May 1965

Contributors to This Issue

Catholic Physicians' Guilds

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TO THE EDITOR:

It has been brought to my attention recently, as a moral member of the medical profession, that many Catholic physicians would prefer that confessors refrain from advising patients whose cycle is too irregular to allow the rhythm to consult a Catholic gynecologist who can probably correct the problem through the use of the pill.

I am convinced that a large number of confessors believe the procedure has been highly successful and consequently, have the general approval of most members of the medical community, especially those who are readily and frequently advised their patients along these lines.

However, if it is true that most medical men do not believe the method is too successful, and if they would prefer that confession not be given to patients with irregular cycles, the profession should be publicized, since it will be of value to all concerned.

I would like to write an article on this problem for one of the professional publications for priests. However, before I would do so, I would like to know if there is any literature in this area of which you may be aware.

(Rev.) Eugene J. Weitzel, S.V.
Vatican Seminary
1212 Otis St., N. E.
Washington, D. C. 17

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DR. JAMES T. NIX, president of the Catholic Physicians' Guild of New Orleans, was host to the Conference on Medical Education and Research held in that city last November 13 and 14. An entire afternoon of his planning was devoted to a symposium concerned with the Health Care of Religious. For several years, Dr. Nix has been chairman of the committee within the National Federation devoting intensive attention to a program of guidance in the health field for priests, sisters and brothers. Numerous articles on this subject have appeared in The LINACRE QUARTERLY authored by him.

Reverend John J. Flanagan, S.J. is Executive Director of the Catholic Hospital Association and consultant to the National Federation and LQ. His deep interest in medical education and research related to the hospital field and the benefit to patients is very evident in the article which keynote selected papers included from the Conference held in New Orleans last November.

Charles U. Letourneau, M.D. is president of Letourneau Associates, consultants to many hospitals throughout the country, as well as editorial director of Hospital Management. The organization has offices in Chicago, San Antonio and Montreal.

John M. Danielson is executive vice president of Evanston Hospital, Evanston, Illinois. Active in numerous hospital associations, he has served in administrative capacity for North Shore Hospital, Manhasset, New York; Roosevelt Hospital, New York City, and Johns Hopkins Hospital, Baltimore, Maryland.

Thomas F. Frawley, M.D., F.A.C.P. Dr. Frawley is interested in teaching programs, at present directing his attention to the university hospital. He is professor of Internal Medicine and Chairman of the Department of Internal Medicine at St. Louis University School of Medicine in St. Louis.

Harold B. Haley, M.D. is past president of the very active Catholic Physicians' Guild of Chicago. He is Associate Professor of Surgery at Stritch School of Medicine, Loyola University in Chicago.

Herman I. Kantor, M.D., F.A.C.O.G. is Chief of the Ob-Gyn Services at St. Paul Hospital in Dallas, Texas.

Lake R. Pascale, M.D. is a cardiologist and member of the Heart Station, St. Catherine Hospital, E. Chicago, Indiana. His work also takes him to

May, 1965
A SUGGESTED PLAN
FOR A DIOCESAN CONFERENCE ON MEDICAL
EDUCATION AND RESEARCH IN CATHOLIC HOSPITALS

It is suggested that a conference be the vehicle for inaugurating diocesan attention to Medical Education and Research in our community hospitals within each diocese. A one-day conference would serve as a good means of giving thorough attention to the examination of the current status of Catholic hospitals, as well as improving the continued educational program in Catholic hospitals of your diocese.

1. Recruiting an Organizing Committee
This committee should be made up of a thorough cross section of the Catholic medical community concerned with this problem. It is suggested that the committee might include the following:

Honorary Chairman —
The Most Reverend Bishop.
Chairman —
A leading Catholic physician who has an academic background and is aware of the objectives of Catholic hospitals.
Committee Secretary —
The Diocesan Director of Catholic hospitals.
Committee Membership —
Chairman of each local Catholic Physicians’ Guild in diocese.

2. Scene of Institute
The use of a college or senior high school facility is recommended. This would provide a large auditorium or hall where a keynote meeting could be held and would also provide additional rooms, if sectional meetings would be considered. If this is not possible, the local hotel would make their facilities available in return for scheduling any lunches, dinners, etc.

3. Time of Meeting
It is desirable that this conference take place soon after the Meeting in New Orleans, Louisiana. An invitation list is recommended for a satisfactory diocesan conference. Consideration should be given to inviting the following:

The governing bodies of Catholic hospitals.
The members of Lay Advisory Boards of Catholic hospitals.
All Catholic physicians of the diocese.
Officers of the medical staff of each Catholic hospital.