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* THE ARENA *

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MEDICAL EDUCATION

CUR LIBRARY

The BSAM library houses approximately 40,000 books and roughly 1,200 current periodicals in an area that is cramped and archaic. It serves students and faculty of the school, personnel from the various teaching facilities in the local hospitals, and graduates and their friends in the Boston area. There are five full-time librarians, four of whom share the responsibilities for the day-to-day operations of the library under the overall direction of Miss Florence Turner.

The library is essentially an open stack library. Most of the books and recent journals are on the shelves, available to everyone. This includes both "course" material as well as background, research and general interest information. Miss Turner and most of the users of the library now feel that this is a sane and mature method of running a library designed for graduate students and professional people.

It is unfortunate that the system does not work as well as it might. Books on the shelves, including those marked, "For Library Use Only", tend to disappear, as do some of the journals and examinations placed on reserve in the library. Sometimes they reappear at a later time, as mysteriously as they disappear. Equally as often, they do not.

It is also unfortunate that most of the people who use the library, who do abide by the rules, must suffer from the actions

of those few weak-willed and selfish individuals who think that it is clever and smart to build personal collections of their own at the expense of the school and of their fellow students.

We believe that several conservative, inexpensive and reasonably simple control measures could be started within the current framework of the library to reduce the bothersome problem of "missing" books. The construction of a book chute, through which books would be returned to the area behind the desk of the library, would both eliminate the current pilferage from the open carts now being used for book returning, and allow for a more orderly return of books to their proper shelves. If important "course" books were placed on closed reserve behind the desk, rather than left out on the shelves, more people might have a chance to use them, as they would stay in controlled circulation for a longer period of time. All those who sign out these and other books should be required to show up-to-date identification (either University or hospital I.D. cards) through which they could be traced if necessary. Finally, the construction of a barricade, through which everyone would have to pass and have all books inspected before leaving the library, would no doubt eliminate much of the casual theft which now occurs.

The monetary loss due to theft is probably considerable, although the library has no accurate records on this. The well-known expense of science books plus the book-keeping and general bureaucracy involved in their replacement, would appear to make some sort of regulatory system highly advisable. The number of books lost per year is also unknown. However, Miss Turner's exceedingly tight budget has made it impossible for the staff to take time to inventory the library and still keep it running. No inventory has been taken for several years.

We feel that the loss of an undetermined number of books from a total collection of an approximate number of books, costing an unknown amount of money and considerable frustration and anger among students who try to find and use these books later on, should not continue.

We wish to thank Miss Turner for supplying many of the facts used in this article.

LETTERS TO THE EDITOR

- Clinical Impression -

Why must third year students double up in pediatrics at the MMH well-baby clinic when there is a wealth of outpatient material readily available across the street at City Hospital?

Why is it that one particular urologist, scheduled to attend MMH urology clinic once a month, has appeared but twice in the last two years?

Why did one group of students on surgery at City Hospital attend three OPD clinics (a total of nine hours) without once seeing a patient in that time?

An attempt to answer these questions might shed some light on the wide-spread grumblings

among the members of BUSM III. Some explanation is sorely needed, especially in view of the projected \$200 increase in tuition. For many in the class, this year represents one of the few opportunities for clinical experience in certain of the subspecialties. Yet clinics very often, as the examples above indicate, have left much to be desired. Urology has been a particular offender, but obstetrics, dermatology, ophthalmology and surgery have, at times, all failed to provide the kind of practical experience fundamental to the development of sound clinical technique.

Present trends are unlikely to be reversed without serious discussions; revisions must be made in time for next year's class. It seems rather unfortunate that our medical faculty is unable to share its experiences with its own students. The kind of communication required would be greatly facilitated by increased concern on the executive level with the methods and procedures of clinical instructions.

BUSM III

NEW SCHOLARSHIP ESTABLISHED

A new scholarship to become effective in 1967, has been established. It will be known as the Gene and Malcolm Gordon Scholarship; and derives its funds from the Barnett D. Gordon Family Foundation. Grants will be awarded to deserving students. Dr. Gene Gordon, a graduate of the class of '46 and a Psychiatrist in Washington, D.C., and Dr. Malcolm Gordon class of '48 and now in Puerto Rico, are the namesakes of the new Fund.

A.A. LOANS ARE NOW SCHOLARSHIPS !

The Alumni Association has decided to change their loan program for medical students to direct scholarship awards. Current loans require repayment beginning 5 years after graduation at 3% per annum. Contributions from some of the two hundred recipients of nearly \$100,000 in alumni money who graduated between 1953 and 1963 have so far this year amounted to \$1,500. This brings their total to over \$6,000 and more is expected to augment and promote the continuance of the Fund which alumni giving supports. Further details on these scholarships may be obtained from Mrs. Gowing.

OBSERVER, JUNIOR

There appears in the New York Times and affiliated papers such as the Boston Herald a remarkable column by a witty and perceptive writer named Russell Baker, titled Observer. While scarcely possessing the ability to write with the sharpness of that unique journalist, or, hopefully, the hubris to claim any part of that ability, nevertheless it is the hope of this writer that some small part of Observer may prove infectious, and that either by air-borne droplet or wafting dust-borne spore, this column may become host to some of the qualities of that famous feature.

Here is a description of somebody I am afraid you know. (Of course it isn't you.)

He - in the general sense, including she - isn't unusual looking. He may wear a white lab jacket, and enjoy Chinese food every once in a while. He probably subscribes to the New England Journal, and may be married. The odds are he drives a car, and takes very good lecture notes. He is generally quiet and rarely calls attention to himself by asking questions in class, although he has been seen sheepishly sneaking into class late on frequent occasions.

You might never actually notice him as anything special. And this is part of his plan.

For he is dangerous to all of us. He probably has a large library of back exams, and often gains ten points on any given test because of the large number of repeats in some courses. But this isn't his most threatening feature; after all many of us have access to back copies of Marvels of Medical Ambiguities. Here is what to watch: he is the fastest climber of stairs in the class. This talent he puts to especially profitable use any time a reserve reference work is announced by some professor. While the less than wary retire to the sumptuous lounge after a lecture for a scalding cup of brown water and English muffin thinly coated with a pseudomembrane of 10 mgm. of apple jelly, our secret athlete has set a new indoor record for the vault up the stairs to the library from Building C (named after Maxmillian Cee, nineteenth century homeopathic physician and discoverer of the vitamin which also bears his name). Within the length of time it takes a questions to be marked wrong this person we know has cornered the entire supply of that book, Smegmitis Among the Uncircumsized. Even this would not be so bad if he signed out for any of the copies smuggled in his briefcase, concealed under four neatly arranged copies of CIBA's latest Clinical Symposium. And here is the worst.

This person (can there be more than one?) has never signed out for any book that anyone else might possibly use, much less ever returned it on time. Being unsure of his own abilities, he endeavors to be sure that no one else gets the chance to use any.

This person must be watched. He is sick, and I fear that his prognosis is bleak - he will do well in school, earn the respect of an unsuspecting faculty and earn lots of money gouged from any patient with any savings or Blue Cross.

OVER

He poses a threat to us, our professional
ideals, our patients' well being and con-
fidence in their physicians. Brothers of
the medical fraternity, Let Us Tromp On Him
And His Kind.

R.G.

HELP KEEP YOUR CAFETERIA CLEAN: USE
RUBBISH CANS.