

Duke Receives Ford Grant

A \$2,700,000 grant has been made to the Duke University School of Medicine by the Ford Foundation, Duke President Hollis Edens has announced.

Part of a \$90 million program to strengthen instruction in private medical schools throughout the United States, the Duke grant of \$2.7 million includes an initial installment of \$500,000 announced last September.

The grants are to be held as invested endowment for at least 10 years. During this time, income from the endowment may be spent for instructional purposes but not for construction and research. After the 10-year period, the recipient medical schools

are free to use the principal sums as well as endowment income.

Henry T. Heald, president of the Ford Foundation, expressed the hope that the grants will help focus public attention on the increasing financial needs of medical education.

President Edens described the gift as "another example of the Ford Foundation's willingness to strike boldly at a major national problem in higher education, and in so doing to encourage others to follow.

"Medical education," he emphasized, "is inherently expensive if it is of high quality; if it is not, ultimately the health of our people suffers. Once more, the Ford Foundation has made a generous, sound investment in the

future of this country. Duke University is deeply grateful for its gift and we shall seek to use it wisely."

Duke Medical School Dean W. C. Davison said the grant will be used "to improve medical instruction by strengthening the departments and increasing faculty salaries."

Duke University ranks 11th in the nation in terms of the amounts awarded to raise faculty salaries. In the medical school program, Duke led the South and tied for 12th place among the 45 American private medical schools. Duke Hospital is one of 57 hospitals in the United States that received top grants of \$250,000 each in that part of the program.

Construction Moving Schedule Outlined

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have not been named yet but a committee is working at it. Two of the nursing units have forty beds each and the Intensive Nursing Unit on the fifth floor has 29 beds. All beds are electrically operated variable height beds. The room furniture has been designed for us with the color scheme and much of the furniture arrangement directed by Harold Shuttles, interior designer of Asheville.

Plans are being made to install an Ultra-sonic cleaner for instruments in the operating room suite. This is a very recent development for hospitals and will clean instruments quickly and completely. Speed is essential now that there will be 18 operating rooms in use. Duke Hospital will be one of the first hospitals in the country to have such an installation. Also an entirely new concept in the preparation of instruments and sterile packs has been built into the O.R. suite, making for efficiency and economy by decreasing the time between operations and by centralizing many functions.

An emergency generator already in operation, will serve the new addition in case of power supply failure. The new centralized food service system will be in operation soon and will have a minimum capacity of 250 trays prepared and served. The dining room for ambulatory patients located on the third floor will have a capacity of 85 chairs and will provide a new type of food service for hospitalized patients. A new retail pharmacy is located adjacent to the new Out-Patient Department waiting room and will have the most modern equipment available. The Womens' Auxiliary will have a counter in the same area and will provide a much needed service to the patients.

The entrance to the rear of the addition will be for patients who arrive by ambulance and in private cars but who cannot go up or down stairs. It is only a short distance to an elevator which will take them to the main registration areas for the Private Diagnostic Clinics and the Out-Patient Department. The Emergency Room will remain in its present location. Patients will be admitted to the hospital from the new O.P.C. Adminis-

tration area during the day and from the Emergency Suite at night and on week-ends.

Almost two-thirds of the building area is for Ambulatory patients. It is expected to relieve the congestion in the halls in the present Clinic areas. All chairs will be removed from the first floor corridors to facilitate the flow of traffic. The new automatic pneumatic tube system will be in operation in the new addition and will be connected to the present pneumatic tube system at the main station in the Medical Record Library. In the automatic system the carrier can be set to drop out at any one of the 21 new stations without being transferred from one tube to another as is necessary under the present system. It is expected that this innovation will speed up communications and reduce the number of messenger trips.

The entire building is air conditioned. It is planned to have the dedication ceremony early in the fall so that the many friends of the University and Hospital will have an opportunity to see the completed building.