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MEMBERS OF THE FACULTY, STUDENTS AND FRIENDS:

It is a time-honored custom to assemble in this room on the day before the beginning of College work, and here, with loyal friends as witnesses, to extend a welcome to those who are about to begin the journey to the Temple of Æsculapius, and to pledge to them the faith of the Woman's Medical College of Pennsylvania.

This pleasant duty usually devolves upon the younger members of the College staff. At this time it happens that one of the oldest in service of the teaching force is the newest member of the Faculty. Wherefore, it is my privilege to greet you today. But Dr. Tracy and I have exchanged mutual promises that my time shall be short.

In a certain town in Delaware, that shall be nameless, there is a cemetery containing a stone with this epitaph: "Sacred to the memory of Mary Jane, daughter of John and Mary ——, aged five hours. An amiable child." I promise to be amiable if brevity is a proof.

On these occasions we have been wont to dwell upon the achievements of medical women; we are prone to look backward: we have even gone so far as mythical time in our desire to swell ourselves with pride. We have much joy in the deeds and accomplishments in the healing art of women of the past, from Hygeia down: Pioneers all! Pioneers, oh! Pioneers: Vale aetque salve—Hail and farewell!

Today we are overlooking the Promised Land. We are on Mount Pisgah; it is for you to enter into this Promised Land, this land of equal opportunity. Therefore, no more looking backward! There is a suggestion of arrest of Progress in the change to a pillar of salt of the fleer from Sodom, and we should remember it was Lot's wife who was the offender!

Forward! Down the centuries calls the Winged Victory of Samothrace.

You recall the pessimistic moaner of Dickens who was always talking about "the good old times," "those were the times;" and, doubtless, each one of us has thought she might have made a more valiant fight under different conditions. But it does not take a prophet to read the writing on the wall for the woman of today. In letters of light it says to her: "Come on! Here is work! Here is opportunity! Here
is equality of reward!” The war that has opened “Pandora’s Box” has also set free Hope. And, when the “world is made safe for democracy,” Democracy will be made safe for women. Those of you who have chosen medicine as your part in the world’s service have chosen well. Never was there a greater need for doctors. Never before has there been a time when the ratio of physicians to the population has been so low.

I am probably understating it in saying that the number of physicians graduated last year was 40 per cent. less than the number leaving the medical schools ten years ago. The slogan, “Fewer doctors and better,” has resulted in closing a large number of institutions and in reducing the number entering the Freshman classes of the fortunate endowed colleges. This naturally has reduced the number of physicians graduated yearly. In normal times they are probably quite sufficient for the country’s needs, but these are not normal times; the war has taken from active practice great numbers of doctors.

Up to a few days ago (September 8, 1917), there had been recommended for commissions in the Army Medical Reserve Corps 15,274 men, and of this number 10,372 had accepted their commissions. But the Moloch of war cries for more; 30,000 physicians are needed, it is said, and that is for the present need only. Base hospitals as well as the first-aid stations are positions of danger and the physical strain of medical relief in the war zones is very great. These two factors are daily depleting the number of doctors, thus necessitating constant additions to the Medical Corps to keep to the present standard. How is this rapacious maw to be fed? It is estimated that to properly man the hospitals in America with internes, 8000 physicians are required. At present, since the war and the draft, it is said these hospitals are short 60 per cent. Imagine what this means in crippling hospital service!

Will there be any relief next year? Not if the war goes on. The present 8000 or more medical students of draft age are, if drafted, to be allowed to continue their studies as members of the Medical Reserve Corps in embryo, thus getting ready to take their places in the army after they are properly prepared and are graduated in medicine. Therefore, as long as we are mobilized, the shortage of doctors for the civilian population bids fair to continue.

Who is there to fill these places but women? The demand for women physicians is, and will be, constantly an increasing one. It seems to me there is no better “war bit” for women to do than for those who have the requisite preliminary foundation to enroll themselves as students of medicine, and, granting the need, the sooner the start is made, the earlier will their services be available.

What are the recent developments showing the woman doctor as an asset?

First: The women’s hospitals that are manned by women are all crying for residents and it is but the beginning of the hospital year.

Second: Hospitals that have never before had women residents have this year established new precedents, by admitting women as house officers.
Third: General hospitals heretofore with medical men only in salaried positions are turning to women for help.

Fourth: The last stronghold of separate medical schools has capitulated. "The Crimson" will shelter women—Harvard Medical School is coeducational!

And Finally: The government is thinking of us. The General Medical Board of the Council of National Defense has recently appointed a woman physician, Dr. Rosalie Morton, to this board, and this is the personnel of her committee:

Dr. Rosalie Morton, of New York, Chairman.
Dr. Adelaide Brown and Dr. Florence Ward, of San Francisco.
Dr. Mary Lapham, of North Carolina.
Dr. Caroline Towles, of Baltimore.
Dr. Cornelia Brandt, of New York.
Dr. Emma Culbertson, of Boston.
Dr. Caroline Purnell, of Philadelphia.

Is there not a demand for the woman student in medicine? Is it not your day? Does not opportunity call to you?

"Master of human destinies, am I! Fame, love and fortune on my footsteps wait. Cities and fields I walk: I penetrate Deserts and seas remote and, passing by Hovel and mart and palace, soon or late I knock unbidden once at every gate! If sleeping, wake—if feasting, rise before I turn away! It is the hour of fate.

"And those who follow me reach every state Mortals desire, and conquer every foe Save death: but those who doubt or hesitate Condemned to failure, penury and woe, Seek me in vain and uselessly implore, I answer not, and I return no more."

In the name of the Woman's Medical College of Pennsylvania, I bid you Welcome and God-speed.

RESOLUTION PASSED BY HOUSE OF DELEGATES OF STATE MEDICAL SOCIETY OF PENNSYLVANIA, SEPT. 26, 1917

WHEREAS, The calling out of the medical men of this State to military service is already causing serious shortage in hospital and dispensary staffs; and

WHEREAS, Women physicians, not yet subject to military draft, are already in demand to fill these vacancies in far greater numbers than are available, therefore be it

Resolved, That the members of the House of Delegates be instructed to carry to their respective county societies the suggestion that the societies issue in their respective communities public appeals to college women who are educationally and temperamentally fitted for the study of medicine to take up this study at once that they may prepare themselves to enter the medical profession and thus aid in meeting the coming stress in caring for the sick in our civil population.
OUR SERVICE FLAGS

The call to national service has reached the Woman's Medical College from several angles, and the illustration on our cover, Our Service Flags, represents our contribution to the personnel of Army and Navy and Red Cross workers.

The **nine stars** on the central flag represent the following members of our **TEACHING STAFF** who have gone to serve Uncle Sam in the camps of this country or the hospitals and villages of Europe:

Dr. Alice Weld Tallant, Professor of Obstetrics: With Smith College Unit: Village relief work in France.

Major George Morris Piersol, Professor of the Principles and Practice of Medicine and Clinical Medicine: Assistant Division Surgeon, Camp Dix, N. J.

Major Theodore Le Boutillier, Clinical Professor of Pediatrics: M.O.T.C. Fort Oglethorpe, Ga.

Major Emory G. Alexander, Clinical Professor of Surgery: Base Hospital Unit No. 34, Allentown, Pa.


Captain Laura Hunt, Clinical Professor of Otology: Hospital Unit of the New York Infirmary for Women and Children: Accepted and officers commissioned by French Government.

Captain James T. Rugh, M.R.C., Clinical Professor of Orthopedic Surgery: Supervising Orthopedic Surgeon for five southern camps.

Captain Ward Brinton, M.R.C., Clinical Professor of Medicine: Ambulance Corps, Tobyhanna, Pa.


Lieutenant Leo H. Bernd, Demonstrator of Clinical Surgery: French Hospital, near Paris, France.

The **eight stars** in the flag at the left represent the following **ALUMNÆ** who are in foreign service or will soon sail for France:


Dr. Marguerite Cockett (1905): Somewhere in France.

Dr. Ethel M. Lyon-Heard (1905): Somewhere in France.

Dr. Aldona Szlupas-Jankovski (1908): Village relief work in Russia.

Dr. Maude M. Kelly (1917), Philadelphia: With Smith College Unit: Village relief work in France.

Captain Marie K. Formad, Captain Laura Hunt, Lieutenant Mary Getty, Philadelphia: Hospital Unit of the New York Infirmary for Women and Children. Accepted and officers commissioned by the French Government, for service in France.
The **twenty stars** in the flag at the right represent the following members of our immediate families in service with army or navy:

Donald H. Brown, Private in Engineers Corps, Panama.
Sergeant Francis J. Clinton, Medical Corps, American Lake, California.
Lieutenant W. H. Dinkins, 366th Infantry, Camp Dodge, Iowa.
2d Lieutenant Harold A. Fahr, 109th Infantry, U. S. A.
1st Lieutenant Arthur Hartley, M.D., M.O.T.C., Camp Greenleaf, Fort Oglethorpe, Ga.
1st Lieutenant Baldwin Lucke, M.D., Pathological Laboratory, Base Hospital, Camp Taylor, Kentucky.
1st Lieutenant James McFarland, M.D., Medical Corps, Fort McClellan.
Lieutenant Bennett H. Perry, Quartermasters Corps, Columbia, S. C.
Redding F. Perry, R. O. T. C., Chattanooga, Tennessee.
Joseph B. Sharp, 1st Class Hospital Apprentice, U. S. S. *Kentucky*.
Major Evarts Tracy, 1st Company American Camoufleurs, 25th Reserve Engineers, France.
1st Lieutenant W. M. Tucker, M.D., Medical Corps.
Captain William Warfield, Fort Totten, Long Island.
Captain William H. Wilbur, U. S. A., Department Military Tactics, U. S. Military Academy, West Point.
Lieutenant John Wilbur, U. S. N., Executive Officer, U. S. S. *Hartford*.
Lieutenant Harold R. Keller, U. S. N., Engineering Officer, U. S. S. *Chester*.
Ensign Jamard Zeckwer, Naval Reserve Corps.

THE WAR VACANCIES ON THE TEACHING STAFF ARE AT PRESENT FILLED BY THE FOLLOWING:

Dr. Frederick P. Henry, Emeritus Professor of the Principles and Practice of Medicine and Clinical Medicine.
Dr. Henry F. Page, Clinical Professor of Medicine.
Dr. Marion H. Rea, Assistant in Medicine.
Dr. Florence E. Kraker, Acting Professor of Obstetrics.
Dr. Eleanor C. Jones, Acting Clinical Professor of Pediatrics.
Dr. Harriet L. Hartley, Clinical Professor of Surgery.
Dr. Rose Hirschler, Acting Clinical Professor of Dermatology.
Dr. James K. Young, Acting Clinical Professor of Orthopedic Surgery.
Dr. A. C. Sautter, Ophthalmology.
Dr. Mary E. Shepherd, Demonstrator of Clinical Surgery.
NOTES FROM THE SMITH UNIT IN FRANCE

By Alice Weld Tallant

The long-expected start for the country was made Tuesday, September 11. Our first instalment consisted of the six members of the Unit who had been selected by Mrs. Hawes as pioneers (Misses Lewis, Wolfs, Wood, Chapin, Leavens and Bennett), with the addition of the medical staff. The start was made in the two Ford cars, the truck loaded with a collection of suit cases, camp beds, duffle bags and other articles of miscellaneous shapes and sizes, while the jitney conveyed six people and such minor baggage as could not be stowed aboard the truck. An auto tire stood between the seats and framed the knees of Miss Leavens and A. W. T. alternately; the wooden cases of “essence” lurched unsteadily toward the passengers and distributed blue paint impartially; Miss Chapin essayed to hold the oil-can in place, and Dr. Kelly supported a pail of comfiture against her shins. As we sped through the streets of Paris, it is not too much to say that we attracted attention.

We had intended to get away at ten, but considered ourselves fortunate to be off by twelve-fifteen. The lateness of our start made lunch the first acute question of the trip as soon as we had left the confines of Paris behind us, but the question was complicated by the fact that Miss Lewis, who was driving the truck, insisted on a down grade as a stopping place, in the interest of starting her machine again. As we felt that the truck and its contents were really too important to be left on the road on account of a failure to start it going, we waited with impatience until the favorable slope appeared and gave us a chance to sit by the roadside and eat. The most notable thing about the lunch was the varied assortment of cheese which had been provided to suit the assorted tastes of the company—cream cheese, Gruyère and Camembert all receiving their share of appreciation.

The next stop was made to water the cars, a process in which we were aided by an unexpected English inhabitant, who told us stories of the German occupation and retreat. Our road went on through the beautiful forest of ______ until we reached the edge of the town, the beginning of the “zone des armées,” where our feúbles bleues (safe conducts) were demanded. Here a new complication arose, when it was discovered by the military man that our first chauffeur’s paper was made out in the name of Monsieur Lewis, while the person at the helm was so plainly “Mees,” but a vigorous display of passport and identification card sent us on our way again. At ______ the truck found that its can of oil had dropped off somewhere along the road, and we made an extended tour of the town to replace it.

Our way now lay in part through another “forêt,” from which we came out into the utter desolation of the little town of ______ which was shot to pieces in the fighting last spring. Then we made our way to the next town with its cathedral towers as landmarks, made a triumphant entry into the town, reached the square in front of the Hotel de Ville ______ and there the Ford truck made a triumphant and complete stop. In about two minutes, apparently every French soldier in Noyon had gathered about us in the “service de secours.” A mecha-
nician was brought from the garage, and when he found the evil too
great for immediate remedy the friendly spirit of our allies came still
further to the front, for the mechanician went in search of a camion to
take the truck’s load, while another friend stood by the jitney to let us
go to dinner. The big camion not only took our load aboard and towed
our Ford to the garage but came back to the square to lead us to Grècourt.

By this time darkness was well upon us, and we sped over the roads
with little chance to see anything of the landscape except the rear view
of the camion which led us. Our military friends seemed to have no
more accurate knowledge of the way there than we, and there were
frequent stops to consult the map by the light of a match. At last
they came to a discouraged pause before a desolate ruin, and assured
us they did not know where we were. It was at this point that the
head of the medical department interposed, with eloquent gestures in
the direction of the north star, and under her guidance the jitney backed
out and took the lead. We made one turn to the left, a second turn,
and then at the next cross-road a guide post with the welcome legend,
“Grècourt 1.3 K.,” on it, and in a few minutes more, at the hour of eleven,
we were entering the grounds of our chateau, to be welcomed by Madame
la Maire and guided to our baraques.

The soldiers unloaded our baggage, and the big camion rumbled
away, leaving us to put up our beds and lie down in the peace and chill
of our new home.

There remains but one thing to tell about our journey. The next
morning daylight revealed to us that if we had kept straight ahead
for a few hundred yards, at the point where the soldiers became dis-
couraged, we should have come to the gate of the chateau. The accu-
rate guidance of the head of the medical department may be open to
question under the circumstances, but the fact remains that we reached
our goal, even if it took us three sides of a square to do it.

Our headquarters and the villages in which we are to work were
already assigned to us by the time we landed in France. I wish
you could see what a beautiful place it is—not only the lovely
French country which stretches off in every direction, but also our own
home here for the winter. We are on the grounds of a chateau which
was dynamited by the Germans before their retreat last spring, but
the destruction of the building has not affected the charm of a large
part of the grounds, and there is a bit of woods which is specially
lovely these glorious moonlight nights—for we have been wonderfully
lucky in our weather. In an open space back of the chateau we found
waiting for us three “baraques” (two-room houses built of a sort of
fiber cement) which the French Government had supplied for us. We
use one room for our living-room and dining-room, and the rest for
sleeping quarters. The cooking is done by the gardener’s wife in the
kitchen which remains in her half-wrecked house. Our own portable
houses came only last week, and we have had one of them put up already,
while the ground is leveled for another. Dr. Kelly and I have moved
into the one which is already placed, so as to make more room in the
baraques. It is a so-called “tent house” with a canvas roof and canvas
panels in the upper half of the walls. I do not know how warm it will be in winter, but with a stove it should be pretty comfortable. There is one building on the place, an "orangerie," which we are using for our dispensary just now and expect to use for the children's meetings later on when the weather is bad.

I should have mentioned also the stables, which are at present occupied by the sixteen remaining inhabitants of Grécourt, in spite of the holes in the roof which let water through on a rainy day. We yearn to see these inhabitants lodged in baraques on their own bits of land, so that we may use the stables to shelter our automobiles—and our cows. For we have six cows which we bought before coming here and one which was presented to us a week or so ago. There is a tradition that Dr. Kelly's description of my need of milk, as given to a certain official, was so moving that he furnished the cow for my special benefit. At all events, we have the cow and I have plenty of milk to drink (besides what we give out to the people), and they insist that the cow should be named Alice. The arrival of the other six cows at the railroad station, some five miles away, their welcome by a reception committee of the Unit, and their progress to Grécourt with the assistance of various women from our stables, would make a story in itself.

We have a round dozen of villages in our charge. Two of the nearest are also the largest, which is fortunate, because the people can easily come to us and we thus save much time. The largest has perhaps three hundred inhabitants at present. At the other end of the scale is a little place so utterly in ruins that only one family has had the courage to come back. As far as the desolation and ruin which the Germans left in their trail, there are no words of description which can overstate the case. The village people talk of their troubles in a matter-of-course way which is really more heartrending than anything else. One will point to a few fragments of walls overgrown with rank weeds and say, even with a smile, "That was my house." If you ask a woman how many children she has, she will enumerate a few young ones and then add, without a change of expression, "And two older ones with the Boches." The husbands are either in the French army or "prisonniers avec les Boches," and the villages are practically without men; except a few of the old and feeble. Children are plentiful, however; over one hundred and twenty-five are on the roll of those who come once a week for games and classes. The medical department is finding a lot to do for the children too, not because they have serious or acute illnesses but because nutrition and sanitary conditions are at a low ebb, naturally enough, and the children suffer accordingly. I regret to state that one of the important medical jobs seems to be the care of their heads; what we call euphemistically "the pleasures of the chase."

The people have received us with apparent appreciation of our wish to help them. One woman, who helps us with the dispensary which we have established in her forlorn little village, said she wished her children were here (they are avec les Boches) to be so well looked after. We are seeing from twenty to twenty-five patients every day in the dispensaries or in their homes.
One of our first enterprises was the celebration of the fete of Saint Matthew, the patron saint of Grècourt, on the twenty-first of September. The idea came from the preliminary visit which Dr. Kelly and I made to Grècourt two days before we came up with the first instalment of the Unit. When the people were showing us their little church that day, I was happily moved by curiosity to inquire the name of an unfamiliar-looking saint whose statue had a prominent place in the church. They explained to me that it was their patron, and then told us how much they wished that they could have mass in the church on St. Matthew's day. The church was very little harmed by the Germans, but there has been no service in it since their arrival, and the curé is a prisoner now, so that the mass seemed a hard thing to plan. I am sure you will be glad to know that, through a military doctor with whom we made friends, a prêtre-soldat was secured from the hospital where he was stationed, and the mass was held with all the proper ceremony. The little church was crowded with people from the neighboring villages, and I do believe that the service meant a great deal to them. Of course the Unit attended en masse (all but Miss Gaines were here by that time) and even added our share by singing cantiques which Dr. Kelly had taught us for the occasion.

I have not time to write much more and I have left so much unsaid. We have a social service department, of course, and the children's department has just organized a traveling store to go to our more distant villages on stated days (this plan has been tried by an English œuvre not far from us, and has succeeded well), besides a store to be held here on our own grounds. You may not understand about this unless I explain that, with some of the people, the difficulty is not that they are absolutely destitute but that they have no way of getting supplies without walking miles to the nearest town, and that the prices are too high for their scanty means. The different organizations here, besides distributing material free of charge to those who cannot pay, sell at low prices (two-thirds to three-fourths of cost) to the people who can pay something.

I believe it is always a stock question to ask people what has impressed them most in any new experience, and if it were put to me I think I should say, after such obvious points as the desolation of the villages and the courage and cheer of the people, that I was most impressed by the number of cats which seem to have survived the destruction of the village. Perhaps the Smith Unit feels a little bitter on the subject of cats because of one or two hereabouts who seem able to foil our most elaborate efforts to protect our milk and other food products, but I must say that they do seem to be a wonderful comfort to these people who have lost everything. One old couple, whom the medical department has in charge, have three (always occupying the only available chairs in their little kitchen), and the stoves of the countryside are made with a surrounding rim which seems to be on purpose for the kittens to lie on. I commented on the number of cats in talking with a woman the other day, and her eyes almost filled with tears as she told me how, when she came back to the ruins of her home, her cat was sitting on the doorstep to welcome her—mon seul souvenir, as she said.
NOTES FROM LIEUTENANT LEO H. BERND, WITH THE AMERICAN EXPEDITIONARY FORCES IN FRANCE

SEPTEMBER, 1917.

"I am now transferred from a hospital about 300 miles from Paris to one near the city. This is a French hospital, and I am sent here for bone surgery. In the former hospital it was all abdominal work. That was interesting, but this bids fair to be great. "I wish they had you (referring to Dr. Buchanan) where I was placed before. They certainly need a good oculist there. The more I see of eye work here the greater opinion I have of yours. You may put that in the College Bulletin. I told the colonel in Paris that, and I hope they send for you. "Please call up Barton and remind all there that I am with them in spirit, and if I get killed I am coming back to watch over them. "I would love to send pictures, but it is not allowed."

OCTOBER, 1917.

"I saw Petit, the great gynecologist, yesterday, doing surgery of the lung. "The patient was laid on a table with an x-ray tube arranged under it. Petit put on an eye-piece of aluminum and looked through the lung. Then he made a small skin incision, and with a pair of long forceps pushed through the muscles, caught the piece of metal, and extracted it with practically no damage. "I sat on the table, put on the eye-piece, and inspected my legs. It was certainly uncanny."

A NOTE ON THE TRAINING OF MEDICAL OFFICERS

By GEORGE MORRIS PIERSOL, M.D.
PROFESSOR OF THE PRINCIPLES AND PRACTICE OF MEDICINE,
WOMAN’S MEDICAL COLLEGE

What member of the Medical Reserve Corps of the Army will ever forget the restlessness, the anxiety, and the nervous strain of those first weeks after war was declared? Those who had been in the Reserve Corps for some time, and who since 1915 had been quietly preparing for the inevitable, knew that they would be ordered to active duty; but how soon; where; or in what capacity? Those were the questions uppermost in the minds of all. When orders came, uncertainty was at last set at rest; now a definite situation actually had to be met, a situation fraught with far-reaching consequences and unknown possibilities for many.

It is a tribute to the patriotism of the medical profession that, with few exceptions, whenever reserve officers were ordered to duty they were mindful of their obligation to the government and obeyed their orders eagerly and promptly, counting not the cost. That in many
instances the cost was high and the sacrifice great is undeniable. To leave abruptly the familiar routine of practice, carried on amidst surroundings at least of comfort; to set aside the labors and ambitions of years; to overturn the habits of a lifetime; and to radically revise the entire scheme of existence was no small tax on the loyalty and enthusiasm of any man. Nevertheless, it is a safe assumption that, in spite of all it entails, there is scarcely a man among the thousands of reserve officers that today would not rather be taking an active part in our ever-increasing military establishment than to be complacently pursuing the normal course of his profession.

In most instances the first step toward converting the doctor into a soldier was to send him to one of the several training camps for medical officers that were established throughout the country. At the time few realized the vital necessity for this. Today all appreciate what it would have meant had reserve medical officers been plunged from civil practice into the totally new duties and unfamiliar surroundings of Army life. It is axiomatic that, regardless of his attainments as a physician, the doctor is a negligible military asset until he has learned to be a good soldier. The truth of this statement becomes apparent when one realizes that in the Army a medical officer is charged with many duties that are purely of a military character and which can often be performed better by a good line officer without any medical education, than by a good doctor without any army training.

Will anything ever efface those impressions gained the first days in a training camp? All rosy dreams of spacious quarters with orderlies in attendance and other perquisites popularly attributed to officers of the Army were quickly dispelled the moment the uninitiated medical officer, nervous and self-conscious in his none-too-comfortable, new, olive-drab uniform, awkwardly reported to the headquar ters of his camp. From then on his schooling progressed with disconcerting rapidity.

In spite of being composed entirely of commissioned officers, the medical training camps do not differ essentially from the other encampments in which applicants for commissions in the other branches of the military service are trained. All medical officers upon entering camp are placed upon an equal footing as students, regardless of age, rank, or professional ability. They are divided into companies of a hundred and thirty or forty men, each commanded by student officers and non-commissioned officers selected from among the officers in training solely upon the basis of military efficiency not medical skill, the rest of the students occupying the position of privates. The internal administration of these companies differs in no way from that found in any company of enlisted men. Every morning at 6 o'clock they are turned out and by 6 o'clock are being put through setting-up exercises. Immediately after breakfast the students have to “police-up” their barracks and the adjacent grounds so that everything is clean and in order by 7.30, when drill call sounds. From then on until retreat at 5.30 in the afternoon the day is punctuated by a series of classes and formations. For the most part the officers have their evenings free, until at 9.30 all lights go out with the last note of taps.

Companies are quartered in long, one-story, wooden barracks, in which
from forty to sixty students sleep. It is surprising how soon a man can acquire the art of condensing himself and his possessions into an area six feet by four. Each company messes in its own mess halls, a separate building near their barracks. Here the most epicurean student quickly learns the uselessness of superfluous table equipment and the advantages of scrubbed pine boards over the most spotless damask.

The transition from a tired, pale, stooped physician to an erect, sunburned, alert, soldierly individual is a matter of but a few weeks. All who have observed this change agree that it is a truly marvelous result of discipline, drill, exercise, regular meals, and more unbroken sleep than the average practitioner ever enjoyed in his life.

The foundation stone upon which every military structure is reared is discipline. Discipline is a most difficult thing to instil into any free-born American citizen, but the difficulties are greatly increased when that citizen happens to be a doctor. Their irregular, busy lives and the nature of their work tend to develop in physicians individualism, independence of action, and the habit of giving rather than taking orders. But these inherent tendencies have been quickly and successfully overcome by the strict routine of the training camps. The great importance of teaching medical officers team-work and prompt obedience is obvious when one considers that not only must they become smoothly running cogs in the complicated mechanism of the great Army machine, but they must themselves command and lead enlisted men, often under most trying conditions, and efficient results can only be obtained from these men at the price of rigid discipline.

The first object in the training of the medical officer is to render him absolutely familiar with all the functions and duties of the Medical Department privates that will ultimately be under his control. To this end a large part of the officer's early training differs but little from that given any recruit. Physical exercises, close-order drills, practice marches, the care of himself and his equipment in the field, supplemented by instruction and lectures on the more technical side of the organization and duties of the Medical Department in campaign all combine to bring about the desired result.

After the student officer has thoroughly mastered the fundamentals and demonstrated his ability to command he is usually relieved of some of the more irksome features of his training by being made a company officer. Then after a varying period he is given an opportunity to actually assume the responsibilities and duties of a medical officer, by being assigned temporarily to some regiment of line troops, an ambulance company, a field hospital, or an evacuation hospital. Here for the first time he assumes charge of groups of enlisted men who must be drilled, instructed, and cared for. If he is sent to a regiment he learns at first hand the manifold duties and trials of the regimental surgeon. As such he becomes the medical and sanitary advisor of the regimental commander; he becomes responsible for the health of over two thousand fighting men; is their first succor in combat, and must be prepared to follow his regiment wherever it goes, even "over the top."
pendent medical units, and offer the hardest but at the same time the most active and varied forms of sanitary service. The medical officer attached to organizations of this kind must be capable of enduring prolonged physical strain and must also familiarize himself with work of a very special character, in addition to learning the varied duties and responsibilities that fall to the lot of a company commander.

As a rule, it requires about two months of vigorous, intensive training to impart to the average physician the proper military viewpoint and knowledge essential to a medical officer. By that time he is sufficiently prepared to go forth and take his place among the thousands of officers of all branches of the service that are today directing the multitudinous activities of the great divisional camps. In these camps for the first time the medical man appreciates the true gravity and responsibility of his position. Here the lessons of the training camp constantly find their practical application. Ever-changing problems must be solved promptly and correctly. The element of play has vanished; henceforth it is all grim, serious reality.

It must not be thought, however, that with the end of his period of training and his entrance into definite military service the education of the medical officer ceases. On the contrary, it has only begun. To the officer who maintains the proper interest in his work and is alive to his opportunities his career from now on is one great schooling, a continuous post-graduate course carried on under the exacting but stimulating conditions of actual campaign.

To mobilize millions of new recruits, to train them rapidly into an effective fighting machine, and to accomplish this training largely through the medium of reserve officers of limited practical military experience is a huge task, new alike to the oldest as well as to the youngest in the service. To develop a medical department sufficiently large and properly trained to care for our vast armies is an equally new problem. Yet no one who has observed the eager enthusiasm and determination which the officers of the Medical Reserve Corps have brought to their new duties can doubt their ability to do their share in the solution of this problem. True to the traditions of their profession, the medical men of the Army are destined to play no small part in the inevitably successful outcome of the stupendous undertaking to which we as a nation are now so firmly committed.
The second annual meeting of the Medical Women's National Association, Dr. Bertha Van Hoosen, of Chicago, President, was held in New York City in June, 1917. In view of the pressing need of physicians and surgeons in the war zone and in the devastated regions of Europe, a War Service Committee was appointed by the Association to organize women physicians of the United States, in preparation for such service as they might be able to render.

This body created an Executive Committee, of which Dr. Rosalie Slaughter-Morton, of New York, was unanimously elected chairman.

Mr. Leo Schlesinger, of New York City, placed at the disposal of the committee a suite of rooms in his office building, 637 Madison Avenue, admirably suited to its purpose, where, early in June, the committee was installed and intensive work begun.

Before this committee had completed its organization, Dr. Franklin Martin, chairman of the General Medical Board at Washington, asked for an outline of the plan for its work. This outline received the unanimous approval of the Board, of which Dr. Morton was promptly appointed a member.

Copies of the outline prepared for the General Medical Board were laid before Col. J. R. Kean, Director of the Department of Military Relief of the American Red Cross, and the Surgeon-General of the Army, General Gorgas. Both expressed the greatest interest in and approval of the work, General Gorgas saying that if the war continued for any length of time the services of every woman doctor in the country would eventually be needed.

The Executive Committee adopted the following platform, which was sent to Dr. Bertha Van Hoosen, the President of the Medical Woman's National Association, and recorded in Washington, July 11, 1917:

1. That our work be so arranged that it would be solely for the purpose of meeting existing needs and of making provision to meet needs which will arise if the war is prolonged.
2. That a registration sheet be sent to the women graduates of colleges of high standing throughout the U. S. to obtain a classified list of well-qualified women of experience, this list to be given to the American Red Cross, to the Surgeon-General of the Army, and to the U. S. Army Public Health Service, in order that the women so registered shall pass through these channels to civilian and army relief as they may be needed.
3. It was stipulated that, as events are moving rapidly, it would not be possible to confer with anyone except the officials in Washington regarding the development of the work. It would therefore have to be understood that the entire guidance of the work be entrusted to the Executive Committee of the War Service Committee of the Medical Women's National Association, with full power to act regarding its membership, scope of work, and complete development.
4. That this Committee carry no propaganda except that it stands with the Red Cross to render the best service possible.
5. We request that the women physicians and surgeons of the United States be accepted as members of the Army Reserve Corps, but we do not make it a condition of service, for we realize that by so doing we handicap our opportunity for immediate service, at home and abroad, which is our main desire in volunteering and in making a classified registration of the service we are fitted, and willing, to render.
In view of the fact that the war service of the women of Great Britain is being made known to the world, under the name of Scottish Women’s Hospitals, it was decided by our Executive Committee, after consultation with the authorities in Washington, to establish an organization entitled The American Women’s Hospitals, through which the war service of the American women physicians would be recorded. Though the service may be rendered through channels which differ to some extent from the activities of the Scottish Women’s Hospitals, in that the American women are organizing for civilian as well as for military relief both at home and abroad, yet, when the medical history of the war is written, the American women will be found to have rendered as much medical and surgical service as the splendid and inspiring work which has been, and is being, accomplished by our colleagues of Great Britain.

Blanks for registration in the American Women’s Hospitals have been sent to over 5000 medical women in the United States. On October 6, 1115 women had registered for service either at home or abroad. It is desirable for every woman physician to put herself on record as willing to serve her country at this time, and the Committee earnestly requests that if any woman physician has not yet done so, she will at once secure from the Headquarters of the American Women’s Hospitals (Mrs. C. M. Conger, Executive Secretary), 637 Madison Avenue, New York City, the proper registration blank, and will fill out and return the same promptly to Headquarters.

The blank is so complete that no woman can fail to find her bit of opportunity either in this country or in Europe.

When the General Medical Board calls for data regarding women physicians, the War Service Committee of the Medical Women’s National Association will then be in a position immediately to furnish proof that women physicians are competent to fill every position of responsibility which may have to be carried in the present war by thoroughly trained physicians and surgeons.

Non-medical members of the American Women’s Hospitals are called American Volunteer Aids, and there is a special registration form on which must be entered all data concerning women who wish to be laboratory assistants, ambulance drivers, stretcher-bearers, interpreters, dieticians, clerks, etc. A number will be needed in the units which the Committee has already been asked to have in readiness, In England the women who are doing this work are called V. A. D.’s, which means that they belong to the Volunteer Aid Department. The American assistants will be called A. V. A.’s, and there is a distinctive uniform for their identification and protection.

The following list of sub-committees, with chairman of each, suggest the completeness of the organization of the American Women’s Hospitals, and may be of use to any one desiring to write for further information on any detail of the work:

EXECUTIVE COMMITTEE:
Rosalie Slaughter-Morton, M.D., Chairman.
Mrs. C. M. Conger, Executive Secretary, 637 Madison Ave., New York City.
Organization of Medical Women for War Service, Belle Thomas, M.D., 312 W. 109th St., New York City.

Foreign Service, Civil and Military, Caroline M. Purnell, M.D., Chairman, 132 S. 18th St., Philadelphia, Pa.
Committee on Physical Examination, Martha Welpston, M.D., Chairman, 32 N. State St., Chicago, Ill.; New York Representative, Marie Chard, M.D., 616 Madison Ave., New York City.

Civilian Hospitals and Dispensaries, Elizabeth P. Merceis, 17 Plymouth St., Montclair, N. J.; Grace N. Kimball, M.D., 337 Mill St., Poughkeepsie, N. Y.

Army Hospital Service, New York Representatives, Augusta Vedin, M.D., 224 East 15th St., New York City; Wilhelmina A. Ragland, M.D., 150 East 35th St., New York City.

Women's Army Hospitals in Home Zone, Mary Almira Smith, M.D., Chairman, 33 Newberry St., Boston, Mass.
Hospitals for Acute Cases, New York Representative, Matilda K. Wallin, M.D., 616 Madison Avenue, New York City.

Hospitals for Convalescents, Harriet Baker Hyde, M.D., Post Road, Greenwich, Conn.

Care of Soldiers' Dependents, Eleanora S. Evarhard, Chairman, The Calvert, Dayton, Ohio; New York Representative, Ethel Dotty Brown, M.D., 26 Gramercy Park, New York City.

Hospital Service for Prisoners of War, Minnie L. Maffett, M.D., Chairman, Dallas, Texas; New York Representative, Anna Hubert, M.D., 149 E. 49th St., New York City.

Sanitary Inspection of Camps, Eliza. M. Mosher, M.D., Chairman, 184 Joralemon St., Brooklyn, N. Y.

Laboratory Work, Martha Wollstein, M.D., 1 W. 81st St., New York City.
Committee on Anesthetists, Alma Vedin, M.D., 224 E. 15th St., New York City.
Committee on Radiographers, Gertrude W. Welton, M.D., Chairman, 345 W. 50th St., New York City.

Substitution in Hospital and Clinical Service, Edith Eareckson, M.D., Chairman, 922 Madison Ave., Baltimore, Md.; New York Representative, Alice Wakefield, M.D., 749 Madison Ave., New York City.

Substitution in Private Practice, Edith R. Hatch, M.D., Chairman, 2620 Main St., Buffalo, N. Y.; New York Representative, Mary McMillan, M.D., 137 E. 63d St., New York City.

Committee on Reciprocity, Elizabeth J. Van Slyke, M.D., 141 W. 109th St., New York City.

Committee on Dentists, De Lan Kinney, D.D.S., Chairman, 276 Fifth Ave., New York City.

Dr. Caroline M. Purnell, Chairman of Sub-committee on Foreign Service, supplies the following list of physicians who have been referred by the American Women's Hospitals, and are already serving in Europe.
CHILD, DR. FLORENCE, 5023 McKean Ave., Germantown, Pa.
Degree before Medical College: A.B. Bryn Mawr.
Medical College: Johns Hopkins, 1909.
Positions held at time of appointment to foreign service: Medical Inspector for Division of Child Hygiene, Bureau of Health, Philadelphia.
Child Welfare work in France.

CHILD, DR. DOROTHY, 5023 McKean Ave., Germantown, Pa.
Degree before Medical College: A.B., Bryn Mawr, 1910.
Medical College: Johns Hopkins, 1914.
Postgraduate study: University of Pennsylvania, Degree Dr. P.H., 1916.
Associate Professor Physical Education, lecturer on Hygiene and First Aid, and physician to women students, University of Kansas, 1916–17.
Speaks French, German.
Child Welfare work in France.

BANCROFT, DR. MABEL H. F., 472 Central Ave., East Orange, N. J.
Medical College: Woman's Medical College of Pennsylvania, 1903
Positions held at present: On clinic staff Orange Memorial Hospital, Orange, N. J.
Speaks French.
Child Welfare work in France.

GREENOUGH, DR. CLARA M., 38 Federal St., Greenfield, Mass.
Degree before Medical College: A.B. Smith, 1894.
Medical College: Northwestern University Woman's Medical School, 1899.
Postgraduate study: 3 months in Chicago.
Positions held at present: Medical Inspector, Agent of Board of Health, including Tuberculosis Dispensary.
Slight amount of German.
Social Service in France.

PARKER, DR. ESTHER E., 326 E. State St., Ithaca, N. Y.
Degree before Medical College: A.B.
Medical College: Cornell, 1907.
Postgraduate study: Lying-in Hospital, 2 weeks.
Speaks French and German.
Child Welfare work in France.

KEYES, DR. REGINA FLOOD, Hotel Buckingham, Buffalo, N. Y.
Medical College: University of Buffalo; Dispensary and Erie County Hospital.
Postgraduate study: Traveled and visited large hospitals in Europe and Japan.
Positions held at present: Gynecologist Buffalo General Hospital; Staff Erie Hospital; St. Mary's Hospital; Instructor University of Buffalo.
Speaks some French and German.
Refugee Hospital in Serbia.

FLOOD, DR. F. MABEL, 705 Maple Ave., Elmira, N. Y.
Medical College: University of Buffalo, 1911.
Refugee Hospital in Serbia.
HAN, DR. JENNIE A., 174 South St., Morristown, N. J.
Degree before Medical College: B.A.
Medical College: Cornell, 1910.
Positions held at present: Pathologist and Anesthetist Memorial Hospital, Morristown, N. J.
Speaks French and some German.
Red Cross Hospital, Paris.

FRAZEE, DR. LOUISE, Bloomingdale Hospital, White Plains, N. Y.
Degree before Medical College: B.A.
Medical College: Johns Hopkins, 1914 register.
Positions held at present: Assistant Physician Bloomingdale Hospital
Somewhere in France.

BLAIR, DR. ESTHER L., Pittsburgh, Pa.

WIGGIN, DR. LAURA C., Lowell, Mass.

NEVIN, DR. MARY, Albany, N. Y.

HEARD, DR. ETHEL L., Galveston, Texas.

WOODROFE, DR. HELEN L., Los Angeles, Cal.
Child Welfare work in France.

Dr. Purnell further supplies the following quotation from Dr. Herman M. Biggs, representative of the Rockefeller Tuberculosis Commission in France: "Seven to nine women have already been sent to France for tubercular work by the Rockefeller Foundation and Red Cross, which act jointly. Probably no others will be sent immediately. Dr. Mary Lapham is listed and may be called upon."

Several units of women for foreign service, chiefly for village relief work or civilian hospitals and dispensaries, are being organized on paper, to be ready for call by the Red Cross to active duty at short notice.

One such unit will be called the Woman's Medical College of Pennsylvania Unit. When called out it will probably go to Serbia, financed by The American Red Cross at Washington.

The personnel of such a unit includes:

1 gynecologist.
1 general surgeon.
1 obstetrician and pediatrician.
1 radiologist and x-ray technician.
1 bacteriologist, pathologist and laboratory technician.
1 internist.
1 eye specialist.
1 ear, nose and throat specialist.
1 general medicine.
1 assistant surgeon.
1 assistant obstetrician.
1 dentist.
1 pharmacist.

21 nurses.
20 nurses' assistants.
chauffeurs.
1 bookkeeper.
1 recording clerk.
1 electrician.
1 dispensary clerk.
1 plumber.
1 mechanic.
1 orthopedic mechanic.
1 matron (housekeeper).
1 cook.
1 seamstress.
several helpers.

Dr. Purnell will be glad to correspond with any woman qualified and ready to register for this service.
THE YOUNG WOMEN'S CHRISTIAN ASSOCIATION IN
WAR SERVICE

The National Board of the Young Women's Christian Association
has established a Council for War Work, whose activities have developed
rapidly under wise planning and generous financing.

With a true understanding of the importance to the soldiers of social
intercourse under attractive and homelike conditions, this war council
has established hostess houses in or near the camps, where the boys may
meet socially their mothers, sisters and girl friends.

In addition, Field Workers are sent out to communities in the neigh-
borhood of the large cantonments, there to interest and secure the
cooperation of the women and girls of the community in the social and
moral welfare of the men in these new camps.

This field work includes, wherever possible, talks on sex hygiene and
social morality, delivered by women physicians to selected groups of
schoolgirls and young women.

Dr. Mary R. Noble, Woman's Medical College, 1900, of Colorado
Springs, writes as follows of this war service for the Young Women's
Christian Association:

"My trips for Social Morality work have taken me into Kansas, Utah,
Texas, Tennessee, Kentucky, Alabama and Mississippi, most of the
cities visited being in proximity to cantonments.

"The Young Women's Christian Association, through its Social
Morality Commission, is trying to educate and help the women and girls
of two great classes: The first are the very young schoolgirls, who
'lose their heads' over the soldier boys, and in uncontrolled contact
constitute a temptation and menace to the boys, while they are them-
selves victims of their own ignorance. The second class are the women
and girls either near cantonments or 'mobilized' by thousands in new
localities where the war industries have developed; girls often very
young and adventurous, and needing desperately the advice and help
of special and tactful field workers.

"My work was a miscellany. It included giving three-talk courses
to High School girls, when the community could be persuaded of the
immediate importance of the subject. Generally the Superintendent of
Schools was not willing for the course to be given; either sex-hygiene
had been unsuccessfully presented at some previous time, or he was
afraid of a conservative Board behind him or of conservative parents
behind the Board.

"Private schools in some cities, notably St. Louis and Nashville,
gladly took the lectures entire. In High Schools, when only one talk
could be given because of prejudice (one Principal managed to cut the
time down to 13 minutes), only the fringe of the subject could be touched
and no sex instruction included.

"The High School girl is, however, the most responsive. That she
is needy there is no manner of doubt. In one city a Juvenile Court
officer stated to a Woman's Club that there would be one thousand
illegitimate children born there this year, chiefly of young schoolgirls.
The camp near this city is a small one. In another city, the Superin-
tendent of schools said that instruction in sex matters was too late if not given before High School years! It should be given to seventh and eighth grade girls! He was willing for the entire course to be given in his schools.

“The situation differs greatly according to whether it is a city or a small town over against which the camp lies. The small town has almost always ‘bitten off more than it can chew.’ It cannot house the wives or other relatives of the men in camp. It cannot produce jobs enough for those who want to be near their husbands and earn something as well. The swarms of soldiers on the streets hide the insignificant number of civilians. The tension among the youth becomes terribly high.

“Gathering the mothers of young girls into groups and trying to open their eyes is no small part of the work. The mother is blind and prejudiced; thinks she knows her child’s pure white soul; refuses to believe she has anything in her innocent young mind beyond what mother herself had at her age. A three-talk course to parents and teachers serves to stir them up a bit.

“In the larger cities the chances for mischief are more numerous and restraints are perhaps even more easily cast aside. The city industrial girl, while far from safe and victimized right and left, is yet safer than the schoolgirls. She is often shockingly young to be unleashed from home restraints, but she is more sophisticated and a bit more able to look after herself.

“The most heartrending cases we meet are those of the young country girls who hurry into the city for work and for a good time. The soldiers are marrying these only to desert them. The girls, away from home, are hoodwinked into alliances which offer them nothing but tragedy.

“The hostess cities and towns, as those in the neighborhood of cantonments may be designated, are obliged to interpret their duties in a very large way. And in a nutshell, the Social Morality campaign seeks to arouse every woman and girl to her responsibility for giving the soldier boys a square deal by ministering to their best manhood. Such small things as the very appearance and dress of the girls and women, their demeanor in the streets, and the contact in hospitable efforts for entertainment and recreation, must be characterized not by letting down all the bars of convention but by keeping them rigidly up. To interpret friendliness, for example, as one woman I came across does, by waving to and smiling at every soldier or group she passes in her car, is to foster the free-and-easy familiarity which, if copied by young girls, can only end darkly. To act up to the spirit of ‘if-you-wear-a-uniform-you-need-no-introduction’ means opening the doors to a whole brood of vicious liberties.

“Talking to the workers in factories and mills is chastening work, specially if one is deficient in the ‘vernacular.’ One can ‘put it over’ if able to use their words and phrases well enough to show them one is no complete outsider so far as the occurrences among them are concerned. The ability to speak with a casual air of vulgar but, to them, every-day happenings, is not attained in a moment of time. The noon hours are almost the only time to reach these audiences. If the mana-
ger is friendly, ten to twenty minutes can be used. Rarely permission
to come for three successive days is granted; and to appeal to them to
pull up their standards of action, and drive home a few hints on mar-
rying, etc., means the most perspiring and flesh-reducing task I have
ever undertaken. But it pays in the response given by a sobered crowd,
and that golden compliment, 'She sure did tell the truth,' not said to a
secretary, who may have been one's escort, but overheard as remarked
to a companion.

"Yet the undertaking is so big, and the number reached seems after
all so small, that one's utmost exertions make but a drop in the bucket."

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**CALL FOR HOME SERVICE**

The definite need for such a call to service as suggested in the Resolu-
tion on page 5 is clearly reflected in the daily correspondence of the Dean's
Office. A list of Hospitals which are in serious need of house officers
has been compiled for this BULLETIN, and our readers are urged to assist
in informing women physicians and would-be medical students of the
wide field of opportunity now open to them.

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**VACANCIES ON THE RESIDENT STAFFS OF HOSPITALS CALLING
FOR THE IMMEDIATE SERVICES OF WOMEN
PHYSICIANS**

**INTERNESHIPS WITHOUT SALARY**

**General Hospitals:**

1. *Long Island Hospital*, 133 Newbury Street, Boston.
   Dr. Robert Soutter, Dr. E. H. Bradford.
   400 beds. Dispensary service 6000 visits a year.
   Service one year.
   Mostly medical and neurological cases. Some general surgical
cases and a few obstetrical.
   *Six house* officers needed at once. Later undoubtedly will need
ten.
   Send application and several references to address above.
   Spring applications before May 30.

2. *The York Hospital and Dispensary*, College Ave. and Oak Lane,
   York, Pa.
   Mary A. Smith, Superintendent.
   125 beds. Medical, surgical, obstetrical, pediatrics and dis-
   pensaries.
   Salaried pathologist, anesthetist, and resident physician in addi-
   tion to internes.
   *Three internes* needed.

   Dr. Walter R. Weiser, Surgical Director.
   Active service, especially surgical.
   *Two internes* needed.
4. St. John’s Hospital (Church Charity Foundation), 1521 Atlantic Avenue, Brooklyn, N. Y.
Rev. Paul F. Swett, Superintendent.
95 beds. Acute cases.
Four internes desired by December 1, 1917.

5. The Glenville Hospital, 701 Parkwood Drive, Cleveland, Ohio.
Miss Anne Williamson, Superintendent.
One interne desired. Write for particulars.

Miss Lucia L. Jaquith, Superintendent.
Medical, surgical, obstetrical, pediatrics, and laboratory services.
One interne wanted at once, December 15.

Special Hospitals:
Chas. Sinkler, Secretary.
One interne needed.

2. Manhattan Maternity and Dispensary, 327 East 60th Street, New York.
Miss Mary E. Cadmus, Superintendent.
Three months' service in obstetrics.
Previous experience required.
 Honorarium offered at end of service, $50.

Dr. J. C. Gittings, Secretary of Staff, 3903 Chestnut Street.
Two internes needed January 1, 1918.
Services six months, and one year.

INTERNES OR RESIDENT PHYSICIANS WITH SALARY
Previous Experience Required

General Hospitals:
1. St. Agnes’ Hospital, Raleigh, North Carolina.
Mrs. A. B. Hunter, Superintendent.
For colored patients only.
85 beds. Strong Visiting Staff.
Medical, surgical, obstetrical, pediatrics, specialties.
No laboratory at present.
Maintenance and $50 a month.

2. Greenpoint Hospital, Kingsland Ave. and Bullion Street, Brooklyn, N. Y.
Dr. J. E. Dougherty, Medical Superintendent.
200 beds. No “chronics.”
Under Department Public Charities, New York City.
Complete clinical and laboratory equipment. Valuable diagnostic conferences.
Anesthetist needed. Salary not stated.
Assistant roentgenologist needed, to be in charge. Salary, $900.
3. **Reading Hospital**, Front and Spring Streets, Reading, Pa.
   Miss E. A. Gallery, R. N., Superintendent.
   Much surgery.
   *Resident Physician* with one year hospital experience, $75 to $100 a month.
   *Interne*, $50 a month.

4. **General Hospital**, Madison, Wis.
   Referred by Dr. Sarah J. Morris, Medical School of the University of Wisconsin, Madison, Wis.
   Good Surgery and Obstetrics, under excellent staff.
   One interne. First opportunity for women on this staff.
   Small salary, amount not stated.
   Excellent opportunity to develop private practice later.

**Special Hospitals:**

   Dr. Alfred F. Hess, 16 West 86th Street, New York.
   Modern Hospital for Children.
   400 patients; 100 are infants.
   *Requires one year previous internship.*
   Salary, $75 a month and maintenance.

2. **Hartford Retreat**, 400 Washington Street, Hartford, Conn.
   Dr. W. N. Thompson, Superintendent.
   Good opening in psychiatry.
   Previous hospital service and some general practice required.
   Salary, $800 and maintenance.
   One resident desired.

3. **Schuylkill County Hospital for the Insane**, Schuylkill Haven, Pa.
   Dr. Walter J. Bowers, Superintendent.
   *Resident physician for women patients,* and to do laboratory work.
   Desire previous laboratory experience.
   Salary, $1000 and maintenance.

4. **Lying-in Hospital**, New York City.
   Dr. E. L. Coolidge, 850 West End Ave., New York City.
   Clinics for babies under two years of age.
   Excellent experience in feeding cases and all diseases of young children.
   One vacancy as assistant in the Second Division of the Babies Class.
   Appointment for one year. Salary not stated.

5. **Dr. W. B. Fletcher’s Sanitarium**, 1140 E. Market St., Indianapolis.
   Dr. Urbana Spink.
   Treatment of nervous and mental diseases.
   One resident physician needed.
   Salary, $25 a month for first six months, promotion according to qualifications.
   Good opening with many advantages.
INTERNE, NO PREVIOUS EXPERIENCE REQUIRED

GENERAL HOSPITALS:

1. **Monmouth Memorial Hospital**, Long Branch, N. J.
   Mrs. W. D. Harper, Superintendent.
   150 beds. Medical and surgical services.
   Salary, $25 a month and maintenance.
   One intern needed.

2. **Bryn Mawr Hospital**, Bryn Mawr, Pa.
   Dr. F. C. Sharpless, Secretary of Staff.
   Recognized by Pennsylvania State Board of Medical Education and Licensure.
   Service, eighteen months.
   Salary, $25 a month for first six months.
   $50 a month for second six months.
   $75 a month for third six months.
   One intern wanted January 1, 1918.

3. **Good Samaritan Hospital**, Lebanon, Pa.
   Miss C. C. Tallman, R. N., Superintendent.
   Emergency work from Bethlehem Steel works.
   Medical and surgical dispensary. New x-ray equipment.
   One resident physician needed.
   Salary, $40 a month.

SPECIAL HOSPITALS:

   Dr. Thomas H. A. Stiles, Medical Director.
   Salary, $1000 and maintenance first year.
   $1100 and maintenance second year.
   $1200 and maintenance third year.
   May be further increased on recommendation founded on ability and record.
   Two vacancies.

2. **Sea View Farms**, West New Brighton, N. Y.
   Mr. W. B. Buck, Director.
   Hospital of 800 beds.
   Clinical tuberculosis, psychiatry, and diseases of the aged.
   Opportunity for research and laboratory work.
   Salary, $900 to $1500 and maintenance, with excellent living conditions.
   One resident needed at $1020.

LABORATORY APPOINTMENTS

A prominent firm of pharmaceutical chemists in the Middle West need women physicians in biological division.
Two candidates needed.
Salary commensurate with experience; probably beginning with $1500 or $1800, with prospect for advancement.
Special Hospitals:

   Dr. J. C. Gittins, 3903 Chestnut Street, Philadelphia.
   70 beds in city hospital, 30 to 50 in country branch.
   Two appointments to be made April 1 and one on July 1.
   Special summer service at Country Branch, five months from June 1.
   Previous interne service preferred.
   No salary.

2. West Philadelphia Hospital for Women, 4035 Parrish Street, Philadelphia, Pa.
   Dr. F. W. Grim, 46 N. 40th Street, Philadelphia, Pa.
   Desires interne about February, 1918.
   Salary, $25 a month and maintenance.

Candidates for any of these appointments will please make application through the Dean's Office. In this way only can we maintain the cooperation of the hospitals concerned.

NEWS NOTES

On October 27 the Second-year Class entertained the College at the Annual Hallowe'en Party, and the gymnasium was unusually brilliant with the gay costumes. Dr. Marion Manter, of New York, adorned as a large knitting-bag, carried off the prize offered for the most unique dress. The entertainment of the evening was offered in a presentation of the play, "The Man Who Married a Dumb Wife," and the audience was delighted and impressed by the talent exhibited by the actors.

The College Dormitory is an established fact. Fourteen of our students are there comfortably housed, and nearly all of the resident College community take their meals in the dormitory dining-room. Under the excellent management of Mrs. Elizabeth Fahr we are forgetting, even in these war times, that we used to be hungry, and instead of agonizing over the pitiful evidences of under-nutrition among our students the authorities rejoice in the appearance of vigorous young women who report a steady gain in weight.

The College does not own the present houses occupied by the dormitory at 2417 and 2419 N. College Avenue, and does not therefore feel justified in investing money in electric lights and some other conveniences. When, however, property can be acquired for development of this important department, we shall hope to see the acquisition of all of the comforts of home.

On the afternoon of the 9th of November, Mrs. Wilfred Lewis, President of the Board of Corporators, and Dr. Martha Tracy, Acting Dean, entertained the College at the Dormitory. Students and Faculty turned out in full force and a pleasant social hour was enjoyed over tea and ices.
Dr. Ethel M. Polk, 1912, of Soo Chow, is in this country on furlough, and is giving some time to clinical work at the College and Woman's Hospitals.

Dr. Polk is the medical head of the Mary Black Hospital at Soo Chow, and is in charge of instruction in Surgery at the Woman's Medical College associated with the Hospital.

Dr. Hattie F. Love, 1911, now at Soo Chow, is Dean of this medical college for Chinese women, and joins with Dr. Polk in earnest plea for doctors to help them in this educational work.

Four doctors could be used at once on the teaching staff, covering the medical and surgical specialties and the laboratory work. Even a short-time service, of only two years, would be of inestimable value in organizing the work in these departments, and preparing native women physicians to take up the responsibility when the American doctor must return home.

Two nurses are also sorely needed in the Mary Black Hospital.

Dr. Polk expects to return to China in May, but will be in Philadelphia until March, and will gladly correspond with interested candidates for these unusual opportunities for service. Her address will be: 251 N. 18th Street, Philadelphia.

The Student Medical Club, organized now as a committee of Student's Association, held an interesting meeting at the College early in November.

Papers on phases of Child Welfare Work were read by Miss Anne Taylor, 1918, and Miss Ethel C. Russell, 1919. Dr. Harriet Hartley, Director of the Bureau of Child Hygiene of the Philadelphia Board of Health, gave an instructive account of the work of her Bureau.

A second program covering other phases of this subject will be given on December 14th.

On Saturday afternoon, November 24, a sale of home-made candy, cake, and bread-stuffs, war-time specialties and recipes, was held at the College. The object of the sale was to raise money toward an endowed scholarship for a Wellesley student at the Woman's Medical College of Pennsylvania.

By invitation, the Philadelphia Wellesley Club held its regular meeting at the College from 3 to 4. The members and others attending the sale were received from 4 to 5 by Mrs. Wilfred Lewis, President of the Board of Corporators, and Dr. Martha Tracy, Acting Dean of the College.

The Committee in charge of the sale consisted of:

Miss Jennie Ritner Beale. Miss Caroline Katzenenstein.
Mrs. George D. Feidt. Dr. Ruth Webster Lathrop.
Mrs. Joseph S. Francis. Dr. Caroline E. Spencer.
Dr. Annie Bartram Hall. Dr. Esther M. Weyl.

The net receipts were one hundred dollars. Further contributions to the Scholarship may be sent to any member of the committee.
The commencement exercises of the Training School for Nurses of the College Hospital were held at the College Building on the evening of November 27th. Dr. Potter, Medical Director of the College Hospital, presided.

The candidates for the nurses' diploma were presented by Miss Beach, the Superintendent of the Hospital, and the diplomas were conferred by Miss Hilda Justice, Secretary of the Board of Corporators.

Dr. Gertrude A. Walker delivered an interesting and inspiring address to the graduates.

Music was under the direction of Miss Elizabeth Wilson, of the third-year class at the Medical School.

A delightful reception in the gymnasium followed.

The graduates were:

Miss Bertha Hall, Winburne, Pa.
Miss Mabel Hart, Clarendon, Pa.
Miss Anna Nielson, Philadelphia, Pa.
Miss Adelaide Tighe, Carbondale, Pa.

As we go to press, plans are in progress for a dinner to be given on December 7th at the College Building, by the Board of Corporators and the Faculty of the College, in honor of Captain Marie K. Formad, Captain Laura Hunt, and Lieutenant Mary Getty, who will soon sail for France with the Hospital Unit of the New York Infirmary for Women and Children.

Dr. Finlay, of New York City, organized this unit, and after unsuccessful efforts to secure the acceptance of its services by the Surgeon-General of the United States, she formally offered the Unit, completely equipped and financed, to the French Government. The offer of service was gratefully accepted, and the sixty women constituting the personnel of the Unit will cross the ocean to serve under the French flag. The medical officers hold French Commissions during the period of the War.

We are proud of the women physicians who refuse to withhold their services, even though official Washington would not give them recognition.

In the sad times coming before the war is over, our Uncle Sam will no doubt ask gladly for his loyal nieces, and grant them place in his household equally honorable to that occupied by his nephews.

A REGISTER OF ALUMNÆ

It is desired to include in our March BULLETIN a register of Alumnae of the Woman's Medical College of Pennsylvania. Such registers are carefully compiled by all academic colleges and constitute a very valuable record.

Loyal Alumnae of these Colleges gladly give the moment of time necessary to fill in the blanks sent them each year by their Alma Mater in the effort to keep the record corrected to date.

Surely the Alumnae of the Woman's Medical College of Pennsylvania

30
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GIFTS AND BEQUESTS

$60,000.00 will endow a Professorship.
$5,000.00 will endow a Scholarship.
$5,000.00 will endow a Hospital Bed.
$1,000.00 will endow a Baby’s Crib.
$4,000.00 will endow a Child’s Bed.

FORM OF GIFT OR BEQUEST

I give (or bequeath) $....................... to the Woman’s Medical College of Pennsylvania, to be used at the discretion of the Board of Corporators.

I give (or bequeath) $....................... to the Woman’s Medical College of Pennsylvania, for....................... (specify object).

While gifts and bequests for specified purposes are always greatly appreciated, nevertheless any one who wishes to benefit the College most promptly and effectively can best do so by contributing funds to be used at the discretion of the Corporators.