.D., and the medical directors are Joseph Candio, M.D., and Larry Feldman, M.D. Team members include Marlene Keck, R.N., Judy Holaska, R.D., and Christopher Rock, R.Ph. The secretary/data coordinator is Bonnie Winkler. The telephone numbers are 2587 and 3282.

Request for consultations should be referred to these numbers, 8:00 A.M. to 4:30 P.M., Monday through Friday. Consultations on the weekend should be referred to Drs. Candio and Feldman's office at 821-1103

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