



**NOW THEY ARE LPNs**—After a year-long course for licensed practical nurses at Durham Technical Institute, these hospital employees were recently graduated through the Paths for Employee Progress (PEP) program. From left, they are Lorenza D. Jones, Jacqueline Bennett and Veda Carlton. Mollie Ford was not available for the photograph.

## Macy Grant Helps Expand History of Medicine Program

The History of Medicine program is being expanded and strengthened through a two-year, \$53,600 grant from the Josiah Macy Jr. Foundation of New York City.

It was the Macy Foundation, in 1966, that provided initial support to establish a History of Medicine curriculum at Duke.

In the program a small number of selected students who anticipate academic careers are financially supported in earning jointly doctorates in medicine and history. In each of the four years from 1967-70, one student was admitted.

The first student, Dr. Russell Maulitz, received his degrees in 1973 and has joined the faculty at the University of Pennsylvania.

Dr. Robert Powell, who also has received both his M.D. and Ph.D. degrees, will join the faculty at the University of Missouri in Kansas City following a year of training in psychiatry in Syracuse, N.Y.

Four students are currently in various phases of their studies. The new Macy grant will be used to add a faculty member and secretarial help.

Dr. Gert H. Brieger, who has headed the program since 1970, said that both the undergraduate history department course and the medical school's elective courses in the history of medicine have grown.

"The presence of an M.D.-Ph.D. student in the medical school classes has had a definite stimulating effect in raising the interests of fellow students in the history of medicine," Brieger

said.

The addition of another historian in medicine, he said, "will enable us to increase the course offerings, thereby providing more teaching in the history of medicine, both graduate and undergraduate."

Brieger noted that with the completion later this year of the Seeley G. Mudd Building, Duke's new medical library and communications center, the program's students will have increased access to the Trent Collection in the history of medicine and the recently acquired Barchas Collection in the history of medicine and science.

Macy's support of the expanded program, coupled with the new library facilities and the Trent and Barchas collections, Brieger said, "will make Duke a premier center for research and teaching in the history of medicine."

## — Service Awards —

(Continued from page 1)

Stanley Porter, Mary M. Pulley, William W. Reed, Dorothy M. Reep, Irma H. Riddick, Donna K. Riley, Judy C. Rivers, Mildred Russ, Dr. David C. Sabiston and Dr. Harvey J. Sage.

Willie Satterfield, Nancy E. Seagroves, Annie G. Seeley, Elwood W. Senter, Dr. W. Derek Shows, Cornelius Simmons Jr., Flora A. Smith, Lucille M. Smith, Dr. George G. Somjen, Myrtle U. Spears, Samuel L. Stubbs, Bessie Sumpter, Patsey S. Sutphin, Audrey E. Swann, McArthur Taborn and Kathryn M. Taylor.

Eloise M. Thomas, Carolyn T. Thornton, Penelope R. Turner, Gladys C. Walker, James T. Walker, Lonita W. Wall, Evelyn F. Waller, Dr. Hsioh-Shan Wang, Gloria T. Wardrick, Mary J. Washington, Robert E. Weaver, Hazel L. Whitaker, Thomas B. Wilder, Clara A. Wilson, Mary O. Winston and Jane W. Wrenn.

### 20-Year Awards

Rosa Lee Bradsher, Marjorie H. Brown, Susan S. Butler, Eunice D. Cable, Ervin T. Cartee, Sallie T. Davis, Dorothy G. Durden, Irene T. Elmore, Robert O. Gooch, Dr. Albert Heyman, Harold Jones, Hattie N. Jones, Bertha R. Kent, J. Edward King and Bernard E. Lloyd.

Mary T. Mebane, Cora A. Miller, Hilda M. Parrish, Hannah L. Roberson, Peggy S. Roberts, Dr. Norman F. Ross, Dr.

## Personnel Paragraphs

This is a column for and about employees, faculty and staff at the medical center. The subject matter will cover a wide spectrum of personnel policies, benefits, federal and state regulations, payroll information, wage and salary data, and many other matters affecting employees at Duke.

Questions from readers are encouraged. If you have a question, send it to:

Personnel Paragraphs  
Box 3354, Duke Medical Center

All inquiries must be signed, but you may request that your name not be used if your letter is published. All questions of wide, general interest will be published. "Personnel Paragraphs" is your column, so let us hear from you.

### SAFETY REGULATIONS FOR REPORTING ON-THE-JOB ACCIDENTS

**Q.** What is the first step I should take if I am injured on the job?

**A.** The injured employee will report immediately to Employee Health for treatment. If the accident is serious or occurs during hours when Employee Health facilities are not available, the employee will go to the Emergency Room. (The employee's department should follow up with the Emergency Room to ensure that the injured employee is not charged for services).

**Q.** What material should I take with me to Employee Health?

**A.** The employee's supervisor will fill out the department portion of Form A-016 (a supervisory report of occupational accident or illness) and the employee will take it with him to Employee Health.

**Q.** What other forms might I need?

**A.** If a form 19 (for registering for Workmen's Compensation benefits) is required, the Safety Office will request it from the injured employee's department. The Safety Office will forward the form 19 to the Compensation Office, which will process the claim. If the claim is approved, the first check will be mailed to the Compensation Office, which will forward it to the employee. Subsequent checks are mailed direct to the employee.

**Q.** What should I do when I am ready and well enough to return to my work?

**A.** The employee must report to Employee Health before returning to his job; Employee Health will provide him with written approval to return to work.

**Q.** If I follow these safety regulations in reporting any job-related injury, will I be charged for the care and treatment I receive?

**A.** No.

**Q.** When are employees charged for medical services?

**A.** Employees will be charged for medical services under the following conditions:

— When they report to the Emergency Room for non-emergency treatment during the hours when Employee Health is open.

— When they seek treatment during hours outside of their assigned work shift.

— When they are injured or become ill enroute to work or enroute from work to their home.

— When they seek treatment without supervisory authorization (Forms A-016 for job-related accidents or injuries; or F10021 for first aid care or medications and non-prescription drugs for acute problems not job-related).

**Q.** Where are the Employee Health offices located and when are they open?

**A.** Employee Health offices are located in the hospital basement next to the Emergency Ob-Gyn clinic and in the Marshall I. Pickens Center, Erwin Rd. and Trent St. Their hours are:

#### HOSPITAL SUB-STATION

Mon-Fri: 8 a.m.-Noon  
1 p.m.-4 p.m.

#### PICKENS SUB-STATION

Mon-Sat: 8 a.m.-7 p.m.  
Sun: 2 p.m.-7 p.m.

Separate holiday schedules for both facilities are posted when applicable. Any additional questions about accident or illness regulations should be directed to the Safety Office at 684-5697.

## Drug Program Set for Clergy

Religious leaders from across the state are expected to attend a conference on "Drugs and Our Society" here next Tuesday and Wednesday.

The two-day symposium, originally scheduled for Jan. 21-22, is designed for members of the working clergy who experience drug-related problems in the course of their duties. The Behavioral Neuropharmacology Section of the Department of Psychiatry will host the program.

The conference, which is sponsored by a grant from the National Institute on Drug Abuse, will be held in Perkins Library. Psychiatrists, ministers, counselors and social workers will set their discussions around the following conference goals:

—To place the current drug problem in perspective and to share some facts about drug use and abuse.

—To enhance the clergy's counseling skills as they relate to drug situations.

—To discuss the clergy's role in a community response to the drug problem.

—According to highway traffic fatality statistics, the most dangerous day to drive is Saturday, but the most dangerous time is between 5-6 p.m. on a weekday.

## Intercom

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