

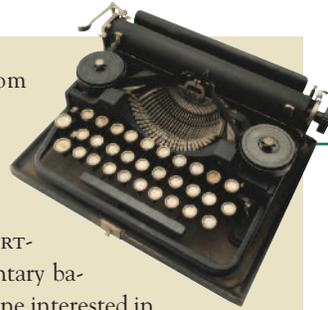
One of the letters below celebrates the kind of physician-patient relationship that may have been more common in times past, while another letter celebrates the fact that—for women in medicine—conditions today are much better than in days of yore.

Reflections on relativity

I really enjoyed the article titled "At Home," by Dr. William Toms (see dartmed.dartmouth.edu/f11/f02). It told me a lot about the kind of doctor he is and the kind of medicine he practices. He reminded me of a pediatrics preceptor I had when I was a student at DMS, Dr. Kaplan, whom I accompanied on several home visits. Whenever I have cause to reflect on Dr. Kaplan, I am reminded of how much home visits help a doctor to understand patients in their own circumstances. It is simply impossible to get that same understanding by taking a history in your office.

The article also gave me an opportunity to reflect anew on

We're always glad to hear from readers—whether it's someone weighing in about an article in a past issue or someone asking to be on our mailing list for future issues. We are happy to send DARTMOUTH MEDICINE—on a complimentary basis, to addresses in the U.S.—to anyone interested in the subjects we cover. Both subscription requests and letters to the editor may be sent to: Editor, DARTMOUTH MEDICINE, 1 Medical Center Drive (HB 7070), Lebanon, NH 03756 or DartMed@Dartmouth.edu. Letters for publication may be edited for clarity, length, or the appropriateness of the subject matter.



the physician-patient relationship. It is a bond of such intimacy, but it can also be one of distance. As a pediatrician, I often see kids who are the same ages as my own boys. It has struck me many times that if I had met some patients' mothers on the playground, at a birthday party, or at a sporting event, we might have exchanged phone numbers to arrange a playdate for our kids. But my relationship with my patients' mothers generally stays within the confines of the office. It mostly works well that way, for visits then have structure, definition, and a level of objectivity that can be very valuable.

But there are some such relationships that evolve to a deeper level, some mothers who truly become friends. I treasure those relationships beyond measure, for connecting with patients on a deeper level gives me satisfaction well beyond making a clever diagnosis.

That seems to be true of Dr. Toms as well. I enjoyed reading how he and this one patient truly, unapologetically became dear friends. I also loved how the mood of the feature moved from sunny and chipper to slow and sorrowful—taking the reader along on the emotional journey that these two had together.

By the end, it was clear that these friends really didn't want to say good-bye to each other. The final poem is so poignant that every time I read it, it makes me tearful. Thank you for showing what the physician-patient relationship can aspire to.

JULIA NORDGREN, M.D.
DMS '99, HS '02-03
Guilford, Conn.

Hail, Columbia(n)?

I just finished reading the article about Dartmouth and the Civil War (see dartmed.dartmouth.edu/su11/f01) and found it wonderful. But



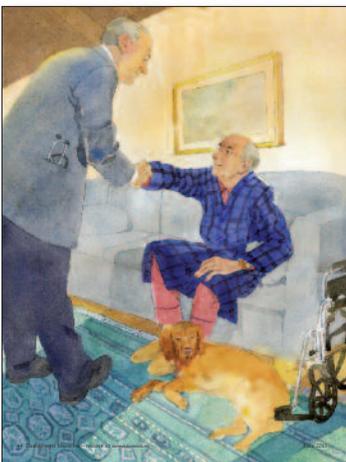
One reader thought the photo above might be a case of mistaken identity.

I wish to make a correction to the caption of the photograph on page 42 (which is reproduced above). The hospital labeled as the Columbian Hospital is actually Columbia Hospital, which later became Columbia Hospital for Women and about 10 years ago was converted into a high-end condo. The building was deemed historical by the Historical Preservation Society, so it couldn't be torn down. I worked there for 22 years.

In addition, I had a great-great-grandfather who fought at the Battle of Fredericksburg, where another of the photos in the article was taken.

Again, it was a great article.
CAROLIN RINGWALL, R.N.
Oakton, Va.

It appears that Columbian Hospital and Columbia Hospital bear a resemblance to each other architecturally as well as nomenclaturally. So although we're pretty confident the photo above is indeed Columbian Hospital, it's easy to see how Ringwall could have taken it for



At Home

For over 40 years, family physician Bill Toms has propped the crutches of stability by getting what he calls "his most interesting cases." Now retired from Dartmouth-Hitchcock, he shares here some insight into his relationship with a patient with whom he always felt at home.

Y es, Bill and I shared a friendship. Though the extent of that friendship was usually casual, there were times when we sat on the lawn and talked for hours. The topic of our conversation, though I did not push, was always to address your patients, often with colorful or metaphorical language. I did not push. And though I did, in the end, Bill remained the doctor and I the writer. You, that was it. That made our friendship special.

This feature by a retired Dartmouth-Hitchcock family physician drew praise for illuminating the intimacy that the physician-patient relationship can aspire to.

Columbia Hospital. Readers interested in comparing the two structures can see a more tightly cropped version of the photo included in our article at <http://tinyurl.com/civilwarhosp>, and a photo of Columbia Hospital for Women at <http://www.nlm.nih.gov/hmd/medtour/columbia.html>. We appreciate Ringwall bringing to light the fascinating similarity.

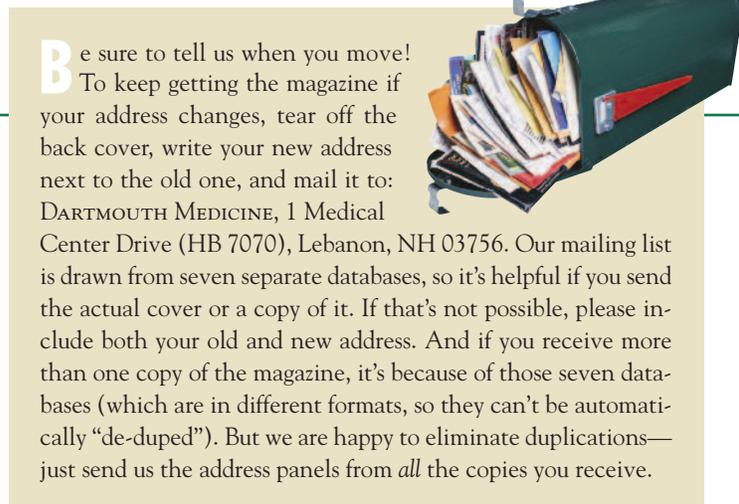
No nostalgia here

I was very interested in your article about women in medicine, especially at Dartmouth (see dartmed.dartmouth.edu/f11/f03). I graduated from Columbia University College of Physicians and Surgeons in 1953 and served my rotating internship at the old Mary Hitchcock Hospital. The feeling was that it would be "okay," since I was married to an internist who was spending a year as a cardiologist at the White River Junction VA. (We lived for that year at 6 Rope Ferry Road.)

I was told there had been one other female intern, but "she had worn long earrings in the operating room." I recused myself from army-style physicals at Dick's House but did take the urology rotation, much to the apprehension of the staff.

My experiences mirror those of the women quoted in the article. When I was applying to medical school, I was often asked "How many times have you been in love?" and "Do you plan to get married?" and "Certainly you don't expect to have children!" It was only after I earned an M.S. in zoology and reapplied that my application was taken seriously.

Application for residency was somewhat more straightforward,



Be sure to tell us when you move! To keep getting the magazine if your address changes, tear off the back cover, write your new address next to the old one, and mail it to: DARTMOUTH MEDICINE, 1 Medical Center Drive (HB 7070), Lebanon, NH 03756. Our mailing list is drawn from seven separate databases, so it's helpful if you send the actual cover or a copy of it. If that's not possible, please include both your old and new address. And if you receive more than one copy of the magazine, it's because of those seven databases (which are in different formats, so they can't be automatically "de-duped"). But we are happy to eliminate duplications—just send us the address panels from all the copies you receive.

since I was headed for a career in anesthesiology. I started at the Massachusetts General Hospital (MGH) and transferred to the Peter Bent Brigham Hospital (PBBH) after six months. At the MGH, the men had call rooms in the hospital, but the women's call rooms were in an old firehouse down the street. We literally ran between buildings, since it was a very questionable area near Scolley Square. I disconcerted the PBBH because anesthesia was a section within the Department of Surgery at that time. So I was the first woman in surgery at the PBBH, in spite of

the fact that, so I was told, there were "no call rooms for women" except with the nurses.

Academic advancement was dependent on publishing, and I could not manage that and my household of three sons. In the beginning, I wasn't even allowed to take the specialty boards (because I'd "interrupted my training" with pregnancy—although interruption for service in the military was approved; this policy was later countermanded). Since there was no option for maternity leave, I had to change hospitals each time I gave birth.

Attitudes have changed since

then, thank goodness. I practiced for 35 years and loved it, despite the roadblocks.

JULIE S. CROCKER, M.D.
HOUSESTAFF '53-'54
Peterborough, N.H.

An Ears-plug

I just read the article about Dartmouth Ears (see dartmed.dartmouth.edu/su11/v01) and wanted to congratulate all the participants in the program.

I am a volunteer caregiver coach with a similar program at Montefiore Medical Center in the Bronx. Volunteers at our Caregiver Support Center aren't involved directly with patients, like Ears volunteers, but we are involved, as needed, with their caregivers. We can offer a lovely lounge area with phone and computer access and, most important, shoulders to lean on as we listen to their concerns.

Caregivers are most appreciative, and if they're pleased with our services then it must help patients as well. We currently have 16 volunteers who staff the center from 9:00 to 5:00, five days a week, plus one paid, very capable administrative assistant.

Once again, all the best with Dartmouth Ears.

ALAN EPSTEIN
DARTMOUTH COLLEGE '47
Mamaroneck, N.Y.

Narrative hook

This letter has been in my head ever since I read Jennifer Durgin's article about NH-INBRE (see dartmed.dartmouth.edu/f11/v01). I am now finally sending it.

She is a great writer—that continued on page 62

A reader who was one of the early women on the Mary Hitchcock housestaff was inspired by this article to recall how much has changed for women in medicine.

ROGER CLARKSON REALTORS



*Serving the Upper Valley
since 1975*

**Knowledgeable.
Professional. Experienced.
Caring.**

Sales and Rentals in NH & VT



38 S. Main Street
Hanover, NH
(Behind Ledyard Bank)
Parking Available.
(603)643-6004

WWW.ROGERCLARKSON.COM

Letters

continued from page 23

much is certain. What I particularly loved about her article was her ability to so succinctly identify the key element of our program and to work it into a beautiful narrative—about scientific haves and have-nots and how we at DMS are addressing a statewide concern.

The story reinforced for me the central meaning of the program; this is why I accepted the job and why I enjoy the work we do. I was fascinated, even awed, to see it captured in print. Thank you—a million thanks, really. I'll be keeping this article with me for many years to come!

CHARLES WISE
Thetford, Vt.

Wise is the project manager at DMS for NH-INBRE—the New Hampshire IDEa (Institutional Development Award) Network of Biomedical Research Excellence. The program, funded by a \$15-million federal grant, aims to improve scientific research and education at eight undergraduate institutions in the state. ■

Faculty Focus: Black

continued from page 51

gerate benefits or exaggerate risks," he says. "You wouldn't want overly aggressive follow-up of findings."

So one lesson the former math major took from the NLST is that, as with everything else in radiology, it's essential to take a rigorous approach. "There should be a logic," he says. "There should be a method for reporting our observations, for interpreting our observations, and for making decisions." ■

Alumni Album: Auerbach

continued from page 53

that of his father and Dow, he, too, plays a lot of different positions—from caring for hospitalized patients to teaching residents to conducting research on patient outcomes to spreading the word about his specialty.

So Auerbach might be working in a different environment than those early mentors, but, like them, he has become a pillar of his own community. ■

DOWDS' INN EVENT CENTER

Weddings • Rehearsal Dinners • Brunches
Conferences/Meetings • Reunions
All Gatherings! All Seasons! All Reasons!



OUTDOORS
in our beautiful gardens
INDOORS
in our Country Banquet Room



Full in-house services
for all gatherings.
Off-site catering available.
We cater to all of your
special requests!



LYME, NEW HAMPSHIRE
www.dowdscountryinn.com
(800) 482-4712 • (603) 795-4712
innkeeper@dowdscountryinn.com

WillowBrook Prosthetics & Orthotics



Robert Diebold, C.O., Orthotist • David Loney, C.P., Prosthetist

190 Hanover Street • Lebanon, NH • 603/448-0070