

Office Memorandum • UNITED STATES GOVERNMENT

TO : S. R. Sapirie, Manager

DATE: September 30, 1953

FROM : L. Paul McDowell, Assistant Director,
Community Affairs Division

SUBJECT: ANNUAL REPORT OF THE OAK RIDGE HOSPITAL, INC.

SYMBOL: C:LPM

Enclosed are five copies of the Fourth Annual Report of the Oak Ridge Hospital, Inc., for the year ended June 30, 1953.

A sufficient number of copies of this Report are available in this office should you desire additional ones.


L. Paul McDowell

Enclosure:
As stated (5 cys)

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1 cy - Henck
1 cy - Woodruff.
1 cy - files *when*

MEDICINE, HEALTH & SAFETY 10-8

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FOURTH ANNUAL REPORT
OAK RIDGE HOSPITAL, INCORPORATED
OAK RIDGE, TENNESSEE
FOR THE YEAR ENDED JUNE 30, 1953

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FOURTH ANNUAL REPORT
OAK RIDGE HOSPITAL, INCORPORATED
OAK RIDGE, TENNESSEE
FOR THE YEAR ENDED JUNE 30, 1953

BOARD OF TRUSTEES

George A. Rothery, President
George H. Dykes, Secretary
Thomas D. Clines
J. Hoyt Mason

Logan B. Emlet, Vice-President
Oral Rinehart, Treasurer
Carl C. Martin
John D. DePersio, M.D. (Ex-officio)

MEDICAL BOARD

John D. DePersio, M.D., Chief of Medicine, Chief of Staff
Dana W. Nance, M.D., Chief of Surgery
Lewis F. Preston, M.D., Chief of Pediatrics
Charles J. Ragan, M.D., Chief of Obstetrics and Gynecology
John P. Crews, M.D., General Practice

VISITING STAFF

GENERAL PRACTICE

John P. Crews, M.D.
Jack L. Diamond, M.D.
Parley M. Dings, M.D.
Thomas G. Fortney, M.D.
Jack M. Hays, M.D.
William B. Holden, M.D.
Paul R. Marsh, M.D.
Hyman M. Rossman, M.D.
Cordell H. Williams, M.D.
Nathan B. Williams, M.D.

INTERNAL MEDICINE

John D. DePersio, M.D.
Samuel W. Root, M.D.

EYE, EAR, NOSE AND THROAT

Raymond A. Johnson, M.D.
Dexter Davis, M.D.
E. Martin Dings, M.D.

SURGERY

Dana W. Nance, M.D.
Henry B. Ruley, M.D.
Robert R. Bigelow, M.D.

THORACIC SURGERY

Robert W. Newman, M.D.
William K. Swann, M.D.
William K. Rogers, M.D.

PEDIATRICS

Joe T. Smith, M.D.

OBSTETRICS AND GYNECOLOGY

Albert W. Diddle, M.D.
Kenneth A. O'Connor, M.D.

RADIOLOGY

Frank T. Rogers, M.D.
Herbert D. Kernan, M.D.

GENERAL PRACTICE

Archer W. Bishop, M.D.
James S. Hall, M.D.
Henry Hedden, Jr., M.D.
Eugene B. Smith, M.D.
Johnny Joseph Smith, M.D.
S. J. Van Hook, M.D.

PEDIATRICS

Lewis F. Preston, M.D.
William P. Hardy, M.D.

OBSTETRICS AND GYNECOLOGY

Charles J. Ragan, M.D.
William W. Pugh, M.D.
Robert E. DePersio, M.D.

ORTHOPEDICS

Paul Spray, M.D.

ANESTHESIOLOGY

Betty M. Cooper, M.D.

PATHOLOGY

Ralph M. Kniseley, M.D.

RADIOLOGY

Robert P. Ball, M.D.

ON LEAVE OF ABSENCE

Daniel M. Thomas, M.D.
Robert G. Tromly, M.D.

CONSULTING STAFF

ORTHOPEDIC SURGERY

Troy P. Bagwell, M.D.
Robert G. Brashear, M.D.

NEUROSURGERY

M. Frank Turney, M.D.
W. Eidson Smith, M.D.

EYE, EAR, NOSE AND THROAT

Edgar L. Grubb, M.D.

INDUSTRIAL MEDICINE

C. R. Sullivan, M.D.
Joseph S. Lyon, M.D.

COURTESY STAFF

UROLOGY

Moses W. Howard, M.D.

ORAL SURGERY

Clarence J. Speas, D.D.S.
William F. Willien, D.D.S.

ADMINISTRATION

Carl D. Jeffries	Director
Frances E. McCallum, R.N.	Director of Nursing
E. Dean Van Hoozer	Chief Accountant
Laura M. Lovell	Chief Dietitian
Julia M. Greene	Executive Housekeeper
Robert E. Simpson	Purchasing Agent
Ruth W. Levy	Chief Telephone Operator
Hyman Africk	Chief Pharmacist
John Geffel	Maintenance Superintendent
Oscar E. Long	Payroll Supervisor
Silvia Aliberti	Medical Records Librarian
Paulene W. Twigg	Physiotherapist

ANNUAL REPORT OF THE PRESIDENT
FISCAL YEAR ENDED JUNE 30, 1953

The annual meeting of the Board of Trustees was held on Wednesday, June 17, 1953. At this meeting the following officers were re-elected for the coming year: George A. Rothery, President; Logan B. Emler, Vice-President; George H. Dykes, Secretary; Oral Rinehart, Treasurer. Board members Carl C. Martin and George H. Dykes, whose terms expired, were re-elected for three-year terms.

Submitted at this meeting was a communication dated May 22, 1953, from C. Vanden Bulck as Contracting Officer for the United States Atomic Energy Commission, wherein the Board was notified, in accordance with the provisions of Article IV - TERM of Contract No. AT-40-1-GEN-252, as amended, that the Atomic Energy Commission notified the Oak Ridge Hospital, Inc., of the exercise of its option to renew said contract for a period of three (3) years beginning July 1, 1953, and continuing through the thirtieth (30th) day of June 1956. The Board indicated acceptance of this extension with one exception. During the past year, some difficulty was encountered on the subject of collections and collection procedures. It is the Board's desire that these restrictions be made more realistic in view of the collections problem, and the President is negotiating this subject with the Contracting Officer.

In connection with the above, it may be of interest to note that the average collections of hospitals in the United States, as published, was 87.92% last year. Collections in our hospital in the past year are estimated to have been 99% of charges for services.

Reports of Director C. D. Jeffries and others for the past fiscal year are a part of this report. Your attention is again called to the final net-cost figures of \$128,991.35. After adjustment for bad debts for 1952, this is a decrease of \$44,414.31. Again, this is a very satisfactory result. It is anticipated that, for the fiscal year 1954, the net-cost figure will approximate that of this year.

During the month of January, the hospital facilities were utilized to their full extent, as the result of a severe influenza epidemic throughout the community. While of necessity there was some waiting for admission, the lack of complaint on care and facilities is a good commentary on the fine job done by the personnel of the organization.

During the year, the hospital property has been normally maintained with the following extraordinary repairs or capital improvements:

1. Ice-making machine purchased and installed.
2. After proper bid, contract was let and work was started in June on the rehabilitation of the electrical system throughout the hospital property.
3. In connection with certain changes for efficiency and modernizing in the X-ray Department, as indicated in the report of Dr. Ball, arrangements were made whereby a new fluoroscopic machine of modern type and adaptable to requirements of this department was secured at a minimum cost by trade-in of the old machine.

The approved intern program was followed through so that, beginning with the first part of July 1953, interns will be part of the hospital organization.

The medical staff members have continued their cooperation in maintaining high ethical standards and good medical practice. All members of the active staff were reappointed for the ensuing year by the Board of Trustees on recommendation of the Medical Board. The Board also reappointed the following for the new fiscal year: Dr. John DePersio, Chief of Medicine and Chief of Staff; Dr. Dana Nance, Chief of Surgery; Dr. Charles J. Ragan, Chief of Obstetrics and Gynecology; Dr. Lewis F. Preston, Chief of Pediatrics. Dr. John P. Crews was re-elected by the staff to the Medical Board.

With the resignation of Dr. Herbert D. Kerman in September, Dr. Robert P. Ball was appointed Radiologist. Dr. Kerman had devoted part time to the hospital, the balance being in research in the ORINS hospital. Dr. Ball is devoting full time to our hospital in the practice of radiology.

During the year, fifteen employees received gold pins in recognition of five years of continuous service with the hospital organization. A total of 119 employees have thus far received these five-year service pins.

Two of the Board members gave talks to civic clubs during the year as part of the program to keep the public informed of the work of the hospital.

Carrying on its program of attempting to secure modern hospital facilities, the Board continued discussions with the Atomic Energy Commission. It was determined by the Atomic Energy Commission that it would not request funds for construction of a new hospital in Oak Ridge in the fiscal year 1954 budget. They stated that this determination indicated recognition of the fact that maintenance of the existing hospital building is uneconomical, but the determining factor was its relationship to community disposal. The Board will continue its efforts to secure new and efficient hospital facilities and to eliminate the continuing deficit of this institution.

George A. Rothery
President

REPORT OF THE DIRECTOR

To the President and Board of Trustees
Oak Ridge Hospital, Incorporated

Statistics for the year under review reveal that a total of 8,640 patients was admitted by Oak Ridge Hospital during the year – a reduction of 284 when compared with the 1952 fiscal year. This number includes 960 births, which was 27 more births than occurred the previous year.

The factor bringing about the reduced demand for hospital services appears to have been the new hospitalization insurance plan adopted by Carbide employees, which provides that payment of a part of the charges in medical cases is the responsibility of the patient.

When compared with the previous year, there has been a further reduction of \$44,414 in the net operating cost. Had the hospital occupancy remained as high as during fiscal year 1952, the net cost would have been further reduced by about \$29,000.

With proper adjustments for bad debts (which were not included in previous yearly operating statements), the following table summarizes the results attained since your Board assumed responsibility for the operation of the hospital:

<u>Fiscal Year</u>	<u>No. of Patients</u>	<u>Patient Days</u>	<u>Operating Expense</u>	<u>Operating Revenue</u>	<u>Deficit</u>
1949	7,949	48,453	\$1,092,943	\$ 594,619	\$498,324
1950	7,678	45,598	964,435	639,749	324,686
1951	8,651	58,609	1,075,264	867,694	207,570
1952	8,924	63,150	1,155,054	981,648	173,406
1953	8,640	59,475	1,150,636	1,021,644	128,992

A breakdown of the items contributing to the average patient day cost during the year is as follows:

Salaries and wages (7.8 hours at \$1.55)	\$12.09
Surgical, anesthesia, laboratory, and X-ray supplies	1.28
Food supplies	1.17
Drugs and medicines	.64
Laundry	.52
Heat, light, power, and water	.41
Housekeeping, maintenance, and kitchen supplies	.36
Printing, office supplies, and telephone	.17
Other services and supplies	.41
Total per diem cost	\$17.05

For the services reflected in the above costs, the patients were charged an average of \$14.06 a day.

Employees were paid salaries and wages amounting to an over-all average of \$241.67 a month during the year. The average paid during fiscal year 1952 was \$226.43. The minimum monthly salary is \$155.00; the minimum hourly wage, \$0.87. These minimum-pay scales are the hiring rates for untrained workers.

The hospital equipment appears to be entirely adequate for our needs in all departments, though the buildings are deteriorating rapidly due to the temporary nature of the construction.

Respectfully submitted,

C. D. Jeffries
Director

REPORT OF THE MEDICAL BOARD

To the President and Board of Trustees
Oak Ridge Hospital, Incorporated

The work of the professional staff was carried out through the past year without any unusual incident, and a good spirit of cooperation with hospital administration has been in evidence at all times.

Early in the year, a Tissue Committee was established and has been functioning well. Its monthly tabulations have revealed a high correlation between operative findings and pre-operative diagnoses. To the present, there has not appeared to be any need for corrective measures. The Tissue Committee, in addition to reviewing cases in which tissue is submitted, also receives notification of operative procedures in which no tissue is removed, such as laparotomies and lysis of adhesion operations and uterine suspensions, and in these cases may review the clinical record.

During the year, several operative procedures were placed in the category of major ones. These were saphenous vein ligation, hemorrhoidectomy, and tendon repair. Also, rules were put into effect to clearly establish the responsible surgeon.

The direction of the Nursery was transferred from the Obstetrical Department to the Chief of the Department of Pediatrics, who has appointed an Advisory Committee. It was not felt that there was an urgent need for a change, but it is in conformity with recent trend.

Routine professional accounting reveals the performance of the staff to be well within acceptable limits. For example, there were no maternal deaths in 965 births, and there were only 17 Caesarean sections, or a rate of 1.7%. The autopsy rate was 48%.

There were several changes in staff membership with the following additions: Dr. Robert P. Ball, as head of the Department of Radiology; Dr. Herbert Kerman, who went to the University of Louisville as associate professor of Radiology, was placed on the consulting staff in Radiology; Dr. Nathan Williams, general practitioner in Clinton, to the active staff; Dr. Paul R. Marsh and Dr. William Holden, both general practitioners, to the active staff; Dr. John J. Smith of Clinton, general practitioner, to the courtesy staff; Dr. William K. Rogers of Knoxville to the consulting staff in Thoracic Surgery; and Dr. William Willen to the courtesy staff with privileges in Dental Surgery.

On the minus side of the ledger, we have temporarily lost Dr. Dan Thomas to the Navy. Dr. Robert Tromly has left for a three-year training period in surgery at the John Sealy Hospital in Galveston, Texas. We are again without the services of a urologist, as Dr. V. Frank Carey left Oak Ridge in March. Continued efforts will be made to replace him.

Since approval for internship last year, only one intern, Dr. James M. Kingery, was obtained for the year, so the clinical clerkship program will need to be continued. A complete training program has been set up by the Intern Committee and will undoubtedly result in a satisfactory year for the intern.

The Medical Board expresses its appreciation to the staff for its continued cooperation and to the Director and Board of Trustees for their efforts to improve hospital facilities and operation.

Respectfully submitted,

John D. DePersio, M. D.
Chief of Staff

DEPARTMENT OF RADIOLOGY

PERSONNEL

On October 1, 1952, Dr. Herbert Kerman returned to the University of Louisville after two years as radiologist to the Oak Ridge Hospital and Oak Ridge Institute of Nuclear Studies. Dr. Kerman did superior work at both places. He made a host of friends while in Oak Ridge, and is a distinct loss to the hospital staff. In recognition of his excellent contributions, Dr. Kerman has been appointed as a Consultant Radiologist to the Oak Ridge Hospital. Dr. Robert Ball was appointed radiologist to succeed Dr. Kerman. Other changes in personnel were: Mrs. Dorothy Eldridge, secretary, replaced by Mrs. Barbara Casper; Mrs. Carter Weeks, chief technician, replaced by Miss Harriet Erogan; and Miss Claire Browning, technician, replaced by Mrs. Dean Hawkins.

Currently, the staff of the department consists of one radiologist, one chief technician, one assistant chief technician, two technicians, two relief technicians, one assistant technician, two laboratory assistants, one secretary, and one receptionist.

EQUIPMENT

At the present time, two rooms are equipped with class-A, top-line diagnostic machines for both fluoroscopy and radiography. Also, phototimers are in use on both serialographs, which adds materially to the quality of work done. There is no limitation to types of diagnostic procedures because of equipment.

The film-processing room has been remodeled to permit developing only in the dark, while the remainder of the processing is done in daylight. All processing equipment is new and of the best grade. The daylight processing adds greatly to the smooth operation of the department and permits prompt inspection of recently exposed films. A new chemical drying unit has replaced the former electrical-coil unit. Complete film processing is now accomplished twenty minutes from the time of exposure, as compared with sixty to eighty minutes previously.

A Land-Polaroid x-ray developing unit has been obtained for x-ray services in the operating room. The total time required to process a paper film after exposure is one minute. All the work is done in daylight in or adjacent to the operating room, thereby diminishing the time required to keep the patient under anesthesia.

The isotope laboratory is now finished and in operating shape. Applicators for radium, or isotopes such as cobalt-60, are being investigated for use in therapy.

During the past year, isodose curves have been charted for different size portals and filters in use on the 250-kv, constant-potential, Westinghouse Quadrocondex Machine. These valuable data were obtained through the services of Dr. Richardson and associates at the Oak Ridge Institute of Nuclear Studies.

WORK DONE

The total number of examinations for the year is 9,231. When the stereoscopic examinations of the chest using 4- by 10-inch films are added to the others, it makes a total of 10,280. The total for the previous year is 9,683. The number of therapy treatments is 941, in contrast to 1,712 the previous year. This difference is due, in part, to encouragement of type lesions to be treated by the radiologist, and to a difference in manner of tabulating a treatment. The total number of patients treated is essentially the same.

Respectfully submitted,

Robert P. Ball, M. D.
Radiologist

LABORATORY DEPARTMENT

A summary of work accomplished in the various departments of the Laboratory shows the following:

Urinalysis	8,191
Chemistry	2,024
Spinal Fluid	257
Serology	2,394
Hematology	19,597
Bacteriology	2,132
Tissues	2,161
Autopsies	42
Blood Provided	1,111
Blood Donations	1,259
Blood Provided to Others	414
Miscellaneous	1,104

PERSONNEL

There was a turnover of six of the ten employees.

LABORATORY METHODS

During the year, a number of procedures were modified and evaluation of some new methods was carried out. The major change consisted of replacing routine red-blood counts with microhematocrits. Considerable nonroutine work went into evaluation of the method and apparatus prior to its incorporation into the laboratory routine. A new schedule for chemistry procedures was established to allow for more efficiency.

EQUIPMENT

There were no major changes in the laboratory equipment. An air-conditioning unit was installed in the bacteriology department. A high-speed centrifuge was obtained for microhematocrits.

Respectfully submitted,

R. M. Kniseley, M. D.
Pathologist

DEPARTMENT OF ANESTHESIA

A total of 3,324 anesthetics was given during the year, of which there were 2,447 surgical anesthetics and 877 obstetrical anesthetics. A total of 6 diagnostic or therapeutic nerve blocks was performed.

During the year, two relatively new agents were given extended use. Trichlorethylene was used as a self-administered analgesic agent for cystoscopies in the operating room, for minor surgical cases in the emergency room, and before delivery in the obstetrical department. Succinylcholine chloride, an ultra-short-acting muscle-relaxing drug, was used in conjunction with pentothal sodium.

The anesthesia machines of the department are being reconditioned.

Respectfully submitted,

Betty M. Cooper, M.D.
Anesthesiologist

REPORT OF HOSPITAL SERVICES

Patients remaining in hospital June 30, 1952	176
Patients admitted during the year	7,504
Births	960
Total under care	<u>8,640</u>
Patients discharged during the year	<u>8,481</u>
Patients remaining in hospital June 30, 1953	<u>159</u>

HOSPITAL TREATMENT DAYS

OCCUPANCY

Private and semiprivate	13,249	58%
Ward	<u>46,226</u>	<u>66%</u>
TOTAL	<u>59,475</u>	<u>64%</u>
Daily average number of patients (including newborn)		163
Daily average number of patients (excluding newborn)		147
Highest daily census (including newborn)		209
Highest daily census (excluding newborn)		184
Lowest daily census (including newborn)		104
Lowest daily census (excluding newborn)		87
Deaths: Patients in hospital over 48 hours		42
Patients in hospital under 48 hours		33
Major operations	1,205	
Minor operations	<u>2,154</u>	
TOTAL	<u>3,359</u>	

ANALYSIS OF HOSPITAL SERVICE

Service	Patients	Deaths		Infected in Hospital		Autopsies	
		No.	%	No.	%	No.	%
Medicine	2,491	36	1	1	0.04	16	44
Surgery	1,071	7	0.7	28	3	5	71
Obstetrics:							
Delivered (over 20 weeks)	964			23	2		
Aborted (under 20 weeks)	121			1	0.8		
Not delivered	179						
Gynecology	363			2	0.6		
Eye, Ear, Nose, and Throat	965			1	0.1		
Pediatrics:							
Children	1,083	8	0.7	6	0.6	5	63
Newborn (alive at birth)	965	19	2	9	0.9	8	42
Communicable	142	4	3	1	0.7	1	25
Traumatic Surgery	137	1	0.7	1	0.7	1	100
TOTAL DISCHARGES	8,481	75	0.9	73	0.9	36	48

DEPARTMENT OF PHYSICAL THERAPY

Total patients treated	438	Total treatments	3,750
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BALANCE SHEET AT JUNE 30, 1953

<u>ASSETS</u>			
<u>CASH</u>			\$ 41,208.53
<u>ACCOUNTS RECEIVABLE</u>			
In-patient	\$134,704.83		
Out-patient	12,869.80		
	<u>147,574.63</u>		
Less Allowance for Doubtful Accounts	54,645.79		92,928.84
<u>INVENTORIES</u>			
Supplies and Drugs	33,919.40		
Returnable Containers	2,436.80		36,356.20
<u>DEFERRED CHARGES</u>			
Prepaid Surety Bond Premiums	198.46		
Prepaid Postage	177.39		375.85
<u>FIXED ASSETS</u>			
Land Improvements, Buildings, and Structures	\$1,199,278.17		
Less Reserve for Depreciation	737,263.89	462,014.28	
Equipment	234,866.50		
Less Reserve for Depreciation	158,532.16	76,334.34	538,348.62
TOTAL ASSETS			<u>\$709,218.04</u>
<u>LIABILITIES AND EQUITY ACCOUNTS</u>			
<u>LIABILITIES</u>			
Accounts Payable		7,982.48	
Employees' Bond Account		32.50	
Outstanding Checks - Payment Stopped		9.60	
Salaries and Wages Payable		853.52	
Accrued Taxes and Insurance		6,104.24	14,982.34
<u>CAPITAL INVESTMENT (USAEC)</u>		916,648.14	
<u>OPERATING RESULTS</u>			
Net Operating Cost	128,991.35		
Depreciation	93,421.09	222,412.44	694,235.70
TOTAL LIABILITIES AND EQUITY ACCOUNTS			<u>\$709,218.04</u>

COMPARATIVE STATEMENT OF REVENUE AND EXPENSE

<u>REVENUE FROM PATIENTS</u>	<u>1952</u>	<u>1953</u>
Day Rate Service	\$ 456,147.40	\$ 435,413.22
Pharmacy	157,355.16	155,369.75
Laboratory	85,482.15	95,975.15
X-Ray	94,131.95	108,222.40
Anesthesia	42,361.00	49,061.15
Operating Room	40,220.40	48,230.50
Emergency Room	16,834.46	18,252.70
Delivery Room	17,944.00	18,741.50
Central Supply	18,744.97	21,589.99
Physiotherapy	5,500.00	7,297.00
	<u>\$ 934,721.49</u>	<u>\$ 958,153.36</u>
Less Provision for Bad Debts	19,979.14	9,582.08
	<u>\$ 914,742.35</u>	<u>\$ 948,571.28</u>
 <u>OTHER OPERATING REVENUE</u>		
Medical Arts Building	\$ 30,092.12	\$ 35,819.62
Cafeteria	35,330.97	36,501.34
Other Services	1,482.51	752.07
	<u>\$ 981,647.95</u>	<u>\$1,021,644.31</u>
 <u>OPERATING EXPENSE</u>		
Administration	\$ 88,842.96	\$ 98,415.65
Nursing Service	360,319.71	343,016.03
Dietary	205,646.37	189,370.74
Central Supply	29,116.01	29,980.69
Emergency Room	12,809.61	12,714.24
Housekeeping	63,257.37	60,845.45
Laboratory	44,889.94	55,458.24
X-Ray	55,240.27	60,477.99
Maintenance	28,114.83	30,732.88
Pharmacy	75,702.43	71,753.15
Anesthesia	27,378.53	33,127.67
Medical Records	12,045.21	12,125.31
Physiotherapy	3,923.95	4,336.67
Delivery Room	19,901.43	23,126.21
House Medical Staff and Library	3,691.45	7,561.81
Operating Room	36,917.09	38,526.92
Medical Arts Building	13,576.94	15,885.44
Recreation	1,705.47	2,082.50
Laundry	32,444.22	31,441.17
Utilities	33,589.80	29,656.90
	<u>\$1,149,113.59</u>	<u>\$1,150,635.66</u>
Net Cost (ordinary)	167,465.64	128,991.35
Rehabilitation	5,940.02	---
NET COST	<u>\$ 173,405.66*</u>	<u>\$ 128,991.35</u>

*Net cost includes provisions for bad debts which have not previously been shown on annual operating summaries.

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