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Two Hospital Secretaries Demonstrate . . .

"Handicapped" Is Only a State of Mind

By David Williamson



TWO GOOD FRIENDS — Marie Boring and her seeing-eye dog Tamba have made the journey through the halls of the medical center often in the past six years. The 11-year-old German shepherd has cataracts and a heart condition and may soon have to yield her job to a younger dog. (Photo by David Williamson)

What's it like to live in a world of darkness?

You'd never see wildflowers in the spring, fireworks on the Fourth of July or nature's artwork on the trees of autumn.

Your children's laughter and crying would only be sounds without sight, and the record of their growth would be remembered in your mind's eye solely by the deepening of their voices and the periodic touch of slightly larger limbs.

For a person with good vision, imagining it might bring on a sudden panic of helplessness or a feather-stroke of fear.

But being blind, according to two medical center secretaries who cannot see, is not the end of one's personal world nor the incapacitating condition it once was.

Both women—Rebecca Buckner of the Psychiatric Resident's Office and Marie Boring of the Medical Resident's Office—work regular hours on regular jobs. And they work for the same reasons everyone else does.

"A disability is a disability, and there's no getting around that," Mrs. Buckner said. "But you just do the best you can with it and go on."

The young mother is a victim of

retinitis pigmentosa, a disease characterized by a progressive deterioration of the retina, the innermost layer of "sight cells" within the eye.

Over the course of years, a person suffering from the condition experiences a narrowing of the field of vision and either night or daytime blindness. Eye specialists understand some of the mechanism of what happens during retinitis pigmentosa, but as yet there is little they can do to arrest it and nothing they can do to reverse its course.

The disease is considered hereditary by ophthalmologists, and although neither of her parents were affected by it, both Mrs. Buckner's brother and sister are also blind.

"My husband Carl and I have been keeping close check on our son Steven, and he has his eyes checked every six months," she said. "Everytime we have to go, I hold my breath and pray."

Mrs. Boring explained that her blindness was the result of scarring on her cornea as an infant. Ulcers which didn't heal properly left opaque tissue in front of her lenses like a blindfold. Other eye complications prevented specialists

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Pharmacy Improves Service By Adopting Digital Call System

The Pharmacy Department has announced the adoption of a new system for prescription-filling in the Outpatient Pharmacy which promises to be both speedier and more efficient.

According to Clyde Buchanan, assistant director of the pharmacy, the new system will work like this:

An outpatient or an employee who wishes to have a prescription filled at Duke will present that prescription to a clerk at the pharmacy in-window.

The clerk will immediately determine the cost of the drugs, inform the patient and then pass the prescription along to one of the department's registered pharmacists.

The patient will then pay for the medications, and the clerk will assign him a number from one to 99, depending on the number given to the patient who immediately preceded him.

Depending on the volume of business, a wait of up to 20 or 30 minutes may follow, and the patient is free to take a seat in the waiting room or carry out other business in the hospital.

When the prescription is ready, the assigned number appears on a device

known as a "visible digital call system" which is easy to see from the chairs in the waiting room. If the patient comes back after an hour, for example, and sees that a number greater than the one he possesses is displayed on the call box, he knows his prescription is waiting to be picked up.

"Our new system will end the congestion around the pharmacy window," Buchanan said, "and it will also eliminate the uncertainty in knowing when a prescription is ready."

"In addition, being on a first-come, first-served basis, the system is more fair to the patient," he said.

"Within the department, it's more efficient in that prescriptions flow more directly to and from those who prepare them, and hence the time required to get them filled should be reduced."

Buchanan said that there would be no increase in cost to patients and employees, because there will be no increase in pharmacy staff.

Edgar L. Riggsbee, pharmacy supervisor, said that some prescriptions are particularly

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CONSULTING A TOOL OF HER TRADE — Rebecca Buckner prepares to type information for the permanent files of the medical records division using a medical speller written in Braille, the special "dot writing" for blind people. (Photo by David Williamson)