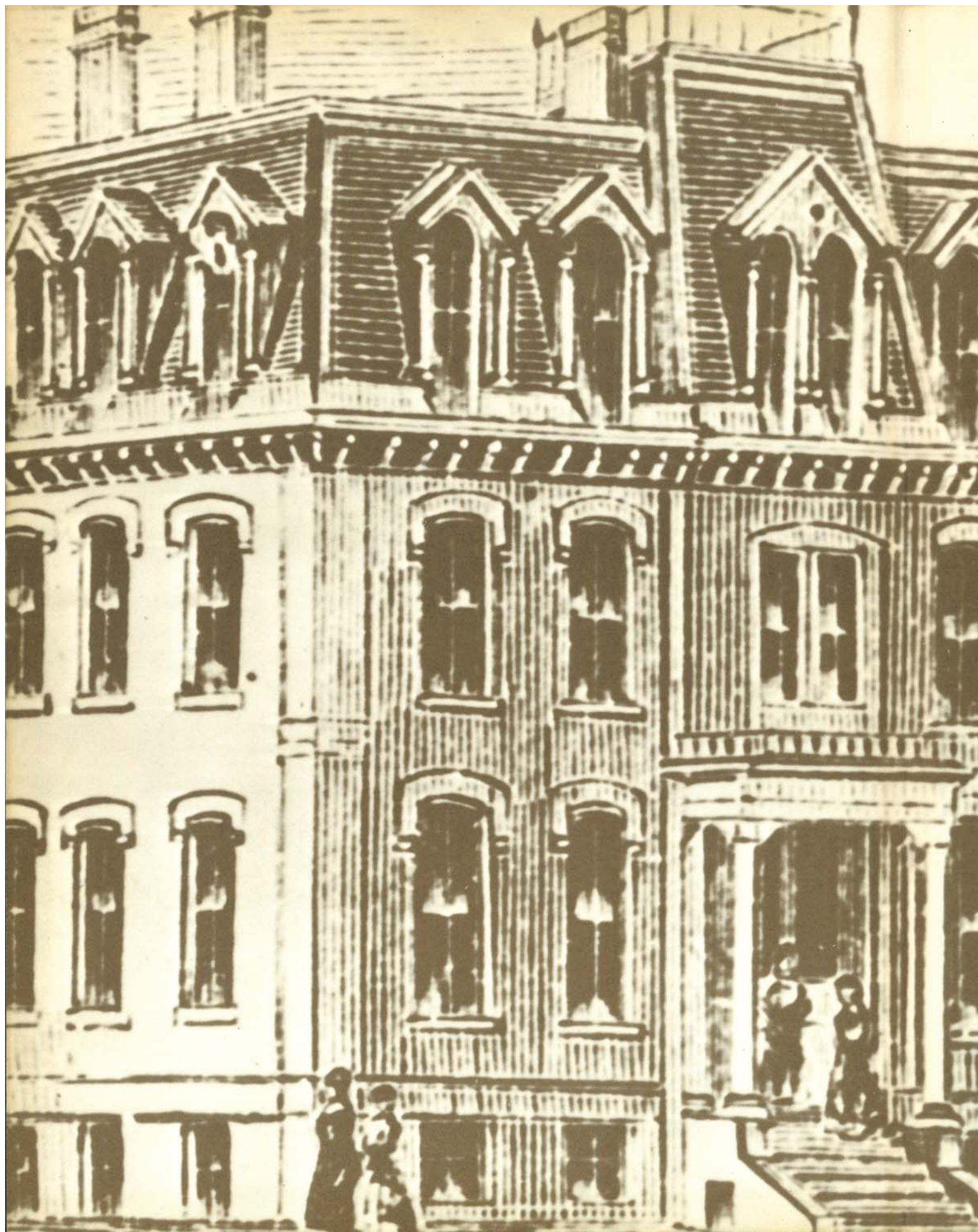
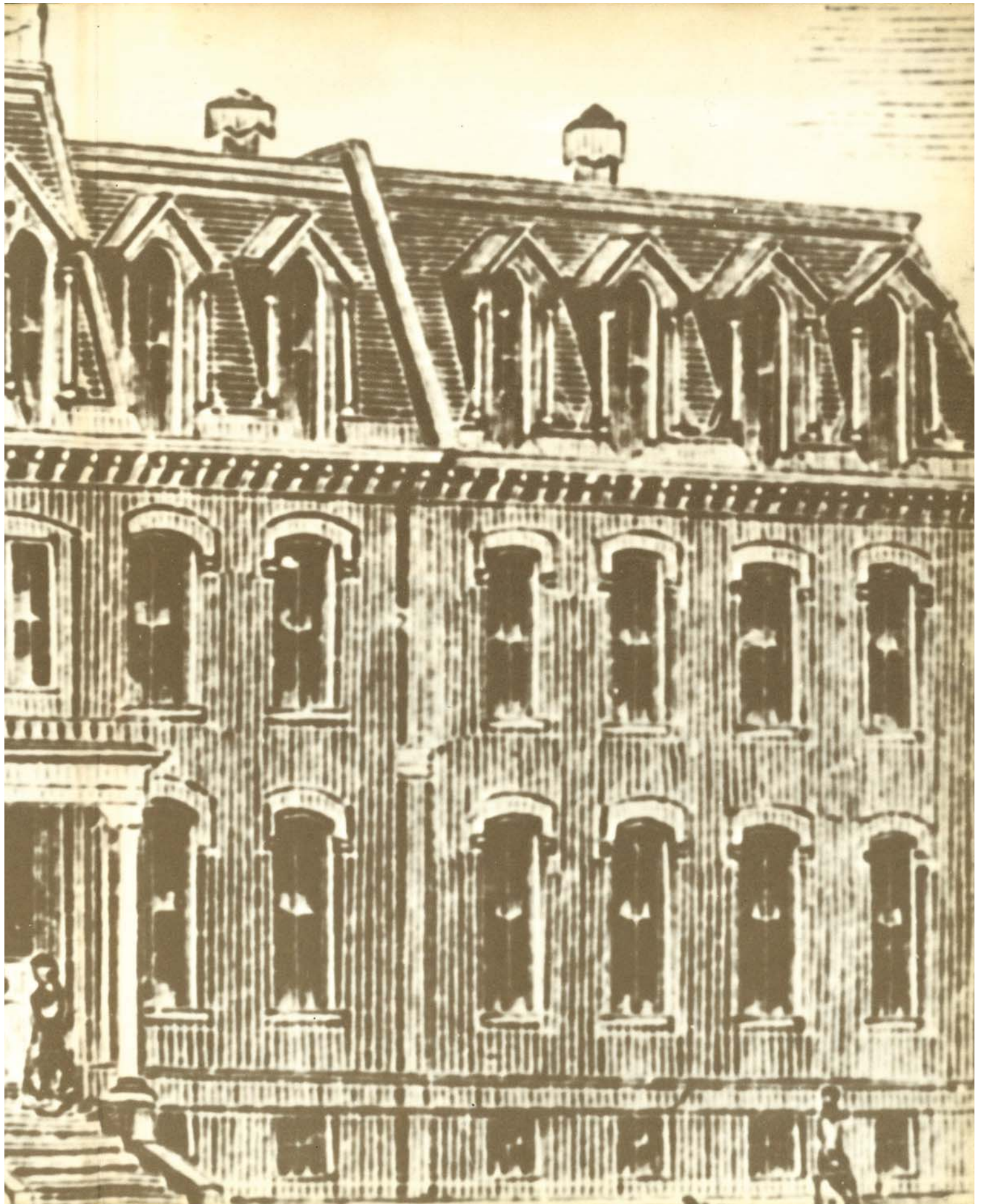


1969







BOSTON UNIVERSITY
SCHOOL OF MEDICINE

CLASS OF 1969

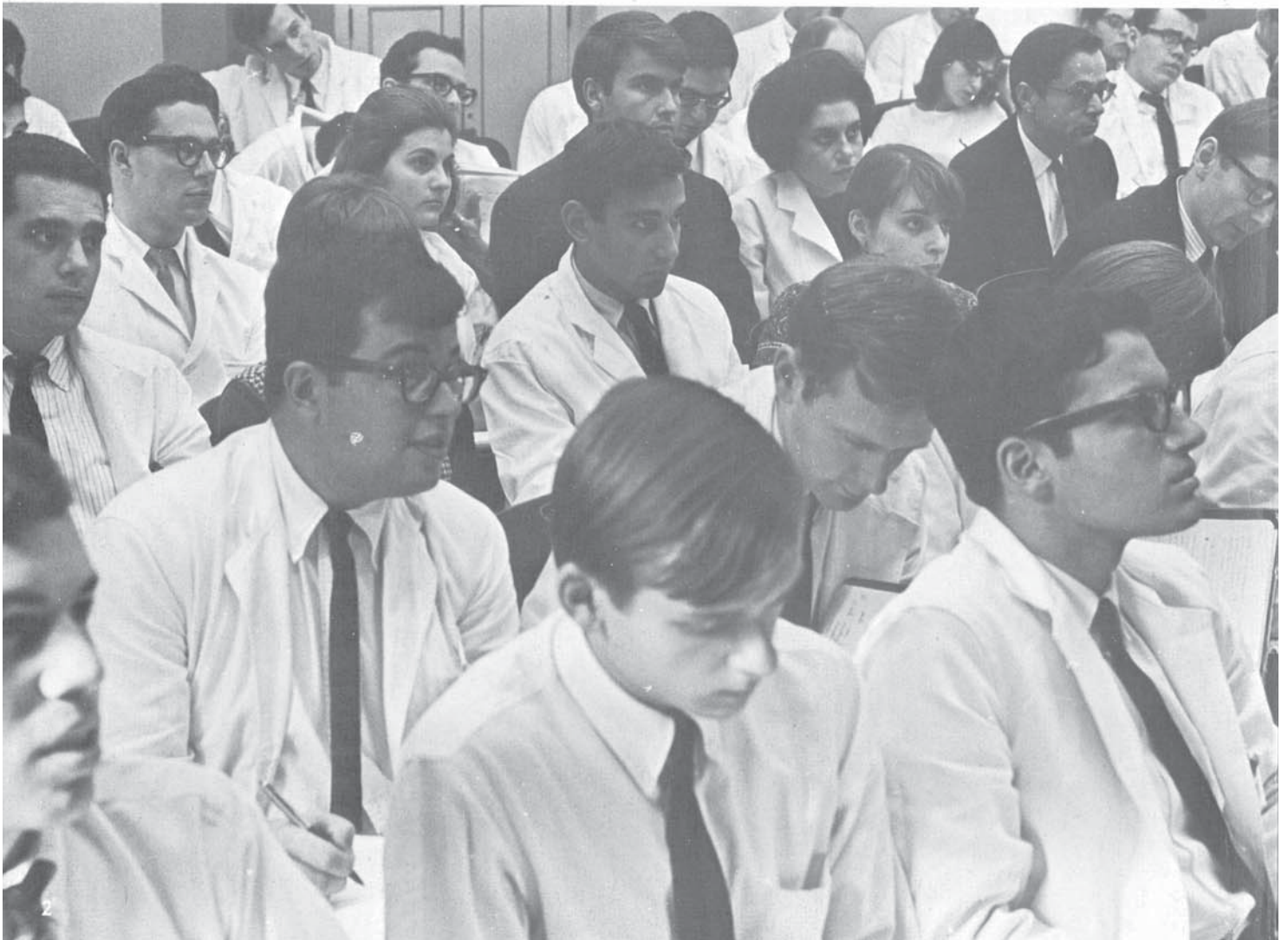


I begin once more my daily work. Be Thou with me, Almighty Father of Mercy, in all my efforts to heal the sick. Grant that I may be filled with love for my art and my fellow men. May the thirst for gain and the desire for fame be far from my heart. For these are the enemies of pity and the ministers of hate. Grant that I may be able to devote myself, body and soul, to Thy children who suffer from pain.

Preserve my strength, that I may be able to restore the strength of the rich and the poor, the good and the bad, the friend and the foe. Let me see in the sufferer the man alone. When wiser men teach me, let me be humble to learn; for the mind of man is so puny, and the art of healing is so vast. But when fools are ready to advise me or to find fault with me, let me not listen to their folly. Let me be intent upon one thing, O Father of Mercy, to be always merciful to thy suffering children.

May there never rise in me the notion, that I know enough, but give me strength and zeal to enlarge my knowledge. Our work is great and the mind of man presses forward forever. Thou hast chosen me in thy grace, to watch over the life and death of thy creatures. I am about to fulfill my duties. Guide me in this immense work so that it may be of avail.

Moses Maimonides









Message to the Class of 1969:

A great many changes have occurred since you entered medical school in 1965. You valiantly suffered through the noise of the pile driver in '66 while sitting in the lecture hall of Building C. Although you, as students, will have received few benefits from the Instructional building except for the lounge, cafeteria, a few months of the library, and your own mail box, the building will be enormously important to you since this will be visible evidence of the progress made at your school, which you can be proud of as alumni. It will make it possible for your school to achieve nationally the image which its faculty and students so long deserved, but which it was prevented from having due to its poor facilities. Alas, also, your class just missed practically all of the curriculum changes instituted. In many instances your class contributed mightily to some of the ideas that made the curriculum change possible. For the first time in the history of the school it was your class who, as a group, performed in the top quarter of the nation with respect to National Boards, being in a three-way tie for fifth out of 40 schools who took the experimental Part III Boards in their Junior Year.

You are entering perhaps one of the most significant and exciting decades that physicians have yet seen. In my opinion, the next ten years will be years where doctors will have a chance to prove that they, in fact, can be leaders of a health team. Much hinges on your efforts in this regard for the future of the nation's health. You represent our future and what you do and accomplish in your career will be the basis on which your school will be judged.

These have been exciting years for both of us, years which I shall always remember and treasure. It was a privilege to have been your Dean. May the future bring much happiness and success to each and every one of you.

Sincerely,
Franklin G. Ebaugh, Jr., M.D.
Dean



LEWIS H. ROHRBAUGH
Ph.B., Ph.D., Sc.D.,
*Director, Boston University
Medical Center
Vice President for Medical
Affairs*

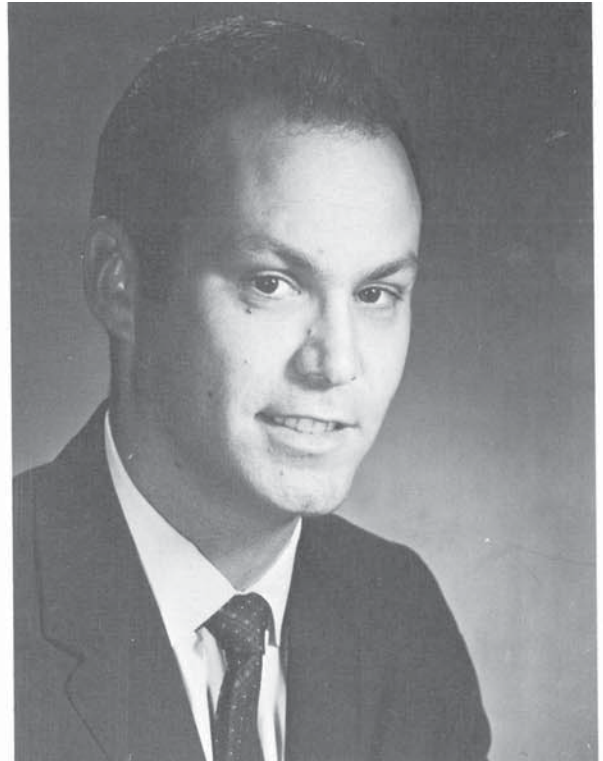
In addition to the good wishes which I extend to all members of the Boston University School of Medicine class of 1969 on the completion of their formal medical education I have a feeling that I should apologize for the inconveniences which your class has experienced during its four years in the school. More changes in such vital matters as the physical plant, the curriculum and the size of the school have gone on during your four years than at any time in the school's history. Obtaining a medical education in this atmosphere of change may have seemed at times a traumatic experience. However, the eventual product will justify any difficulties you have encountered since it will be one of which you can be justly proud.

After some thought, rather than apologize, I should congratulate you. Exposure to rapid change may be the best preparation you could have to enter a field which itself is in turmoil. Drastic changes in the method of delivery of medical care, in the methods of payment for it, and in almost every other aspect of medical practice are currently under consideration and action. Your ability not only to adjust to change but to actively participate in it and hopefully become involved in shaping it will be major factors in your contribution to the medicine of tomorrow. Increasingly the changes in medical practice are suggested and implemented by non-physicians. In many instances this is because of lack of interest or unwillingness on the part of members of the medical profession to accept responsibility for leadership in the organization and delivery of medical care. Your generation has an opportunity to reverse this trend. I have confidence that having withstood all the vicissitudes of medical training in a rapidly changing environment you will be able to contribute in a most valuable way to the solution of the medical problems of the future.

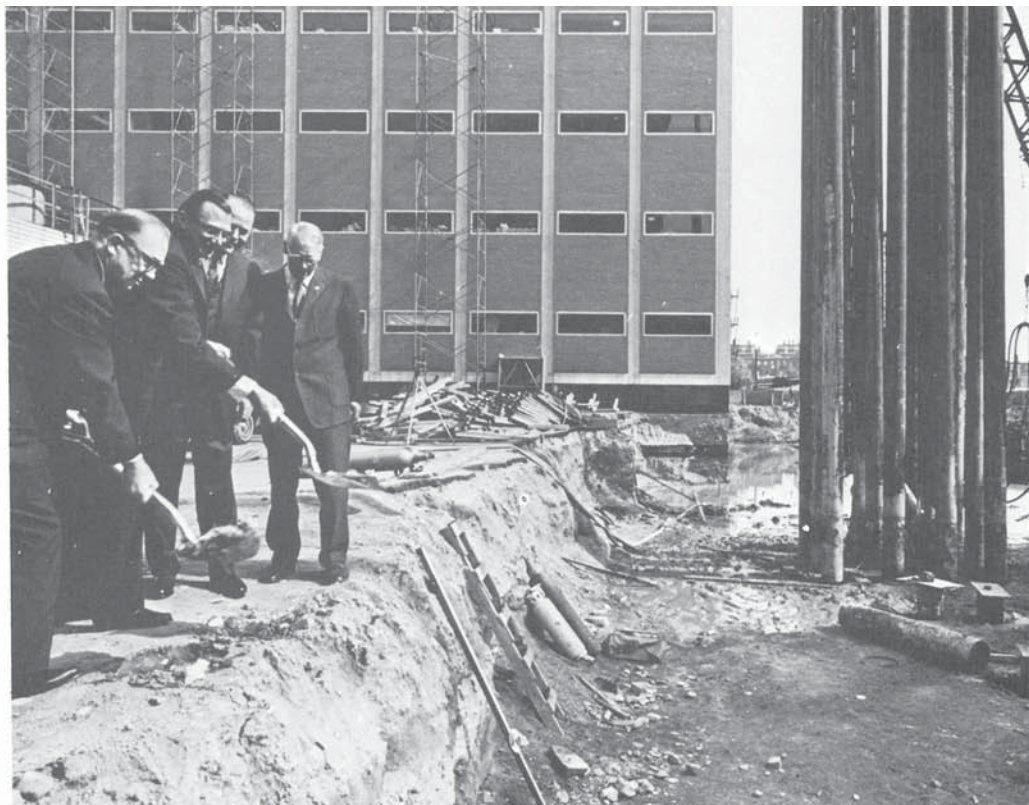
Lewis H. Rohrbaugh
Director



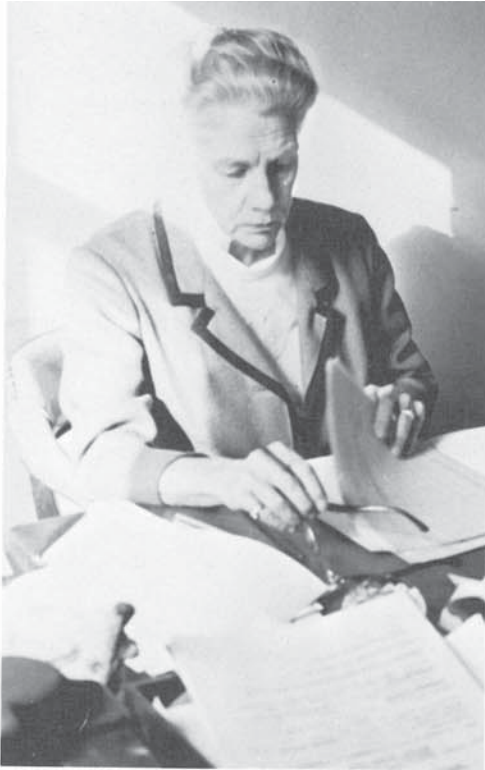
HENRY J. BAKST, Ph.B., M.D.
*Associate Dean, B.U.S.M.
Professor of Preventive
Medicine*



LESTER DEWIS, M.D.
Assistant Dean, B.U.S.M.



in recognition . . .



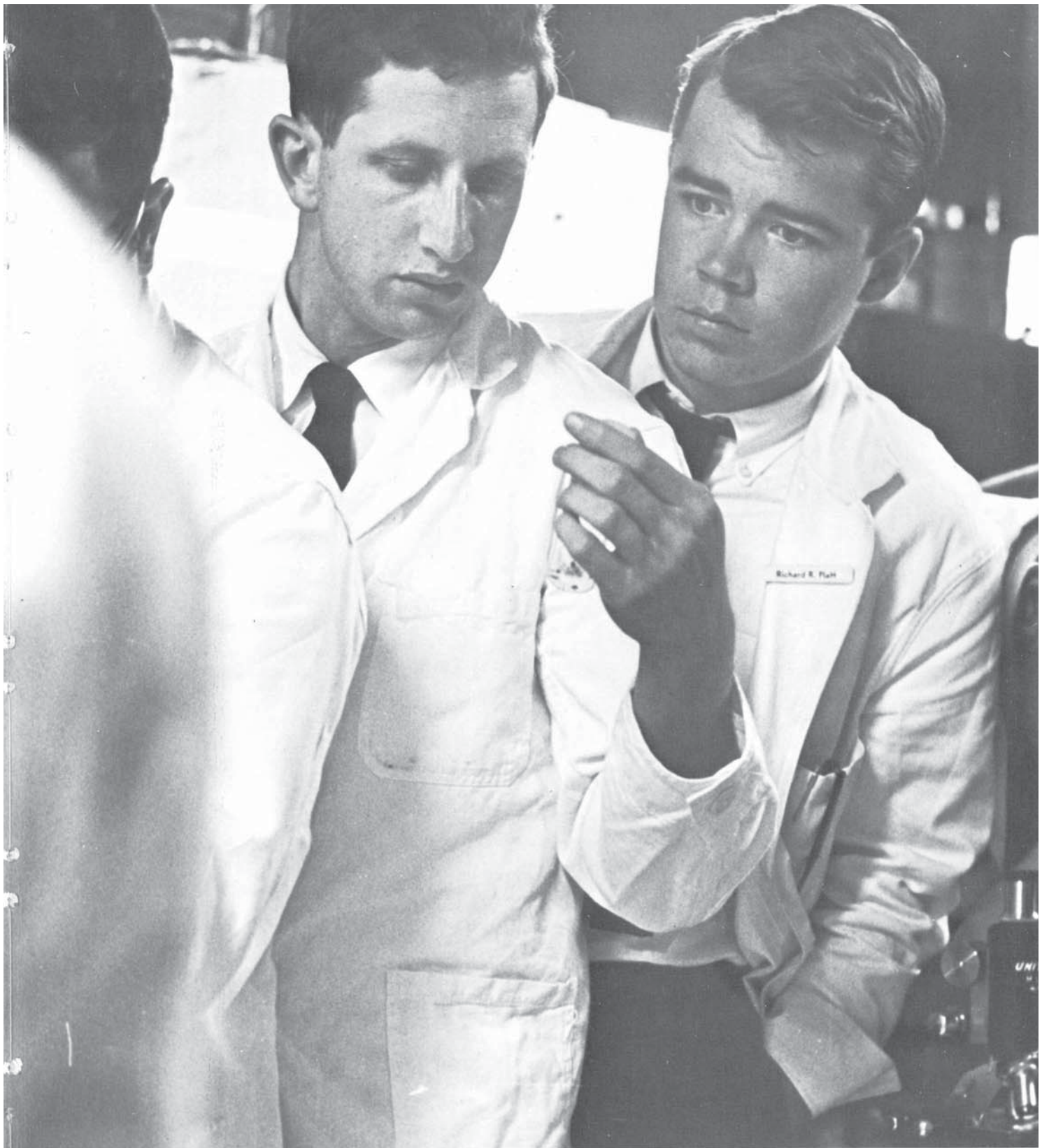
ANNE L. GOWING, Registrar
. . . of devotion



EDDIE McCARTHY
. . . of a friend



EDITH F. CHADWICK, Recorder
. . . of service



preclinical years



Some came to BUSM by the conventional route and some as part of a demonic deal to compensate for shortening their lives by shortening their education. The oldest member of the class was past puberty when the youngest was born and had finished college before the latter had reached puberty; only in a great and democratic society could these two post-pubescent individuals stand side by side to face the rigors of a medical education. Actually, they did not stand side by side. The six year students stood in tight, closed, anxious groups talking about how the "older kids" were persecuting them while the eight year students introduced themselves to each other and compared life insurance policies with Sumner T. All were pleased to be members of the "Class of '69": some happy because they were in any medical school at all, some ecstatic at the prospect of graduating in a centennial ceremony, and some just quietly appreciating the psychosexual symbolism of the numerology.

The strong were gathered by the omnipresent Dr. Moyer to partake in the time-honored ceremony of "gathering the rosebuds." This ritual paid homage to a humble physician who, in the latter days of the nineteenth century, was fortunate enough to have had a rifle during a robbery and actually shot his own cadaver in a valiant effort to defray tuition costs. Our celebration consisted of carrying the cadavers from the freezer to the laboratory via the back stairs. This *rite de passage* was traumatic to all involved; it was physically tiring to the strong, emotionally taxing to the weak of spirit, and absolutely devastating to the patients sitting in the combined ARA Cafeteria-Neuropsychiatric Clinic.

Tuesday evenings were reserved for the group therapy sessions so thinly disguised as "Tutorials." Here we were given the golden opportunity to voice and share common anxieties, and to be reassured by a competent psychiatrist that our fears were unfounded, so that we could face the coming week. One student once told of a terrifying fear of the dark. He expressed concern for the possibility that his personal sins, the evil in his soul, would someday contaminate the whole world and plunge it into darkness. After having been reassured by the group leader and other members of the tutorial that his fear was irrational and unfounded, he stepped outside, into the middle of the Blackout, and has not been heard from since.

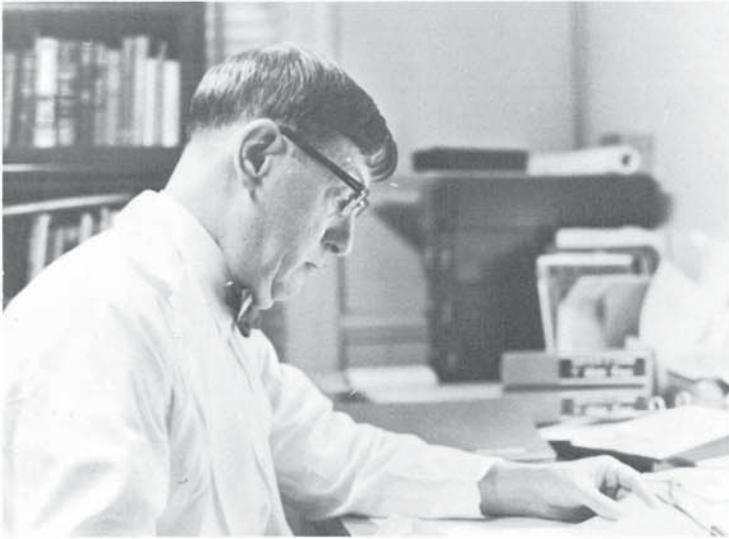
As the first semester's end was heralded by the shrill trumpet of Happy Jose and his Musical Meatus, we all breathed a sigh of relief and of accomplishment. Refreshed by our weekend's intersession, we wondered what wonderful surprises could be in store for the Spring term.

Lonesome George yawningly filled us in on his homespun philosophy of mucopolysaccharides. The Bronx Butcher taught us the mystery of proteins. A friendly chap told us about nucleic acids. But what could top the avant-garde monologue of that lipid-headed biochemist who once stated "Contrary to popular opinion, Sinex is not a nasal spray!"?

Dr. Loew simulated a "high" by bombarding our senses with innumerable facts and pictures of bearded scientists and red cells on the walls and ceiling until, after five solid hours, many blew their minds. And we wondered whether the true message of the magnificent "GALA LECTURES" was that the actions of testosterone are something to blush about after all.

All in all it was a good year filled with hardship, strife, trauma and humiliation. But it was a year we can look back upon with fond nostalgia.

anatomy



WILLIAM C. BARRETT, JR., Ph.D.
Associate Professor of Anatomy

Here's one they'll never get

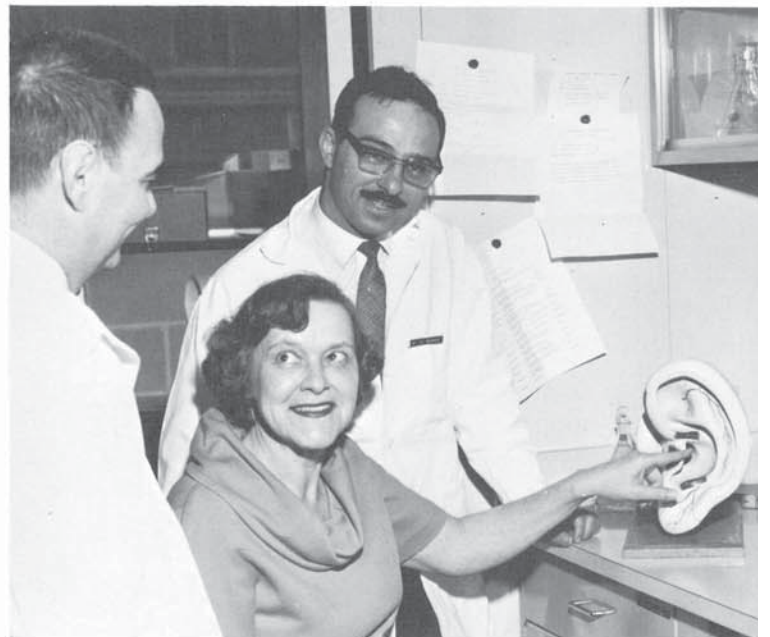


"I'm going to carry what up from where?!"



ALAN PETERS, Ph.D.
Professor and Chairman

WILLIAM F. McNARY, Ph.D.
Associate Professor



ELIZABETH K. MOYER, Ph.D., *Assoc. Prof.*
JOHN D. IFFT, Ph.D., *Assoc. Prof.*
AL-WALID I. EL-BERMANI, M.D., *Instructor*

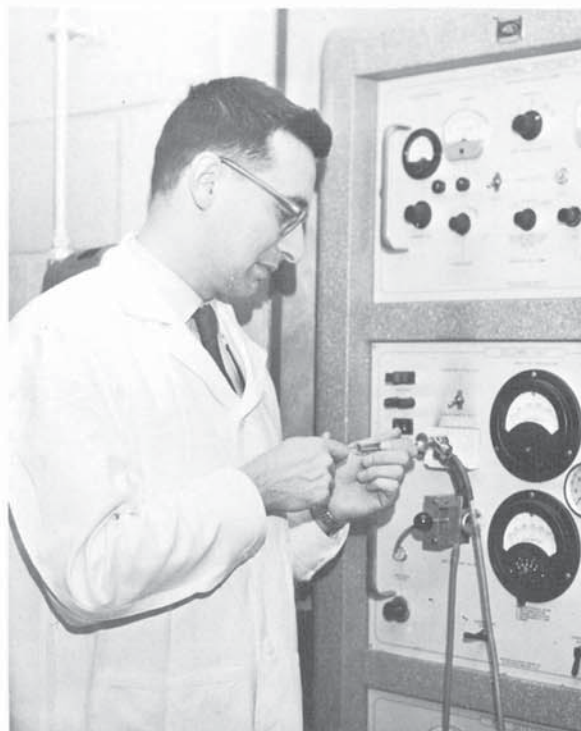
biochemistry



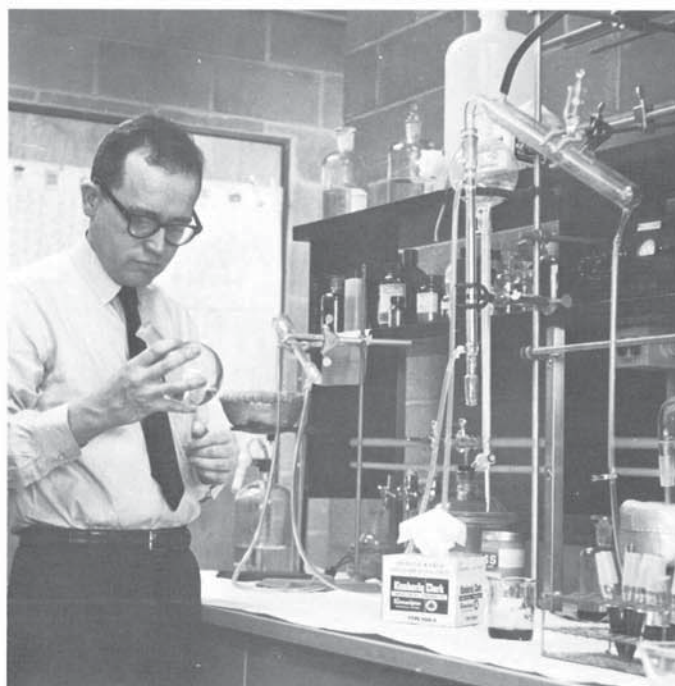
ROBERT L. HERRMANN, Ph.D.
Associate Professor



CARL FRANZBLAU, Ph.D.
Associate Professor



HERBERT H. WOTIZ, Ph.D.
Professor

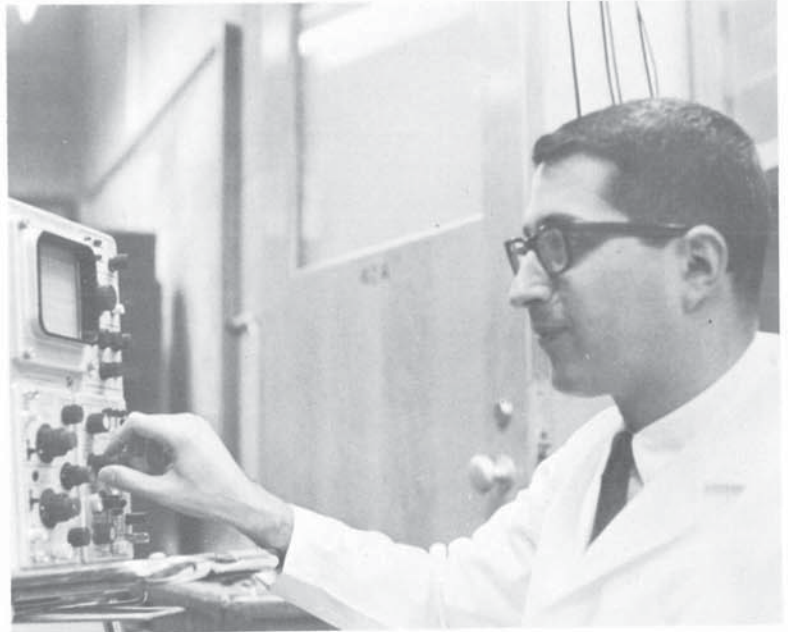


F. MAROTT SINEX, Ph.D.
Professor and Chairman

physiology



EARL R. LOEW, Ph.D.
Professor and Chairman

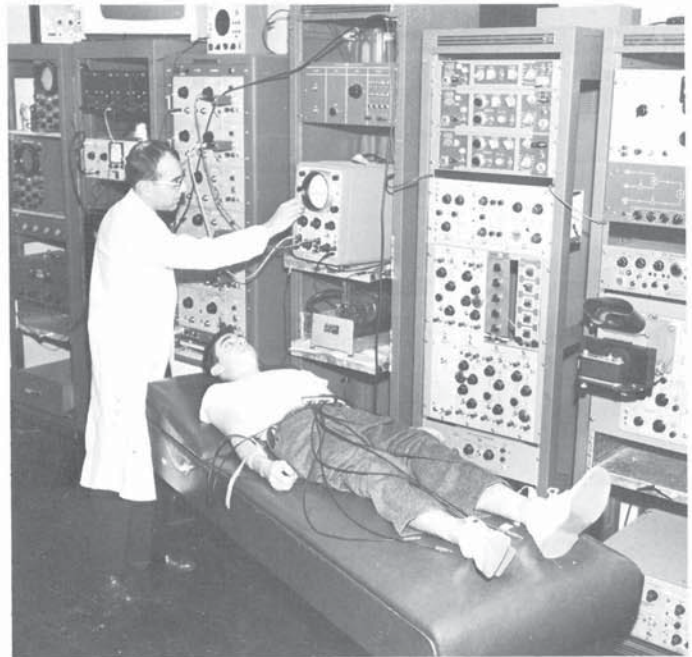


HERBERT L. KAYNE, Ph.D.
Assistant Professor



WILLIAM C. ULLRICH, Ph.D.
Professor

Who stole my lecture notes?



EVANGELOS T. ANGELAKOS, Ph.D., M.D.
Professor

This is all Greek to me

The second year was rung in symbolically by the banging of pile drivers. With each *clunk* a new fact was forged in our memories by amplified lecturers trying to shout out construction noises. Lecture hours were spent trying to see if the guy next to you had caught an important phrase in time to write it down. Fear and panic were struck into the hearts of one and all, for it was alleged that the key to success was the rote memorization of lecture notes. Since it was impossible for all to hear, the only remaining communistic thing to do was to station one brave soul next to the loudspeaker and duplicate her notes for general distribution. Unfortunately, her handwriting proved illegible, her abbreviations proved autistic, and the sheer brilliance of the solution was marred by the inadequacy of the method. In the end, everyone profited from this exciting group venture: the amanuensis got high grades, the rest of us purchased textbooks and were forced to study from them, and Xerox stock went up ten points.

The highlights of the Fall lecture Season were as follows: "On the moral and logical necessity of nerve gas in immoral and illogical conflicts" by E. Pelikan; "How to prepare escargots without harming parasites" by M. Derow; "Why I used to wash hot dogs" by E. Baker; "Let's take a trip" by C. Kornetsky, and "I'll bet you wonder where this voice is coming from" by C. Teplitz. But none could top the immortal "Treatise on the history of plumbing from the outside in" by Alice Marston. To this day there are few who can flush a toilet without thinking of this wonderful woman who taught an entire generation of physicians how to flame their loops.

After having been informed that grades were not important, we were subjected to a barrage of examinations and then, in the wake of detailed statistical analysis, were castigated for poor performance. There was tremendous variability in the type and quality of examination ranging from the challenging synthetic and analytic in Pharmacology through the unchanging and boring in Microbiology to the asinine and picayune in Pathology. Armed with a portfolio of old examinations a student could easily survive Micro and assuage anxieties about Pharm. But old exams could not help with Path since there were none in circulation.

Damocles' sword hung over our heads in the form of National Boards. After having been subjected to a curriculum so incomplete that many had their first acquaintance with certain topics only while writing the actual examinations, those who did not achieve success were severely penalized for having attended a school which paradoxically leans heavily on the Boards for evaluating its students but only lightly in planning its courses. However, the Boards did offer the distinct advantage of giving us all a much needed review of the alphabet.

No class history could be complete without stating that several people vomited during the passage of NG tubes, and that someone did indeed faint the first time he was venepunctured. And with clinical experience came new maturity as even most six-year students were old enough to celebrate at Johnny Corey's.

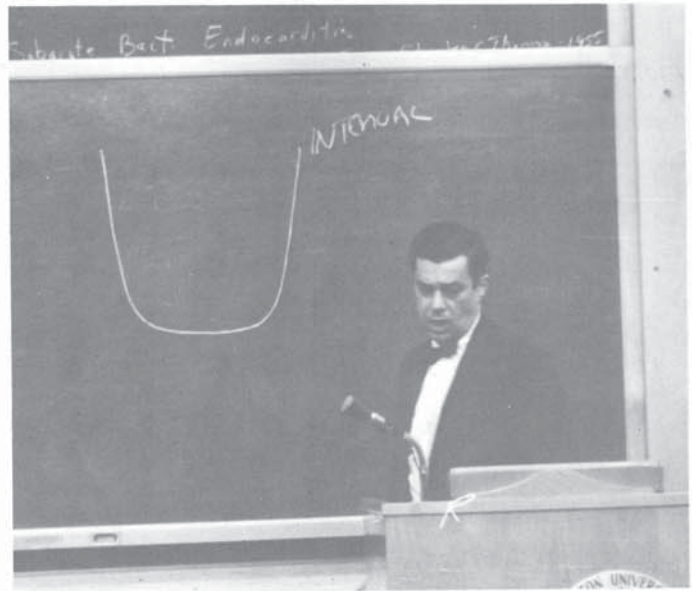
As this was written, the building in which we spent so much of those first two years had been torn down and an imposing pink erection now stands on the piles which were driven contrapuntally with our education. Let the juxtaposition of these events serve as a fitting comment on our years at BUSM.

pharmacology



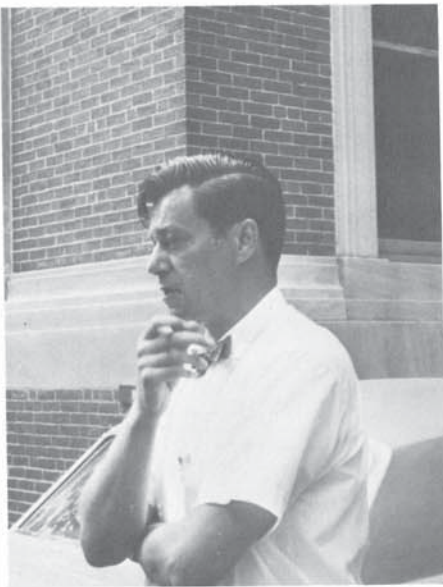
VINCENT LANZONI, Ph.D., M.D.
*Associate Professor of
Pharmacology
Associate in Medicine*

There were doves . . .



EDWARD W. PELIKAN, M.D.
Professor and Chairman

. . . and there was Pelikan.



I just swallowed the entire second year class.



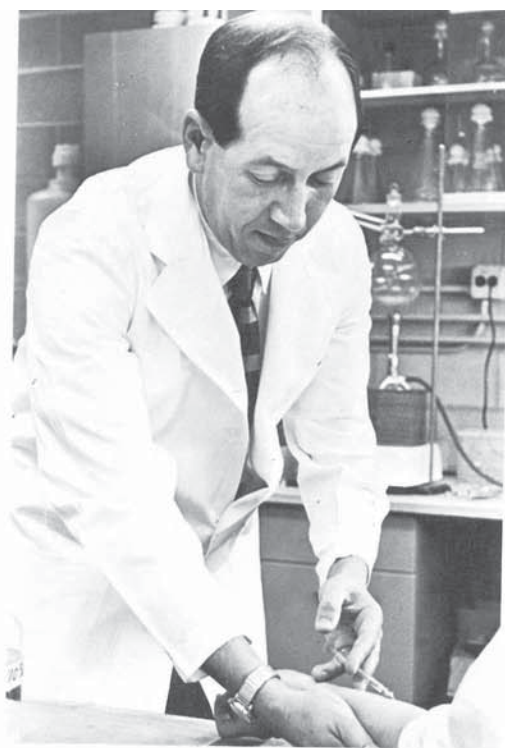
In the beginning

microbiology



EDGAR E. BAKER, Ph.D.
Professor and Chairman

So rested he by the tumtum tree and stood awhile in thought.



SIDNEY KIBRICK, Ph.D., M.D.
Associate Professor

If your skin sloughs in two days that means you have circulating antibody.

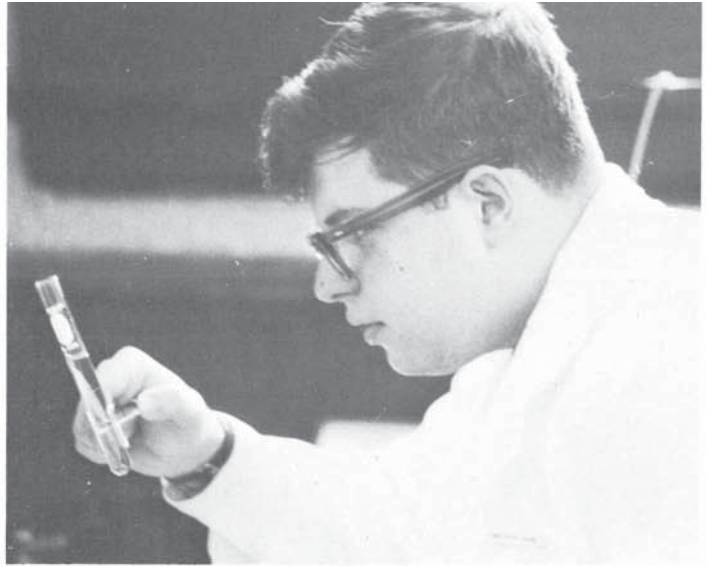


FLORENCE TURNER, *Librarian B.U.S.M.*
MATTHEW A. DEROW, Ph.D., M.D., *Assistant Prof.*
ALICE T. MARSTON, Ph.D., *Associate Prof., Emerita*

The B.U.S.M. Brain Trust



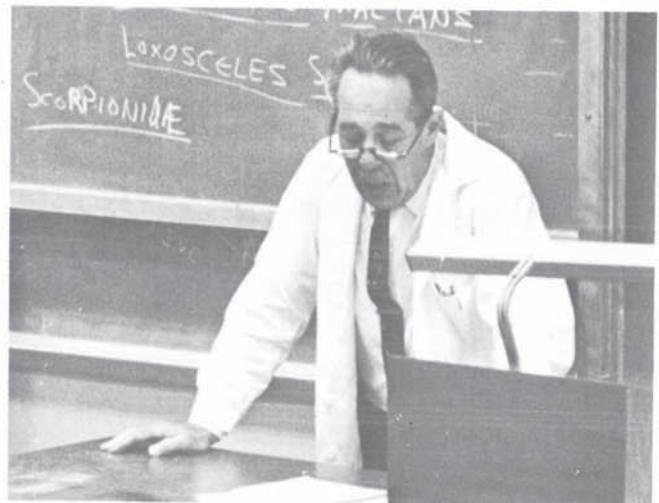
The Boss

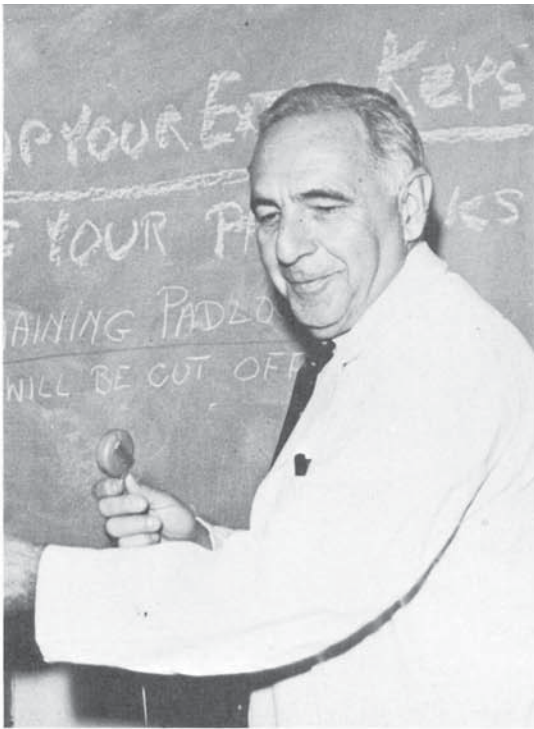


The REAL Boss



*"Of shoes – and ships –
and sealing wax, of
cabbages and kings . . .
And why the sea is
boiling hot – and whether
pigs have wings."*

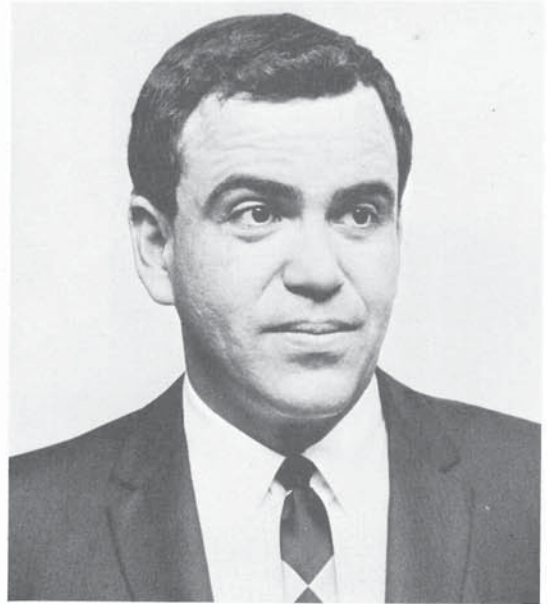




STANLEY L. ROBBINS, M.D.
Professor and Chairman

"Well damn it, gentle people, if you can't recognize acute and chronic, non-specific, pseudo-inflammation consistent with, but not diagnostic of . . ."

pathology



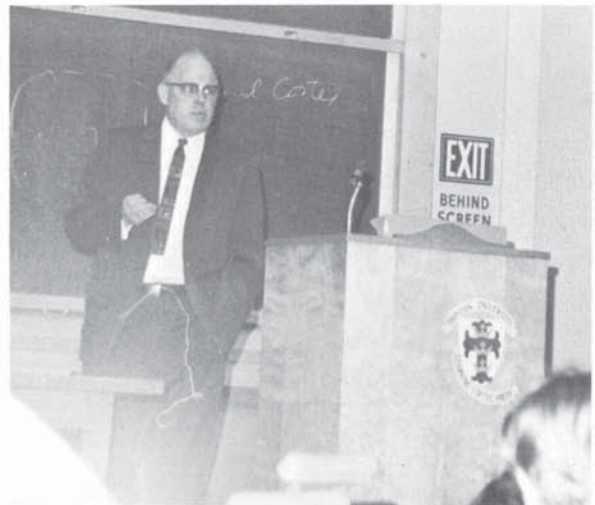
CARL TEPLITZ, M.D.
Assistant Professor

The Last Angry Man



ABRAHAM TOWBIN, M.D.
Associate Professor

*Mary, what am I doing wrong?
Why don't they like me?*



JAMES H. GRAHAM, M.D.
Associate Clinical Professor



JAMES E. FITZGERALD, JR., M.D.
Instructor



Eames, these slides are too much. I should have gone into the poultry business with my father.

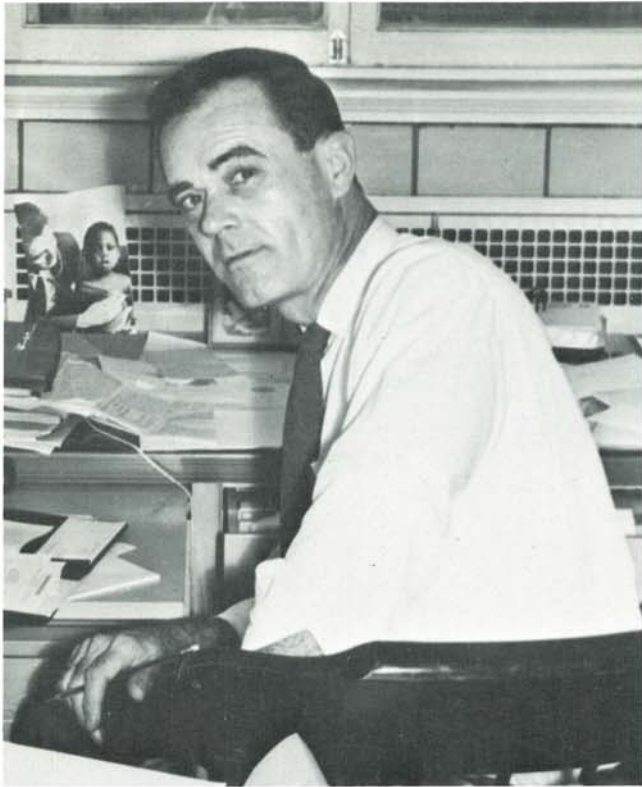


WALTER I. HOFMAN, M.D.
Teaching Fellow



No Mr. Saloman, that piece of tissue which you insist is the Medial longitudinal fasciculus is really impacted feces.

clinical pathology



WILLIAM E. HUCKABEE, M.D.
Associate Prof. of Medicine
Associate Prof. of Pharmacology



PHILIP KRAMER, M.D.
Associate Professor of Medicine

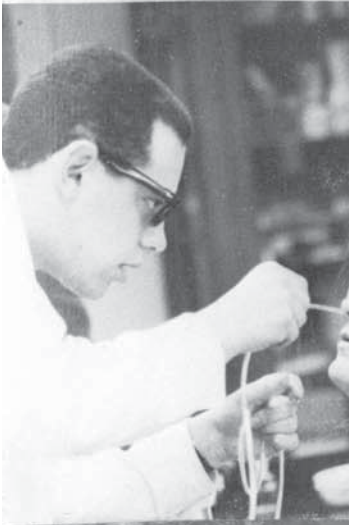
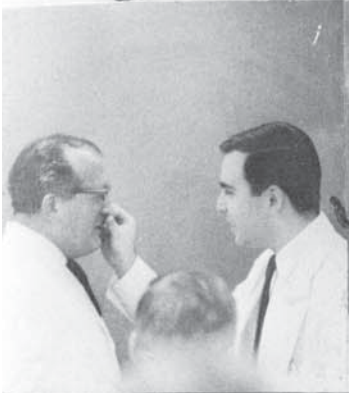
Through the nose, over the tongue, look out stomach here I come.



RONALD B. MILLER, M.D.
Associate in Medicine



CHARLES P. EMERSON, M.D.
Associate Professor of Medicine



neuropathology



LEONARD D. OSLER, M.D.
*Associate Professor of
Neurology*

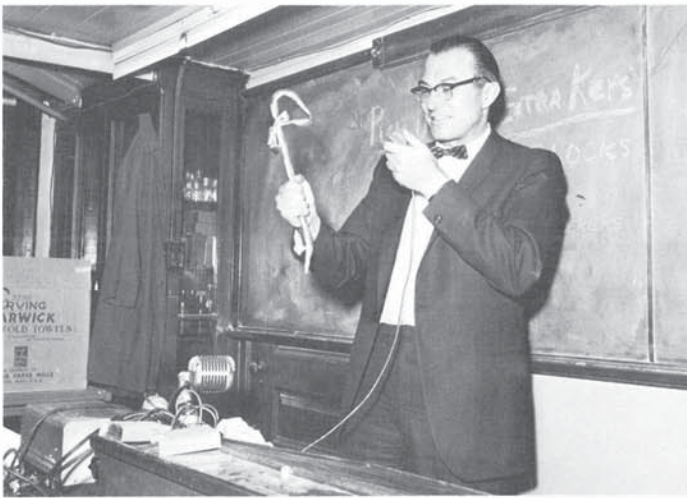
Devoted friend and adviser



ROBERT G. FELDMAN, M.D.
*Assistant Professor of
Neurology*



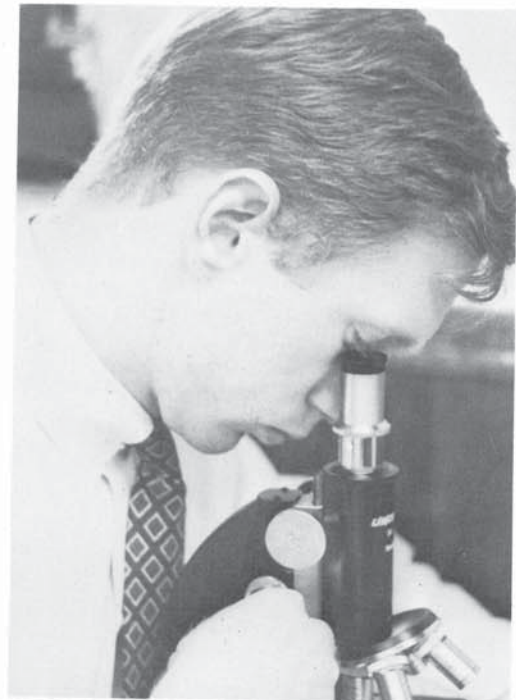
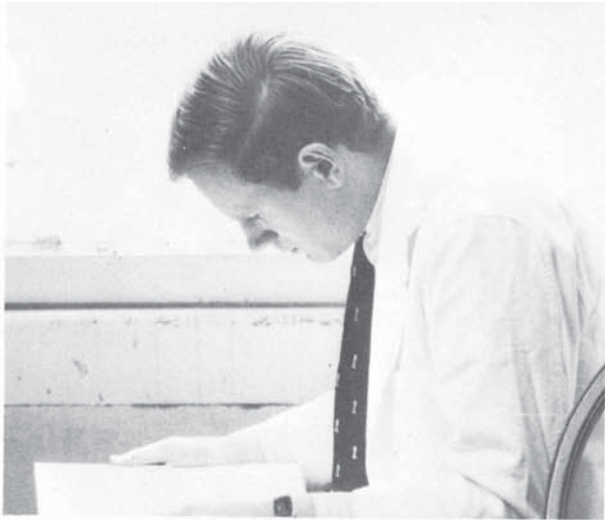
NORMAN GESCHWIND, M.D.
Professor and Chairman of Neurology
JOSEPH M. SEGARRA, M.D.
Instructor in Neurology

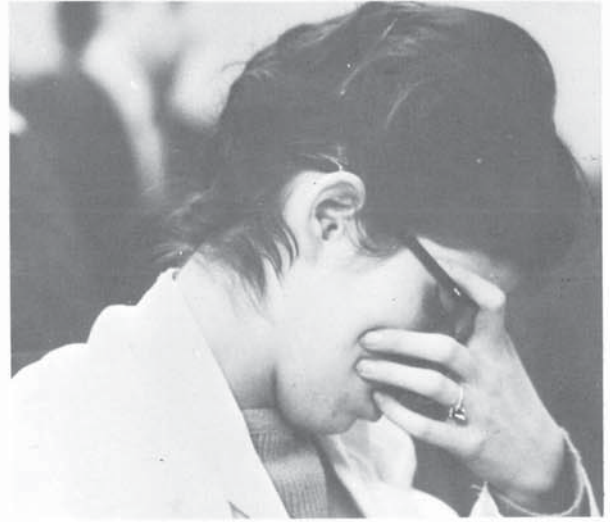


the
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of an
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the grind . . .

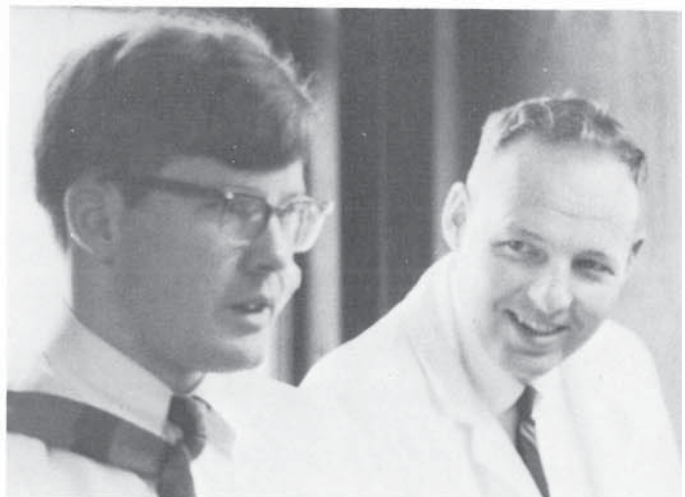
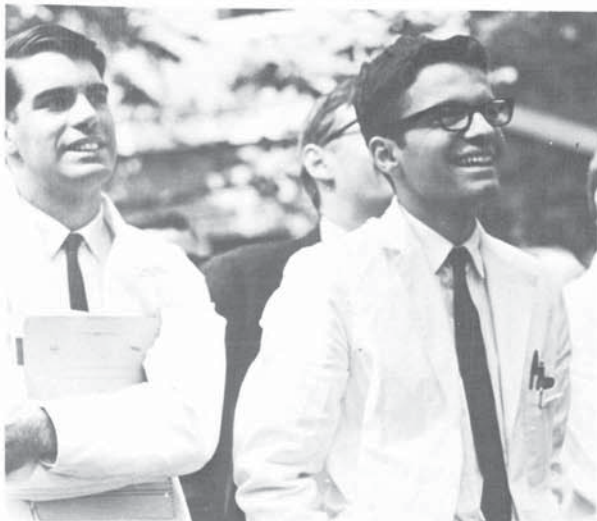
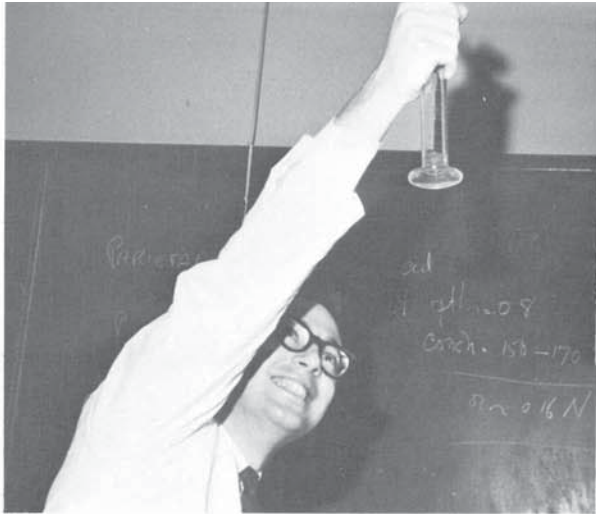


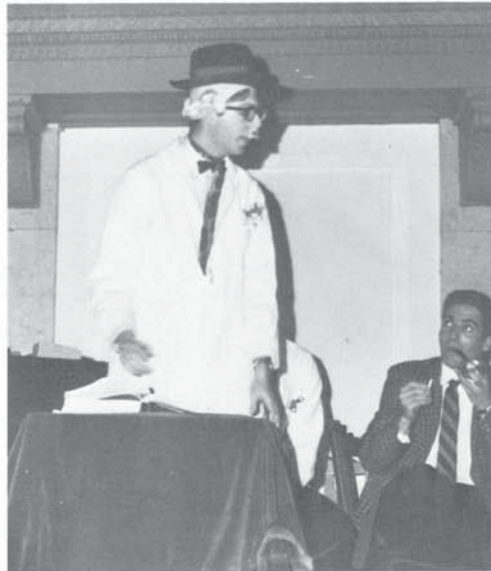


the respite . . .

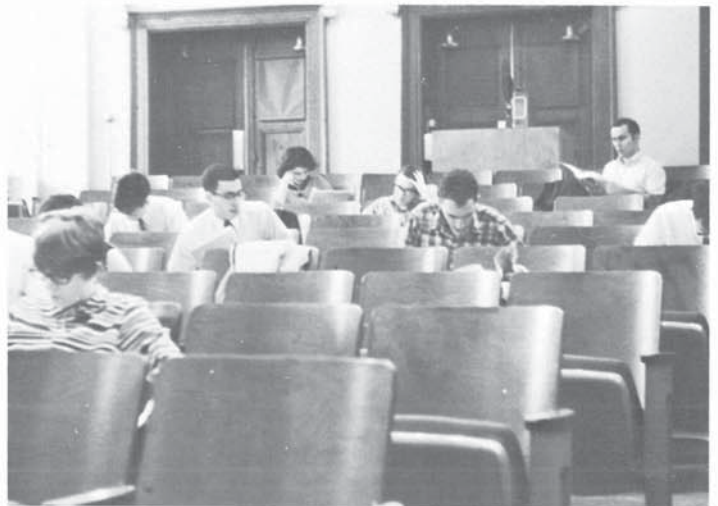
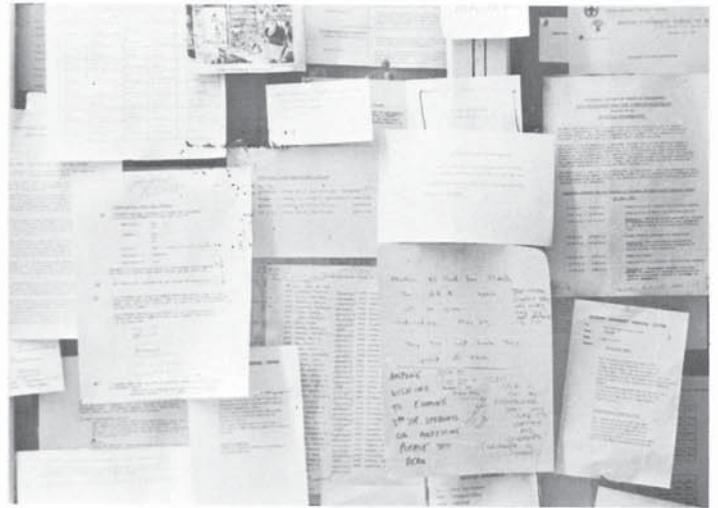
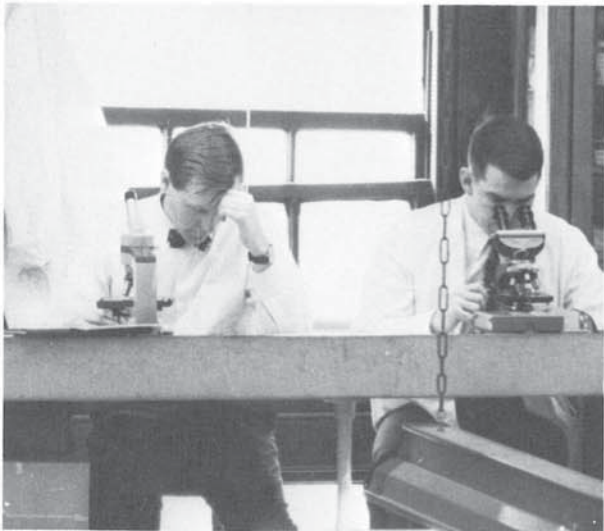


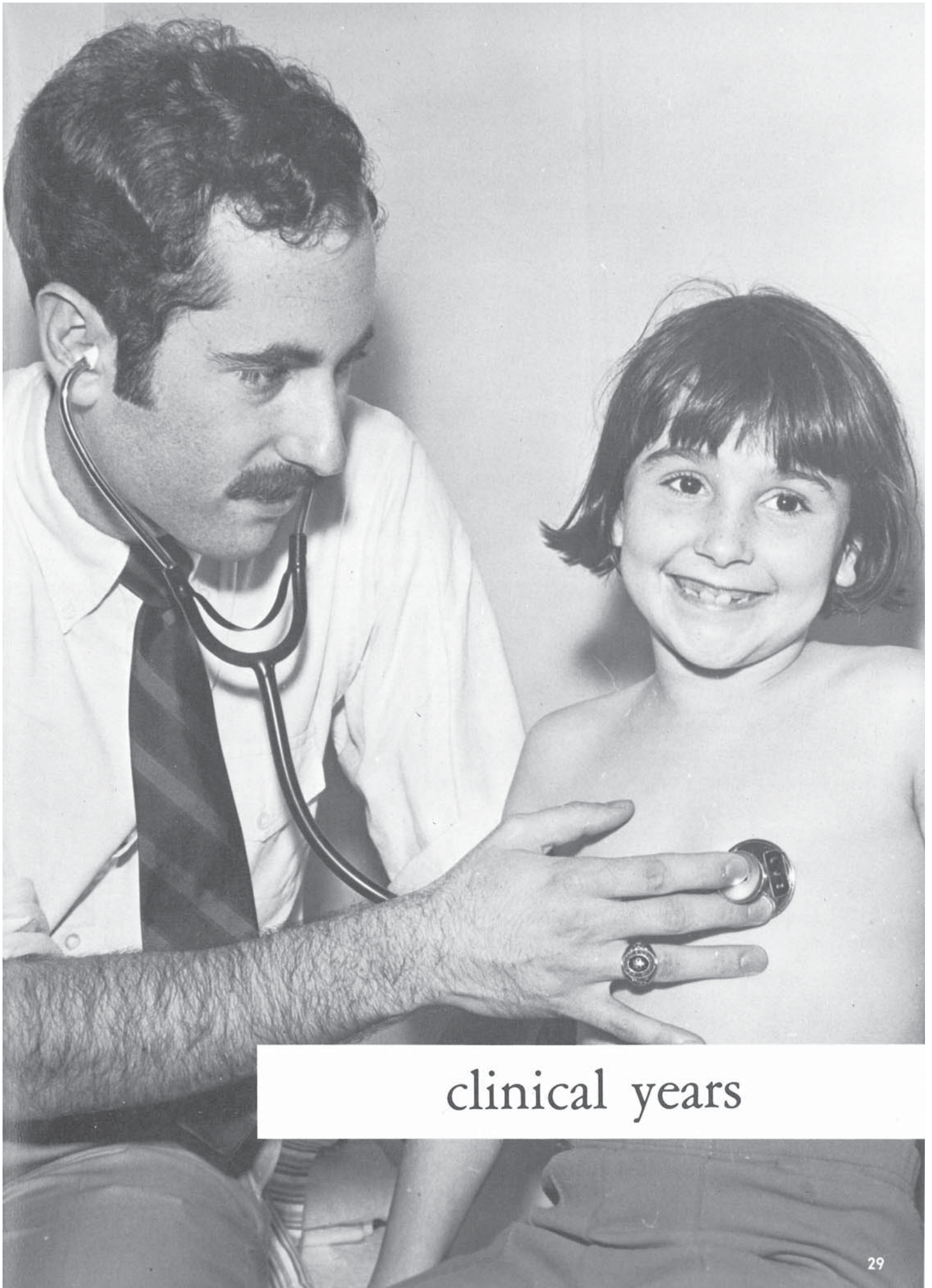
the good times . . .





the
test





clinical years

By the end of the second year, the student is able to take a history with about as much insight into the data he collects as a census taker, and able to perform a physical examination with about as much acumen as a good head nurse. He has been exposed to the art of discussing fatal illnesses at the bedside while reassuring the patient by saying "We're just talking medical talk, this has nothing to do with you." What is decidedly lacking in his development is an understanding of the significance of the compulsive routine he has been trained to perform.

He serves an apprenticeship in the OPD where he learns the vocabulary of "cookbook medicine." Words like "crock" and "Turkey" creep into his everyday parlance. Each morning he eagerly returns to the OPD where he hopes that his patient will have an interesting finding or a rare disease so that he will not feel that his time is wasted on those for whose complaints he can find no physical determinant. One day, however, as he asks the patient a series of questions he hopes to be able to list later as the impertinent negatives *ad nauseum*, he finds that the patient hasn't the slightest idea whether or not he has ever had dysuria, pyuria, or hematuria. He rephrases his question. "Do you ever have pain, pus, or blood when you pee pee?" As the patient then answers in the affirmative the student realizes for the first time that the purpose of his questions is to help his patient rather than to satisfy a pedantic resident. He has learned both to communicate and to emphathize. And when he has his first contacts with fatal or debilitating disease he may come to realize that sometimes it is better to be able to report a negative examination than a positive one. And he may appreciate rather than scoff at Peabody's words.

During the clinical years the student becomes adept at ordering lab tests and using abbreviations. He happily spouts phrases like "Get a CBC, UA, BUN, BS, PBG, LP, EEG, and X-Ray on that FIK with an FUO and seizure. Start an IV but don't give ASA unless the temp hits 105." Often, to him, the practice of medicine is a matter of filling in the blanks on a lab sheet. This is not to say that he necessarily orders tests blindly but that his is the stimulating task of transferring numbers from one piece of paper to another. A new word enters his life and becomes the bane of his existence: SCUT. SCUT is something so much to be despised (after all, Ben Casey never emptied a bed pan) that the course of his future training may be set on the basis of the amount of SCUT in his future. Masochists choose places where there is much to do. Sadists choose hospitals with many medical students around, while others choose the places in between.

There is another aspect of the clinical years which generally receives little attention, but which certainly plays a major role in the maturation of a physician. This is the gradual process of isolation and alienation of the student from his family, friends, and peers. The class is parcelled out to peripheral hospitals where the student finds himself separated from his classmates with no one to talk to except his patients. He has contact with the outside world only on alternate nights and weekends. His idea of fun is the happiness of delivering a well baby. He has been educated to speak the strange language of medicine, and he has difficulty communicating with his non-medical friends. He learns the qualities of initiative, hard work, and individualism. He is gradually given increasing responsibility for his charges. He must endure alone the many humiliations of his education and learn to celebrate quietly his successes. It is important that he learn not to look around nervously when someone asks for a doctor, for he has been carefully prepared to fill the role. And the most important pearl of all is that he learn not to say "oops" when using local anesthesia.

D.P.G.



University Hospital



The Talbot Building

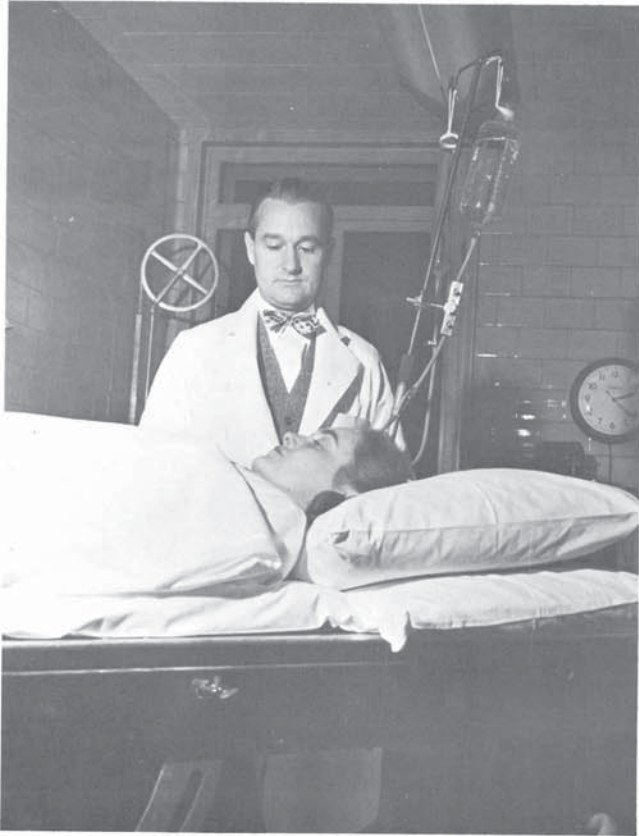


The Boston City Hospital

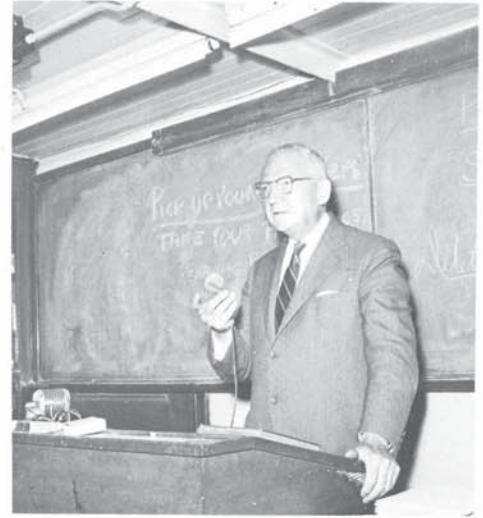
Lemuel Shattuck



medicine



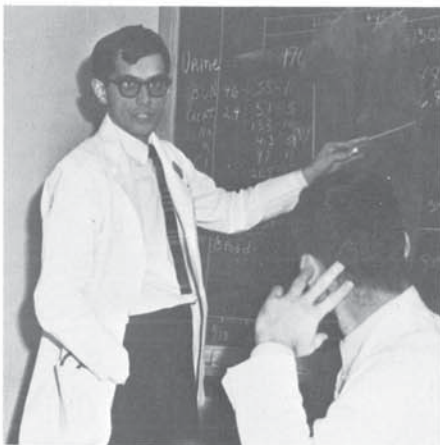
ROBERT W. WILKINS, M.D.
*Wade Professor of Medicine,
Chairman of the Department*



CHESTER S. KEEFER, M.D.
*Wade Professor of Medicine
Emeritus*



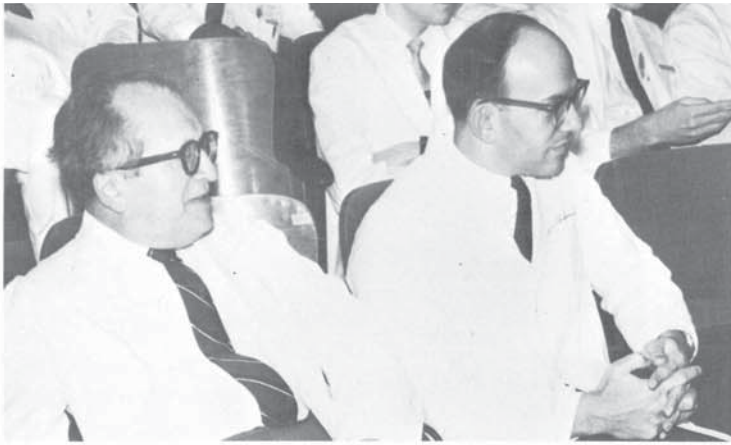
ARNOLD S. RELMAN, M.D.
Professor



NORMAN G. LEVINSKY, M.D.
*Professor, Director V and
VI Medical Services, B.C.H.*

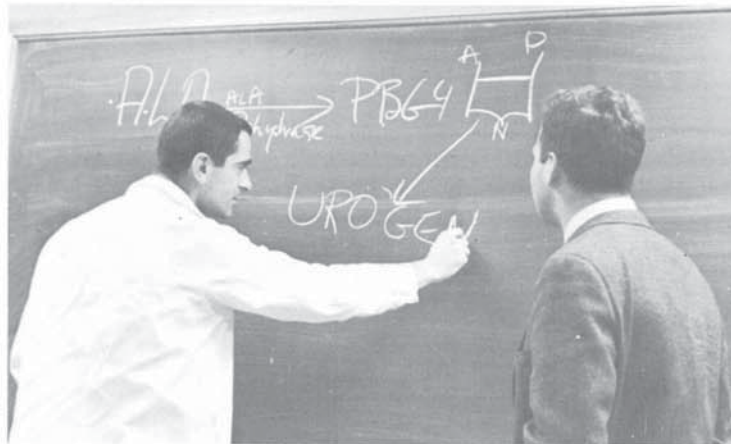


B.C.H. Grand Rounds

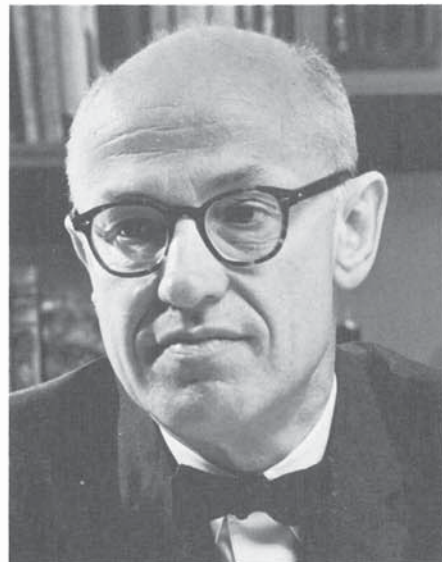


PHILIP KRAMER, M.D.
Associate Professor
 ARAM Van CHOBANIAN, M.D.
Assistant Professor

ROGER LESTER, M.D.
Assistant Prof.



ROBERT M. DONALDSON, M.D.
Associate Professor
Blow in my ear and I'll follow you anywhere.



FRANZ J. INGELFINGER, M.D.
*Former Conrad Wesselhoeft
 Professor of Medicine.*
*Editor - New England Journal of
 Medicine*

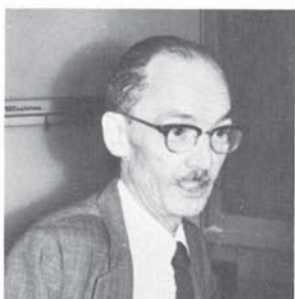
That's the funniest story I ever heard.



I'd like to thank my Uncle Louie and Aunt Sadie for the new fountain pen.



GERALD H. WHIPPLE, M.D.
Associate Professor



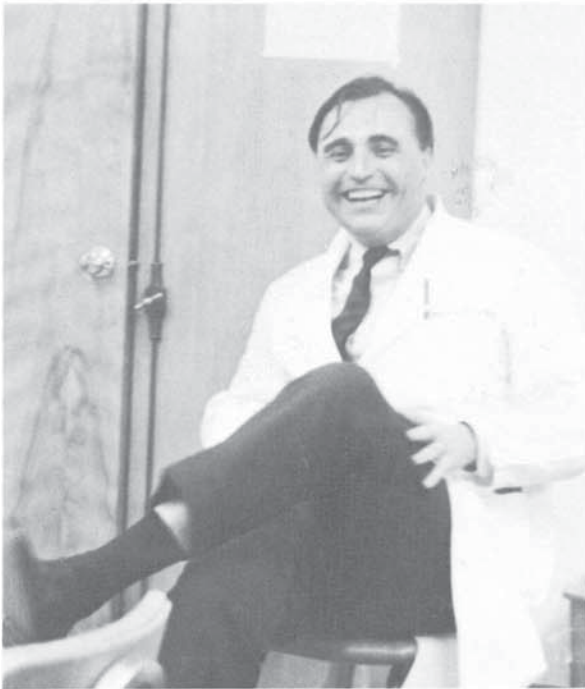
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Associate Professor



BURTON J. POLANSKY, M.D.
Associate Professor

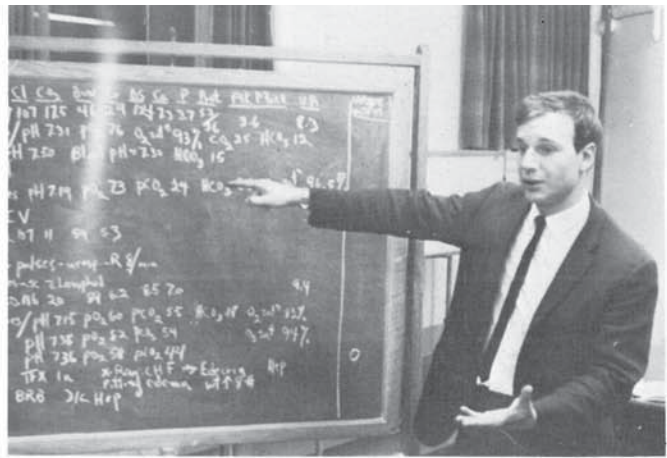
Eat your heart out



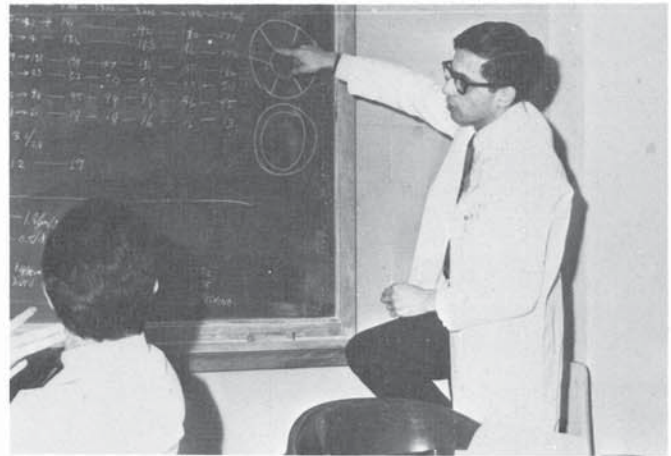


JAMES C. MELBY, M.D.
Associate Professor

Look what steroids did for my affect.



Pete

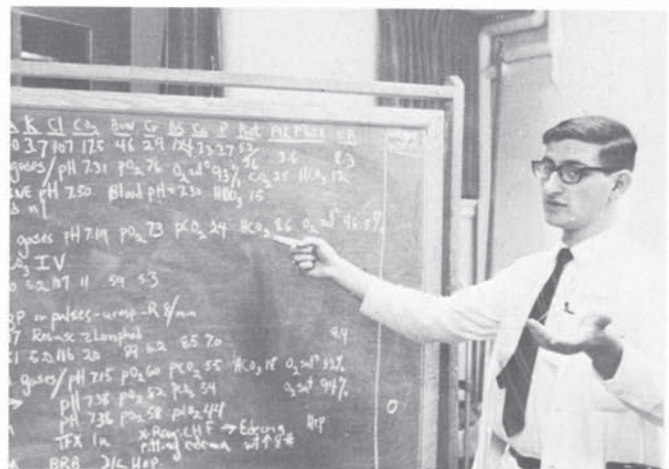


Norm



HERBERT MESCON, M.D.
Professor of Dermatology

Adventures in the Skin Trade



Jeff



WILLIAM R. McCABE, M.D.
Associate Professor

With this stuff, who needs penicillin?



LOUIS W. SULLIVAN, M.D.
Assistant Professor



ISADORE N. ROSENBERG, M.D.
Associate Professor

No, Kent, Hashimoto's Disease wasn't named after me.



LILIA TALARICO, M.D.
Instructor

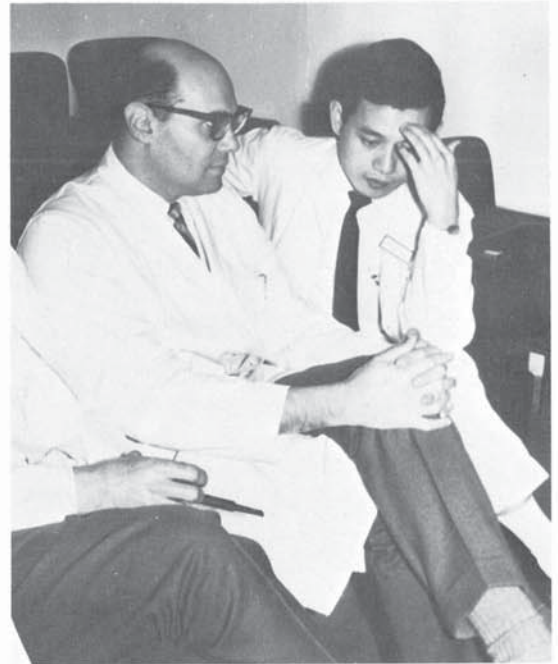
Heme, Italian style



Hey, do you know a good kidney man?



ALAN S. COHEN, M.D.
Professor



SIDNEY R. COOPERBAND, M.D.
Associate in Medicine



MURRAY M. FREED, M.D.
*Associate Professor of Rehabilitation
Medicine*



PETER E. POCHI, M.D.
*Assistant Prof. of
Dermatology*



RICHARD H. EGDAHL, M.D.
*Utley Professor of Surgery.
Chairman of the Department*

surgery



JOHN A. MANNICK, M.D.
Professor of Surgery

Would you buy a secondhand kidney from this man?



Well, Mr. Peck, if you have no problems with your adrenal gland you're come to the wrong man.



"Never mind the procedure, just hold on to those retractors."



SIMMONS LESSELL, M.D.
Associate Prof. of Ophthalmology

You try harder when you're number two.



DOUGLAS A. FARMER, M.D.
Clinical Professor of Surgery

Some thought we should take it in the eye . . .

others in the ear . . .

and others . . .



EPHRAIM FRIEDMAN, M.D.
Professor of Ophthalmology



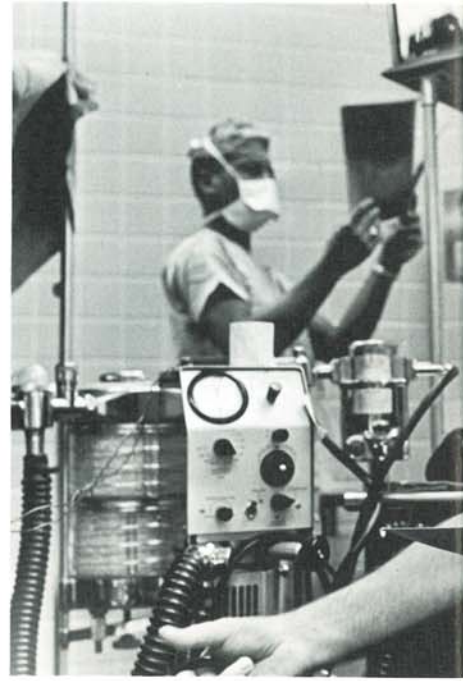
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JOHN F. O'CONNOR, M.D.
Ass't Prof. of Radiology



HORACE M. GEZON, M.D.
Professor and Chairman

I hate kids.



What made you decide on the Six Year Med Program?



S.A.M.A. Christmas Party at Boston City Hospital



Student Health Organization – Boy's Club Project



Two pediatric patients at play



Santa Claus at B.C.H. Christmas Party

community medicine



*A typical day on Home Medicine:
44 U.R.I.'s
10 U.T.I.'s
5 C.O.L.D.'s
1 case of Vaginismus*

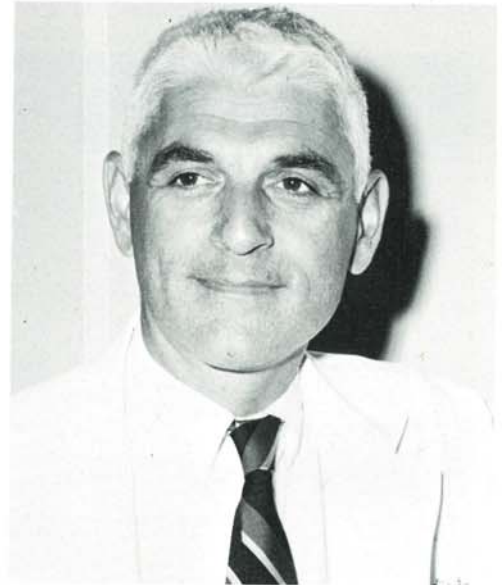


BURTON TEPFER, B.U.S.M. IV
Our crusading classmate



GERALD HASS, M.D.
Assistant Professor
EDWARD G. DREYFUS, M.D.
*Professor, Preventive
Medicine*

Two who taught us that patients are people.



I just got my A.D.C. check.

psychiatry



WILLIAM I. MALAMUD, M.D.
Associate Professor

It's a clear case of penis envy.



BERNARD BANDLER, M.D.
Professor and Chairman

I love my mother but we could never be happy together.



JACOB SWARTZ, M.D.
Associate Professor

So then this nut turned to me . . .



ANDREW D. ELIA, M.D.
*Clinical Professor of
OB-GYN, Emeritus*

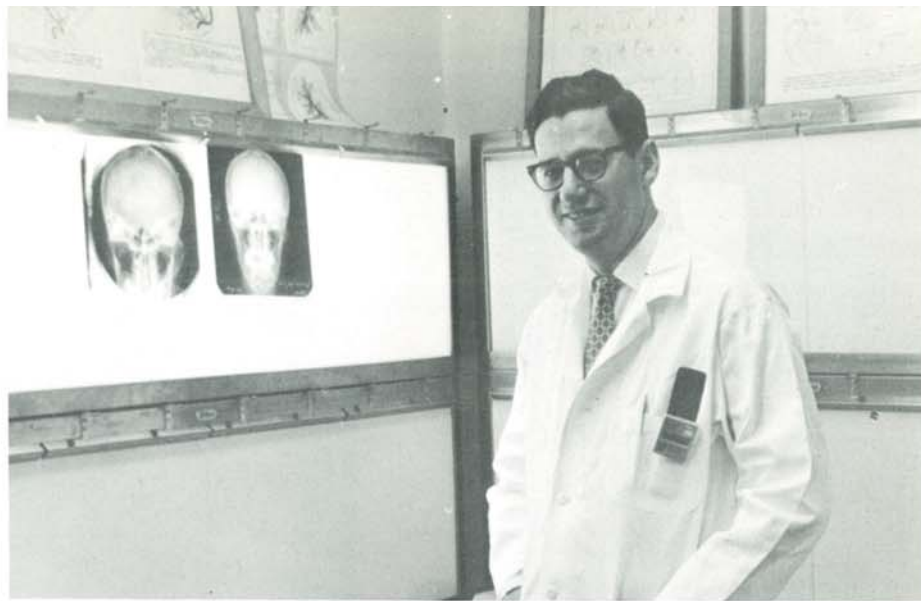
obstetrics



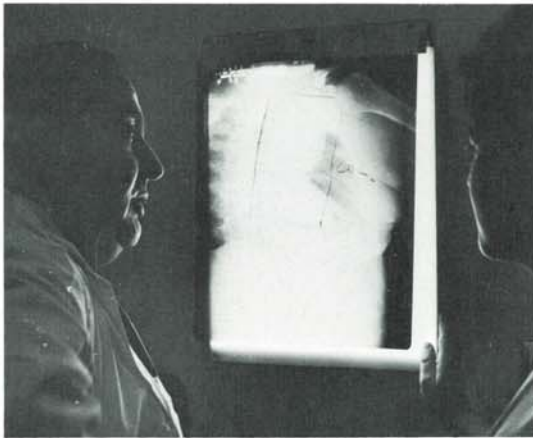
DAVID CHARLES, M.D.
Professor and Chairman



radiology



JEROME H. SHAPIRO, M.D.
Professor of Radiology



ISAMETTIN M. ARAL, M.D.
Associate Professor



42 Mev Betatron

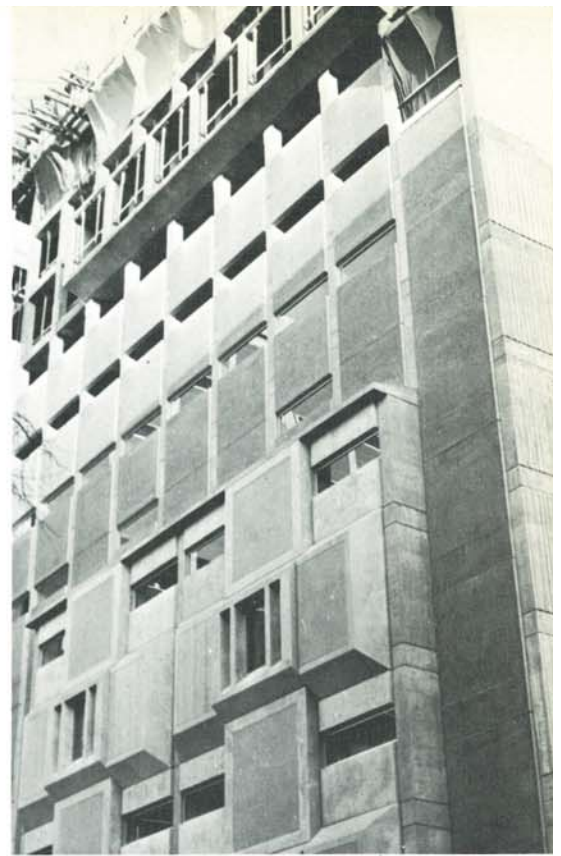
*Sock it to 'em,
Sock it to 'em.*



SEYMOUR A. KAUFMAN, M.D.
Associate Clinical Professor

the
past . . .





... and
present





Jack: I haven't opened a book in four years.

the lighter side



Crazy Legs Hines



1967 Hockey Team



The Bull Session



The Dirty Dozen



Brandeis Sit-In



Lord Jim



Haven't I seen you someplace before.



Christmas Toy Dance



Flash



Hay Ride



Winken, Blinken, and Nod



Hey Frisb, what's all this baseball stuff scribbled in your notebook.





Now it's my turn to do the rectal.



Listen here shorty.



Who's the dog, Elibu?



Time out



Which one of you ate Miss Turner?



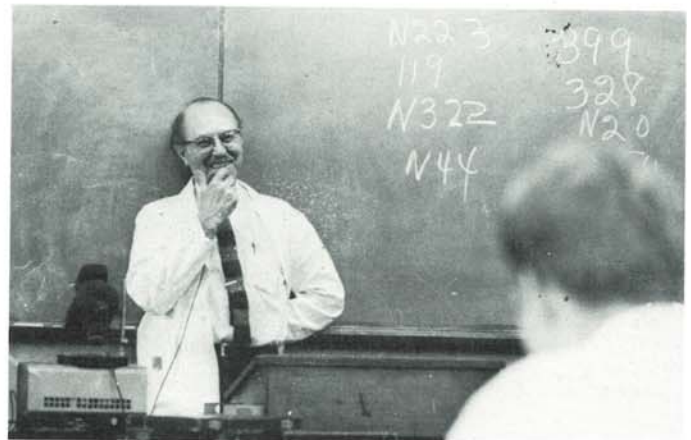
lest we
forget . . .



Barbara's broken leg



The delicious meals at B.C.H.



Dr. Towbin's successful mouse experiments



Bill Grace, a good friend



Kirsten



Barry



The Projectionist



Eddie



Class Notes



Senior Thesis



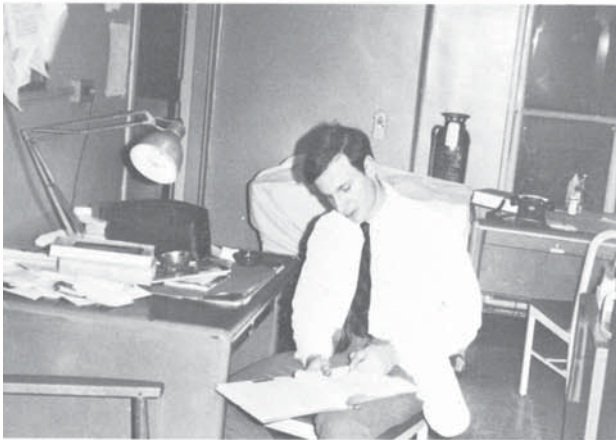
Finnegan's Wake



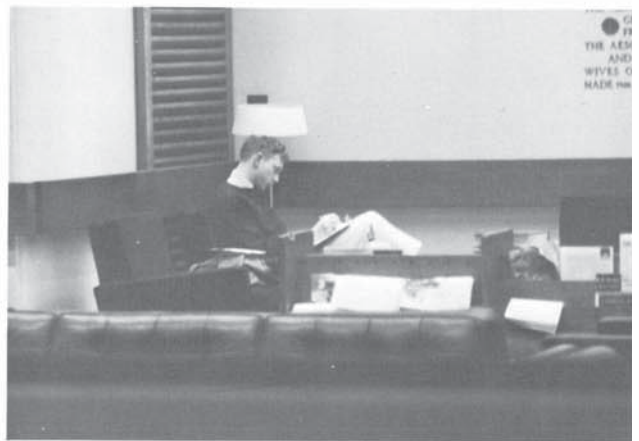
It sure doesn't taste like Salmonella Typhosa



How about a hair transplant?



Final progress notes



Relaxing in the Countway

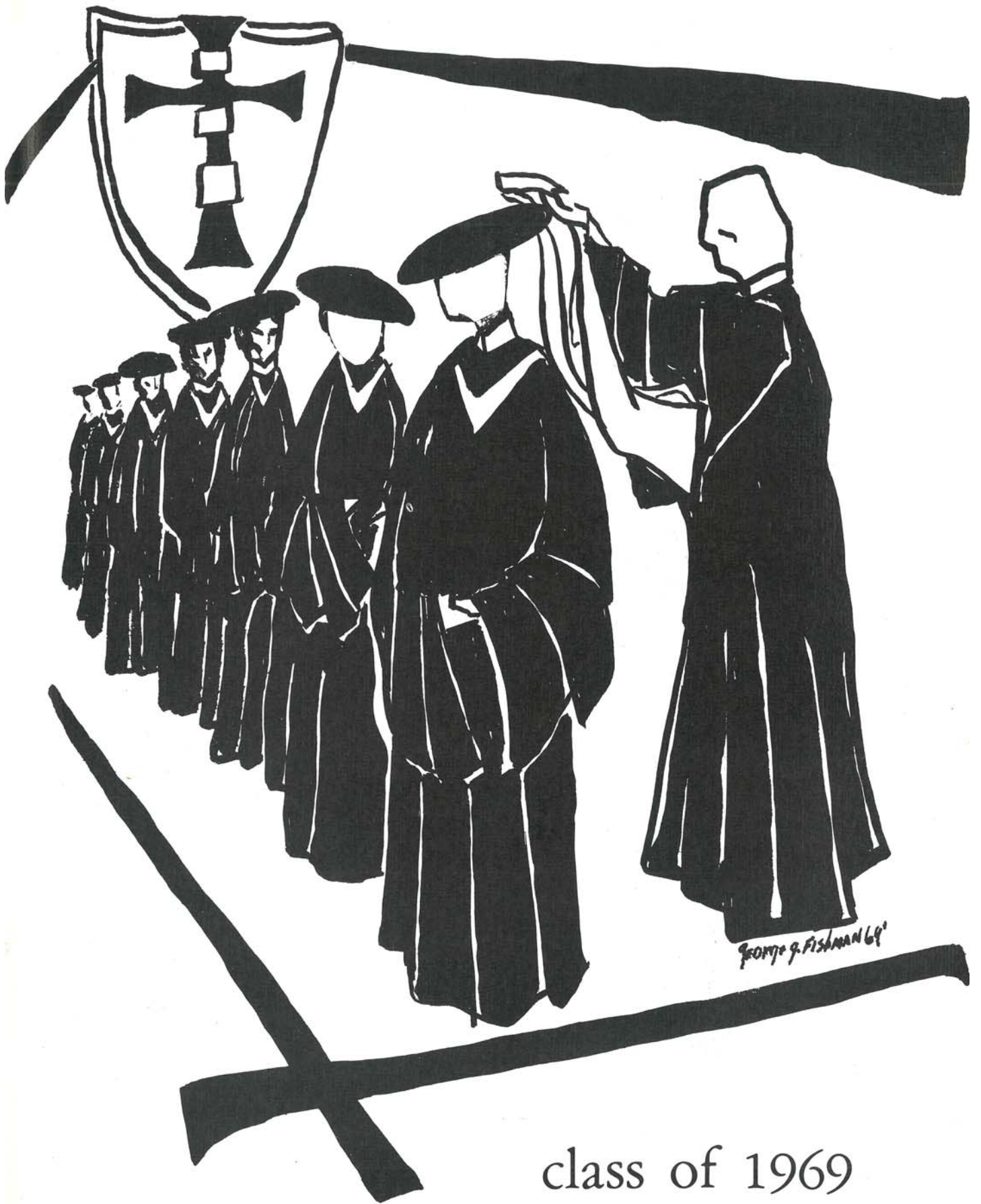


The Purple Gang



discharge summary

NAME – Class of 1969
AGE – Four years
RESIDENCE – 80 East Concord Street, Boston, Massachusetts
FAMILY DOCTOR – Dr. Cornog
CC – Spontaneous abortion May 18, 1969
HPI – Etiology varied. Characterized by chronic
unremitting pain of four years duration with
total body and mind radiation. Periodic relief
lasting for longer periods now.
FH – Contributory only in that they made it possible
SH – Born in USA and four foreign countries. Married 50% –
Children 25
Financial: Usually poverty stricken, but not eligible
for A.D.C.
Work: Lab Tech, bartender, librarian, photographer,
morgue attendant, cab driver, record room clerk,
author, Boston Garden medic, guinea pig, cashier
Sleep: Usually only during lectures
Smoking: Essentially unchanged except during lung
chapter in Pathology
Drinking: Excessive after exams
Medication: Librium, Gelusil, Enovid, Amphetamine,
Seconal, glue sniffing, paregoric, Ex-lax
PH – 41 college graduates and 1 M.A., 28 six year students,
1 engineer, 1 minister, 1 former Navy officer
PE – Some looking much younger than the average med school
graduate, some much older
SKIN: fits
BJM: still kicking
HEENT: Present
BREASTS: Demand greater than supply
RESPIRATION: Shallow
CARDIAC: filled with fond memories
GI: (see above medication)
NERVOUS: constantly
PSYCHE: grateful
IMPRESSION – Fit for Internship
PROGNOSIS – Excellent



George G. Fishman '69

class of 1969



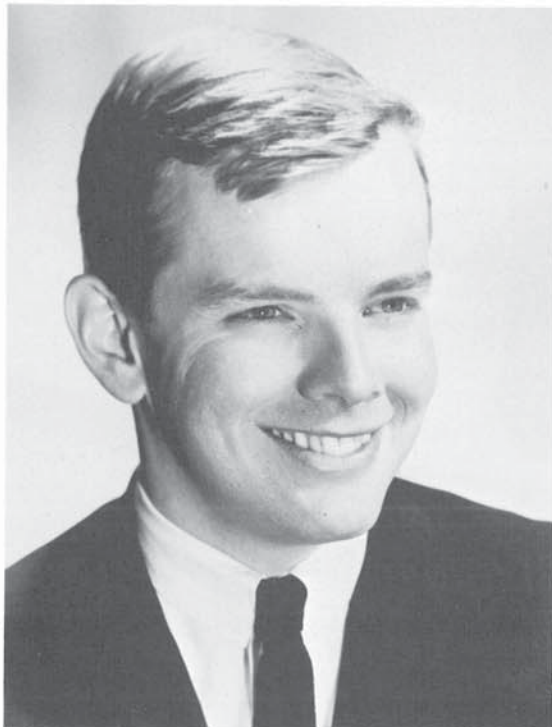
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Valley Stream, New York
A.B., Brandeis University, 1965



CONSTANCE A. ANTON

Cape Elizabeth, Maine
A.B., Boston University, 1969



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Marblehead, Massachusetts
B.A., Williams College, 1965

SYDNEY COHEN

Malden, Massachusetts
A.B., Boston University, 1964



MARTIN J. COYNE

Chestnut Hill, Massachusetts
A.B., Brandeis University, 1965



CLARE L. DANA

Newton Centre, Massachusetts
A.B., Vassar College, 1964

NANCY H. DAWBER

Wellesley Hills,
Massachusetts
A.B., Vassar College,
1961



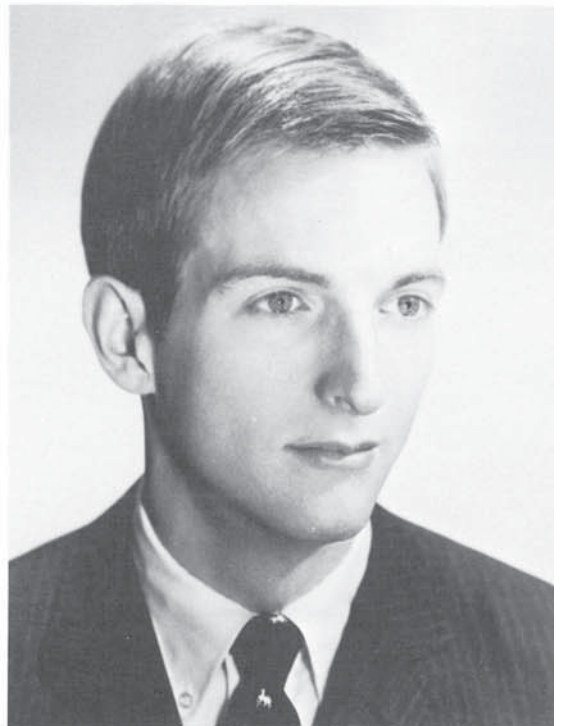
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BRUCE L. EAMES

Becket, Massachusetts
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GERALDINE G. FELDMAN

Greenfield, Massachusetts
A.B., Boston, University, 1969



JACK FERLINZ

Watertown, Massachusetts
A.B., Harvard University,
1960

JUDITH S. FINEBERG

Malden, Massachusetts
A.B., Boston University, 1969



ARTHUR P. FISCH

Union, New Jersey
A.B., Rutgers University, 1965

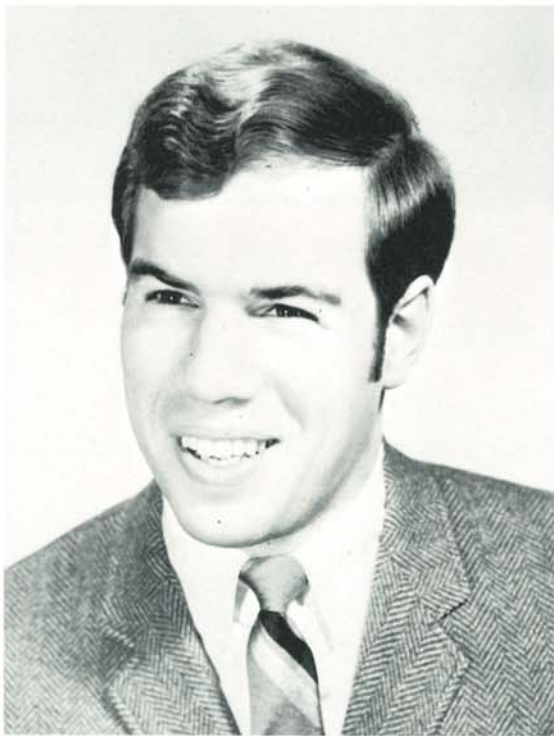
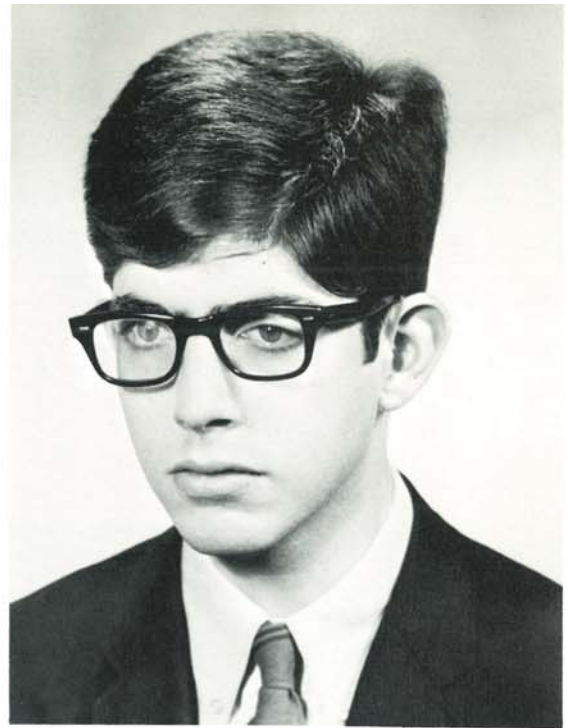


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Hamden, Connecticut
A.B., Boston University, 1969

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B.D., Andover-Newton Theological
School, 1963



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MARC A. GREENWALD

Eastchester, New York
A.B., Boston University, 1969



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A.B., Boston University, 1969

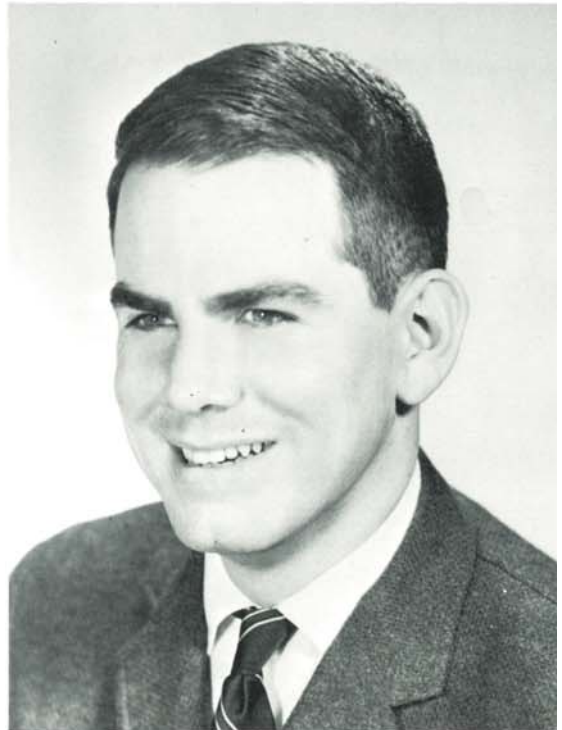
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A.B., St. Michael's College, 1963





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B.A., Amherst College, 1965





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A.B., Boston University, 1969



WILLIAM H. LUNDY

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A.B., Boston University, 1969



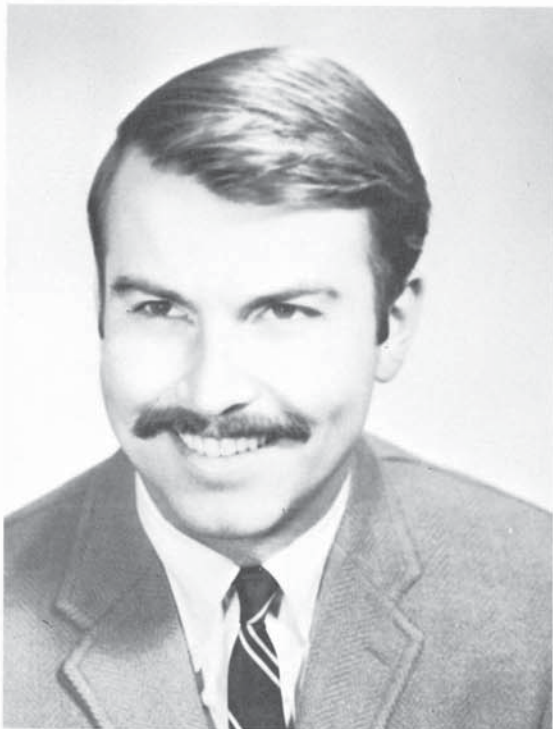
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Avon, Connecticut
A.B., Princeton University, 1965



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Winchester, Massachusetts
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A.B., Boston University, 1969



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A.B., Columbia University, 1965



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A.B., Boston University, 1969

LARRY J. PRICE

Shrewsbury, Massachusetts
A.B., Clark University, 1965



JERILYNN C. PRIOR

Orizinkie, Alaska
B.A., Linfield College, 1965





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1969



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A.B., Boston College, 1965



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A.B., Bowdoin College, 1965



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B.S., Long Island
University, 1962



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Dame, 1964



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Natrona Heights, Pennsylvania
A.B., Columbia University,
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B.A., University of Vermont,
1965



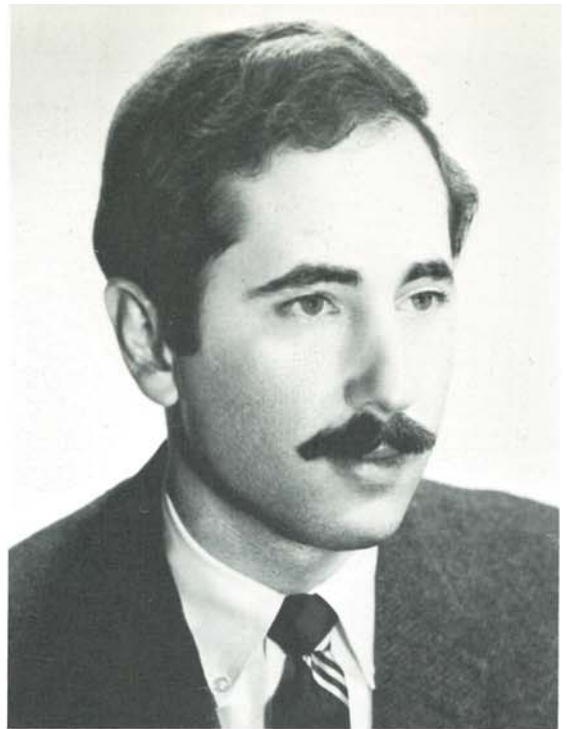
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a hearty welcome from the alumni association

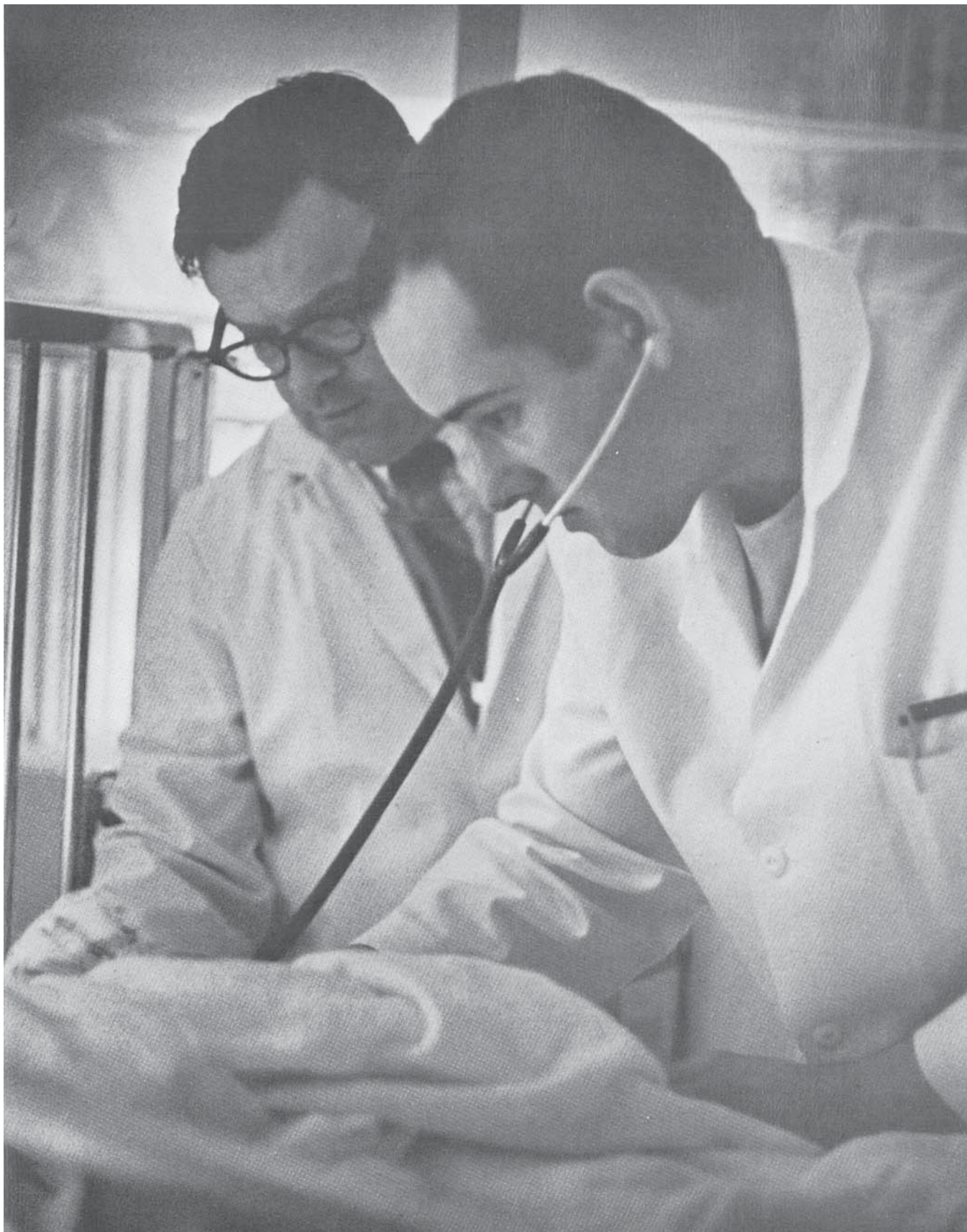
Your four years have spanned some of the most interesting achievements in the history of the school. You entered the old, but hallowed halls of a school which has graduated many illustrious men of medicine in years past. You were exposed to some of the traditions which emanate from an old school as well as being equally exposed to the hardships a deficient plant creates.

You will be the first class graduated from the new school. Although its full impact will not be appreciated until future classes have graduated, I hope the progress you have seen during your time here will inspire future loyalty to the school. As Alumni, we have followed closely and participated generously in its ups and downs. We have contributed to the plant by generous donations to the construction of the Research Building, the Academic Building, and now the Library. We have given monetary as well as material awards to the top three students of each of the four classes at the medical school. We have supported Student Council Activities, entertained seniors in our homes and given an Annual Banquet which serves as a vehicle to welcome all of you new members into our association.

There are no dues required for membership; all of our financial support is provided through voluntary annual giving. We truly wish to cultivate your interest in the Alumni Association and hope that through it you will maintain a warm affection for your Alma Mater. You can express this in the future by your personal interest, active participation in alumni affairs and by an annual voluntary contribution commensurate with your ability at any one time.

I welcome you within the folds of the Boston University Medical School Alumni Association, and may your future be bright.

Sincerely,
Charles D. Bonner, M.D.



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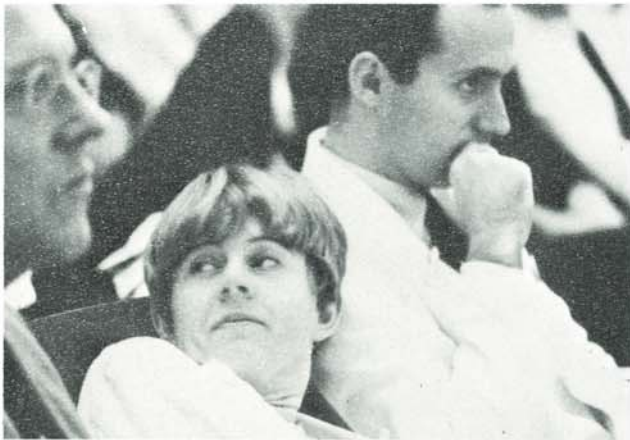
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