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REPOSITORY LANL/RC
COLLECTION H-DO TR6704
BOX No G-3 B237
FOLDER #26 LAMC

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1950 January 5, 1950

237-26.51

Mr. Robert Kimball, Vice President
Board of Trustees

Dear Mr. Kimball:

In order that there be no delay in activating the program of research and care of the patient, the following part of the total program is presented below.

Necessary action was taken at the Executive Committee of the Board at the meeting January 5, 1950.

Justification of the Research Department as a part of Los Alamos Medical Center

Facilities for members of the medical and dental staffs of Los Alamos Medical Center to carry on a research program should be established as soon as possible. There are many reasons why this should be done. The main reasons are:

1. The majority of the physicians and dentists on the present staff were brought to Los Alamos with research facilities as an inducement. The active program of bio-medical research of the University of California has filled its facilities to capacity, making it impossible for more than a few physicians to cooperate in that program, thus making it impossible for the Medical Center staff to have a program of its own. Research facilities for the Medical Center will correct this situation.
2. Modern medicine is scientific medicine, and the men practicing it must have available adequate research facilities in order that the high quality of medicine being practiced can be maintained; the high efficiency and enthusiasm of the staff must be maintained and stimulated; and the knowledge and techniques kept abreast of the most recent scientific medical developments.
3. Besides up-to-the-minute medical treatment that will result from this program for the care of the patient, the patient and the Medical Center will benefit by the effect these working facilities will have on the medical profession outside of Los Alamos. This program should ease the present difficulty in obtaining replacements for the professional staff composed of high quality men, attracting staff applicants so there will be a ready source of immediate replacements, and giving the present staff members opportunity to pursue their scientific studies so that the turnover and unrest within the staff can be reduced and professional staff structure stabilized.

An unoccupied building without plumbing, toilets, heating, or lights (No. 4TA-3E) is available through the kindness of the U. C. Research department and is near their laboratory buildings.

An accurate estimate has been made by Zia Corporation as to the cost of rendering the building capable of use as a medical research department of the Medical Center and under its control.

Since construction of medical research facilities are in the distant future, it is felt that the request for this expenditure is economically and medically justified. It is also in the interest of the community and A.E.C. program.

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II. Budget required for building renovation, equipment, personnel & supplies

a) Building		
Alterations to building (47A-32) partitions, work counters, cabinets, lighting, etc.		\$21,453.18
Provision for toilet facilities		755.00
Raising ceiling in building		421.73
		<hr/>
		\$22,629.91
b) Personnel		
Technician in charge	\$280 / month	
Assistant technician	\$250 / month	
Janitor & animal caretaker	\$150 / month	
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	Yearly salaries -	\$8,280.00
c) Equipment, type II (see attached list)		\$8,000.00
d) Supplies and expense		\$6,000.00
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	Total	\$44,909.91

The outlay of type II equipment will not be repeated in the second year, and it is felt that the operating budget for the following year will not exceed \$20,000.

Don Brown

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237-26-54

Dec. 13, 1948

Dr. Ben Gill, Los Alamos Hospital

F. L. Shipman, M. D., H-Division, LAMC

PROPOSED STUDY

REFERENCE: LAB-2

In connection with the discussion which you and I had with Eric Hauser a few days ago, it seems to me that it would be a matter of great interest to make a fairly careful observation of the neurological findings in the extremities of patients who have been wearing either casts or tight bandages. I am sure that there must be from time to time men with sprained ankles and fractures where there would be an opportunity to check sensation and reflexes just as was done in the case of Wooden Bone.

If you do come across any such case, I would be interested to learn what your findings are.

F. L. Shipman, M. D.
H-Division Leader.

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