

# Senior Year Book

Faculty of Medicine  
University of Sydney

1970



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# Senior Year Book

1970

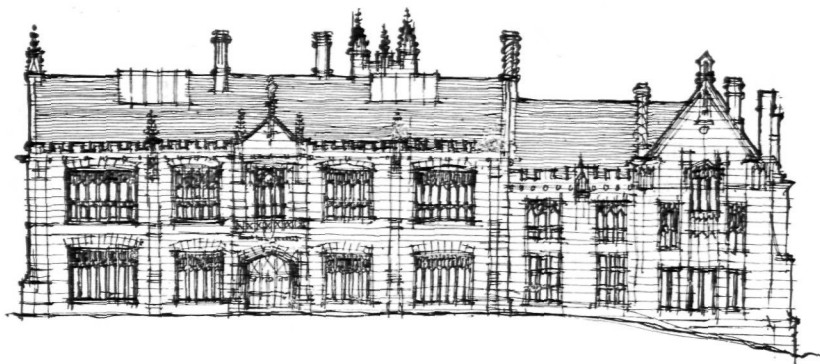
*"Nor is it always in the most distinguished achievements  
that men's virtues and vices may be best discerned,  
but very often an action of small note, a short saying,  
or a jest, shall distinguish a person's real character  
more than the greatest sieges, or the most important battles."*

—PLUTARCH.

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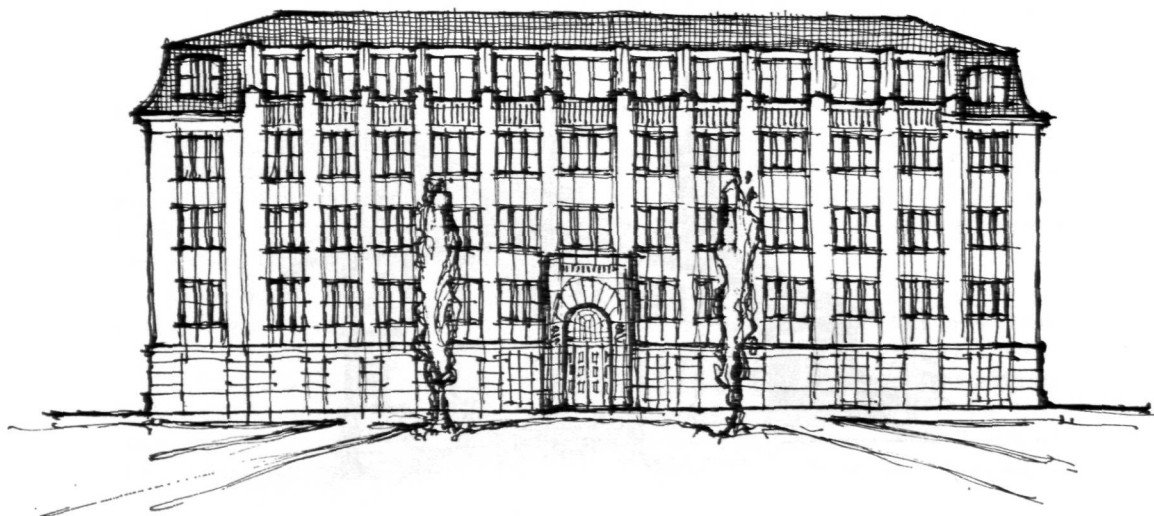




ANDERSON STUART BUILDING—*Old Medical School.*

Its aims are: to chronicle all events of interest in our journey from the first to the final year; to provide a permanent record of the personality and career of each member of our company; and to perpetuate the memory of the professors, doctors and lecturers who showed us the road.

FROM THE FOREWORD OF THE FIRST SENIOR YEAR BOOK, 1922.



BLACKBURN BUILDING—*New Medical School.*



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SYDNEY UNIVERSITY MEDICAL SOCIETY  
BLACKBURN BUILDING, UNIVERSITY OF SYDNEY



*The Research Institute for Mothers and Infants, opened by  
Her Majesty the Queen Mother in 1958.*



*The School of Public Health and Tropical Medicine.*



# Foreword

*"To travel hopefully is a better thing than to arrive  
and the true success is to labour."*

—ROBERT LOUIS STEVENSON; *Virginibus. Pueresque.*

WHEN Robert Louis Stevenson wrote this he could not have had in mind the students of Medicine VI in the University of Sydney in 1970. This group have travelled hopefully for a long time but their arrival—the end of the Final Degree Examination—is an infinitely desirable goal. There is no doubt about the labour part; there is a lot of labour in the modern medical curriculum and the student's success in it certainly depends on the effort he puts into it. But then that is true of the whole of one's life in Medicine. Indeed there is no success at all in Medicine without labour and when dealing with the sick one needs to be as successful as possible as often as possible. Of course success in this context cannot always be counted as cure. All too frequently we must try to be successful in giving kindness and offering compassion as this, in many cases, still is all we can offer. But there is never any excuse for us failing with this offering. It has been truly said that the difference between a good doctor and a bad one lies basically in his success rate—they both fail at times but the good one fails less frequently than the bad one.

Graduates from this School fail infrequently. This is a fact. For instance of those who took the Finals in 1969 the pass rate has been 98%. It is going to be difficult to do better in 1970 but we, your teachers, don't expect it to be any worse.

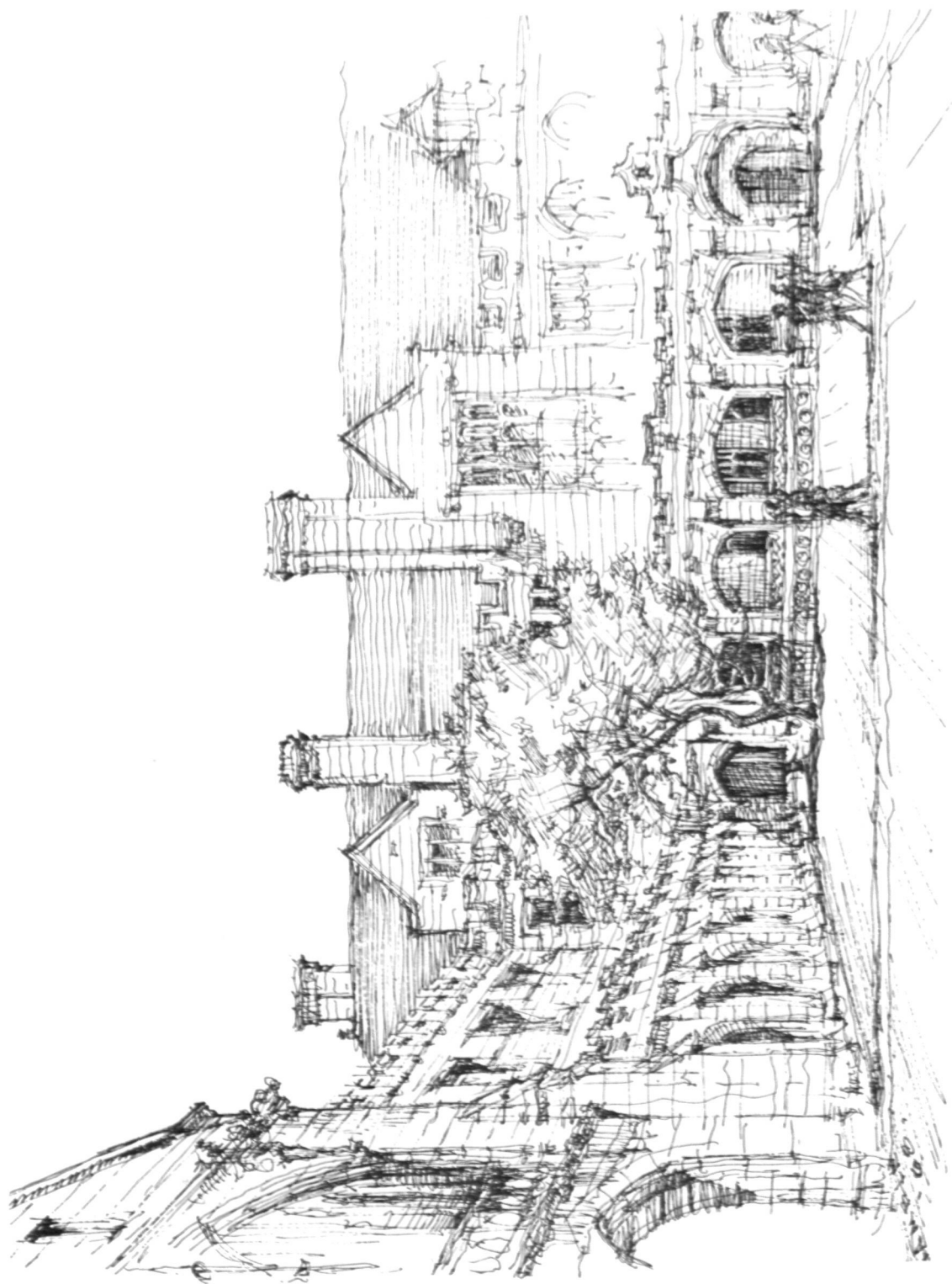
In this issue of the Senior Year Book is included the last of our graduates whose clinical training has been carried out at St. Vincent's Hospital. For many reasons there are those of us who are saddened by this. However, there are a number of new changes being planned and developed which this year's graduates will see come to fruition. The first stage of the re-building of Prince Alfred is being planned vigorously and the whole new and exciting teaching complex at Westmead is starting to appear on paper in a highly satisfactory way. A major new building will soon begin to appear out of the ground at St. Leonards and it is to be hoped that the first stage of the new basic sciences wing of the Medical School will be authorized in the next triennium. On all sides there is much effort and endeavour and the future of our graduates and their School has never looked brighter.

Those of you who saw something of the late Chancellor will know what a blow his death has been to our medical community. It brings to an end a long and distinguished era of medical chancellorship of this University. It started in 1941 with Sir Charles Blackburn, who was appointed Chancellor, and with his retirement in 1964 he was succeeded by Sir Charles McDonald. These great men have been an inspiration to many hundreds of undergraduates and graduates in this Faculty.

From their record it is clear that the members of the 1970 class are maintaining a high standard of excellence. Their many teachers have enjoyed the chance to instruct them, and they all join in wishing them a long and fulfilling life in Medicine. The way won't always be easy or without its disappointments but no one should have any reason to travel other than hopefully or to fail in achieving their true success through lack of labour. Their time in this Faculty should have made this simple but invaluable message clear to them.

JOHN LOEWENTHAL,  
Dean of the Faculty of Medicine.





*The Main Quadrangle, looking towards the old Fisher Library.  
"Far from the madding crowd's ignoble strife."*

# Editorial

BEING students during the most rapid and diverse expansion in human knowledge and endeavour leaves the present day medical undergraduate torn between the desire to absorb and assimilate the ever expanding physiological and biochemical basics of his science yet maintain the humane and clinical heritage that is the basis of the art at the level of the patient-doctor relationship. It is now impossible for one doctor to keep abreast of the changing concepts in all fields of clinical practice and often very difficult to master all the skills of his own subspecialty. A team of doctors pooling their knowledge and techniques is now necessary to provide the best patient care.

Thus, as new medical graduates, we enter a different type of medical practice to those who preceded us even a decade ago. Can we visualize the kind of practice in which we will participate and will our basic training be adequate to allow us to keep astride of progress so that even in the immediate future we will still be "in date"?

Attempts at answering these questions reveal the dilemma faced by present day medical educators as they try to meet the community's immediate needs and produce "doctors" competent to practise upon graduation, weighed against the need to produce a graduate flexible enough to adapt to the inevitable change of his future practising career. Our year graduates at a time when the emphasis is changing from a comprehensive syllabus producing a complete graduate to a basic core syllabus leading to postgraduate training in chosen specialized fields (including general practice) by all graduates. The Faculties present curriculum revision, the planning of the Westmead Medical Complex and alterations in the physical and staffing structures of present teaching hospitals should all be toward this aim if our medical school is to maintain its present standard and status.

At present those desiring to pursue a career in medicine must complete the six year undergraduate course followed by four to six years postgraduate training before entering a general practice or a subspecialty. Although a school leaver's most difficult hurdle may be attaining a place in the faculty quota, his inevitable doubt as to whether the ten years or more to be spent in training is all essential must be considered. As recent products of the present course we all have our own varying ideas about the parts of the course that were irrelevant or too detailed. Few would disagree, however, that by reorganization and a little pruning the length of the undergraduate course could safely be reduced without adversely affecting the standard. This would enable earlier postgraduate specialization. In fact, recent resolutions by Faculty and the various Colleges envisage changes to reduce the length of time required to attain basic medical training and general qualifications.

Of General Practice there are the inevitable questions about its future role, its declining popularity amongst graduates and the postgraduate training of potential G.P.s. Many of these problems are debated openly in the popular press and everyone knows of the decline in the percentage of new graduates who have entered general practice over the last twenty years. Consideration of such crude and isolated statistics is worthless. More fruitful conclusions can only be drawn from comparison of the total number of new medical graduates and other graduates in general practice to population increases and demands on the G.P.; weighed against the massive trend towards super-specialization with its demands on personnel to perform the sophisticated operative and diagnostic techniques, may, in fact, reveal a reverse situation or just a totally inadequate output from medical schools. Nevertheless, few people would dispute the essential role of the general practitioner in the medical team, but undergraduate courses cannot be tapered to produce competent G.P.s. at graduation when in the same class must be the future academics, super-specialists and research workers. In this respect the announcement this year of the first planned residency for prospective general practitioners in this State (at Hornsby and District Hospital) is laudable

as it brings general practice closer to recognition as the speciality it is. Many from this year will participate in such postgraduate training and enjoy a rewarding professional career in this field.

Examinations as a sole method of assessment in any academic course, especially one so competitive as medicine, will always come under some criticism. The valid arguments for the present system at Sydney are well known to most, and change toward the popular alternative of continual assessment by tutors and hospital staff would undoubtedly lead to greater personal injustices and prejudices, especially with the numbers involved in assessment. Use of these results to set faculty quotas, stratify groups and allot residency are part of the system we are familiar with. The alternatives, such as the National Intern and Resident Matching Program (N.I.R.M.P.) of the United States and similar pilot schemes in Edinburgh and Newcastle in the United Kingdom are based on each student applying to the Centres at which he wishes to become a resident and then submitting a list of preferences which are matched with the consultants and hospitals preference list of the applications they receive. The obvious inherent defects in these schemes are that student and consultant can then fix lists so that a posting they mutually desire is ensured thus excluding a more worthy candidate for a post, while the "flyers" who place their highest preferences for the most desirable posts may end up with a post less desirable than they are entitled to as the middle posts they qualify for are filled by those who place them high on their list. In fact these matching programs only partially correct the inherently unfair practice of personal student-consultant contracts for junior posts. It is perhaps the Australians' contempt of such outmoded traditions and his overriding desire to ensure a "fair go" that the present system, solely based on the academic performance of the student and his preference for hospitals and free from manipulation by "outsiders", was evolved.

The main objection to the present scheme remains the paradoxical placement of more successful students to Teaching Hospitals with their well organized resident training programs and the less successful students in peripheral hospitals which have few facilities for resident training, thus perpetuating the gap in knowledge. This situation may be partially rectified by expansion of the scheme where Teaching Hospitals provide residents for peripheral hospitals (as with R.P.A.H. and Rachel Forster Hospital) enabling more residents to spend part of their time at teaching hospitals; and the expansion of resident training programs at peripheral hospitals (as envisaged in the Hornsby general practice residency). Ultimately, however, provision for postgraduate training for all will be essential.

Perhaps the one trend that has dominated our University days is the increasing demands of the student body for a right to participate in the administration of the University. Although at times heated by unreasonable extremist activity the student has acquired by negotiation positions on many Councils and committees involved in University government. On a Faculty level the often fruitless negotiation of year representatives with departments can now be carried to more open discussion at the Student Staff Liaison Committee and in the near future the Faculty. Such progress can only lead to reduction of the barrier between student and staff as well as improvement in the course from the students' point of view.

The preceding consideration has been concentrated on the trends in medical education in our Faculty and a little speculation about the future. Our immediate interest is becoming competent junior residents and preparation for future careers. The Dean has told us of the high standard of previous graduates and undoubtedly our year has similar prospects. Perhaps as we enter positions of clinical responsibility it is interesting to remember that here we have direct contact with the patient and it is with us that he places his trust and confidence. The impressive array of diagnostic and therapeutic members of the team, although essential supports to our best endeavours for the patient, are only of secondary importance to the patient himself. The basis of the art still remains in the personalized patient doctor relationship—no machine, computer or government can displace this.



# *The University of Sydney Medical School*

The University of Sydney was founded in 1850, but 33 years passed before our medical school came into being. It was (and is) junior to the University of Melbourne's medical school by 21 years, although of the two universities themselves Sydney is senior to Melbourne by three years.

The pity of it is that the Sydney University Act of Incorporation (1850) provided for the granting after examination of degrees in Medicine, as well as in Arts and in Law, and strenuous efforts to start a medical school were made from the beginning. But to no avail.

In 1859 the Senate adopted a scheme of medical teaching, which was intended to commence in 1860, and instructed the University's architect, Edmund Blacket, to prepare plans for an anatomy school. But the plan was thwarted by professorial influence, especially that of John Woolley, Professor of Classics and Principal of the University, on the grounds that "the constitution of such studies and the establishment of a medical school would retard the completion of the curriculum in the Faculty of Arts". Further schemes in 1866 and in 1874 likewise failed.

In 1868 an event occurred that significantly influenced the course of events. H. R. H. Prince Alfred, afterwards the Duke of Edinburgh, was visiting N.S.W., and during a picnic a would-be assassin wounded him. He recovered, and as thanksoffering the community raised the sum of £30,000. As the Duke wished the money to be spent on building a hospital, a public meeting decided that a Prince Alfred Memorial Hospital be erected on the site of the Sydney Infirmary (later renamed Sydney Hospital).

This proposal ran into legal difficulties; so it was then decided to build the hospital near the University of Sydney. An Act of Parliament stipulated that its medical staff be appointed by a conjoint board consisting of the Senate of the University and the hospital's Board of Directors sitting together, and that it be open for clinical teaching to students of the medical school when established.

So, in 1882 the (later Royal) Prince Alfred Hospital opened to receive patients. And in the same year the Government agreed to finance a medical school.

Applications were called for a chair of anatomy and physiology, and Thomas Peter Anderson Stuart came from Edinburgh to fill the chair and establish the medical school.

An able, energetic and determined man, Anderson Stuart put all he had into the development of his medical school from his arrival in Sydney in March, 1882, until his death in 1920. He did more for the school than any other single man, and we are all deeply in his debt.

The first medical school was a four-roomed cottage built between the University's Great Hall and Parramatta Road. It was incomplete — lacking windows, doors and, some say, roof — on the day in March, 1883, when lectures were advertised to commence. But four students were there, and so was Anderson Stuart. Lectures commenced as advertised.

To build up his teaching staff Anderson Stuart turned to Edinburgh. Among those who responded to his call were four men of particular note: Alexander MacCormack, later an outstanding surgeon; Robert Scot Skirving, clinical teacher, physician and surgeon *par excellence*; J. T. Wilson, Professor of Anatomy from 1890 until 1920; D. A. ("Taffy") Welsh, who filled the chair of pathology from 1902 to 1935.

As a home for his medical school Anderson Stuart was not at all content with a four-roomed cottage. He had his own ways of getting what he wanted,

despite opposition, and by 1887 a new building on the lines of Blacket's plans was started. The first part was finished in 1891, and the rest by 1922. Known as "Stuart's Folly" and derided as exceeding any reasonable requirements, it was in fact never too big. A handsome sandstone building in Tudor perpendicular Gothic style, it is today known as the Anderson Stuart Building.

The medical faculty soon outgrew "Stuart's Folly", and within less than ten years of its completion, the University was pleased to accept the offer of the Rockefeller Foundation in New York to provide funds for a new building. Situated right beside the Royal Prince Alfred Hospital, this building was opened to students of the clinical years in 1933, the jubilee year of the medical school. It is known today as the Blackburn Building, in honour of Sir Charles Bickerton Blackburn, who was Dean of the Faculty of Medicine from 1932 to 1935 and Chancellor of the University of Sydney from 1941 to 1964.

More recently a major building development has been commenced, adjoining the Blackburn Building. The first stage of this George H. Bosch Building, as it is called, containing four lecture theatres, was opened in 1967. The second stage, containing the Dean's office, the library, pharmacology laboratories and an animal house, was opened in 1968. The final stage, an 11-storey block, is yet to come.

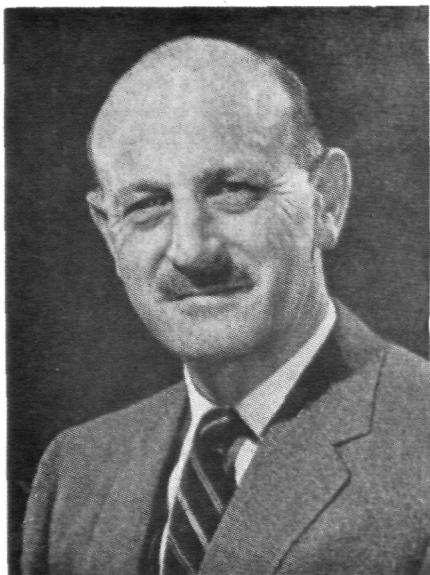
George H. Bosch, a Sydney businessman, has been the medical school's greatest benefactor. It was through his generosity that, between 1927 and 1930, full-time chairs were founded and occupied in embryology and histology, in bacteriology, in medicine and in surgery. Two other important chairs founded about that time were those in public health (1930) and in obstetrics (1933).

With the development of the medical school, and as the growth in the number of students has required it, clinical schools have been begun and built up in general and specialist hospitals. Today they each have their own professorial units, which are part of the University's medical faculty.

Other important activities have accompanied the development of undergraduate teaching. A growing research programme has not only resulted in worthwhile research work but also enhanced the quality of teaching and provided a desirable stimulus for the above-average student. A postgraduate education programme has provided for the continuing medical education of Australian graduates and also has attracted graduates from overseas, especially from South-East Asia.

So the University of Sydney's medical school has grown over 87 years. Playing many roles well, it is now widely known as a school to be respected and reckoned with.

RONALD WINTON



*Dean of the Faculty of Medicine  
Professor of Surgery*

### JOHN ISAACS LOEWENTHAL

As Dean since 1966 Professor Loewenthal has partially forsaken his first loves of clinical surgery and teaching to guide and administer the affairs of the Faculty. Thus during our sojourn at Sydney University the burden of never-ending meetings, committees, congresses and travel have deprived us of his lecture and tutorial prowess.

Although to many of our year he has remained a name with a title, his silent influence on our careers and on the Faculty must never be underestimated. In his term as Dean, and during our undergraduate careers, many momentous and far-reaching events have occurred, and the plans for many more have been initiated. Included in these are the completion of the early stages of the Bosch Complex, the initiation of plans to vastly improve the wards and teaching facilities at all the teaching hospitals, as well as the foundations of the Westmead Scheme and a complete syllabus review.

Still, some of us were privileged to benefit from a short appointment with the Dean, and others his fifth-year tutorials where he impressed us with his humane philosophy and his fascination toward surgery, as well as his genuine attempt "to get to know you in the limited time available". Others, whilst clerking in his unit, found he personally encouraged their involvement in all the surgical aspects of the patient's care.

As graduates of the early seventies, our careers will be enriched if we can exhibit some of the drive to get on with our tasks without humbug and some of concern for social matters which Professor Loewenthal has urged us to.

### *Professor of Medicine*

### CHARLES RUTHVEN BICKERTON BLACKBURN

A Professor of Medicine presents to a Bosch Lecture Theatre on a Thursday morning with cerebral plethora. He is likely to have interesting facts and understandable explanations: (a) always; (b) usually; (c) sometimes; (d) occasionally; (e) never; (f) all of the foregoing.

The answer obviously depends upon the individual, but all of us at some time have learnt a little from "Blackie".

Although he remained an enigma in our first clinical year, leaving the early teaching to his deputies, he took personal responsibility for our medical teaching in final year by professorial tutorials and correlation clinics at which he tried to impress upon us some of the facts which we ought to know.

Our first early morning tutorial was an expedition into the unknown, but his appearance with "long" white coat wrapped around his stooping frame, together with his brown suede shoes and colosseum type hair style introduced an encounter marked by informality and ease of communication.

Perhaps he is most famous to the medical undergraduate for his complex multiple-choice examination. This monument of intense probing, searching and demoralizing enquiry becomes a main talking point of final-year students as the prospect of its endless possibilities, probabilities, impossibilities and likelihoods becomes a reality.

His genuine efforts to try to get to know students and establish some "feed back"—from customer to vendor—was only impaired by a passive student body who rarely challenged his rhetorical "that's right isn't it?"—when he tried to probe their apathy.





*Professor of Psychiatry*

DAVID CLARKSON MADDISON

*"Education comes from radiation of action, centering around the laziness or improper understanding of the tendencies of human struggle."*

*Professor of Obstetrics and Gynaecology*

RODNEY PHILIP SHEARMAN

Our lectures by Professor Shearman will always be numbered as one of the most significant milestones of our medical course. He is pre-eminently a teacher. This was very evident at our first lecture with him when all were put at ease by the genuine interest evident towards his students and, as the experience was furthered, we grew to appreciate even more the excellence of his teaching and the profundity of his knowledge.

A well-groomed, serious, dedicated person, he does not limit his knowledge merely to obstetrics and gynaecology—his chosen field. Few will forget his repeated warnings that no branch of medicine can remain isolated: obstetricians have to be physicians, paediatricians and endocrinologists. This was brought home to those fortunate enough to attend his tutorials where he showed that the pregnant woman has been lifted out of the speciality and placed in the world of general medicine. His teaching was both stimulating and rewarding as we realized that every medical complication of pregnancy could with diligence be diagnosed and treated.

We consider ourselves indeed fortunate to have had Professor Shearman as our lecturer; we shall always be grateful to him for sharing with us his breadth of vision, his deep knowledge and his enthusiasm for his subject.

Professor Maddison's thoughts on undergraduate education are familiar to all of us who have had our stereotyped misconceptions on mental disease overturned by his unique ability to verbalise difficult concepts. There is no doubt we graduate, an army of zealous converts eager to convince the community there are a host of valid "dynamic" reasons why lunatics become weak-willed.

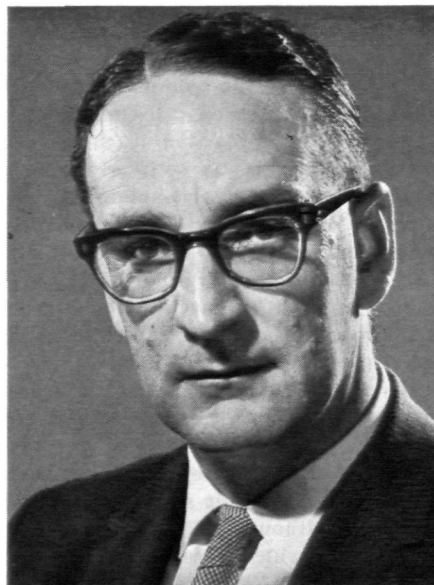
But even more than this, the improvement within each one of us personally is testimony to a powerful symbiotic relationship well founded on basic trust:

*Before Psychiatry:* our year was characterised by pointless negativism, fixation on early methods of sexual satisfaction, the inability to remain alone, and the insistence on solitude.

*After Psychiatry:* the appearance of emotional control and self assertive independence of thought and judgement characterised all without exception as each attained psychodynamic balance within and effective interpersonal relationships without.

It is the Professor's dream to provide general practitioners with the insight to handle most community psychiatry, and certainly if the change in our approach to this problem is any guide, maniacs, perverts and schizophrenics (split personality) will have nothing to fear from the family doctor of the future, even if their behaviour would revolt any decent person.

[Ed.—Professor Maddison is not solely responsible for this confusion—his confidence in our years stability enabled him to spend time in India meditating.]



*Professor of Medicine*

JOHN ROBERT READ

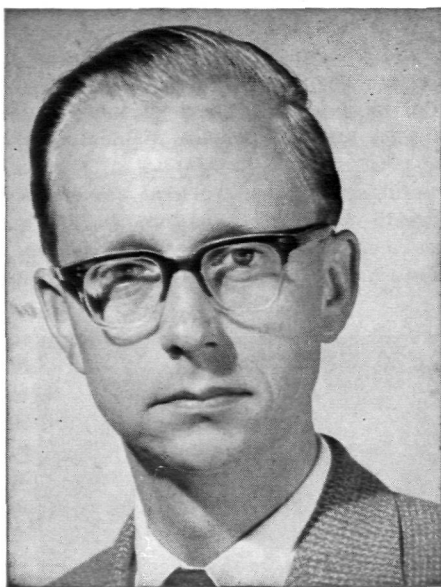
*"Everyone in final year becomes psychotic, and those who say they are not are the most psychotic of all."*

The scene is Maitland Lecture Theatre, Sydney Hospital, as dawn is breaking over the city (actually 8.30 a.m.), and John Read, the player, is portraying himself as a ranting, raving egotist and tyrant who can resist all but a tearful woman. His audience of masochists sits rapt—in first term bathed in pools of sweat; in second term, "the acute anxiety-producing term", wide-eyed and fidgeting and in third term, the term of "undiluted psychotherapy", placidly withdrawn.

The keynote is participation (not necessarily voluntary). The session is alive with aphorisms, Readisms and unique expression both on the part of the teacher and "the taught". The signal to sink under the seat is when Read removes his spectacles, an action indicating "a moment of great emotional stress". For contrast, there are calmer intervals when Read admits fallibility; when we pause for a rendition of medical history or when reference is made to the Read-family breakfast table. The sessions must exhaust him, sometimes depress, but his audience leaves electrified.

Off stage he is a milder man, ready to listen to problems and, as in his tutorials, willing to go to great pains to clarify muddled thinking.

Thanks to him, we now know that dyspnoea has everything to do with the blood gases, or have we still got that wrong?

*Professor of Surgery*

GERALD WHITE MILTON

*"Alexander the Great had conquered half the world at your age."*

Renowned for his interest in students and patients, Professor Milton has raised the status of undergraduate surgery from theoretical to possible, and even desirable. Always eager to encourage participation by all parties in tutorials, he has ignored student apathy, delegated responsibilities and made learning inevitable—by osmosis or by thought.

It is plain that what he emphasizes will keep us out of trouble in the exams and during residency—if only it were as straight forward as he makes it appear. We envy him this logical thinking, and his energy, but we admire his sense of humour too—one lesson in particular will be remembered. Don't take yourselves too seriously.





*Professor of Anæsthetics*

DOUGLAS JOSEPH

One thing all students like is a lecturer who is able, because of his depth of understanding of his subject, to deliver a concise, comprehensible and logical treatise on their subject, especially if the end result is a good set of notes. Needless to say Professor Joseph fulfilled these requirements and thus became a student dream. In fourth-year lectures and at subsequent correlation clinic appearances he was thus able to painlessly induce us to absorb into our overloaded higher centres those facts essential to the management of those anæsthetic and resuscitation problems we are liable to encounter as residents.

His successful attempts to teach at a more personal level resulted in friendly discussions in his hospital tutorials. Consequently the inevitable viva became more of an afternoon smoko than something to be concerned about.

*Professor of Pathology*

FRANK REES MAGAREY

In Professor Magarey's office sits a monkey (alas, not brass, but bronze) contemplating a human skull—very appropriate for such a keen sailor. Because of his nautical know-how, both technical and vocabularious, he ran a tight ship which steered us safely between the Scylla of scrofula and the Charybdis of chancre to the firm ground of matters medical and surgical beyond, whilst convincing a few of us to give up smoking and becoming a father figure to us all. No mean feats (though the well-worn pipe may have hindered the one more than it helped the other).



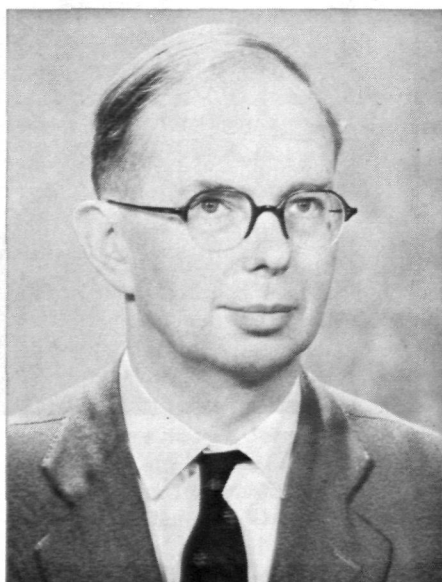
*Professor of Pædiatrics*

THOMAS STAPLETON

Pædiatrics could have been just another subject but for Thomas Stapleton. His determination to ensure that his subject should be a study of the sick child in his total environment has often prompted him to pass over academic trivia to include practical points in child care. His attention to the art as well as the science of medicine has made a lasting impression.

Disguised as an arch conservative, the Professor has often proved surprisingly radical in discussions with his students, and has revealed himself as a man of diverse interests. His hobbies which are known to us include insisting on punctuality, collecting overseas airline tickets, medical student dinners, politics, and entertaining visiting members of the Royal family.

He will be remembered as one of the personalities of the Faculty, and as a thorough and learned teacher.





## SIX YEARS OF . . . .

So we've all graduated M.B., B.S. (Syd.), and can now take our revered role in society as doctors—understanding healers of the sick charging a common fee. But what has brought us here? Can we just try to look back to when this day seemed a long, hard but exciting six years off? How did it really turn out?

For most of our year, it *was* only six years ago; but many took more, finding the histology course too intriguing to do in one year, or some other diversion to prolong the course. Well, how was it then, when fresh faced, green and a good L.C. pass under the arm, we first penetrated the hallowed portals of Sydney University. Perhaps we were awestruck and inspired by the academic tradition and scholarship chipped into the Main Tower and Quad Block, and into the Anderson Stuart Building; but more likely were openly proud to have “made the quota” and thus an exclusive set of free-thinking intellectuals learning about man, his diseases and their cures.

First year appeared a waste of time to us all—just like school, but no fun in milling with the hundreds for a seat in Simpson's chemistry lectures, or watching Professor Birch lazing in armchair as he visualized the fascinations of biology over T.V. (this was the first televising of lectures on campus). The others—physics, maths, psych., and what-have-you, just had to be borne. Afternoon prac. classes were another burden to be borne, off-times relieved by an interval session at the Lalla Rookh.

A move across the road from Carslaw to Anderson Stuart in second year meant we were now starting on the real medicine. But joy quickly turned to gloom when Philomena harangued us to “work now or fail”—other departments' prognoses were no more cheerful!

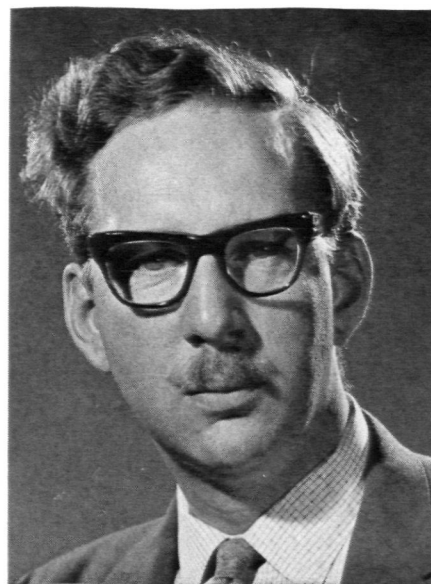
Laborious hours in the formalin-refreshed atmosphere of dissecting rooms saw many a resqué tale exchanged across the table—combined with lectures from Philomena (“If you don't work now you'll be sorry”) McGrath, Dr. “Happy-go-lucky” Munro and Dr. Perrott (who did nothing to improve the ventilation of the Hunterian Theatre by insisting upon performing behind barred doors)—made us all realize the only way to learn anatomy was to read Cunningham religiously. And Black Mac.—is he really the “missing link”? Donny Duncombe made it sound easier in third year.

Histology—a big colouring-in book, boxes of slides and E.M. picies seemed an insurmountable task, while lectures in H. & E. by Dr. Rae were followed by others of equal colour by Professors Cleland, Sapsford, Griffin and van Lennep. The formations of the embryo were moulded by Doctors Sullivan and Wyndham, not forgetting dear old Larry.

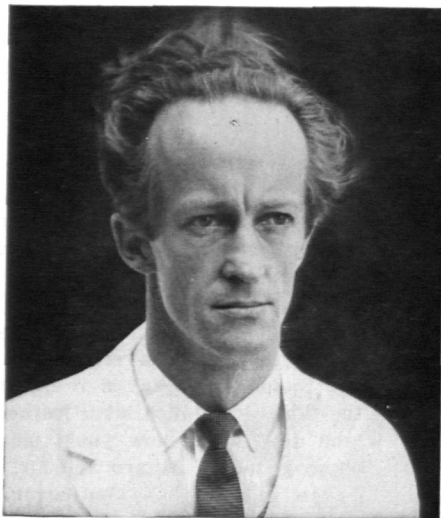
Physiology was a never-ending barrage of new topics and lecturers, as each told us what he knew best. Professor Bishop (chanted about axons and synapses), Professor Taylor (showed us how to circulate as he meandered about the front and through his lectures), Professor Burke (more neurones and muscle), Dr.



*P. O. Bishop,  
Professor of Physiology.*



*M. G. Taylor,  
Professor of Physiology.*



*K. W. Cleland,  
Professor of Histology and Embryology.*

Billington (appropriately explained how to sham feed dogs), Dr. Castaldi (galloped through blood), and Dr. Halmagyi (with his vital capacity). In third year these and more (including Doctors Everitt, Dunlop, Rodieck, Young, Waites) made the scene.

The Three Musketeers skipped in from the tramshed next door to entertain us with the true basis of medicine—molecules, enzymes and pathways; and as we passed on, so did they—with Bill Hensley becoming an expert on beating the breathalyzer at P.A., and Kellerman heading for greener pastures south of the Murray, leaving Viv. Whittaker standing “knee deep” at the old hut writing pantomimes as a solace.



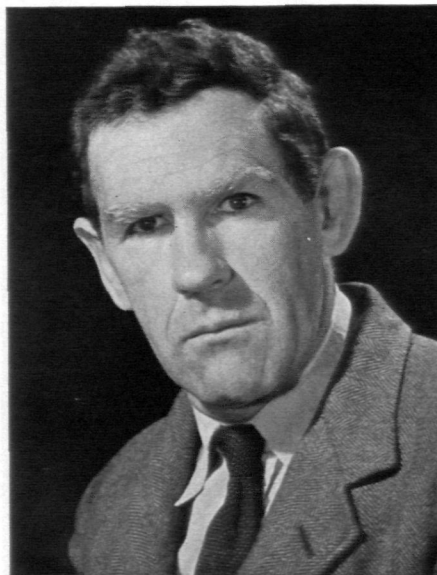
*G. M. Kellerman,  
Associate Professor of Biochemistry.*

The year consolidated in third year and they told us that with a bit of work we'd all make it now. So after increased extra-curricular activities and two terms expanding on the now familiar second-year subjects, the exams in August were the usual manic rush for many. But will we ever forget the emotion of the Bishop farewell?—a classical Hartman oration from the heart with roars of approval and streamers from the troops in the gallery of Anderson Stuart Theatre.

Sporting a ski tan and a new playboy look, our attack on the intrigues of inflammation and neoplasia, bugs



*W. J. Hensley,  
Senior Lecturer in Biochemistry.*



*P. M. de Burgh,  
Professor of Bacteriology.*



*R. H. Thorpe,  
Professor of Pharmacology.*

and drugs was to start—three years of preliminaries had brought us to the real stuff—disease. Pathology came in the form of eloquent, silver-haired and masterly Professor Magarey, supported by Lieutenant Finckh, whose performances entertained us at both lectures and dinners. Of course, the endless bottles and slides were just plots to try to keep us off the streets and beaches.

Who could forget Professor de Burgh and his single-handed recital of the bacto. course?—Tony Cronin's lecture on the King of diseases and disease of Kings, a short course on immunology from David Nelson, and one or two recitals from Professor Faine being the only props!



*J. D. Llewellyn-Jones,  
Associate Professor of Obstetrics.*

Pharmacology in 50 lectures at four in the afternoon often found many wanting; but that nice gentleman with endless anecdotes (Professor Thorpe) and the long cheezy grin (Dr. Chesher) plus those two birds, deserve mention.

That junior fourth term with that Year Dinner (or siege of Manning) also gave our year the privilege of being first tenants of Bosch Stage Ia.

The summer of 1968—hot, long and thirsty—saw us forsaking long vac. for our initiation to clinical medicine and surgery. How any sane person can stay awake in and comprehend four lectures in a morning (followed by tutorials at the hospitals in the afternoon) one can

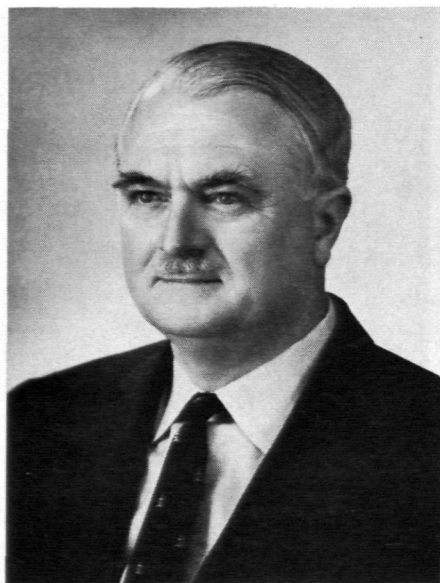


*Sir Edward Ford,  
Professor of Public Health and Preventive Medicine.*



*M. J. L. Stening,  
Lecturer in Gynaecology.*





*Adrian Johnson,  
Lecturer in Dermatology.*

hardly imagine now—but we did it somehow. Lectures by Professors Read, Hickie, Piper, Posen, Firkin and McLeod—as well as Dr. Stewart on medicine—were complemented by talks on the surgical aspects of disease from Professors Milton, Gye, Phiels, Reeve, Sheil, Stephens—without forgetting Messrs. Little and Morgan, as well as Arnold (urology) and Sturrock (orthopaedics).

May exams over, we were privileged to more lectures—the specialties were all presented by their champions: Frank Claffy provided interesting films and slides, but most of all a free and very useful booklet; Adrian

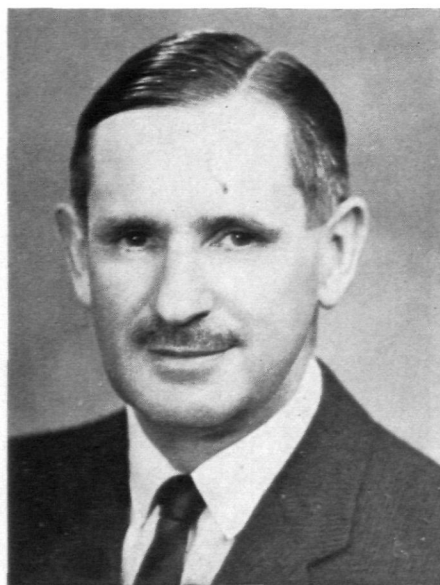
Johnson provided an interesting travelogue with his slides on rashes; Volney Bulteau reassured us that the contents of his comprehensive slides were in all the popular E.N.T. books; while Professor Joseph managed to present the basics of anaesthetics simply without slides.

After our first traumatic experience of clinical vivas, we returned for another leisurely Michaelmas Term. Preventive medicine was a stop-gap course between a professorial change; but Professor Emeritus Sir Edward Ford (with a little of the old) was supplemented by Tony Adams and Co. (with the new) social medicine. Professor Kerr arrived in time to set the exam. at the end of fifth year, and generously helped us with a set of likely questions.

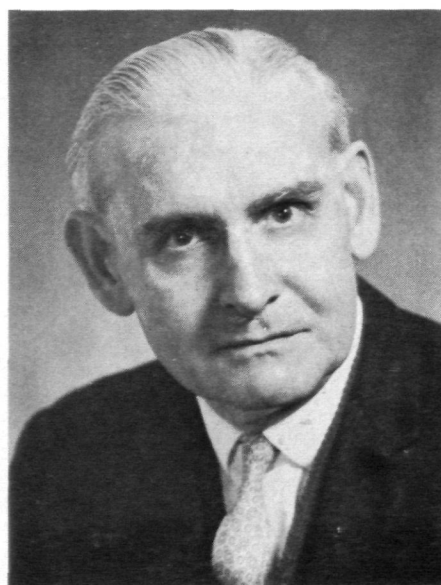
Our introduction to paediatrics was Tom Stapleton's request for a photo ("just what does he use them for?"), and lectures from many of the Children's Hospital staff, directed by Mr. Dey (paediatric surgery) and Associate Professor Katz (child psychiatry).

The different, enlightened subject of psychiatry can be remembered by Professor Maddison (concise and rather smooth), Dr. Pilowsky (so nice, understanding and helpful) and Dr. Ralph Schureck ( ) as well as afternoon T.V. sittings at Broughton Hall. Dr. Laing provided entertaining lectures on jurisprudence: we will never forget his colourful slides! While Dr. Winton enlightened us on the medicine of the past.

A homely introduction to obstetrics by Professor Bruce Mayes was his curtain call, and the end to an era in obstetric teaching came with his retirement. Our new Professor, Rodney Shearman, prefers a more scientific approach, which he presented so concisely in his lectures. Associate Professor Llewellyn-Jones completed a trio, adding a little drama to his lectures which



*Volney Bulteau,  
Lecturer in Diseases of the Ear, Nose and Throat,*



*F. P. C. Claffy  
Director of Studies in Ophthalmology and Eye Health.*

were live performances of chapters from his new book. For gynaecology Dr. Malcolm Stening repeated his Lent-Term lectures which, when the chips were down later, provided a solid basis to the course.

Fifth year ended the on-campus life which was replaced by a new, gay life of seclusion at the hospitals—a term at both Kids and O. & G. hospitals seemed synonymous with late nights and wild turns, while medicine and surgery terms with the specialties just had to be tackled too—but the opportunity to live in and clerk was our first real contact with patients.

Psychiatry and public health exams completed brought relief at last—a term where there is no compulsion to work, but opportunity to travel: see the world (or some small portion of it), or vegetate. But to follow elective term was the story of this book,—final year of tutorials, lectures, ward rounds and more lectures and tutorials

with books between the lot. Of course, we did get to see each other at correlation clinics—which seemed to have more meaning with the finals rapidly approaching!

From these clinics we must remember Professor Blackburn as master of ceremonies, Dr. Turtle (an endless source of hormones), Professor Korner (with his "airy-fairy" cardiology), Dr. Hensley (as resident biochemist) and others who appeared less frequently but with equal efficacy.

So, as a last verse . . .

We'll give a cheer before we go, a hearty cheer and true,

For all the men who taught us, for the men who let us through—

Perhaps they did not teach us much, but they taught us all they knew.

## . . . WHILE WE WERE PASSING THROUGH MEDICINE

THE ROYAL PRINCE ALFRED



## THE ROYAL PRINCE ALFRED HOSPITAL

In the 1969 Year Book a beautifully concise and carefully selected retrospective view of Royal Prince Alfred Hospital is to be read over the signature of Mr. A. S. Johnson, written with those characteristics of care and consideration which underline his own personal and professional activities, both in the theatre and wards and now as a member of the Hospital Board.

Tempting though it may be to use this framework for the present Year Book under the heading of Royal Prince Alfred Hospital, I will gloss over the past by reference only by name to the doyens of the past, some of my own clinical teachers, Sir Edward Knox, Thomas Anderson Stuart, St. John Dansey, Sir John McKelvey, Sir Harold Dew, "Bunny" Lidwell, Sir Charles Bickerton Blackburn, Sir Herbert Schlink, Sir Charles McDonald, Sir Thomas Greenaway, Sir William Morrow, W. I. T. (Ivor) Hotten, John Storey, Sir Benjamin Edye, Sir Hugh Poate, John Laidley and Malcolm Earlam, Eric Susman, John McMahon.

I mention their names with gratitude for what they have done for the community and the Hospital.

"For they taught us common sense  
Tried to teach us common sense  
Truth, and God's own common sense  
Which is more than knowledge."

What I wish to speak of, however, is change and the future. Our future implementation is increasingly of scientific knowledge and scientific methods, in addition to art and professional common sense. I will not dwell either on your present teachers and/or Senior Honoraries. You will have assessed them amply and with perspicuity. You will be aware of each his individual strengths and weaknesses. They are implementing science in medicine which has increased beyond conception. I trust the art of medicine is maintaining its rightful place and the personal factors in doctor-patient relationship, between professional colleagues, and between them and nursing and paramedical staffs are being maintained.

In your hands and some of your younger teachers, however, lies the future of Royal Prince Alfred Hospital and the prospective vista of Royal Prince Alfred Hospital is and must remain pre-eminent in your minds and endeavours.

Royal Prince Alfred Hospital in the past has progressed because of the quality of individuals, their dynamic activity and foresight and their individual professional prowess. The future of Royal Prince Alfred Hospital will, I predict, rest in addition and in increasing manner on its special clinics and community

group efforts. Though individual prowess will continue to be important, it will be the team effort that counts. Keep it on a practical but not *over* academic basis.

Medicine and surgery in the past have too been activities involving very direct and personal doctor-patient relationships. The intrusion of third parties in professional practice has been small. It is rapidly increasing and will increase further. It is the *governmental* third parties which have come to take such part in the future of all hospitals mainly because of the finance which these tax collectors have to supply to hospital practice. It is my hope that the future staffs of R.P.A.H. will bear in mind, as have their predecessors, that they are servants firstly, of their patients, and only secondly and necessarily of Hospital Boards and Government third parties. Professional liberties must be preserved from administrative *over* intrusion. Let the staffs of the future remember too that they are here to serve the general practitioner (amongst whom I hope a goodly proportion of graduates will work) who entrusts and refers his patient to the hospital's care. These practitioners have their stature and their dignity and are entitled to help; information regarding their patient and their own continuing education, both by the information which gets back to them from the hospital, and by their presence and welcome when possible within the hospital walls.

Finally, regarding the future role of R.P.A.H., I say it is no more possible for a hospital than an individual doctor to continue, in the future, to embrace all fields of medical and surgical practice. The costs of special clinics debars their unnecessary reduplication within the community and in the future he may well have to select or even have allotted to each major hospital particular fields of medical and surgical practice. Special clinics, therefore, are here to stay and we have to get used, in the days to come, to exchange of patients requiring special procedures between hospitals and admission to hospitals based on selectivity on diagnosis. We are becoming used to secondment of resident staff.

If, however, we are to still continue one of our primary functions up to the present—that of a major undergraduate teaching hospital—we must continue to admit to our wards the broad range of common things at present being filtered off in peripheral hospitals. Alternatively, of course, we may require to affiliate with other and peripheral hospitals where some of this undergraduate teaching can take place.

Teachers of the future require too to be instructed in, and practice, better methods of teaching than we

have offered in the past. The honorary system will, in due course, pass. It has served with honour the requirements of the past. It cannot fulfil all the requirements of the future. Teaching staffs in the future require a component of full-time *academic staff*. To continue producing the doctor product best able to serve the community's needs, teaching staffs must continue to embrace a large component of visiting teachers from the *practising profession*. This necessity is already recognized in almost every other profession. It is one of the items of policy of the N.S.W. Council of Professions, which believes also that the practising professions can and must have adequate representation on those committees responsible for drawing up teaching programmes.

This belief is based on the fact that, whereas universities have a function in respect of learning *per se*, they exist for two other reasons.

The first is to prepare the undergraduate for a way of life in the community (which is written into the Charter of Monash University) and the second is to provide the community with a product at graduation which will serve the community's needs better, especially in the professional and scientific fields. The community demands and merits this better service as the financial burden for teaching devolves increasingly on the taxpayer and to a decreasing degree on the individual undergraduate and graduate.

I would thank your editorial staff for inviting me to write this foreword to R.P.A.H. and end by reminding you that the future worth of your hospital is in the hands of yourselves and some of your younger present teachers.

You will require an active and dynamic lay board prepared to supply your needs in new paths. You need this now to divert obsolescence to activity. It is finally from the fire we can light in the Hospital Board that the Phoenix of P.A.'s future can arise from the ashes, but glowing ashes, of the past. It is in our hands and yours to work the bellows.

To you who are about to graduate, Good Luck and God Speed. Stick together as a profession and in your professional associations, endeavour to guide but at the same time stand up to the third parties which have become involved in medical practice. Protect yourselves from litigation. Stick together as a profession, conduct your practices ethically and have respect for the ethics of other professions. We all have great faith in the future that is yours and the expanding fields of medical practice..

P. A. TOMLINSON.



## THE HONORARIES



LOUIS BERNSTEIN

*"See . . . isn't cardiology easy?"*

**Presenting signs:** Large and ovoid in appearance, wielding a sharp red pencil. Known to use a stethoscope occasionally. Spontaneous laughter quite common.

**Ætiology:** Probably congenital, but some acquired characteristics (e.g., ability to teach). Efficient C.N.S. stimulant aurally.

**Physical examination:** Found to be relaxed, affable and charming.

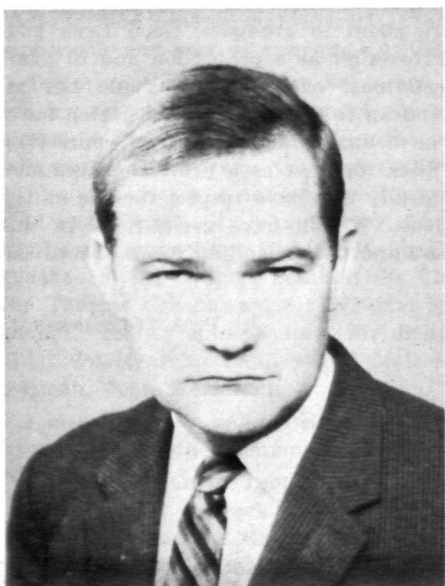
**Investigations:** E.C.G.—some chin hypertrophy, non-specific limb lead changes; chest X-ray—large heart (probably functional of the "soul" variety).

**Diagnosis:** Cardiologist, first-class.

**Differential Diagnosis:** Philosopher, collector of "fun" theories.

**Treatment:** Vigorous twice-weekly attack by Med. VI students.

**Prognosis:** Excellent. Final-year student survival rate, 100%.



LESLIE JOHN ALLSOP

Our impressions of this eminent-looking, black attache-cassetted neurologist were created at Neurology Clinics.

His ability to enquire and tabulate the neurological symptoms of patients and his uncanny knack of performing a complete neurological examination in a time when most would be gathering their wits, combined with his unique application of Newton's Third Law as a test of righting reflexes and the mystic of his black bag "full of most wondrous things", are some of the hallmarks by which we shall remember him.

We must thank him for lifting the shroud off a most complex speciality and for his lucid explanations of the anatomical basis of neurological symptoms and signs.



FRANCIS HARDING BURNS

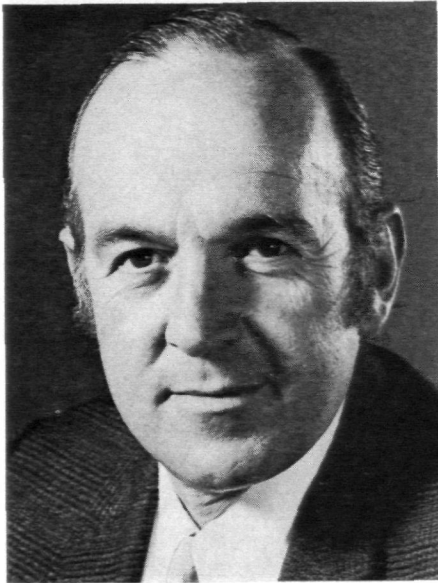
Dr. Harding Burns graduated from this University in 1948 and after a few years as a resident repaired to "Swinging" London in the early fifties. There, oblivious of the evils of a Tory Government, he obtained his M.R.C.P. and returned to the Antipodes in 1956. He immediately settled into gainful employment at Royal Prince Alfred.

Equipped by a sound knowledge of medicine and a finely-developed sense of the ridiculous, he plied his trade most diligently and so rose in the esteem of his fellows that he has been able to grow the most remarkable pair of side-burns without prejudice to his reputation.

To those students who had the good fortune to be under his guidance in Final Year, Dr. Burns appeared as a friendly and competent teacher with a most unusual personal modesty and a keen appreciation of the limitations of medical science. His personal interest in diabetes and allied disorders meant that his students soon realized the importance of medical practice as a treatment of the whole patient rather than a set of biochemistry results.

## TIMOTHY BOYD CARTMILL

Short-sleeved and rotund, a chubby face becoming rubicund, spectacles askew above a somewhat rural voice—this was Tim Cartmill. However, lacking the usual surgeon-Jehovah-syndrome made no difference to his enthusiasm as a teacher. His tutorials, regrettably few in number, were the highlight of the week as we combined to achieve an excellent balance between input and output. Added to his ability to emphasize the important at the somewhat humorous expense of the ridiculously rare or obsessively listed, this gave us a healthy attitude to thoracic surgery.



## DAVID THOMAS CHURCH

*"Now remember, acute nephritis can often present as pulmonary oedema. Only last week I saw a patient in my rooms who. . ."*

Between the clouds of smoke from an odd assortment of pipes, and punctuated by attempts to rekindle the fire, we learned of some of the more unusual presentations of diseases. Even though he was never less than half an hour late for tutorials, his realistic attitude enable us to get away from the more high-powered side of things and closer to the real bones of the subject.

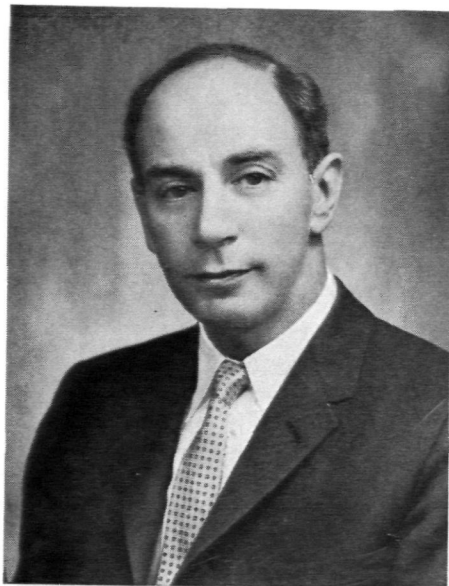
Friendly, approachable and amazingly tolerant, Dr. Church taught us the meaning of the word "rapport". Although at times he must have despaired of us ever learning, we count ourselves fortunate to have been taught by him.

## JOHN ERNEST DUNLOP GOLDIE

Twice a week we were met punctually by a quiet, grey-haired gentleman who would for the next hour proceed to cover thoroughly and methodically his chosen topic, without rebuking us for our near total lack of knowledge, but by consolidating and contributing to it.

From his clarity and thoroughness we must learn, and for his tolerance and concern for us, we thank him.





#### STANLEY JACK MARCUS GOULSTON

A scholar and a gentleman from whom we learnt that the art of medicine is no more than one facet of the art of life itself. For no tutor did we suffer such agonies over our case-presentations—anxious to avoid that furrow in the kind, fatherly brow that was always the strongest indication of his dissatisfaction and our abject failure.

Lowly students, like everyone else, were ladies and gentlemen to Dr. Goulston, an attitude to which we, conscious mostly of our undeserving, could not fail but respond.

Not only have our characters and careers acquired a richer dimension from our contact with Sir, but the initiated recognize us by some less subtle indices—that fascinating occasional white-coated phenomenon glimpsed flashing down to pathology, feverishly clutching a still-warm specimen! A former Goulston student well knows how to keep a tricky amœba wriggling!

#### ALEXANDER FALCONER GRANT

*"Rot! The poor old guy will be dead by then."*

With an aggressive and simplified approach to thoracic surgery, Sandy taught us that all chest shadows are lung cancer, even if proven otherwise. Infusing us with the urgency and the seriousness of the business, he gave us simple tags to hang it all on and the helpful hint that all surgery is just anatomy and physiology.

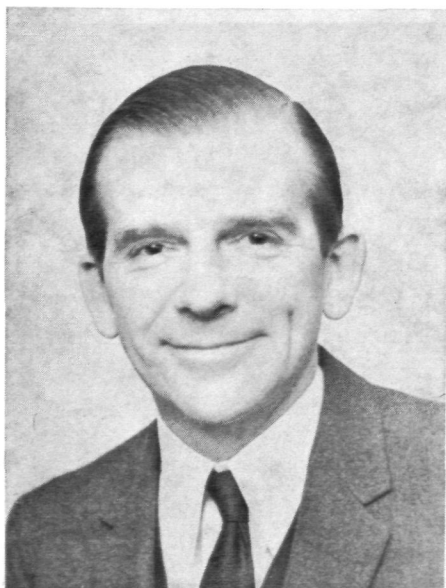
Learning in his tutes was made easy, even if it was compulsory, by his ability to sweep away the minutiae and stick to the point. Sincere thanks for effective tutorials and amazing patience.



#### JOHN MOORE GREENAWAY

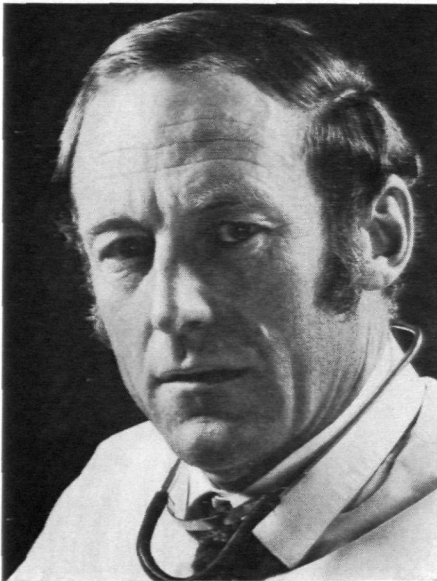
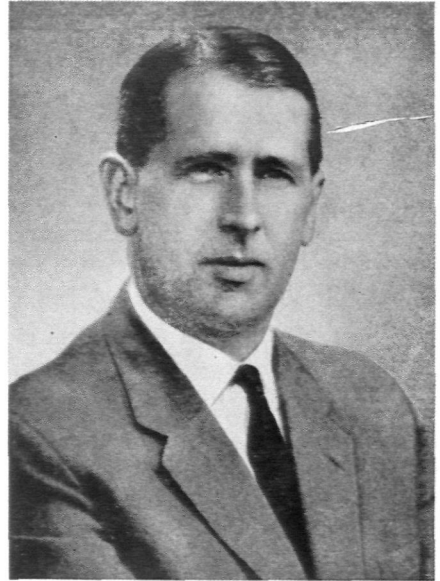
Few tutors would seem to enjoy a widely-read knowledge of medical history; fewer still would seem to enjoy a well-rounded knowledge of that wider world beyond medicine. So it is that one could despair of ever receiving tuition from a man well versed in both. Yet such a man is John Greenaway. His background of knowledge and experience, when combined with sound clinical teaching, ensures that any student's awareness of a patient's illness and its management is expanded into a more memorable and harmonious whole.

As example and aside . . . if, in future affluence, you are drawn to Europe and, of course, Paris, seek out this man's advice before any other. One of his many suggestions will direct you to a certain small restaurant on the left bank, whose speciality of the house is Lobster Babinski. A truly medico-cum-gastronomic delight.



## EDWARD JAMES HALLIDAY

Dr. Halliday has certain disturbing traits, such as running up to Page 7 and evincing an interest in cross-country skiing. However, such idiosyncracies must be expected in a cardiologist. On the brighter side he made our collective COMPOS considerably less NON MENTIS in a difficult subject, whilst fitting that nebulous and much maligned Australian category of "good bloke" better than anyone we know.



## HENRY PETER BURNELL HARVEY

He was an inspiration to us all. Starting our final year convinced of all its horrors, we were relieved to meet this lean-and-hungry-looking man. He taught us the substance of most thoracic matters and then we learnt his technique of good work—ever quickly on to other things—this led us to the realms of squash games, S.C.G. test matches, whatever one likes.

If his teaching methods are as successful as they are popular, we may be fortunate enough to know him more next year.

## JOHN EVERARD HASSALL

As fifth-year tutor to all medical groups and expert on diseases of joints, we will all remember his comprehensive explanations which clarified many of our misapprehensions on matters medical, especially those related to the arthritides. His crisp and somewhat rapid dissertations would often be interrupted by a question as he tried to penetrate the refractoriness of students to participate in a dialogue or to think about the topic at hand. His persistence in such attempts to enliven tutorials and lectures is a tribute to his enthusiasm for the teaching of his chosen art.

Although he no longer is the official friend of students in medical matters at R.P.A.H. (he retired from the post of Medical Supervisor early this year), Dr. Hassall continues to encourage and help any passing student in the wards by demonstrating his patients and embarking readily on lucid explanations of their diseases. We are confident that in future years he will appear in this book in a new role as a respected and popular final-year tutor.







#### FREDERICK CHARLES HINDE

This reformed surgeon, now deliverer of bubs and curer of the ills peculiar to the fair sex, popped his head (with its inviting grin) up to welcome us (to R.P.A.H.) in fourth year; warn us (of the dangers of sharing beds in K.G.V.) in fifth year, and to wave us farewell (at the O. & G. revival weekend) in sixth year.

In between times he has remained an enigma, but the efficacy as base in the Top-Floor Schlink Quartet is evident in the comprehensive obstetrics and gynaecological teaching programme we have enjoyed over the last two years. We hope that future years will benefit from his intense interest in student teaching.

#### ELTON HOLMAN

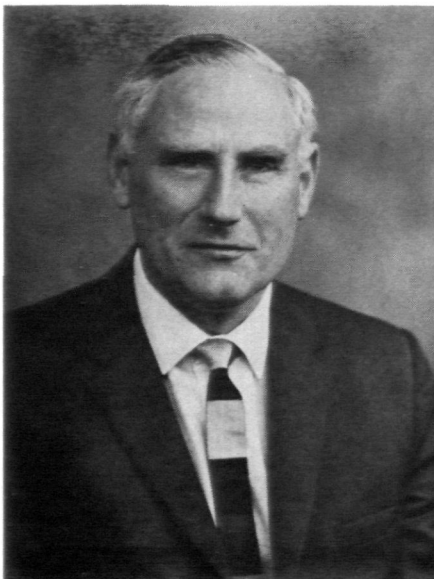
Dr. Holman was really an enigma. Behind a mild-mannered exterior of sombre grey suits and conservative black shoes there is someone else.

With an amazing grasp of the vernacular, Dr. Holman vividly described the intricacies of obstetrics, always stressing the fact that a liberal supply of commonsense and patience was the only *sine qua non* of good obstetric practice. Such an approach is really appreciated by the average final-year student who finds the whole of obstetrics a *déjà vu* phenomenon.



#### WALTER LLOYD HOLCOMBE KELLER

As Mr. Keller's 1970 dull group we made great progress under his penetrating questionings and criticisms. His systematic technique was to devastate us one by one after luring us on with a gently encouraging smile. No one burst into tears though, and viva technique improved a hundred fold. We are now sold on the Patey modified radical mastectomy and confidently expect an enormous upsurge in world demand. We congratulate Mr. Keller on his recent accession to the DI throne and hope that in future he is still able to devote his full hour to final-year students.



*Professor of Cardiology:*

## PAUL IVAN KORNER

*"I do the airy fairy stuff."*

Professor Korner impressed all students by his ability to reduce all the problems of clinical cardiology to basic physiological terms. His logical approach to clinical work has given many students (the responders), a deeper and clearer understanding of the medicine they will practise. After one of his lectures we were all convinced that "after all, medicine is only abnormal physiology".

Despite an extensive research interest, Professor Korner undertook a vast teaching programme, giving lectures and tutorials at various hospitals. His readiness to help and patiently re-explain, in his well-prepared tutorials was appreciated by us all.



## BRUCE DOUGLAS LECKIE

The uneasy feelings of his students about the diagnostic possibilities of thoracotomies were quickly dispelled by this colossus of P.C.P. at the very first meeting. In fact, by the end of term, thoracotomy was placed at the head of every list of diagnostic aids in thoracic surgery, and damn the physicians. This pioneering spirit, however, was tempered by his very real interest in teaching students, and his bewildered patience at their inability to see anything at all on his carefully-selected X-rays. His awe-inspired patients, and his tales of past feats, provided us with a memorable perspective of surgery, and for this we are grateful. We do all have our hang-ups.

## JULIAN HERZL LEE

*"Watch it, see—nobody pushes 'Big Julie' around . . . puff, puff."*

What to do in tutorials. Well, you can sit there and react, write, sleep or ponder. With Dr. Lee it was a bit hard to sleep, to react would have been dangerous, pondering out of the question. So we wrote (again): which really suited everyone. At the end we had notes on most things. Boiled down, at the moment of crisis, these may prove more useful than those peri-bed patient memories.





#### GEOFFREY LANCE McDONALD

We all came to know Dr. McDonald as Warden of the Clinical School when we arrived from the pre-clinical campus—his reminder to us "to clean your nails and shave occasionally before entering the wards" was our first experience of the fatherly interest he was to show in our clinical studies at R.P.A.

Of his family, we knew him through the company of daughter Helen Mary, but also shared his personal sorrow on the death of his father, the late Chancellor, earlier this year.

As our final-year medical tutor we came to know an understanding and sincere physician who was ready to show us the importance of the common and basic principles of medicine.

We all appreciated and will remember his quiet and unassuming manner and his active interest in the teaching of students within the hospital.

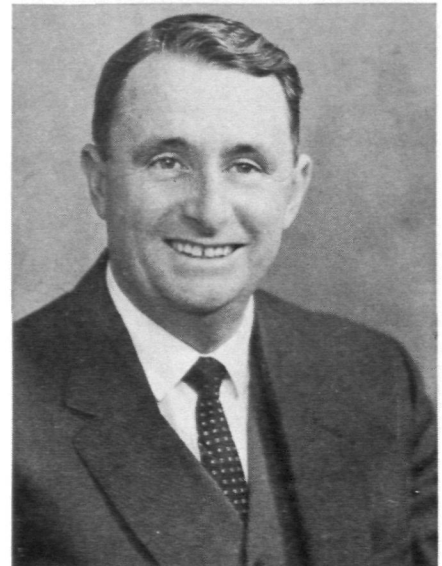
#### BRIAN PATRICK MORGAN

Trumpets sound, doors open, patients and students cringe in awe as the figure with the bow-tie enters the ward, index finger on high.

"I have two things to say, gentlemen: first, learn the Sparrows, and second, Sussman, don't read the small print."

"Did you realize that in this Hospital, well in excess of 70% of patients have lesions of the rectum or anus if you look hard enough. Why, on routine sigmoidoscopy one can see up to fifty centimetres from the anal verge. This is a simple and painless procedure and should be carried out as a routine on all patients."

Mr. Morgan's enthusiastic approach to the teaching of surgery made the term a most rewarding one. We especially appreciated his ability to adapt his teaching style to the academic and theatrical tone of the group.



#### MARGARET MULVEY

*"Where are the boys this evening—um?"*

Our exhaustion after long nights in labour ward was always regretted by Meg, as she is affectionately known to everyone. Her unlimited energy was manifested by all those 8 a.m. lectures and her extra tutorials.

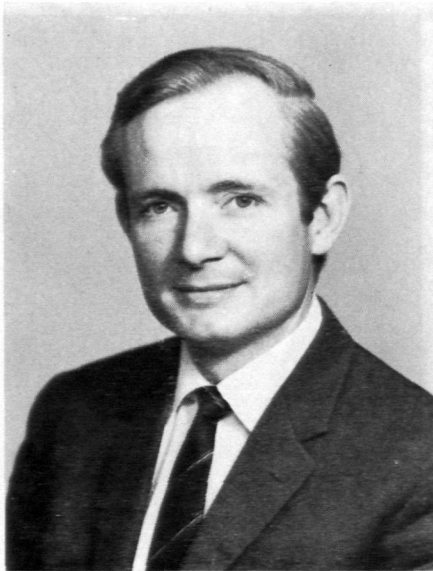
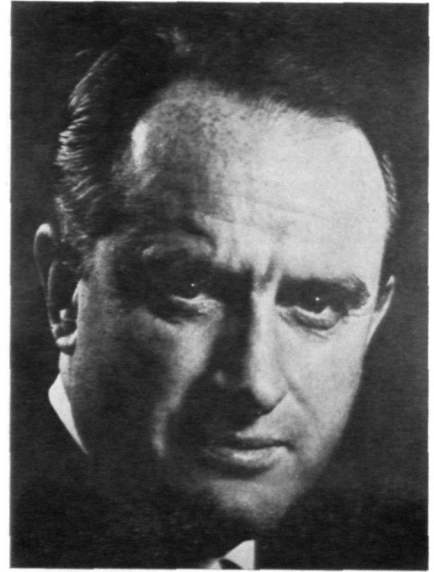
She is one of those who is a "born teacher", and she has that knack of being able to pass on her enthusiasm (as well as numerous facts) to her students, in whom she maintains a keen and genuine interest.

Those who have been lucky enough to come under her tutorship can look back on an enjoyable and profitable term.

#### GEORGE ROWAN NICKS

Mr. Nicks has, in five short tutorials, managed to teach us so much about the management of the patient as an individual rather than as a disease entity.

In his calm, quiet discussions with us he has stressed much of the practical nursing management and I feel sure we will benefit greatly by his teaching. He has taught us to reason our own way through the numerous problems which will suddenly confront us in January.



#### HOWARD JOHN PEAK

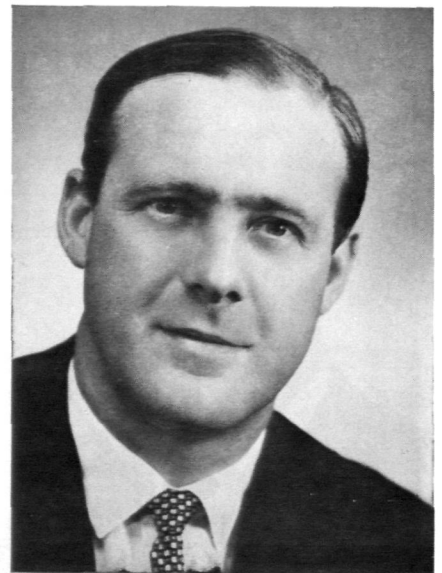
A term of cardiology is simply not enough to get to know this man. Well versed in the art of producing instant anxiety in his students, Dr. Peak then proceeded to follow this with instant understanding, describing such oddities as "just inaudible murmurs".

A keen surfer, cook and councillor, he no doubt finds medicine an interesting adjunct to a full life, and this is reflected by the high quality of his tutorials.

#### JOHN GRAHAME RICHARDS

Dr. Richards is a rarity amongst physicians—he is always on time for tutorials. His non-stop approach to cardiology and the teaching thereof leaves his students breathless, though much wiser, at the end of five weeks of cardiology. Things undreamed of in our simple philosophy were soon made abundantly clear and placed in their proper perspective. Full attendance at all tutorials enables one to gauge the effect he has on students fresh from *la dolce vita* of fifth year.

Prince Alfred students are fortunate, indeed, to have a tutor of his calibre, a man who is vitally interested in his work and in teaching, and who is capable of communicating to, and generating in his students, this same enthusiasm.







JOHN ROBERT SANDS

Extracts from an Indictment:

*"... certainly in a lesser man such heresies and inexplicable lapses could—with forbearance—be overlooked; however, in one known otherwise to you all for sound judgement and grace it cannot be so."*

"... to make matters worse, he suggests to these guileless charges that medicine is a rational beast—commandable by diligence, continued application and commonsense. . . ."

"... moreover, he has led them to believe that his extensive knowledge of our arcane philosophy grew from little more than an intelligent interest in his fellow man. . . ."

For those who would suggest to us that such teachings are no more than harmless eccentricities in an otherwise exemplary tutor, the President concluded with irrefutable proof of the corrupting and evil nature of these pernicious doctrines. . . .

"... to my shaken disbelief they immediately suggested that as a result of their tuition they now enjoy a surer confidence in themselves and in the medicine they soon hope to practise!"

THEODORE SELBY

*"You never know, the patient might sign out at any time."*

Although this wasn't a routine prognosis for all of the more difficult patients, Dr. Selby usually convinced us of the efficacy of medical treatment. With incredible patience he somehow managed to drum a few morsels of knowledge into our conscious awareness. He even let fly with strings of absolute gems during his rare manic phases. He was always quick to put the important topics into perspective, e.g., "You must know SOMETHING about cerebrovascular disease."

Being a true gentleman, he always let us know the patient to be presented a week in advance.

We appreciate his approachability and we are grateful for his patience and teaching.



DONALD MERVYN SHELDON

*"It's hard to ace you people."*

His tutorial was always the high spot of the week (invariably above the umbilicus—predominantly to the right of centre!). Those pearls he cast before us were usually camouflaged biliary calculi. This is not to imply, however, that our well-liked tutor was narrow-minded. On the contrary, discussion topics ranged widely from the aetiology of phyto- and tricho-bezoars to the management of chest injuries during the Crimean War.

Yet important messages were driven firmly home. For example, we will NEVER have our asymptomatic gall-stones removed. Instead we will rest content in the knowledge that should Barnard's syndrome or some other terrible complication develop, even when we are eighty-five and have retired to Cobar, Mr. Sheldon will be just a mercy-flight away!

## JOHN WALTON SPENCE

He towers above us in height and knowledge, yet twice a week, faces the ordeal of those medical students.

With a point of a finger and folding his arms, he directs us to a patient with an "interesting sign". Then, with methodical dexterity, challenges and thwarts our inexperienced minds with questions, somehow keeping a cheerful countenance at our ignorance.

Each Thursday he rests his legs on Schlink furniture, and from fading notes, adds colour from past experiences of his patients and personal illnesses, punctuated by the alternation of his spectacles between eyes and mouth.

We have all benefited from his helpful tuition, and hope that students to come are as fortunate.



## PAUL ANGUS TOMLINSON

*"All you have said is correct, but. . ."*

A genuine interest in our petty final-year problems became apparent from the outset, and thenceforth we became more fully introduced to this patient man with a quiet smile and a penchant for punctuality.

Sometimes soporific, occasionally obtuse, our tutorials were always conducted with an air of direction and coherence. Surgical subtleties were supplied by Mr. Tomlinson, always with a view beyond November to later efficient functioning and with the careless aside of "of course all this has nothing to do with you, dear. . ."





RICHARD LALOR HARRIS

Richard Lalor Harris died on June 16, 1970, after a short illness. He was one of the senior physicians on the staff of Royal Prince Alfred Hospital and had it not been for his sudden, untimely illness just before the beginning of Lent Term we would have met him as one of our clinical lecturers this year.

Many of us, however, knew him already, for he had long been a familiar figure around the hospital. Over a period of nearly 30 years he served successively as Resident Medical Officer, Acting Deputy Superintendent, Clinical Superintendent, Honorary Assistant Physician and Honorary Physician. In addition, he was a member of the Board of Directors.

His large, imposing figure and his laconic and, at times even brusque, manner were at first a little disconcerting to those who served under him as students or as graduates. However, it rapidly became clear on further acquaintance that he was, in reality, a gentle character with a wonderful sense of humour. As a teacher he stripped medicine of any pretentiousness, and sought always the basic clinical facts which led to a diagnosis. The patient and his welfare were uppermost in his mind at all times. In other words, he embodied the best attributes of a good clinical teacher and helped students to put into perspective the theoretical knowledge that they acquire in their pre-clinical and later years.

The University has lost a dedicated teacher, the Hospital has lost a first-class physician, his many patients have lost a firm friend.

To his wife and family we extend our deepest sympathy.

## OUR OTHER TEACHERS

Space does not permit us to write in more detail about our teachers. To the following tutors, who were no less colourful, capable or helpful than those more libellously described above, we record our grateful thanks.

### ORTHOPÆDICS

Mr. H. C. Barry  
Mr. A. W. J. Watts  
Mr. W. D. Sturrock  
Mr. C. L. Greaves  
Mr. H. D. Tyer

### UROLOGY

Mr. H. G. Cummine  
Mr. L. D. Wheeler  
Mr. B. S. Pearson  
Mr. D. D. Arnold  
Mr. G. J. Coorey

## THE REGISTRARS

### MEDICINE

G. Anderson	W. Flukes	S. Morey
I. Bailey	B. Hurley	P. Roy
R. Clarke	J. Horvath	M. West
G. Duggin	J. Koutts	L. Wing
J. Eisman	M. McGrath	

### SURGERY

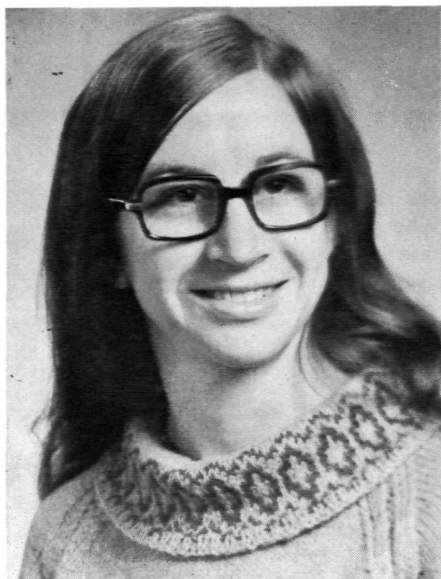
D. Baird	C. Williams
F. Bonar	B. Edwards
A. Farnsworth	A. Meares
G. Cummins	T. Vandeleur

### OBSTETRICS AND GYNÆCOLOGY

E. Boyce	A. Korda
M. Catt	I. Stewart



## THE STUDENTS



VALERIE RUTH ARNOLD (NÉE BROWN)

*"Exams? Again? But I really meant to start early this year!"*

As she said this for the nth time, the genuineness of Val's indignation hadn't changed one iota. Nobly shrugging aside the bare essentials of life (unfinished novels, the odd jazz ballet class, etc.), she resolutely began the long list of never-to-be-completed topics.

Who else could conduct a courtship with Bob on the benches round the oval and arouse the minimum of suspicion in blatantly interested observers?

Has anyone else ever astounded the labour ward sisters by coolly requesting a rubber apron to add to the full obstetric regalia as the baby delivers itself?

Who knows what lurks beneath that imperturbable surface? When she calmly blinks at aggressive tutors, is there really panic beneath? Or lunatic laughter?

NICHOLAS ZACHARIAS AVRAMIDIS

*"Are there any new good books for sale at the Med. Soc.?"*

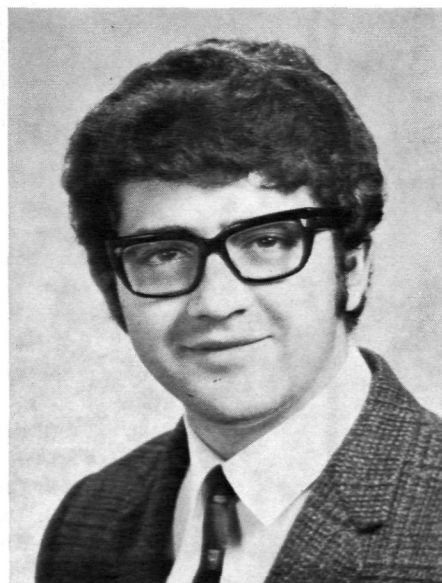
Nick began medicine after a successful stay at Sydney Boys' High.

His distinctive voice has many a time been heard warning us all of the impending dangers—both academically and on the stock market.

His severe pessimism has stirred many of us into action—but it all turned out well in the end!

Many miles were flat-footedly jogged by Nick during his six years in an attempt to remain fit and to hit squash balls.

However, upon this serious academic storm a beautiful ray of sunlight appeared in the form of his love, Ninon, completing Nick as a warm, good-natured and genuinely happy person.



JENNIFER SUE BALDERSTON

*"This is my grate friend Jen. Distinguishing marks: Beetle scrawled in ink on left knee."*

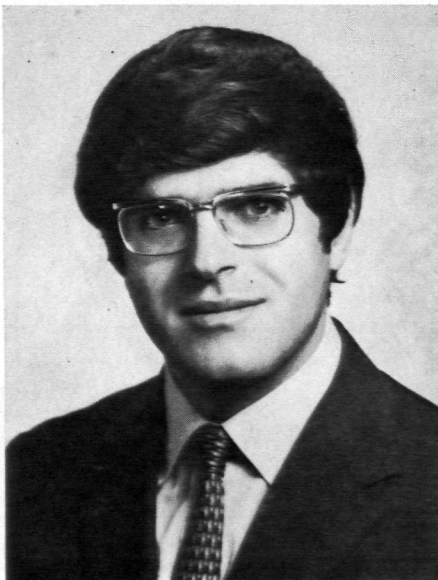
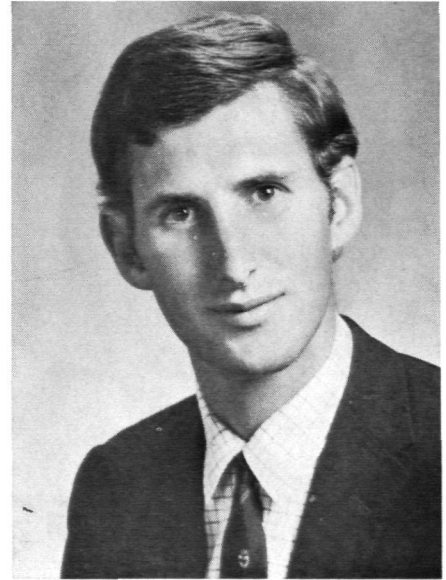
Jen is a friendly person of thoughtful disposition and a strange attachment to "gobble-uns", characterized by a love of harp music and youth concerts, Renoir and red velvet, pot-pourri and crochet and a delightfully impish sense of humour.

Textbooks have often been seen lying idle while their owner squeezed in a novel between topics. A knack of studying to Beethoven has been used to make more palatable the long hours spent with medical tomes.

She has our good wishes for the future, and "may she live happily ever after".

RUSSELL FREDERICK BENNETT

"From Cranbrook young Bennett?"  
 The Warden had said,  
 "I'm not sure you're right  
 But you want to do Med."  
 "I'm keen to do well", said the lad,  
 And he took up his oar;  
 Midweek golf he always plays,  
 Now can he do more?  
 "Well", said Fred after his years at St. Paul's,  
 "You see I've passed all my posts  
 And of all my time in these hallowed halls  
 It is the medicine that I played most."  
 "I've answered three questions and that is enough"  
 He said in his final-year viva,  
 "Do you think I can waste all day on such stuff?  
 I'll be a doctor, a student or neither."



VASILIOS ANTONIOS BERDOUKAS

Bill started off medicine after abandoning law, as a quiet, well-groomed, meticulous student—whose main passion seemed to be neatness in all things—especially in taking lecture notes. In fact, Bill's only seeming liability is that his handwriting is legible.

Throughout his uni-course he spent a good deal of time disproving the myth that med. students were culturally deprived.

In the field of sport Bill also proved his worth—many of those marks on the R.P.A. squash courts are a legacy to Bill's method of handling aggression.

Early this year, Bill took perhaps the most important step in his life, namely, getting married. In this, Bill again showed great judgement by choosing, in Anna, a beautiful, charming, intelligent arts bird.

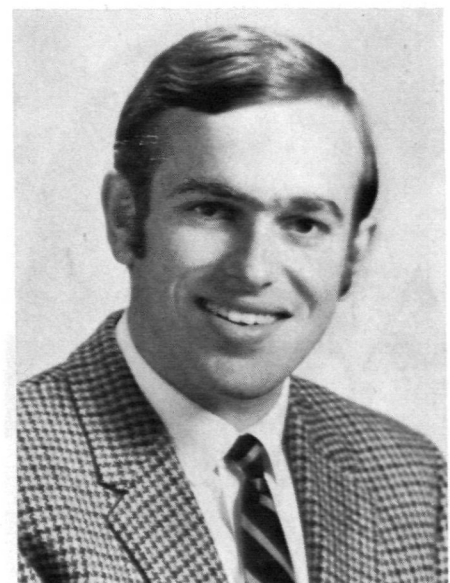
MICHAEL BESSER

Mick has had rather a colourful career since arriving at Sydney University from Homebush Boys' High. He has succeeded in acquiring an impressive list of credits, as well as a delightful wife and daughter, while winding his way through the course.

To show his versatility, Mick has also tried his hand at street sweeping, driving cabs and various other devious means of beating the Taxation Department.

It is a pleasure to have been associated with Mick who, as well as keeping a paternal eye over the more rowdy members of our group, has kept us amused with his keen wit.

There is no doubt his future career will be highly successful and he will never be short of both good friends and numerous patients.





#### SUSAN ELIZABETH BLESSING (NÉE O'BRIEN)

I was just saying to the Chief, "You can't beat her smile". He concurred and turned back to his yo-yo.

"There's more than the smile, though", I continued, "Who'd want to marry a smile?"

"It's been done before", he quipped, "but not this time."

I shrieked, wiping away a quiet tear. "There are qualities to be listed, and I shall list them!"

I referred him to the footnote below.\*

He reeled, stricken. "Forsooth", he cried, "the smile was a mere fringe benefit, a ripple at the edge of the sea!"

I was satisfied, secure in the knowledge of a man well persuaded. "Now, off with this Clark Kent outfit; up, up and away!"

\* Sensitivity, intelligence and many others.

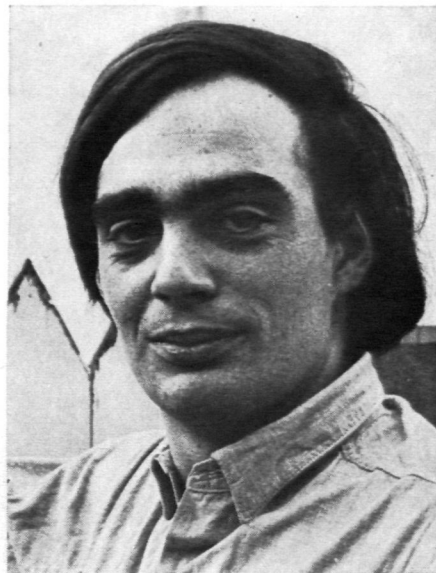
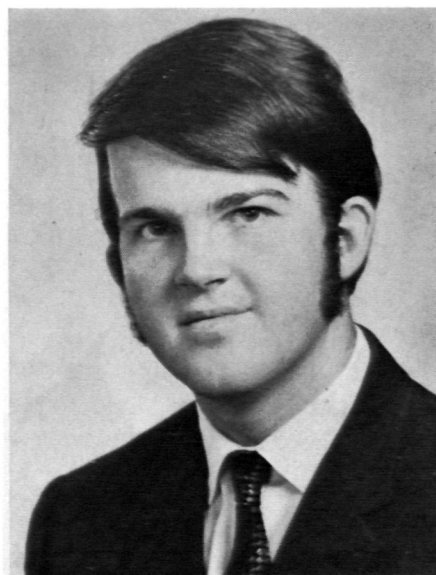
#### PETER ALEXANDER BLOMBERY

Peter joined us after a successful year as a physiologist—although meant to be a holiday after preclinical years, his cardiovascular studies certainly kept him on the ball.

During clinical years he was often seen in the wards with patients or nurses, or perusing the texts and journals he is wont to ingest. Quick of wit and keen to appreciate any subtlety crossing his sensorium, Peter kept his colleagues stimulated and amused by his observations.

Outside he is known to drive an "FJ" erratically, play organs and sleep in regularly amongst other pastimes.

Equipped with his interest in patients and their diseases and his endless list of obscure syndromes, his future career is assured in whatever field he chooses.



#### THOMAS ARTHUR BOLEYN

En,/actus ui, nec usitata,/sperum sum plenus/qua mihi explicanda sint,/si uacat,/si placidi rationem admittitis.

"Homo tamen sum,/quam quam omnia humana/sunt a me aliena/(id quod nec aliter esse possit)."

Sunt enim quædam mysteria/nec formæ unius:/multa sunt quæ natura/spemque metumque non desiderant./Iam iam quæritant homines/De finibus bonorum/et malorum.

Sic illi contigit:/sed nescio an sit in deos euectus, amici, annon re uera quasi naufragio mortuus./Qualia uates, talia homo et in his diebus?

Quæ minime illum iuuant./Homo tamen est:/"Amor nempe est?"/Quotiens sed hominum esse uoluit?

Pæti more moriri constitutum,/quasi spectaculum,/"propria autem morte"/quasi qui id gratum arbitretur.

Mors eius uero uera nobis sane,/non ingrata, puto, hominibus,/ . . . neu indecora, amici, stulto.

## LYNDALL MARY BOWEN-THOMAS

*"They also serve who only stand and wait."*

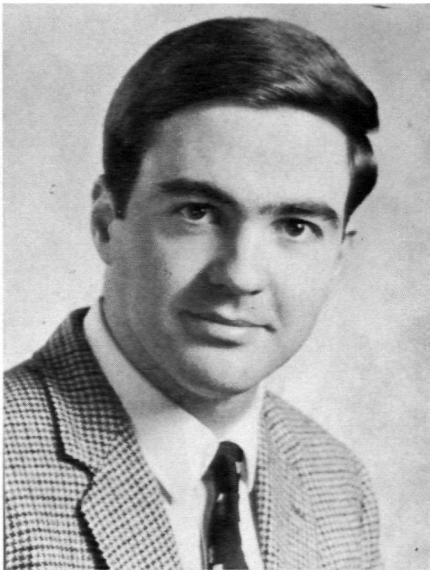
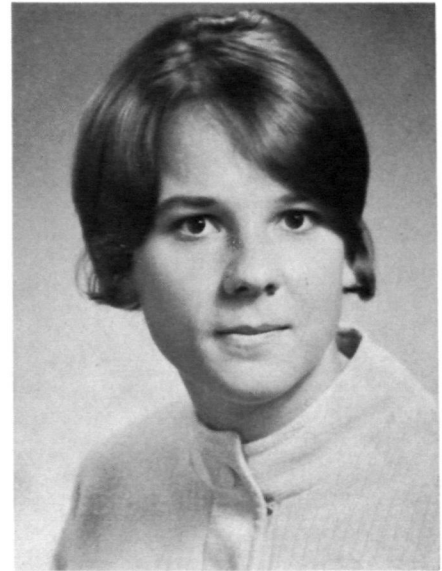
—MILTON.

Will success spoil Lyndall? This is the question we all ask as our tenure at the University draws to a close.

Already the changes in Lyndall have been great. Gone forever is the shy young girl who first crossed the portals of this seat of learning only six years ago. In her place stands a mature young woman, ready to face the problems of the ailing community.

Always down-to-earth, the ephemeral world of Macquarie Street doesn't interest her. Not for her the bustle of city practice, but instead the quiet backwaters of the country, where the doctor is yet a follower of Hippocrates.

Still, the best-laid plans of mice and men. . .



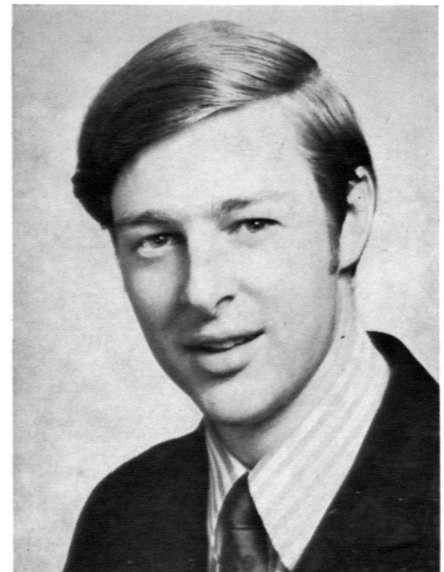
## ROSS BRADBURY

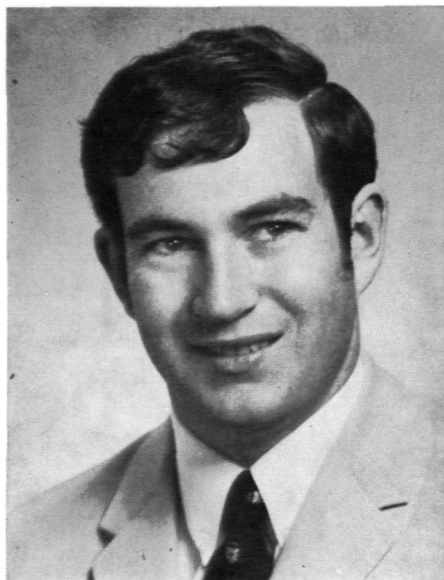
Recent reports from Paddington residents of a rotund, low-flying object, mysteriously gaining in muscle mass as it flashed night after night down darkened streets, have aroused considerable interest. However, naturalists have discounted the return of Frankenstein since their field E.E.G. machine was fused by the powerful brain waves emitted from the creature, and have gone on to reveal its true identity as mild-mannered Ross Bradbury in pursuit of the perfect body.

Ross' pleasant good sense will take him far if he can lose a few annoying habits, especially an enormous golf drive which most of us find sickening. This and similar flaws have only detracted slightly from the real pleasure in knowing Ross over the last few years.

## ARCHER BROUGHTON

From Tumut High to The Kings School is an almighty jump in anybody's books, but Arch was not content, and several hat sizes later started medicine. Since then he has managed to become an encyclopædia of little-known facts which, when combined with his general all-round superiority and inexhaustible sense of humour, has enabled him to bluff his way through many an embarrassing situation. Arch's incredible ability to invent entirely fictitious explanations and then defend them with supreme confidence and a straight face has left a trail of confused colleagues, young women and tutors. We know his great wit will continue to play havoc with the unwary and turn boredom into hilarity in the years to come.





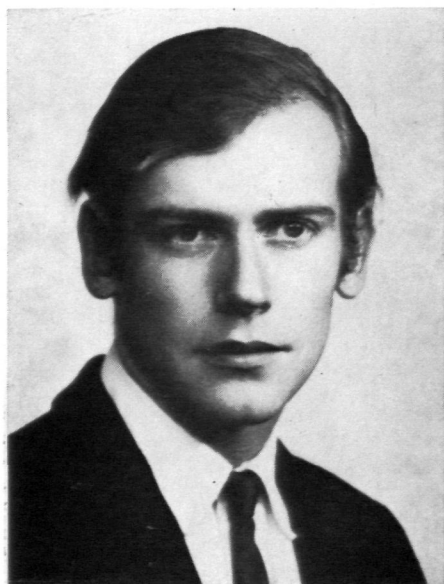
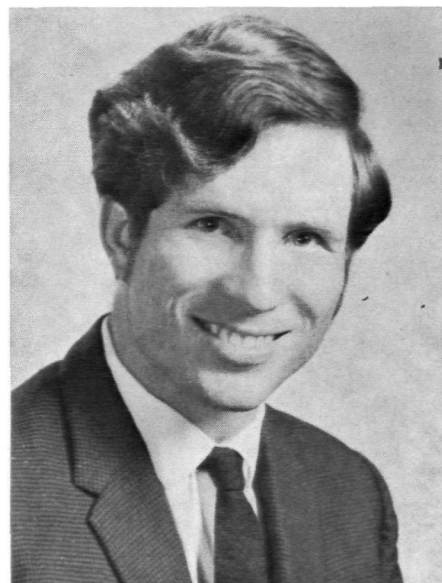
PHILLIP KELVIN BROWNLIE

Phil came to Uni from Avalon in 1964 with shiny blue eyes; he leaves with glazed red ones—a change generally attributed to long hours of study under a dim light. In 1965, he migrated to the hallowed halls of St. Andrew's College, deep in bluebag territory. The year '66 saw his election as year rep. and an attempt on his life by an anatomy lecturer. Always a keen sportsman, he represented university in cricket and squash and was a member of the victorious '66 faculty football team. Last year, he excelled himself with one engagement, one distinction and a marriage in quick succession. Next year he's off to defend our lives with the Air Force. After that . . . we wish him well.

JOHN BUCKINGHAM

A distinctive, high-pitched voice, an eager face, illuminated with enthusiasm and interest, constitute Buck. He is renowned for his indefatigable questioning of honoraries and lecturers as to whether the material is examinable, and for his constant searching for examination tips, many of which must have "come off", judging by his splendid record. Thought to be wedded only to his work, Buck lately surprised his innumerable friends by his sudden interest in physiotherapy—or is it just one member of that Institute?

Educated at Riverview, where he had an excellent academic record, Buck aspires to surgery. If sheer determination, boundless enthusiasm and much natural ability count, he will assuredly leave his mark on the abdomens of his fellow citizens.



NEIL MCKAY BURNET

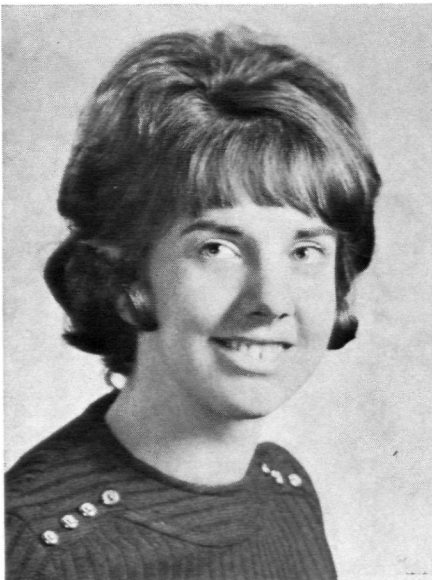
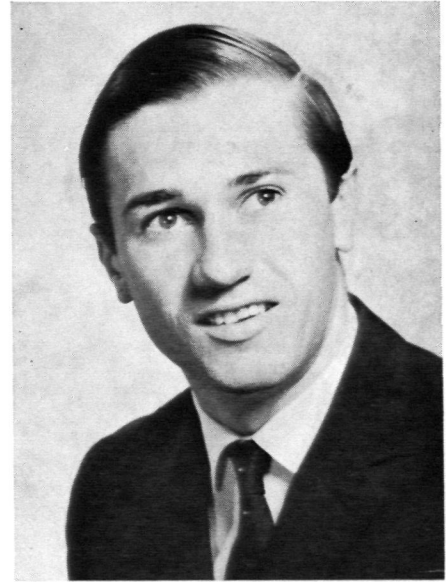
*"Oh, very good, very cutting. What incredible insight."*

Neil first thrived among the heavy textbooks, never put out that we didn't ask if he was any relation to the other Burnet. Intellectually precocious, however, he embraced pacifism, grew a mighty beard, and failed second year with surpassing speed and passion. He remains a jump ahead of fashion, in his own anonymous way, for he is now a family man, a role which he carries off with phlegmatic aplomb from a Kirribilli stone mansion and a disgracefully battered sedan.



## WILLIAM ALICK BYE

Bill, with his conservative, sleekly-groomed hair style and notoriously crinkled shoes, has always been an eager and enthusiastic student. He is an all-rounder. As well as being most successful in his studies, he finds time for sporting activities, being both a cricketer and footballer—an interest that carries on from his days at Riverview. Bill has become famous for his comprehensive lecture notes, always beautifully printed and given in great detail—a fact that made these notes particularly useful to his many friends with whom he shared them so generously. Endowed with an equable temperament and a clear, forthright and independent mind, Bill, with a host of distinctions and credits behind him, will certainly carry on the Bye tradition.



## ELIZABETH HELEN CLARK

Entering university without a faculty, Liz was attracted to medicine because it "seemed least uninteresting and the longest". Settling into the ease of campus life, she has enjoyed the leisure time which it brought as well as the interesting parts of the course. But her pleasing nochalance is easily stirred to protect the fairer sex or to ridicule the absurdities of life, but especially to chastise the examiners.

Adept at skipping a lecture in search of a minier skirt, a week of term for skiing and, most of all, six years of interested medical men for a lawyer, she will continue to impress all with her incisive mind and easy manner.

## MONICA POH CHEOK CHEUNG

*"Definitely a mink-and-diamonds girl."*

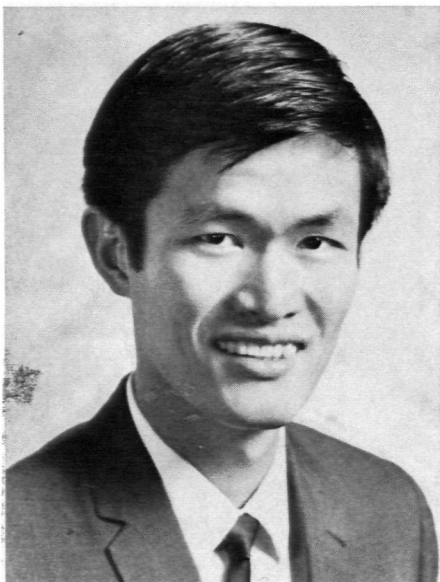
Cheok arrived fresh from Claremont and settled into Women's College to start her medical studies. She quickly became well known for her excellent fashion sense and limitless wardrobe.

One of seventeen children, Cheok readily adapted to student life but kept any wayward lad in line with a sound punch on the biceps. She also introduced us to Oriental mysticism and a great variety of Chinese food.

Cheok was definitely the expert of the one-night cram; however, we have noticed a more constant approach since the arrival of a certain James Kee in fifth year.

We are pleased that she has decided to settle in Australia and feel sure that her career and married life will be highly successful.





## JOHN ENG LEONG CHONG

*"I went home every Christmas to avoid becoming too Westernized."*

On coming to Australia in 1963, John enrolled in the secluded Bathurst High School, which promptly produced a scandal which made headlines. Among the select few who made the strict quota for overseas students he elected to reside at St. John's College, where he impressed his colleagues by his variously successful attempts at hurdling, beer guzzling and skill at billiards. His contributions to basketball, soccer and hockey greatly helped retain the Penfold Shield.

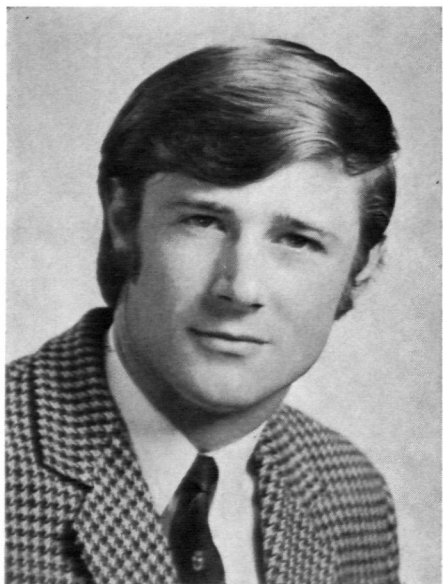
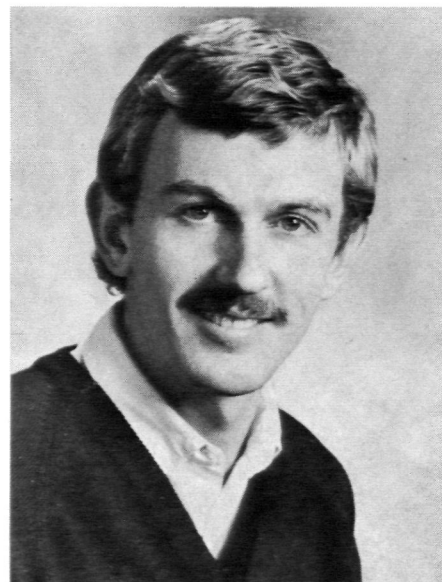
For the clinical years John experienced residence in the notorious International House, where he cooked authentic Eastern dishes for the hungry Western masses.

With graduation, John finally accepts that temperate medicine is applicable to tropical Borneo.

## CHRISTOPHER ALAN COMMENS

Chris apparently entered medicine with the rest of us. This misanthrope then entered the clinical years with a hebephrenic giggle and the maxim that "everyone is a complete fool until judged other wise". The great Khan then embarked on an awe-inspiring pilgrimage of destruction. We mortals could but only gape!

No one was too great or small to feel the wrath of his sanguine tongue and see the glory that was Commens. And yet, the cracks were beginning to show; an occasional mercy here, a missed opportunity there. The crash was inevitable, and with the advent of final year, a shadow of a former prince presented himself for judgement; now professing all those vile traits he had so recently taught us to abhor—tolerance, civility, charm. Yecch!



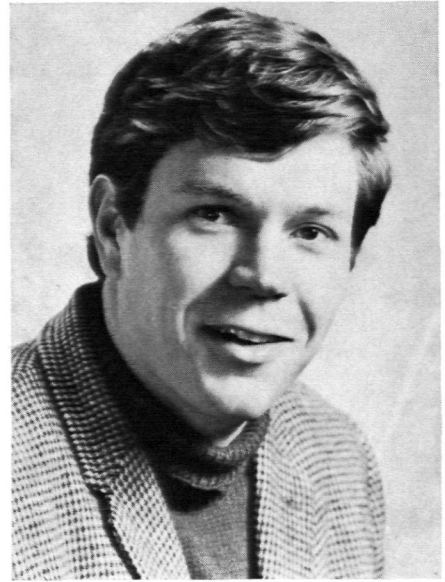
## TIMOTHY ERIC CROPLEY

At once a realist in mind and an idealist at heart, these were Tim's fatal attractions. An avid interest, rarely unreturned, in the distaff side led to occasional errors of selection, but more often to more serious relationships with "Class-Birds". Early undergrad. days saw the heated chases of the copulating neurone from bases in Blaxland and Coll. Wes. Cooled by a spell in the suburbs in fourth year, Tim returned to Wesley in 1969-70 "to work" and practise what was termed "a cynical detachment". However, the heart remains warm, and an imaginative individual and honest thinker will always make a good doctor.

## JOHN ORGILL CURRIE

John came from Wollongong with an impressive record, and carried on in the same vein in the Medical Faculty. His six years at Wesley College contributed much to the sporting and intellectual environment. Initially sober, his social life tended to degenerate yearly and lately he's been solving the problems of many "troubled girls". However, he felt that this wasn't good enough and he began a search for the classic beauty (attempts so far unsuccessful). Following public health, he began to wage a solitary campaign against the products of the bovine udder.

Although John's long-term goal is to become a country squire, we believe that his interim practising of medicine will meet with every success.



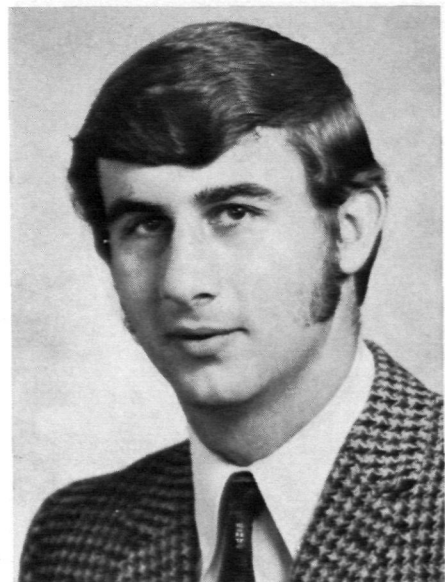
## SIMON PATRICK HUGO DE BURGH

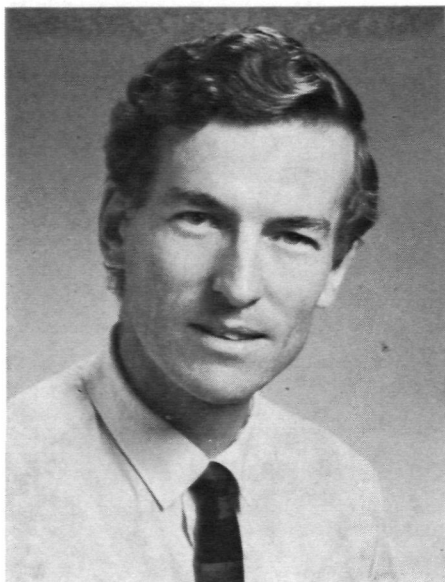
First known in concentric circles as a silent schizoid with a weakness for serious talk. Though he had been to a good school, got on by cultivating friends in low places, and in fourth year achieved sudden popularity (strange). Entered a seminary for the profligate, but was impeached at vespers. Disheartened, he undertook to take the lid off immunology and amidst emotional scenes he and some unwholesome friends graduated as rebel intellectuals. Though no better at the flute, he has got cooler about it until now—freshly bearded at Hereford Street—not living in sin, just visiting—he finds with faint surprise (how like him) that this whole thing is going to be all right.

## KIM EDWARDS

No-one will ever accuse the celebrated sportsman and scholar from Dubbo High of wasting his youth. With his well known "It's all under control", he left medicine until final year and concentrated on rugby union, taxi-driving, water-polo and the indoor sports—bridge and physiotherapists. He put on a sudden spurt in final year and amazed us all by knowledge of such well-known conditions as Wallenbergs syndrome and the urinary findings in thyrotoxic myopathy. He also managed to obtain the largest collection of books ever borrowed by one student, and with the contents of De Gruchy, Cecil Loeb, Berlyne and Sherlock imprinted on his mind, finally settled down to attack final year.

With such preparation he can but do well.





## TRENT DOUGLAS FAREBROTHER

A tall, bowed figure strides through the hospital with pipe aglow—another Dr. Schweitzer? No, only Trent wondering where the next meal is coming from for his ever-increasing progeny.

Trent passed through Knox Grammar, entered pharmacy, graduated, and proceeded to specialize in lip-sticks. However, vexed by the problem of why this green pill and that one differ, he entered medicine determined not to be distracted by anything. He fell down first in an attempt to gain a University win in rowing, then again in getting married.

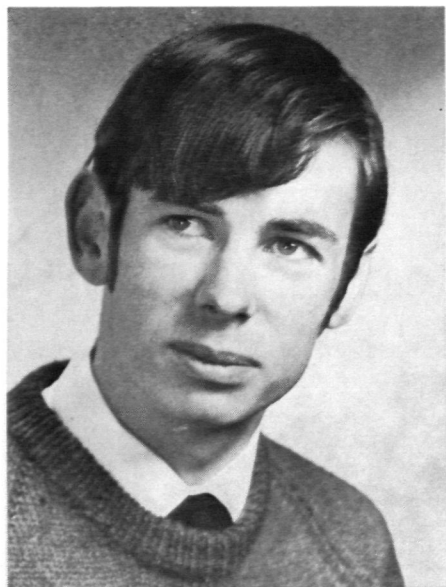
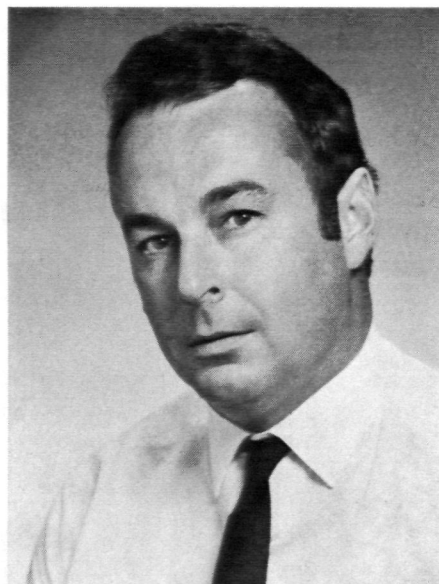
Trent's solid academic records, sincere approach and friendly manner, show promise of a fine M.B., B.S., Ph.C.

## KEVAN JOSEPH FLEMING

*"Come up to the farm and we'll shoot a few prospectors."*

A number of years ago, beyond anyone's memory, the cow cocky dropped his suitcase at St. Johns and ducked over to the Grose Farm for a quick one. Apart from a cloak-and-dagger battle with the Registrar's Office, he's been over there ever since, absorbing his medical course from afar.

To the surprise of all, he showed up at the hospital this year, nappy-changing for daughter Mariska permitting, his greying temple and portly bearing, a foil to his youthful tutors.



## AIDAN FOY

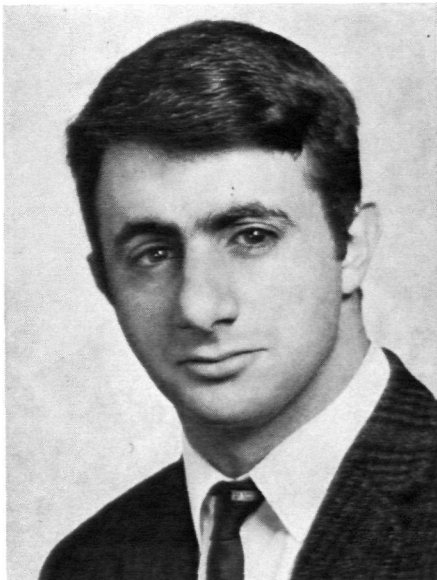
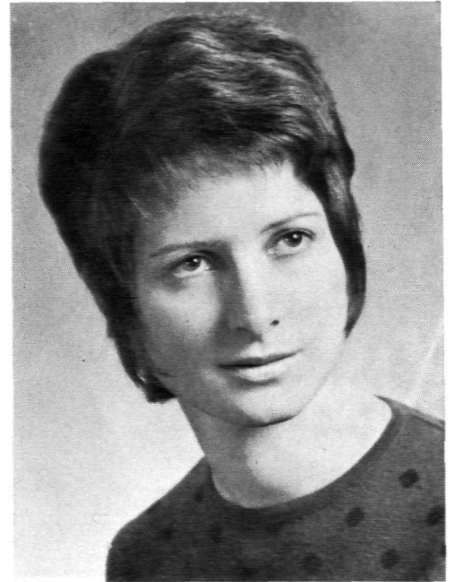
In approaching a problem a Marxist should see the whole as well as the parts. A frog in a well says "The sky is no bigger than the mouth of the well". That is untrue, for the sky is not just the size of the mouth of the well. If it is said "A part of the sky is the size of the mouth of the well", that would be true because it tallies with the facts.

## ROSALIE LILLI FUZES (NÉE MINC)

Lilli's relationship with the healing art has been an "on-and-off" affair, culminating with her decision in fifth year that she did, in fact, want to do medicine.

Over the years she developed a love of the finer things in life, becoming a devoted soccer fan, an unconventional bridge player ("Who's Goren?") and, finally, a housewife. In between, she progressed steadily despite an occasional skirmish with the examiners. The era of the mini-skirt has suited her admirably, and many hopes were dashed when she and Peter were married.

A sympathetic listener, she was adept at brightening up any morose group of final year ("Let's play bridge!"). Her hopes for the future are unknown, but it will be something in the style to which she has become accustomed.



## JOHN MICHAEL GEORGE

John began medicine in 1965 fresh from Nudgee College, Brisbane. He has constantly proved an eager and versatile student in all fields of his training, but we feel he may recently have forecast his future sphere of interest in the profession—his knowledge of the virgin breast has astounded both tutors and colleagues and earned him the utmost admiration as a true virtuoso in this field.

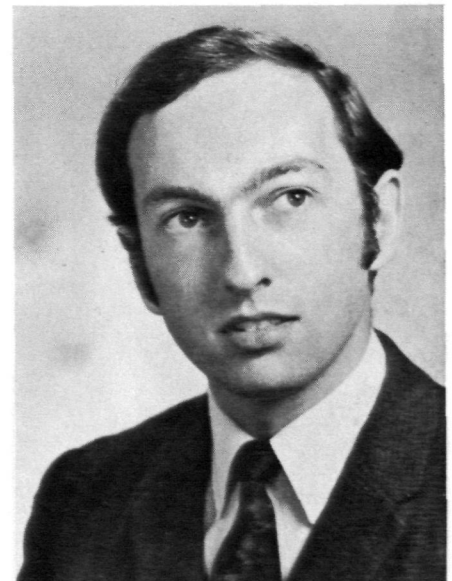
Whatever he may decide to do, he is bound to succeed, but we feel that "mammology" is a likely favourite.

## PAUL LIONEL GOODMAN

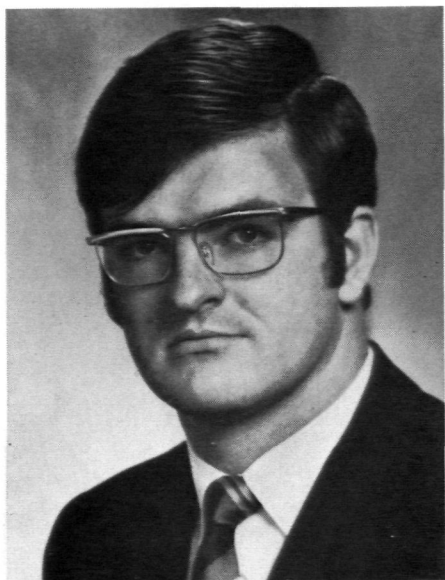
This chirpy little fellow entered the faculty with the firm belief that a rounded personality was an essential requirement towards becoming a successful medico. With increased caloric intake, "Goodie" was thus able to channel his energies into playing the classical guitar, constructing furniture and driving cabs, as well as dissecting the course with distinction.

However, his fascination with the minute intricacies of medicine never diminished and many a mundane tutorial was sharply awakened by his amusing outbursts and hair-splitting arguments. His passive aggression towards uninspiring lecturers was demonstrated by his ability to fall asleep anywhere at any time.

With such a background it is unnecessary for us to wish him well, as his undoubted talents and good nature ensure success.







#### PETER MALCOLM GRAHAM

Peter hails from Berry and his early career in medicine was dominated by bursts of study and snooker playing, together with the development of a taste for a "quiet ale". His other activities included the annual snatching of credits from confused, bewildered examiners.

Quickly tiring of raising cows, Peter decided to let the State support him and joined the R.A.A.F. During his passage through the Faculty he has acquired a very understanding wife, a discerning eye for a good car, a knack for spending money and an incurable addiction to movie marathons on T.V.

Peter is one of the most amiable, easy-going characters in the Faculty, and his future success is assured. Without doubt he will be a credit to his profession.

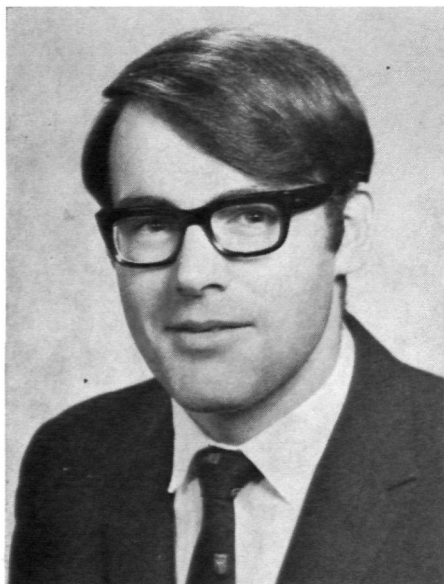
#### MICHAEL GREENBAUM

After leaving Sydney High School, Michael spent a year wandering the world seeking enlightenment. He certainly found the true and only way to tackle medicine—do nothing first term, hypomanic panic second term, depressive panic third term and then last-minute cram.

An amateur artist, Michael's lecture notes are all finely illustrated, no doubt an attempt to think of a person associated with a disease.

His sense of humour, readiness to help his friends, and his easy-going nature will ensure him a satisfying career.

Michael Greenbaum, a dilettante student,  
Thought Science a bore, but was prudent,  
For when told "Describe lung compliance"  
He would answer with complete reliance,  
"Medicine, Sir, is an art not a science."



#### BRUCE MILNE HALL

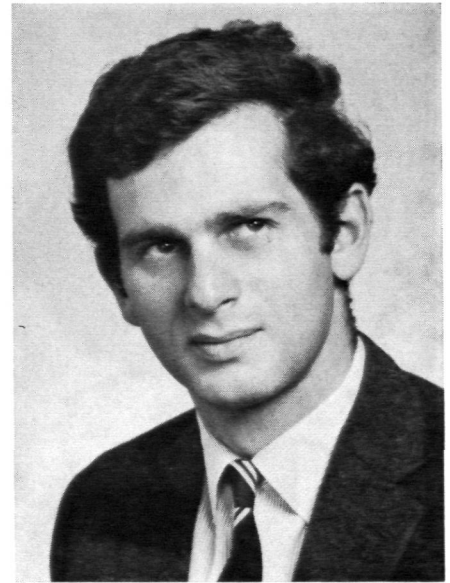
The art of total relaxation of both mind and body, as demonstrated by Bruce in many tutorial attendances is, perhaps, the secret which enables him to work tirelessly for the Medical Society whilst at the same time maintaining an irreproachable academic record. His ability to organize his colleagues in an unobtrusive manner has allowed us to fulfil the demands of the medical bureaucracy with a minimum of personal effort or pain.

Although an advocate of the "see Australia first" policy, elective term enabled Bruce to expand his sphere of reference to include the geographical and social intricacies of New Zealand.

Bruce's quiet nonconformity and interest in people and their problems assure his success and satisfaction in future years.

## GABOR MICHAEL HALMAGYI

On the local medical scene Michael has been a displaced Hamlet, bristling with discontent, preoccupied with the fundamental physiology and philosophy, iconoclastic and apt to ask questions both pertinent and impertinent. All of this aristocratic restlessness somewhat discomforting to us of the sane and sanitary bourgeoisie. Yet his turgid intensity could always be pricked with a joke—a broad and bawdy sense of humour with some of us left blushing in the wings. And now, as the actor looks out, there are the unaccommodating eyes of the darkness and no more prediction than a sense of some overwhelming principle waiting perhaps to be unwound.

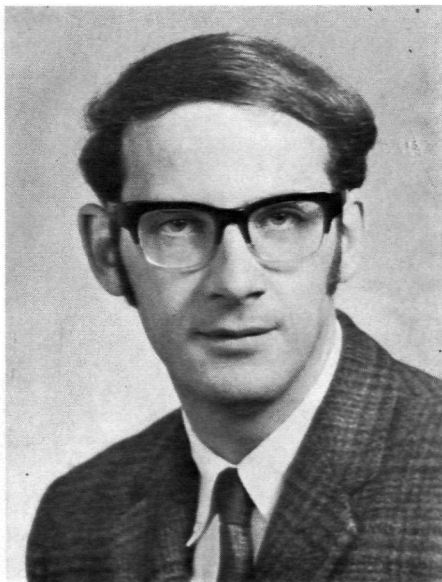


## GEORGE PETER HAMOR

Does this look like the face of a physician or a musician? Verily 'tis both; for, at a tender young age George forsook his homeland and an embryonic musical career to join us down-under and dedicate himself to the worthiest of professions. Added to these frustrations is a small car which inevitably fails to start on exam. days, and that elusive "grand slam" which constantly avoids his game of bridge.

Never one to distract himself from medicine, George restricts his activities to a few hours of bridge a day, amorous adventures on weekends, footy on telly, and an occasional fling on the squash court.

A slightly obsessional personality, which results in impeccable handwriting, makes his lecture notes highly desirable, his temper somewhat friable, his habits very reliable and his character highly admirable. . . . Good luck, George!



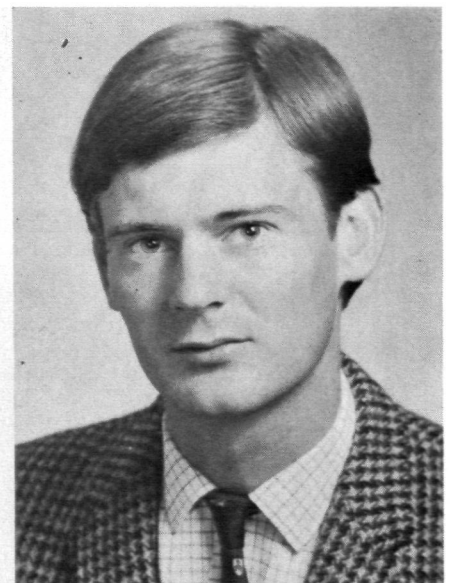
## KEVIN CHARLES HANEL

Spending six years in College without assuming the stereotype of a college man is not easy but Kevin seems to lack that narrow-mindedness and conformity and has remained relatively unscathed. Refreshingly, he has retained a discerning and candid mind.

Earlier years have been marked by the usual run of student frolics and follies punctuated by a propensity for sleep and television approaching world records. Lately other interests have supervened.

Torn between College and Albury, and in simple harmonic motion between the two, Kevin finds University an interesting adjunct to living; the result, no doubt, of a pleasant, easy-going manner that enables him to keep things in proportion.

What the future holds is not certain but I think there will be a quietly successful practice with lots of kids.





YVONNE MARGARET HEITNER (NÉE SILBERMAN)

*"Should I take off my earrings to go into the wards?"*

When Yvonne graduates, the medical course just might fade away from utter lack of support! For "to like moderately" does not exist in this vivacious brunette's vocabulary. Sometimes lesser souls quail a little in the face of her medical passions, but how often we rely on that same vitality to rally our own ragging enthusiasm. Who but Yvonne could wax lyrical over a little ivy plant's struggling attempts to beautify a ward?—could offer us a year's supply of her fabulous multicolour lecture notes when we fall behind?

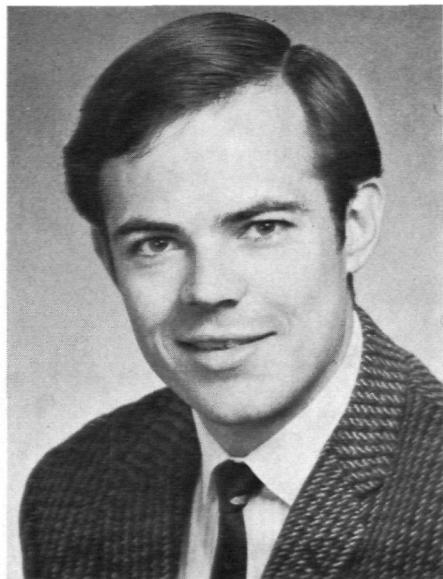
A fellow student, aware of her unique charms, very early could allow her single no further than second year, and we wish this medical team much success.

GRAYDON BRUCE HOWE

Graydon has made two momentous decisions in his short life: medicine—and despite an early stumble he has succeeded in frustrating the most searching of inquisitors; and marriage—although agonizing for most, it was never really a great problem. One reads of childhood sweethearts, but who thought that it really happens?

These excepted, he has never had to make a decision—matrimony called for his move from Andrew's to Stanmore; potted plants grow by themselves; and today's cars only need to be washed.

However, Graydon has admirably prepared himself for medical practice with experience at "Kids" (making all manner of radiological discoveries), and by acquiring a sound working knowledge of the share market. His comfort in the profession is assured.



DAVID JULIAN ITZKOWIC

*"The pupils are equal in size and regular in rate and amplitude."*

After a year in the Physiology Department stimulating feline medial geniculate bodies and getting Honours in these aural pleasures, David joined us in Med. IV.

David developed into a most exuberant, many-sided, yet all-round person. His extremely low laughter response threshold provided any joke teller with a receptive audience.

In the clinical years he proceeded to spend much of his time with photography, the clarinet and university squash, as well as suddenly developing a deep interest in physiotherapy and Pauline.

David's capacity for getting on with people, his sincere friendship to his colleagues and his high academic standards, assure him a satisfying career.



## MICHAEL ALFRED JAMES

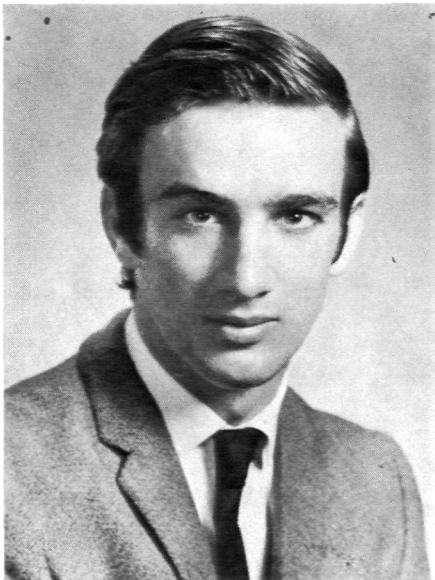
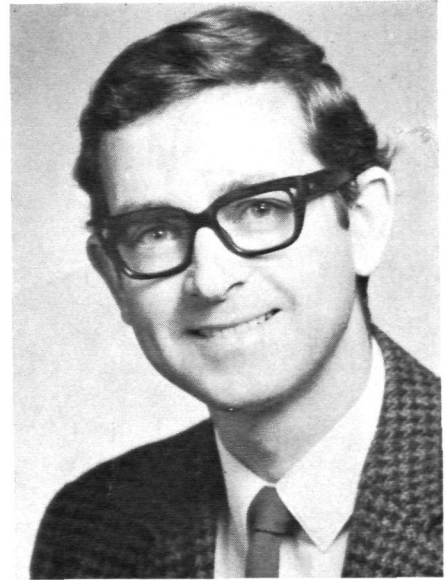
*"Naa, I'm not going to that."*

Insouciant extraordinaire and gentleman of many parts, young James foresook the arts some time after World War II and stumbled into medicine.

Stumbling on, he became famous for his little black car "Melæna", gourmet cooking, exotic flatmates and the Booth Street barber shop where wassail bowls often flowed merrily into the night.

Long debauched carousings in the lesser-known eating houses and musical pubs of the city are random snippets of the broad-based educational programme undertaken by the friendly, bespectacled tippling Irishman.

He's packing his stethoscope, frying pan, Nordic princess of a wife, new-found knowledge and great experience and heading to New Zealand, to the home of apple wine. Slauncha!



## STEPHEN ERNEST JEWELL

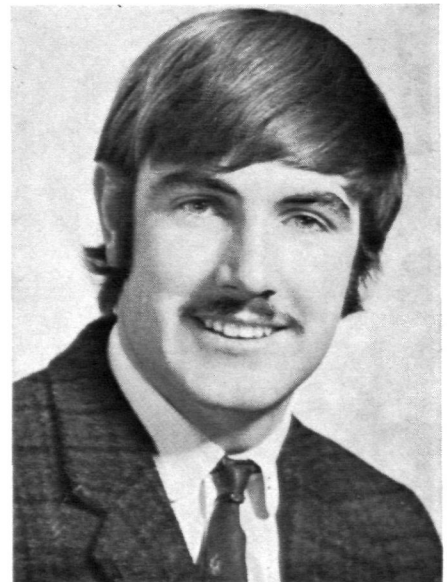
Steve came to University after a very successful high-school career at Fort Street, where he excelled in athletics, German, French and Latin. With characteristic peculiar logic, he thus embarked upon a career in medicine. Never one to allow his vocation to interfere with his other pursuits, he proceeded to develop his piano-playing à la Fats Waller, play the organ in a pop group, and then master the guitar, as well as ride his bicycle all over the country, yet still, somehow, negotiate the examinations successfully.

He amazed and amused fellow students with dissertations on exotic syndromes (mostly self-invented) and never-ceasing enquiry about obscure triads and tetralogies.

With the quick mind and ferocious determination that he possesses, success is undoubted.

## JOHN HOLFORD JORY

It would take an Œdipus to unravel the mystery that was Jory. Whence did he come? Where is he going? Where the heck is he, anyway? Is it true that his granny glasses and hairdo were especially to impress Dr. Hassall? Is he really John Lennon? Who was his mysterious Oriental friend? And what was his response to a tutor's announcement of an early tute? The answers were elucidated last May. . . . They are: Albury; Liverpool; goodness knows; yes; yes; you wouldn't believe it if we told you; "In that case it's hardly worth going to bed then, is it?"





## DOUGLAS EDGAR JOSHUA

*"See you later; I'm going to meet Anne."*

To a large extent, this is the real story of Doug's life. The rest of it is made up of topping the year, a B.Sc. (Hons.) degree, and driving his "almost new" Humber many miles every holiday.

His seven-year courtship of Anne before the final blow in fifth year was a classical example of the seven-year-itch syndrome.

A developing gourmet, he has a strong, almost masochistic love for hot spices and a recently-acquired taste for Hungarian dishes.

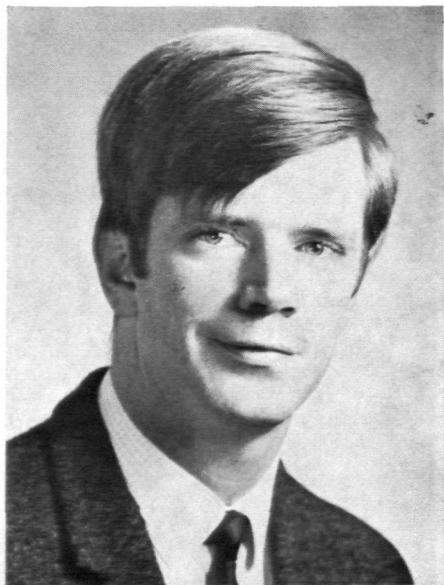
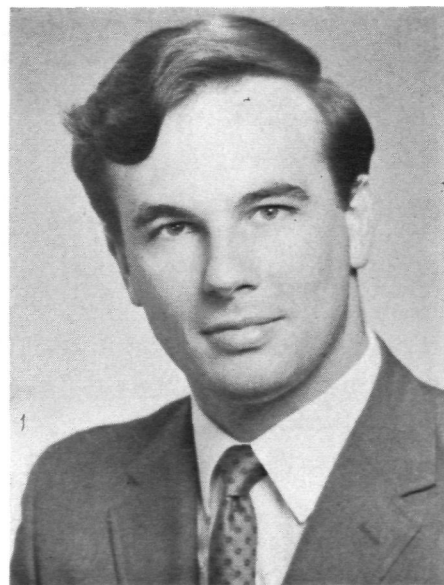
Doug is regarded by his friends as a perfect example of a good example. Despite this, we still think he is a true gentleman and a scholar.

## ROMAN JUDZEWITSCH

This quiet gentleman, whose family left Russia at the time of the Revolution, finally producing him in Germany, drifted into medicine, ostensibly for lack of anything better. He has enjoyed the course, flavoured as it has been with wild parties, frequent holidays and some medicine when time permitted. Consequently, he has been notably inconspicuous at tutorials whenever questions were asked or histories needed to be presented.

A pessimist, always expecting poor examination results, he only surprised himself with his adequate passes.

Roman's inoffensive wit and ironic sense of humour are his characteristics and will undoubtedly help him in a successful future, of which he himself is characteristically uncertain.



## OWEN HAMILTON KENNY

*"An itinerant lithotomist."*

"Mo" arrived, having been stamped on by the King's School machine, and proceeded to meander his way through medicine. Keeping in mind the Dean's statement that the good student was one with outside interests, he participated in various activities both within and without the University without much distinction until he took up bridge. This latter consumed more time than medicine did, but unfortunately he has now run out of partners. He has now arrived at the other end of the course, hoping that the examiners will be suitably sympathetic, so that he may continue his meandering.

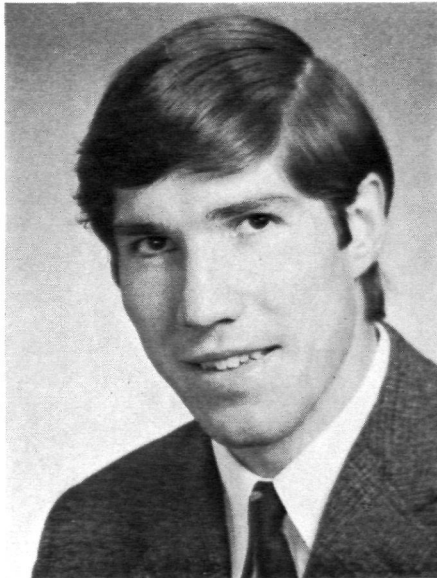
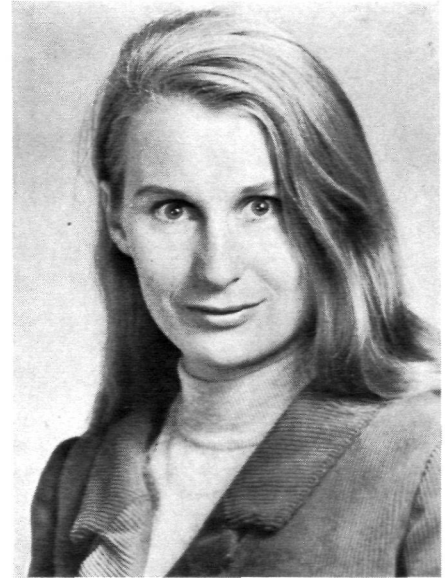


## JILL BRONWYN KING (NÉE WILLIAMS)

To know Jill is to realize how useless neuroses are! Life's difficulties are to be confronted with a toss of flaxen head, merry Jill-laughter and simple wisdom that can waken optimism in the gloomiest heart or debunk the cocksure pretender who fails to gauge the piercing intelligence behind that pretty face!

Near Jill, apathy is tabu—from Sydney High she became sports and social secretary in the early years and won a wide reputation as a "fast to moderate" walker in the march to tutorials, laughing gaily at our dyspnoea from a hundred yards ahead.

Now a young lawyer has won her very warm, very discriminating heart, and in a white cottage at Lane Cove are two people (and their puppy) who can convince anyone that life is great fun.



## WILLIAM ERNEST KOCH

"A little bit of tonsillitis never hurt anyone", Bill told us as he staggered across to P.A. to have a barium meal for his epigastric pain. When we visited him after the appendicectomy he told us about the nurses—"good value, fellas", he said, "they really make you feel like a king." And we were unkind enough to enquire about their mothers. Rehabilitation involved the purchase of a British racing green "mighty" Hillman Hunter—"It won the rally, fellas", and a trip to Germany—"Really good value, fellas—have you seen my slides?"

Always a conscientious worker, Bill still found time for athletics, rowing and other activities at Andrews.

## ELIZABETH FRANCES CHRISTIE LACKEY

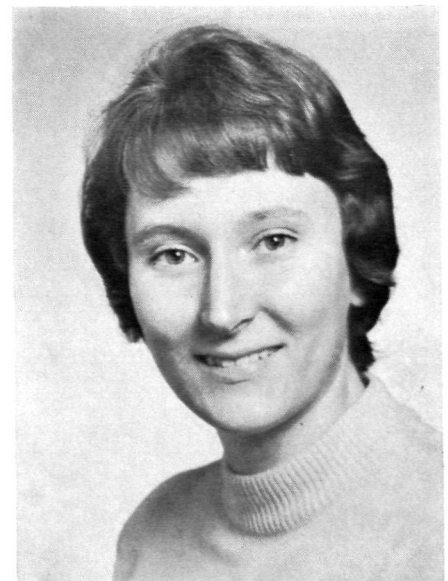
Beth's progress through medicine has been marked by skilful avoidance of the "exclusively medical med. student" syndrome.

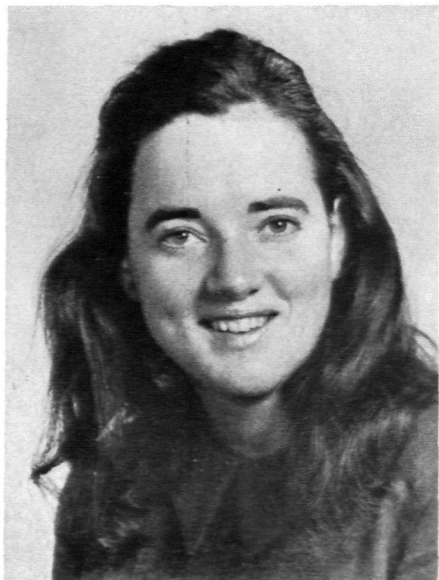
She is ready for discussion—preferably heated—on any topic at any time. Everybody—including Beth—is floored to discover in retrospect that her vehemently propounded point of view is not necessarily her own.

Parties are one of Beth's specialties. She can do Zorba's dance for longer than any other non-Greek and once was seen revolving horizontally at impressive speed several feet above the ballroom floor.

Exams have not disrupted Beth's daily hour at the piano, although this may be a massive denial mechanism.

In case aspersions have been cast on Beth's medical progress, she has been frequently observed both at and awake in lectures.





KARINE LANCASTER

Arriving at University after five year's residence at "Kambala", Karine found herself at Women's College, where she remained until the restricting nature of the College atmosphere drove her forth in junior fourth year to live a more normal life as a flat mate.

From here she was able to attend lectures in varied subjects; and then to further her social education, Karine undertook a mini world tour in her extended elective term, visiting many countries, making a preliminary study of their cultures and extending her circle of friends to the international level. As usual she returned to us in her aged Anglia which has faithfully carried her over many erratic but accident-free miles.

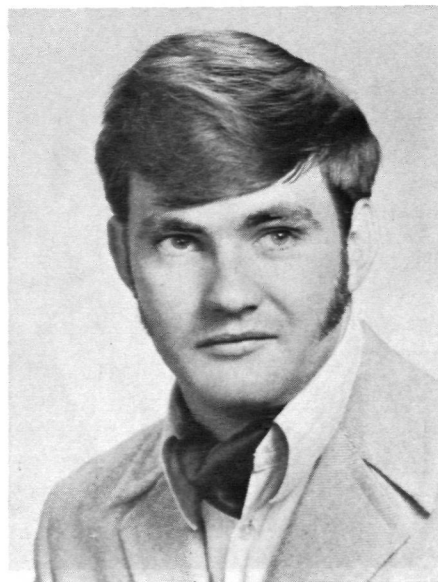
Those of us who have come to know Karine know that behind the retiring front is an alert and compassionate personality.

RODNEY JAMES LANE

This side-levered, bell-bottom-trousered swinger must get his limitless energy from somewhere—but who knows where?

His never-ending zest for knowledge and his very successful attainment thereof stands him frequently in the awe of his colleagues as he describes in detail the features of obscure syndromes foreign both to colleagues and tutors. His explosive sneeze, his confident, outspoken manner, his many witticisms and verbal slips ("circumcized lung lesions") ensure that his presence is always felt by his colleagues—it's a dull tute, indeed, without Rod.

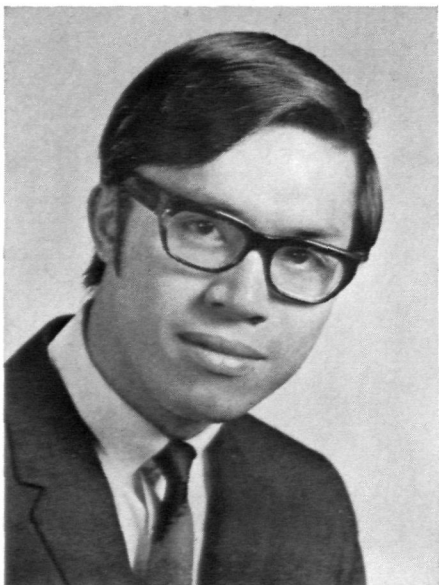
His academic achievements are equalled by his success in sport—his snappy game of squash is not outdone by his sailing ability—and his taste in women (everyone knows his bird). His undisputed zeal, together with his unique energy ensure him a very successful future.



IAN LEE

The behaviour of this strange Asian form of life has intrigued anthropologists since it arrived on our shores two decades ago. Often observed running in endless circles around some well-worn oval, it migrates in winter to the colder climates of the snowfields while summer months find him skimming over the surface in the wake of a power-boat. Its mating habits are equally curious, showing no seasonal variation but remaining at a constantly high level throughout the year.

Great skill and cunning manifest when trapped within the four walls of a squash court where much aggressive behaviour is uncovered. Nonetheless, the enquiring nature, adaptability and likeable manner ensure the propagation of this species and its future success.



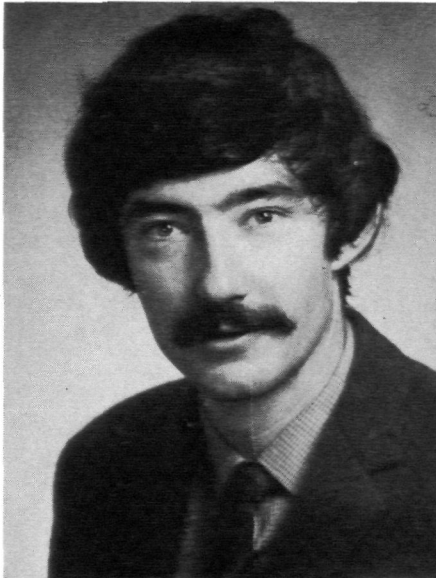
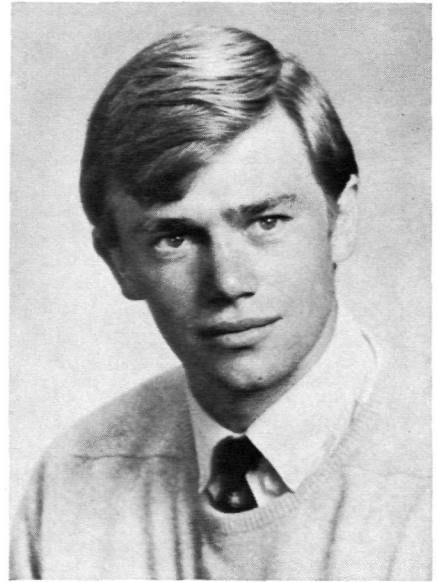
## PETER KIRTON MACINTOSH

Blond, baby-faced, red-nosed "Gremmy" arrived at University from Riverview and the surfing scene in 1964. His ready smile and laugh made him well known and liked by his fellow students, various young maidens and bartenders alike.

After his early years his life began to settle down somewhat as his studies began to take a more prominent position, and as he developed (he liked to think) some finesse in social activities. A relapse, however, found him perched chastised on the Dean's couch.

Bridge, golf, football—an established five-eighth—brought sedateness to his later years. To cap it all he now plans a more lasting relationship after the final exams.

In both tests we wish him good fortune.



## RICHARD HUGH MARCHANT-WILLIAMS

Entered Medical Faculty in 1964.

Completed B.Sc. (Med.) 1967-1968.

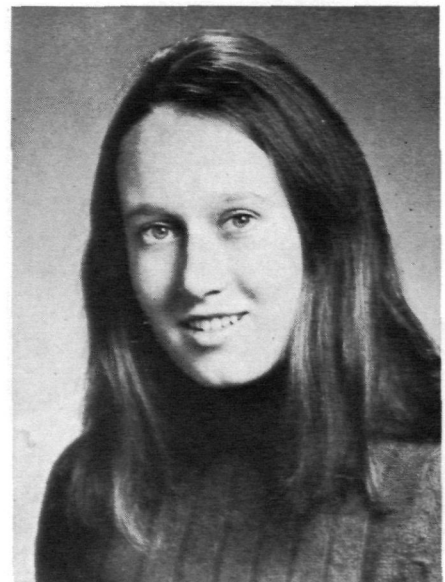
Graduated from Medical Faculty in 1970.

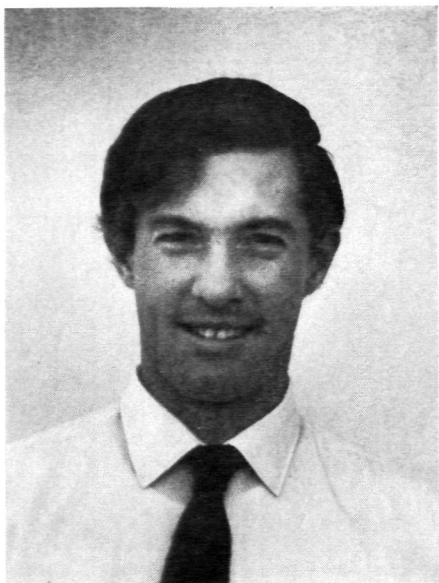
## GILLIAN SHIRLEY McCONNELL

In 1965 Gillian arrived fresh out of Ascham to commence medicine. After spending her preclinical years at Women's College, Gillian finished her course somewhere between Darling Point, Richmond and Mollymook—she even did one senior term from Brewarrina. At the end of fifth year an unallocated term was spent in Europe, supposedly at St. Bartholomew's.

Mildly diligent when the mood took her (usually just before exams) she had no trouble with exams, although she did have some trouble with tutors.

We wish her well and thank her for her refreshing, vivacious and very feminine company on our long journey through medicine.





## ROBERT BRUCE McCROSSIN

They say "Ask the quiz kid, he'll tell you." "Listen, boy, the mind boggles (building up to a crescendo) . . . absolutely boggles at the possibilities." The boundless enthusiasm continues on without decrescendo.

Ever willing to expound his latest theory on anything or chastise one on the simplicity of extrapolating the basics of pathology, physiology and biochemistry to clinical practice; Bob was always able to dramatize and simplify any complexity in his ceaseless prologues.

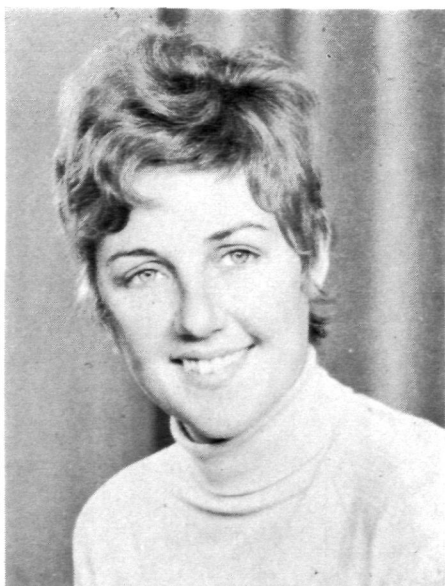
Sailing (a Dutchman), skiing, squash and a B.Sc. in pathology drained some surplus energy as an undergraduate.

What happens after graduation is sure to be spectacular—with all those extracurricular activities, an exuberant personality and inexhaustible energy, what else could we predict.

## HELEN MARY McDONALD

*"Please, Sir, what station is it at?"*

Despite her natural feminine modesty, Helen is a girl who has been noticed. Initially somewhat ill-prepared for the seamier side of life, Helen withstood a Commem. kidnapping and the subsequent police investigations in fine style. The only lasting sequel was a certain attraction for men in uniform which reached its peak during the clinical years when she enticed the entire Cleveland Street fire brigade to her Brown Street bathroom on several memorable occasions. Naturally we were relieved when this fad passed and Helen resorted to much quieter liaisons with elderly general practitioners, both metropolitan and country. But more than these highlights, it has been the impact of a delightful girl, overflowing with warmth and endless enthusiasm for impassioned debate that we have enjoyed.



## JULIA ANNE McKEOWN

*"Hang on, I'm just taking out my contact lenses. . . ."*

Julia's pleasant, unassuming manner has made her popular both in medical circles and in Wesley, where she was amongst the first women in the newly co-ed. College. The proximity to P.A. prompted a transfer from Vinnies for final year. Although her temperamental red Honda had provided a good excuse for missing tutorials, she had also been heard to say "The rest of the group works too hard!"

Julia loves skiing, rowing, wining and dining, percolated coffee and Frenchmen, and she applies herself with vigour to these pastimes. (Her main ambition at present is a residency near the snowfields!)

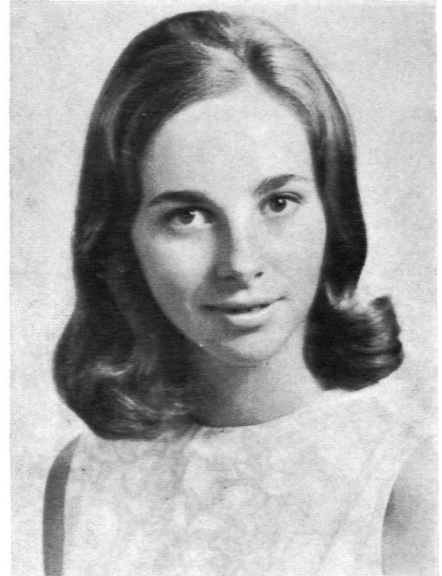
Her friendly, natural approach assures her of success in the future.

## ELIZABETH JOAN MORGAN

Elizabeth departed from the depths of Kenmore in 1964 after a distinguished career at Goulburn High. Following a year at A.N.U. she saw the light and decided that the Women's College had far more to offer than the colder atmosphere of Bruce Hall.

Since settling in, Elizabeth has acquired the odd medical fact, many friends and a shiny new Vee Dub—the latter resulting in weekly trips to the Y.M.C.A. to attain proficiency in motor maintenance.

Liz has the happy knack of cheering up both her contemporaries and the patients with her delightful smile, and we are sure that her quiet, efficient manner will assure her success both in and out of the medical profession.



## THOMAS MOSS

*"Can you explain that, Doc?"*

Tom's desire to get to the root of things may frustrate his teachers but it exemplifies his attitude to the workings of the body in disease. Tom is an enigma. While on unallocated term, interstate, his apparent somnolence during the day would change dramatically at night. Tom's evening jaunts kept all surprised.

For relief from complete absorption in medicine he may be seen running along Bondi Beach, regardless of the weather. Among his many girl friends he found in fifth year Mariana—habit forming but non-addictive.

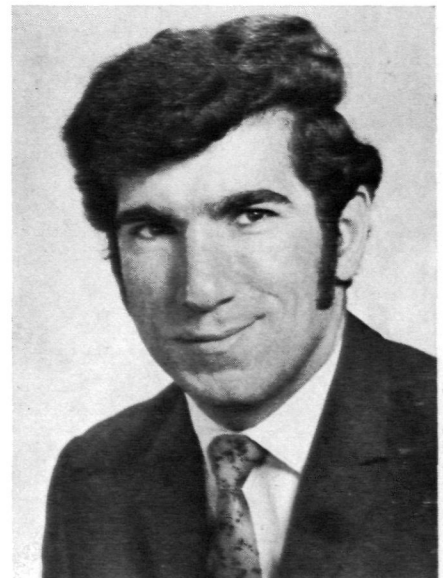
Tom's future career in his profession is sure to be full of surprises and success.



## FRED NASSER

To write about Fred is to describe a friend, or how to recognize an Arab when you see one. If one is to look beyond his cedar-like features and unrecognitive of his benign Lebanese grin, there is always his name badge pinned casually on his unstarched white coat. For such is Fred, a warm-hearted guy enjoying the meat of life without the trimmings. He likes to drive his G.T. Monaro without the optionals, pulls his boat to fishing or water-skiing on a trailer without the bearings.

Standing above all else is his astute awareness of where he stands among the complexities of life which he has the art to simplify. This was exemplified when his namesake was engaged in a tussle with a certain group over land rights near "Suez Canal". Fred, constituting the total contingency for his side in the campus threw down his gauntlet (orally) in defence of his Motherland's principles and won the admiration of his opponents, which constituted the fleshy proportion of the yen, because he went over with goodwill and well-meaning.







## DAVID NEWMAN

Dave was born in France, and at an early age came to Australia. He was educated at Daceyville Primary School and later at Sydney Boys' High School. At first he entertained thoughts of doing law, but finally decided on medicine.

Throughout the course he maintained a mature outlook, with rigid principles and high ideals.

He never failed to amaze his fellow students by the way he could casually flick his pen into the air and catch it, in rapid succession, while concentrating on lectures.

Extra-curricular activities included youth club participation, an avid interest in soccer, and his love, Gizela.

Most tutors and, indeed, most of his fellow students, were perplexed by his former surname, Chrepacz; few, if any, ever pronouncing it correctly. Thus he changed his name to Newman at the end of final year.

## DIANA ELIZABETH O'CONNOR (NÉE GARDNER)

*"How about the gamma globs?"*

Besides her incredible ambidexterity, Di is mostly characterized by her understanding nature. In the wards the general mood was invariably elevated by her warm smile and sincere words. At Crown Street she was a most avid baby-cuddler.

A drastic change occurred in Med. IV when Mike appeared on the scene. Romance blossomed and that was that—a true fairy story. Since then life has consisted mainly of getting dinner over in time to do some study. However, between St. Barnabas, Ashfield and marathon medical tutorials, Di has managed to keep a smile on her own and Mike's face.

We all feel that Di's success is assured.



## MICHAEL CHRISTOPH O'CONNOR

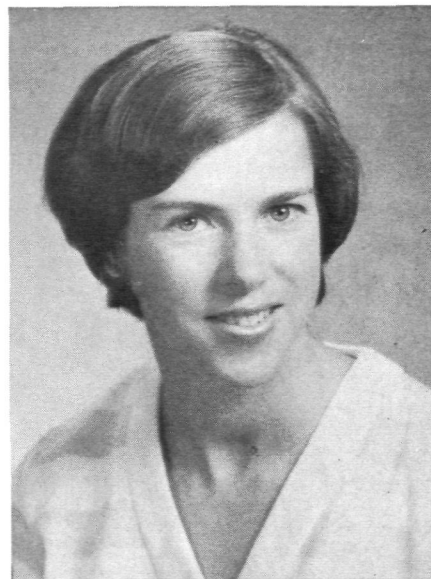
Perhaps it is Michael O'Connor's Irish blood which drives him to say what he thinks. His pragmatism has often been thrown up at our teachers: "What's the practical application of this?" Such honesty and width of perspective is a bracing change in a system which encourages submission and microcosmism.

Michael happily acquired a wife in fifth year who shares some of his other qualities—gentleness and kindness towards patients and the ability to work. The conscientious O'Connor often arrives at tutorials with a wan and drained look, and it could be due to all the swot, but on hearing those jokes we wonder if the pallor doesn't spring from that species of activity known by the ancients to cause anæmia.

## ROSEMARY ELIZABETH PIGGIN (NÉE LYNE)

The year 1965 saw Rosemary Lyne's entrance into the Faculty, followed by a steady progression through the early years, with occasional flings on hockey field and squash court.

In fourth year she and Stuart Piggin—"a very nice Historian"—were married and took up residence near the hospital; and since then many a tutorial group wilting in academicism has been refreshed by a consideration of the problems of drying washing on a small balcony, or of making un-mushy sandwiches. Now Rosemary is preparing to go to London, where she anticipates dividing her time between home and hospital—proportions unknown!



## ANTHONY WALKER QUAIL

Tony came to University in 1965, ex-"Joeys"; he took up residence in St. John's College where he lived throughout his course. He was extremely keen on medicine from the outset, though application has been somewhat lacking due to a ready love for certain other good things of life.

A keen sportsman from school days, he is rather bulky in frame; his nickname "Kyba" has something to do with the Khyber Pass. He has been prominent in rowing and football at University and is playing now in the first XV.

Though he vowed this would never happen, we have just heard that he has become engaged. Best of luck to him in this, as in all other ventures.

## ADAM RAPAPORT

*"Oh no, when was that tutorial on?"*

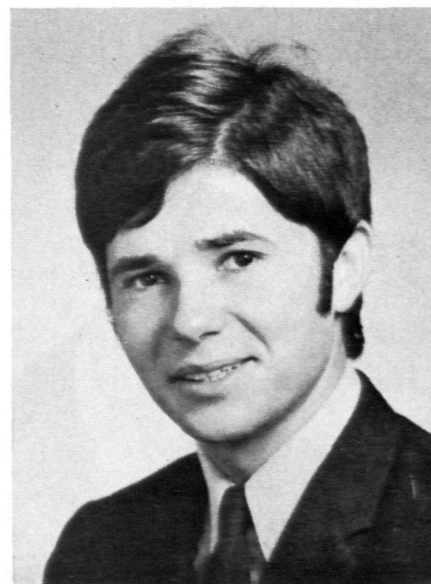
Adam was one of those remarkable personalities to whom the art and practice of medicine seemed to come spontaneously. Appearing calm and relaxed at all times, he baffled us with vivid descriptions of obscure syndromes.

If he wasn't in the wards you'll find him in the common room sabotaging a bridge game or reading the latest stock reports.

Never to be seen in the vicinity of a squash court, he managed to remain hale and hearty but we are kept guessing how.

Spending elective term in the New Guinea highlands, Adam returned babbling in Pidgin and with a few tall stories that kept us entertained.

We sincerely wish him well, knowing that his resourcefulness and craft ensure success.





PHILIP JOHN RAPSON

*"The natives call me Tau Bada but you can call me Phil."*

Emerging from the steamy jungles of New Guinea to study "white man's medicine" and armed with his trusty radiator (which, rumour has it, has operated non-stop for six consecutive years), Phil settled into Paul's. From there he operated the notorious Rapson "You break it, I'll repair it" service. His results in this enterprise varied alarmingly from complete cure to complete post-operative demobilization of a car whose only symptom was a faulty horn.

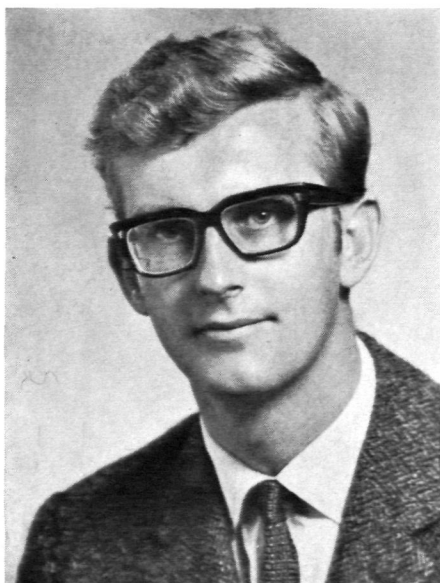
On those rare occasions when he isn't under the bonnet of a car or gazing enraptured at an anæsthetic machine, Phil shows the same analytical approach to medicine.

No doubt in the near future, the Rapson modification of the heart-lung machine will be in common usage.

TENGKU ABDUL RAZAK

Tengku Abdul Razak came to Australia straight in as a first-year medical student. Like most other Asian students, he came from a relatively sheltered and loving family life. But he soon settled down to the task. It did not prevent him, however, from courting and settling down with a lovely girl of another Asian country.

Razak is a quiet student with a friendly disposition. He is most helpful towards his friends and will always help them when in difficulties. He will return to Malaysia enriched by his experiences in Australia and will be extremely proud of his heritage as graduate of Sydney University.



MICHAEL GERARD RYAN

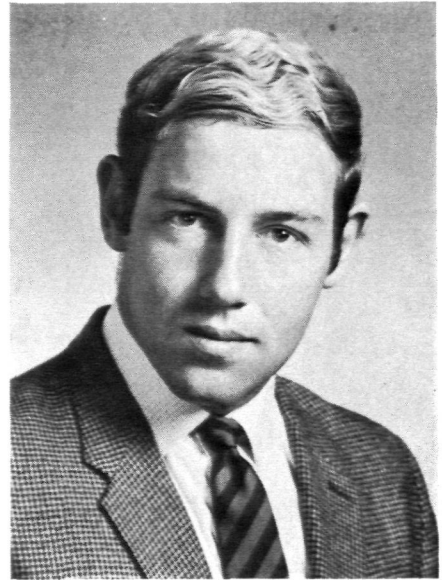
Michael was seen as a very keen student in first year. He soon, however, succumbed to the life of St. Joseph's College during third year; and then came junior IV. Michael's new-found freedom exhibited itself in many ways, including a brief counselling session with Professor Blackburn. Around this time he became interested in the Mallory-Weiss syndrome, which he superbly demonstrated to a keen group of students celebrating his birthday.

As a variation from his studies, he gains much enjoyment from the "Grose Farm", women and punting, all of which meet with little success. Judging by the past, the future for Michael should indeed hold much variation.

## DAVID PAUL SEVIER

After receiving his schooling at Shore, Paul followed in the family footsteps and arrived in medicine. The early years were passed with time taken out to row for University, but it was not until he left Pymble for Paul's College that his results took on a new and improved look. This was largely due to his vigorous and demanding schedule that, amongst other things, allowed time off for a nightly jog and to listen to "Yes, What!".

Unfortunately, he was born on the wrong day and the Army has requested Paul's company for TWO YEARS; but, wherever he goes, we know that with his sense of humour, his sincerity and his conscientiousness, he can only do well.



## MOHD BIN KASIM SHAM

Mohammad Sham came to Australia from Malaysia in 1965 under the Colombo Plan. Throughout the medical course he has been a very keen and industrious student.

Probably considered by the honoraries as a keen little fellow, and forgotten by confused registrars, he nevertheless has a sense of humour proportioned to the difficulties of an Asian student studying in Australia.

Sham has worked as hard as anyone, sometimes ignoring his other appetites, occasionally satisfying them; sleeping through expendable lectures, arriving late when unimportant, but with many hours in the wards, Sham will return to Malaysia the very semblance of a competent Prince Alfred graduate.

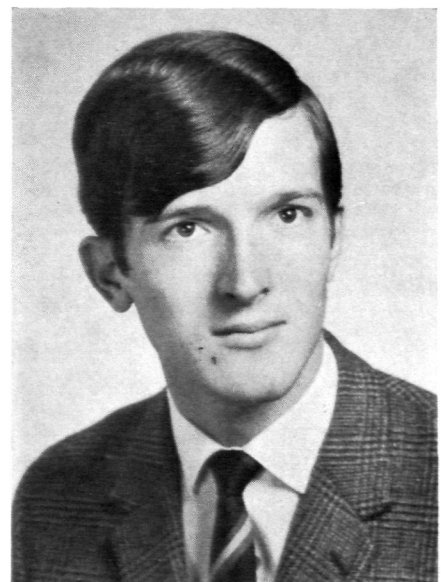
## MARK STEPHEN SHUHEVYCH

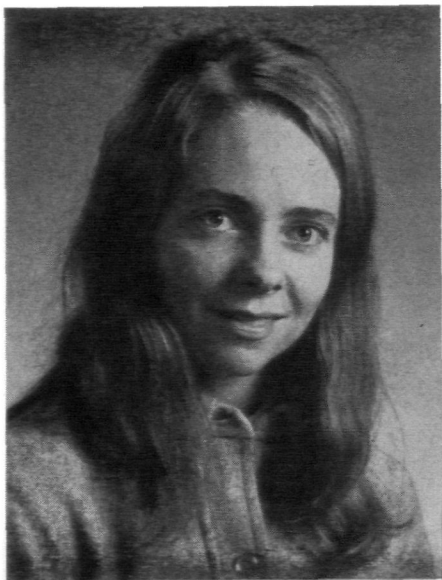
*"A wise physician skilled our wounds to heal,  
Is more than armies to the common weal."*

—POPE (*Iliad*).

His school was Grammar. His name betrayed his Ukrainian ancestry, and glimpses of lively Cossack dances occasionally spun in the corridors, and of his historical tomes, showed this was not completely forgotten. What, then, set his mind to travelling about New South Wales in search of historical relics, wandering from town to town, identifying with our past his sense of a lost past would, perhaps, have explained his attachment to his own town of Liverpool, for he was not deterred by the daily long trek to Sydney, where his arrival at tutorials was not always well timed.

Thus persistently and cheerfully he progressed through medicine with scarcely a stumble.





## JENNIFER JANE SILVERTON

Undiscouraged by her family's advice that medicine isn't for women, Jennifer entered the faculty on leaving Ascham and methodically set about proving them wrong. Her first four years residing in the Women's College are shrouded in mystic—although she was noticed to emerge from its hallowed walls to attend lectures regularly, and to her interests in music and the performing arts.

Clinical years increased her intrigue, but she has been known to admit to enjoying a round of golf, a week at the snow and that solo trip to the East Indies.

The inviting grin and feminine determination we have come to know ensure her success in medicine as well as satisfaction of her desire to travel.

## SUSAN DEL SMYTHE

*"What did I miss in yesterday's tute?"*

Sue is that quiet, unassuming bird with hair of very variable style and colour who always does better in exams than anyone can foretell. She is also the second-ever bird to brave a B.Sc. (Med.) in neuro-physiology (because "it wasn't as far to walk").

Besides her voluminous output of knitting ("I'm freezing"), her marathons around Victoria Park, she is probably best known for her physiological lid-lad.

After doing first year at A.N.U., Sue set out to achieve the world record for pedestrian journeys between the old Kentish pub (Women's Hall) and the Med. School.

Sue's sharp intelligence and delightful personality will surely lead to her success in whatever field she chooses.



## JOSEPH STEG

"Peppa" entered the Faculty from Sydney Boys' High and very soon realized that medicine could be a comfortable sideline if the stockmarket did not prove profitable enough. With foresight and incredible luck he not only amassed a fortune with his transactions, but managed to pass each year with flying colours at the same time.

His carefree, easy-going manner provided much amusement for his colleagues and frustration for his tutors. Never one to interrupt a bridge game for lectures and tutorials, he often demonstrated the "Steg-method" of physical examination.

Provided the examiners in the finals recognize his undoubted potential and disregard his unorthodox manoeuvres he should enjoy much success in his chosen profession.

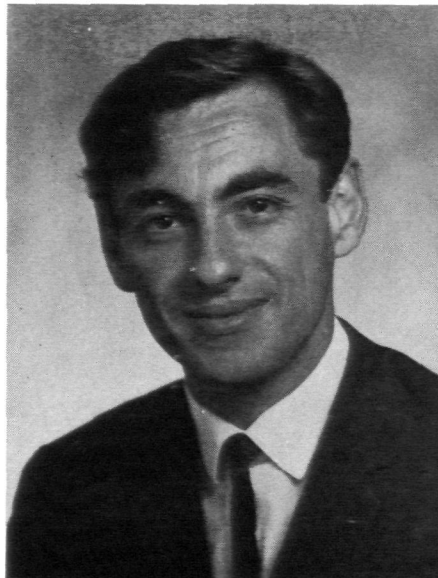
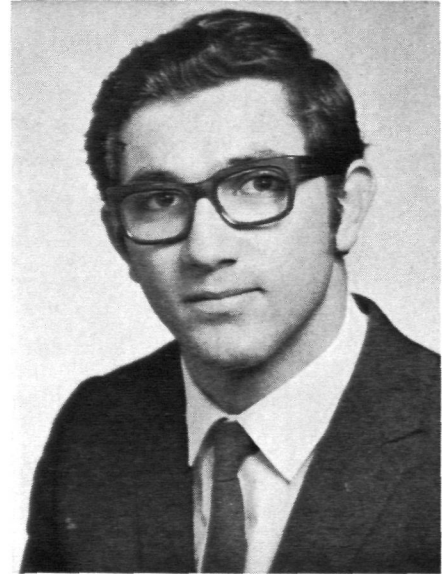


## PAUL RICHARD STEPHENS

Entering the Faculty in 1964, keen about medicine, Paul was unwilling to bash books so found solace in the Union snooker rooms. He played inter-'varsity squash and also represented in alpine skiing.

He is known in tutorials as P.R.—probably for his digital dexterity rather than his organizing ability.

Spending his elective term in a district hospital in New Zealand, he managed time off to learn to fly (solo in four hours). He kept his obstetric hand in while in New Zealand, an interest which may lead him to some future pre-occupation.



## WILLIAM SUSSMAN

*"It's good value."*

After his stay at St. Andrews (where he "acquired" his "habits") Wild Bill "came to town" in fourth year and made his "debut" at the memorable year dinner. Many members of the academic staff and a prominent official of the A.M.A. will NEVER forget Bill.

The clinical years saw him dubbed "King of the Midwives" and "Wild Bill". When there was study to be done he could always be found in Schlink—day and night—he was the "honorary" attached to the "unit". Bill was constantly in the fore—even to the extent of his position in grand rounds.

He has always shown an intense passion for life and living and a love for the finer qualities in life. Travel and people are his greatest interests. With his true sense of values, his manner and his irresistible drive he will certainly be successful.

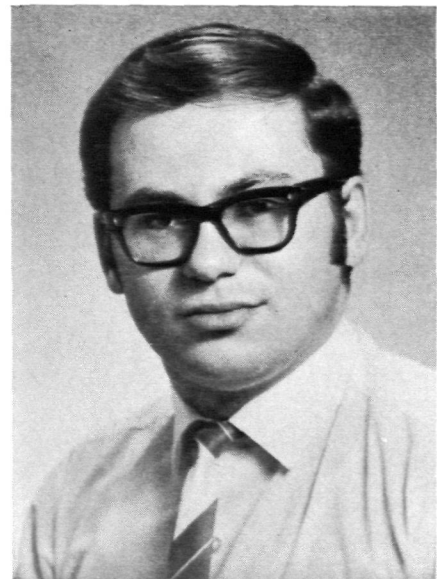
## JERZY GEORGE SZWARC

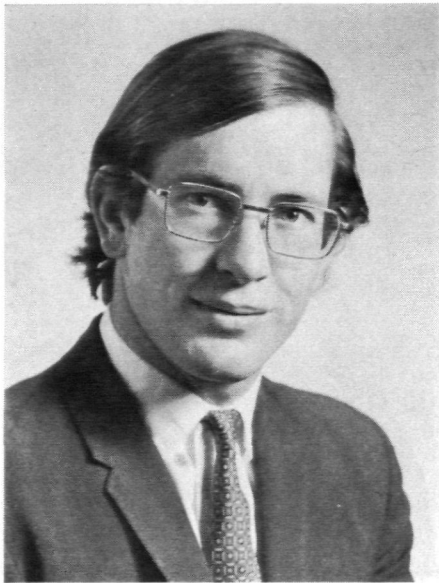
George entered the Faculty confident, boisterous and with a thick foreign accent, and left in the same way.

Though graduation was inevitable, so he said, he was not quite able to avoid skirmishes with his tutors, including one that led to a two-day war; predictably he lost. Nevertheless, he impressed tutors and colleagues alike with crisp, concise replies and clinical acumen, all this drowned in that accent.

Outside the field of medicine George is known mainly for his love of bridge, antiques and undoubtedly the most ridiculous game of squash imaginable. All three have become much subdued since he entered the bliss of marriage, no doubt replaced by new-founded hobbies.

Still the assets of strength of character and rudiments of knowledge may make him a damned good doctor.





ALAN RICHARD TALL

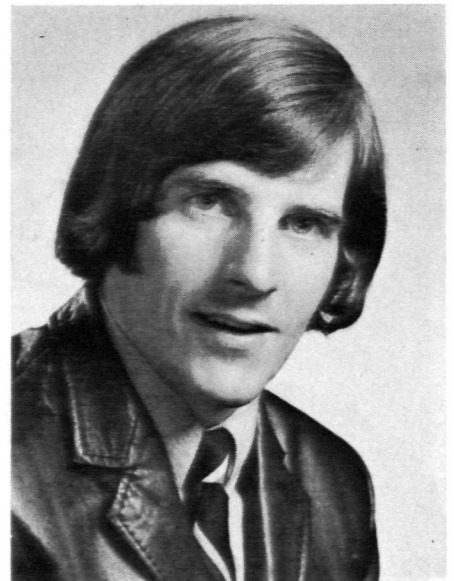
A significant part of medicine is an art; a significant part of Alan's art is medicine. An incorruptibly unflattering sensitivity towards the human condition, incessantly fuels the furnaces of his imagination. While some idly spin the cylinders of speculation presuming to pull an original combination, he struggles to dilate, as did such famous physicians and Schiller Keats and Chekov, the stricture that language imposes upon the expression of thought. The reader is warned against the gratuitous rumour that Alan has transcribed Harrison into 1500 iambic canti, hoping to make memorization more appealing to his literarily less-gifted colleagues.

JAMES NOEL JOHN TAYLOR

"Allow me to introduce friend James, educator of the already educated, amateur historian of his own recent history; connoisseur of good food, good wines and musical women; poet, philosopher and literalist of note and politico of future notice and member of what faculty?"

James is pleased. He leans forward in Rodinesque pensiveness. Eyes give hints of philosophy. Hands have a distinctly theological movement. Smile is softly arty. The garb, however, supplies the answer. Leather coat donned nonchalantly over a navy tee-shirt, blue bell bottoms, black hose and maroon casuals. The obvious garb of an advocate of no mean mental ability.

The lady's eyes reveal decision. Moist lips part over pearly teeth as she softly rounds the syllables: "Why you're a pop star", she says.



HELEN JEANETTE TELFORD

*"It's all character moulding."*

Based in Women's College, Helen spent first year discovering the delights of Newtown. Her life in the country and as a boarder at Kambala had not prepared her for the wiles of her anatomy table in second year. After this initiation she learned to see the funny side of any situation and amused her friends with stories of her experiences.

It was with great dedication that a heavy-lidded Helen would, when she could, grimly set out to attend her morning tutorials, but by the afternoon she was always ready for a cup of tea and a hand of cards.

However, since returning from a hectic term in New Guinea, she is now desperately attacking final year.

We are sure Helen's cheerfulness and strength of character will ensure her happiness and fulfilment in life.

## JOHN FRANCIS THOMPSON

An English upbringing, modified by harsher exposures on Norfolk Island and in Western Australia combined to produce in John an enigmatic mixture of staid conservatism and mad-dog activism. Not many Englishmen spoil their tea with peanut butter/jam sandwiches. Less walk hundreds of miles through south-west Tasmania catching trout on hand-lines and lobsters with trout nets, and only one has ever been accused of wearing a medical professor's underpants by the outraged owner in a grass hut in New Guinea! All this and more, from North Queensland railways to Bali Hai, by a quiet, bespectacled Wesleyan B.Sc. (Med.) who goes his own way (often to Strathfield), and who does his own thinking. Not really bad criteria for a good doctor!



## MARGARET ROSAMUND THOMSON

*"What makes you think I've got any convictions?"*

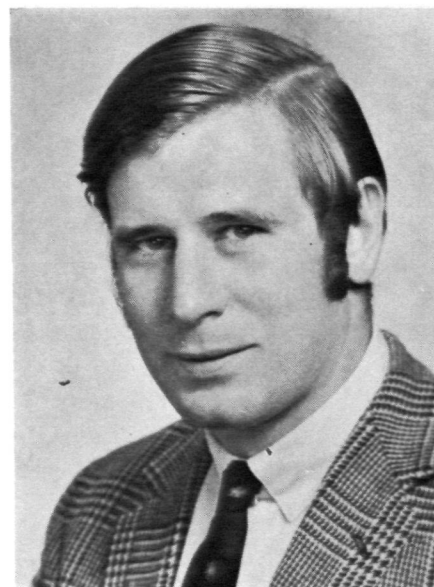
Ros is noted for a feminine delicacy of nature demonstrated by a propensity to blush at the least provocation, fainting in operations and bursting into tears in the ophthalmology viva. At other times "Tommo" will be found at the oars of a boat or championing the rights of women against housework. Academically Ros was the first to recognize and describe "examinosis", a common clinical entity among her friends.

Ros has, we fear, broken many hearts by marrying Peter Kesteven. He intends to design wonderful hospitals fit for such a wife to work in.

Knowing Ros' talents and personality, we predict her future success and happiness, and add our good wishes.

## TERRANCE VAUGHAN TURNBULL

When he started medicine in John's he passed over commercialism and settled for intellectual boozing, jazz playing and books. Med. seemed to offer the individual freedom for those loathe to work and, like Robinson Crusoe, only came in Fridays. Good man, failed second year. Almost resident tutor in histo-embryo. Almost Long Bay resident—assault with deadly "Honi"—indecent language. "But your Worship, I pronounce my G's." The experience made him disenchanted with active political participation and, combined with the disillusionment of med/surg., led to early marriage. The Nowra dairy farmer chose her, well endowed, and a fellow colleague. A changed man. Credits in fifth year. What next? Seems I've lost a drinking mate, but gained someone to treat my complaint.





## JUDITH ANN TYLER

For those who agree that the decor of the Medical Faculty owe much (or all) of its colour to our female constituents, then Judy has certainly contributed over and beyond the conventional hemlines, above which she displays indeed a refreshingly different dress every day.

Besides this insatiable taste for gear, her bubbling personality and adoration for pin-ups of pink elephants, Judy has also come to be identified with her pleasantly unique choreiform laughter.

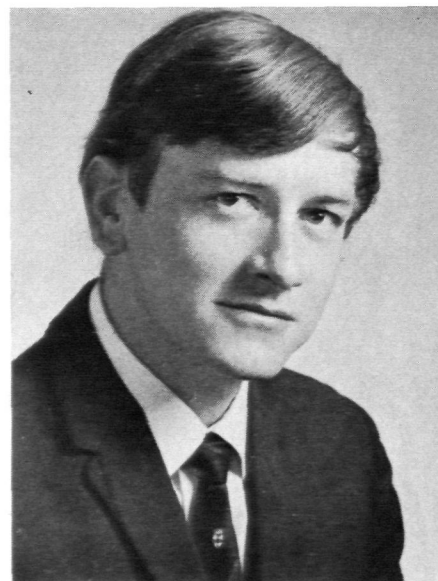
Musically minded from way back, she has a natural sense of harmony; either in scampering off to a tute or running Chopin through on the piano. Her movement in allegretto is particularly enticing. But of late the finer arts had to make way for serious medicine, and for Judy to become a paediatrician is her ambition. We think it's due to her mother instinct—supporting evidence being the glitter on her left ringfinger—and we know she will go far in a future that holds many promises.

## ROGER FRANCIS UREN

*"S.F.A.? What sort of test is that?"*

Of puckish manner and original idiom, Roger has the undeniable gift of understated humour. From Wesley College and environs to Ashfield, wider environs and back again, he captured life with the zest of a troubadour yet made no affectation of it. His student career was fraught with the difficulties of Winchester practicals with Kellerman—"What did you say your name was?"—the third-year dry dribbles, irate obstetric registrars and obnoxious bus conductors.

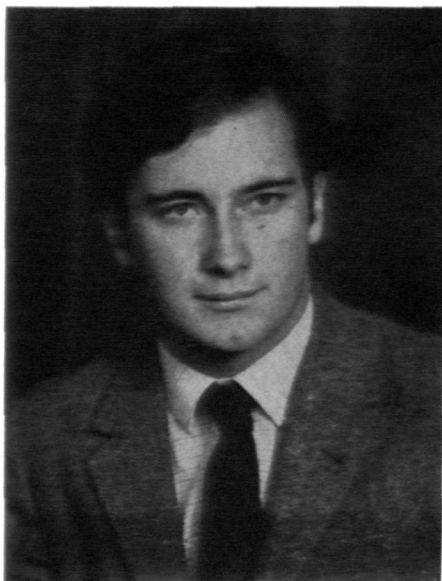
A contrast to some of his more preoccupied med. mates, he was not above seriousness when the occasion demanded. Medicine may be hard work but philosophy and nonsense in the right ironic proportions make not a bad doctor.



## PAUL JOHN VANDERLAAN

Paul, a product of A.N.U., 1965, came to Sydney and St. Andrew's College in 1966. Although medical subjects were frequently thought about in the ensuing four years, there were some other things to be attended to. Sixth year seemed a long way off. When asked about any significant events, he quickly brought to mind the details of a not-well-known 15-hour pin-ball marathon and the pleasure he had in sitting in on 48 hours of exciting pontoon in Room 9, St. Andrews, 1967.

Although infrequently seen at R.P.A.H. before 1970 and anywhere else before midday, he claims that he could have been contacted, if necessary, at Longdown Street between the hours of 2.00 p.m. and 2.00 a.m.

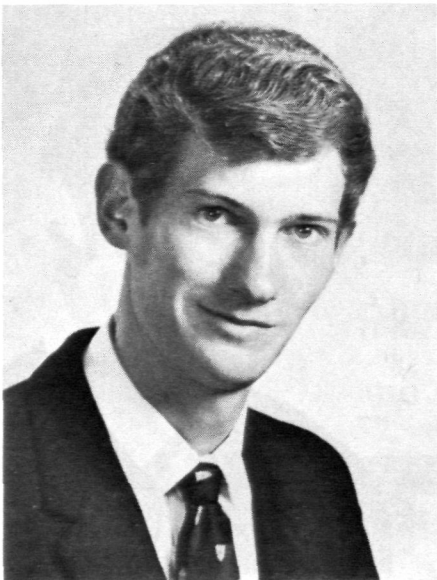
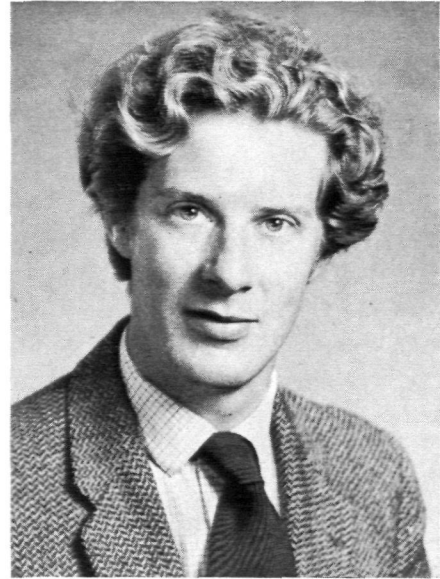


## CHRISTOPHER JOHN WATTS

*"Moody madness, laughing wild."*

—THOMAS GRAY.

A figure from the mysterious haunts of Paddington, Christopher's salient features are his outcrop of curly, congested hair and the dilated ends of his blue corduroy flares. Decorating his chest is an outlandishly colourful tie which has often provoked violent reactions from tutors and students alike. His appearance complements his character, for Chris is endowed with an exuberance that has not infrequently frightened the wits out of his fellow students. Many a time has he broken the quiet conversation of a tutorial group with exclamations such as "Ah! I've got it!", or "But what's the mechanism?". Nevertheless this exuberance has helped him gain his B.Sc. (Med.) and will certainly be of much benefit to him in his future career.



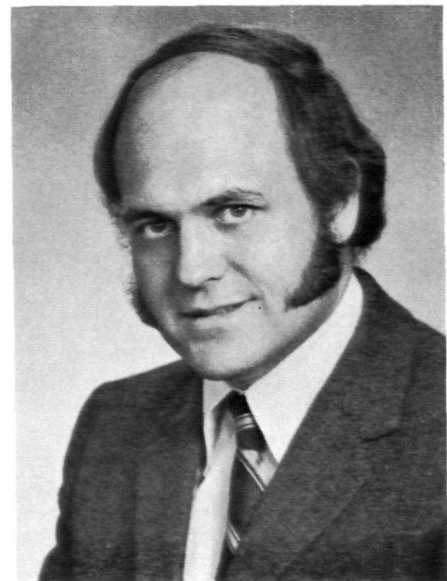
## FREDERICK HERMAN WEGENER

The first time I saw Fred I almost didn't. Enough said. . . ? He had arrived, he said, to undertake yet further academic pursuits of one type or another. Good music, good wine, a list of the second greatest movies ever made and a life-size autographed photograph of "th' Duke" punctuated the more esoteric side of his existence and softened the rigors of an otherwise ascetic vocation. His prowess on the sporting field and at the tennis table go without mention.

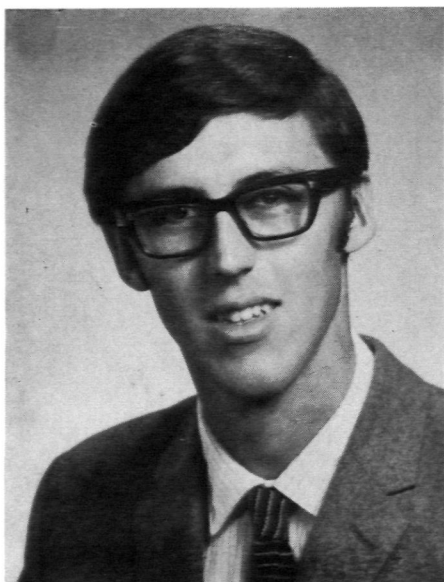
But some few questions remain unanswered. Did he and Brownlie offer to fight Dr. Perrott? Has he ever experienced that ol'-time religion? Who taught him how to poison his friends with martinis? No one knows for sure.

## ROBERT FAULKNER WHITE

Debonair, swashbuckling, international playboy and gigolo. Sportsman extraordinaire and occasional student. Of late sporting loud shirts and less hair, perhaps due to a love affair with an ancient sports car. Never known to look at the gloomy side of things. An evil chuckle as he passes an obscene remark. Spends winter playing with Knox old boys. Part-time at St. Paul's College, where he learned to play the guitar and sing dirty ditties. A mature man (as he often points out—"thinning hair is a sign of virility and maturity—something you'll never have, swinger!"), who prefers Scotch and Camels. Has been known to express a desire to do neuro. Much beloved and respected by his mature colleagues, he is sure to leave his mark.







ROGER DUDLEY WILLIAMS

Roger has, in the past six years, demonstrated most of the symptoms and signs that typify the euphoric, depressed, sympathetic, macabre, lucky, poor, weebegone and aspiring modern-day medical student. However, unlike many, he will not graduate with the frustrated feeling that somehow it all must mean something; but rather that ten thousand previously unrelated facts are now in perspective and ready for application.

Roger's ability to see humour even in the driest subjects has always stood him in great stead; evidenced by the various semi-official positions he has held, usually after election in his absence, or with only one vote against him (his).

And, of course, having a father and a brother in the profession has not made things any easier; still, it probably hasn't made them any harder.

PETER CHARLES WILSON

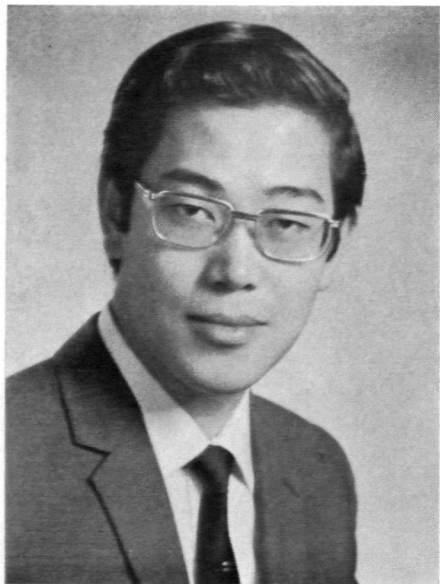
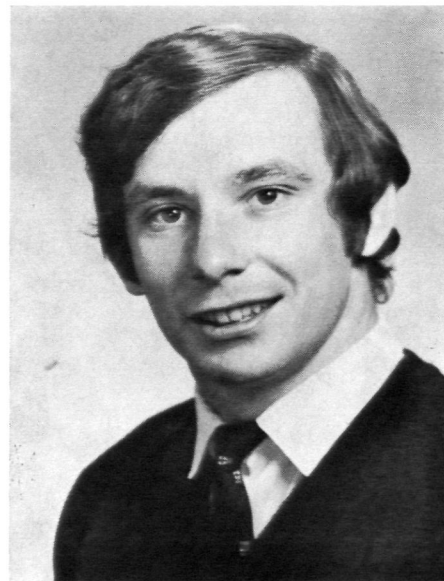
*"Cirrhosis, eh? . . . I always thought it was sclerosis."*

Wils arrived in 1965 from the obscurity of "Stanies", took up residence at Johns and, in final year, moved closer to Royal Randwick.

With a decidedly obsessional and probably mythical first-year pass, he began progressively to settle down to a more sedate academic pace, eventually realizing exam attendance is really the only *sine qua non* of graduation.

The vista of his extra-curricular activities is immense, but first-grade football has taken precedence over the none less important activities of athletics, pontoon, skiing, bridge, marbles, etc.

Pete must succeed; anyone would who has his genuinely friendly outlook, his amazing memory and his ability to give a reasonably informed dissertation on a multitude of topics about which he will admit that he hasn't the slightest clue.



RICHARD YIP

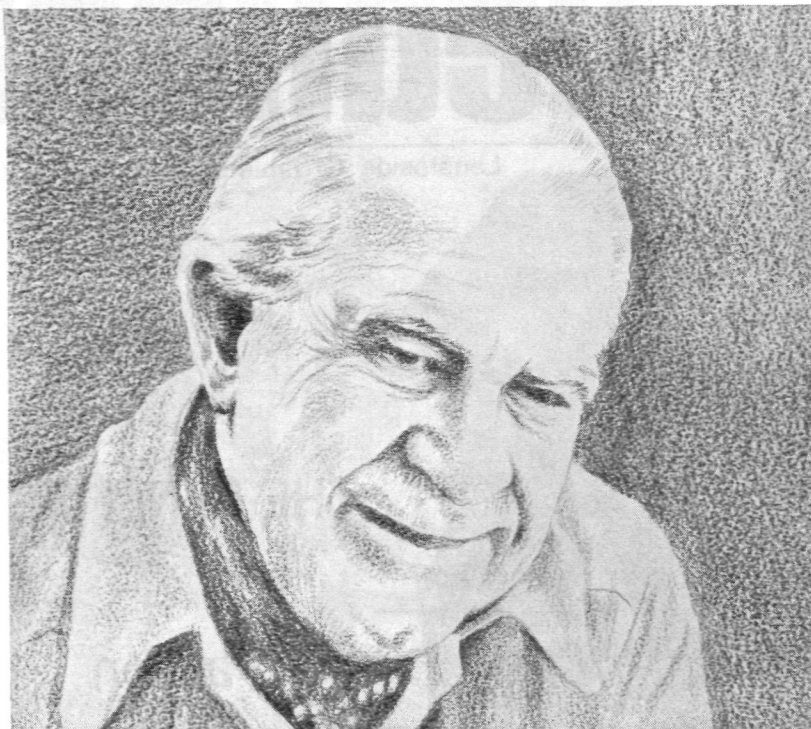
Richard's academic zeal has its basic training from the early days he spent at Sydney Boys' High. A bursary student from high school, he has continued his academic record through medicine.

With the clinical years his views changed, with more emphasis on the practical side. He is a fanatic for detailed physical examinations in large tutorial groups. From the beginning Richard staked an early claim in the Schlink Reading Room, where he is often found studying (or is he asleep?).

A keen chess player, his other interests include squash, skiing and the thyroid gland.

His friendly manner, coupled with his conscientious approach to medicine, should stand him in good stead in the years to come.

Others: B. J. BEDKOBER, P. I. RYLANDS, G. R. SAVAGE.



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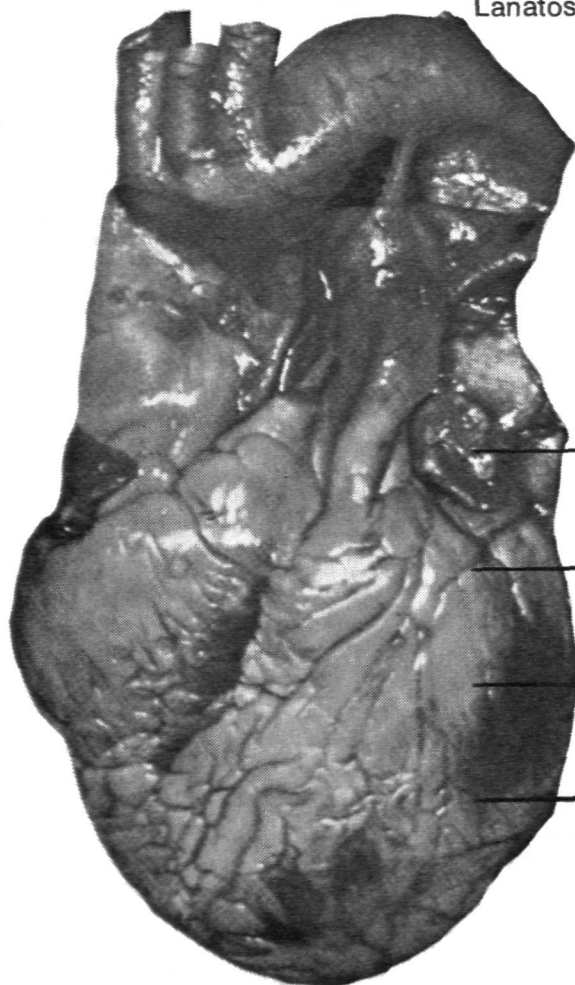
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## SYDNEY HOSPITAL

"One of the oldest institutions in this young country is the Sydney Hospital. It is much older than any person here present, for institutions, fortunately, live longer than men.

Many years have passed from the day in which a beneficent Governor, his Excellency Lachlan Macquarie, laid here the foundations of what was then called the Sydney Infirmary. Our Sydney Hospital is legally and practically the same institution, though changed in name and incorporated by Act of Parliament in 1881. The land on which our present palatial structures are erected is still the same unrivalled spot on which the more modest buildings of Governor Macquarie arose. Our Board of Directors is the direct successor of the

governing body which under the name of Sydney Dispensary administered our institution as far back as 1826. Also, the objects and work done, with due allowance to progress, have been consistently the same for all these long years—that is, first, the affording of medical and surgical relief to the poor; second, the education of medical students; third, the training of nurses for attendance on the sick.

That from an early time the Sydney Infirmary made provision for the education of medical students is certain, for as far back as 1850 medical students were here enrolled. . . .

Many of you will, from a scientific point, have greater advantages than any of us ever had, so you must be

equal to the occasion. Your success in this direction will depend on enthusiasm and on persistent indefatigable work; if you possess these, I have no doubt that some of you may rank, in the future, amongst the great thinkers of medicine.

As regards your teachers in the Sydney Hospital Clinical School, be sure that they will encourage you to think for yourselves, and will avoid any spurious method that may stuff you with knowledge and not enable you to make it an integral and living part of your mind. We admit that the first duty of our school shall be to give you the necessary education, as required by the Sydney University, and to turn you out well

informed and sound medical practitioners. We shall, however, aim to something higher than that; we want to give you every facility that you may avail yourselves of the enormous material for study our hospital possesses, and train yourselves for the future to original research. If there may be amongst you one with the mind of a Sydenham, a Morgagni, or a Laennec, in *embryo*, it will not be through want of our help and inspiration, if he will fall short of his high destinies." —from the *Inaugural Address delivered at the official opening of the Sydney Hospital Clinical School for Medical Students on the 20th October, 1909, by Thomas Fiaschi, M.D. (Pisa and Florence), Sydney.*



## THE HONORARIES

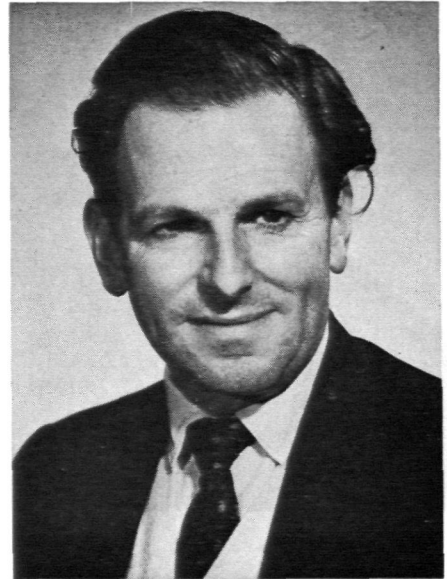
### GASTON EGON BAUER

*"Do you know about the facts of life, Bernie?"*

This mild-mannered medico opened our minds to a wider understanding of medicine. By placing his subject in its proper historical and contemporary perspective he led us logically to the way ahead.

His tutorial discussions had an uncanny knack of leading on from the intricacies of cardiac function to pointed anecdotes delivered with a distinctive, subtle humour and the finesse of the accomplished raconteur.

In the wards he taught by example: we learnt that management includes personal concern and that the bedside manner can be a form of therapy. We also learnt the meaning of modesty. It is a pleasure to have been taught by him.



### EDWARD MORELL CORTIS

*"Sounds that disgust the duchess are music to the surgeon's ears."*

This perfect gentleman introduced us to final-year surgery. Not lost on his patients or the girls of the group were his twinkling eyes and his charming smile. In him quiet self-assuredness blends easily with success.

Besides our bi-weekly exercise, his tutorials provided us with a generous admixture of Latin and English, a strong flow of surgical expertise seasoned with subtle humour, and a dilemma at every door on whether or not seniority preceded femininity.

### JOHN DIXON-HUGHES

*"No, I will not talk louder."*

J.D.-H. is a quiet, softly-spoken surgeon who positively bristles with the sort of information that students seek. Consequently he enjoys a well-deserved reputation for being a good tutor. He is also well known for his tardiness, which is presumably due to waiting for McWhirter's ten-year survival figures.

In tutorials he treats his students to a profusion of breasts and thyroids, with a generous measure of other surgical material thrown in. His approach is often strongly individual (we will not quickly forget his Christmas dinner therapy for post-gastrectomy patients), yet what he says is almost invariably "the good oil" and is much appreciated.





LESLIE ALBERT DUNCOMBE

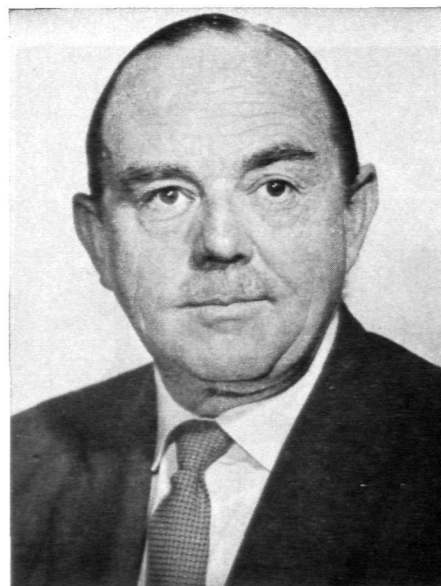
Don Duncombe is an enigmatic character whose path has crossed our several times during the course. He first bounded into our awareness in third year when, poorly disguised as an academic, he became our principal lecturer in anatomy. His exam. tips were so accurate that we all proceeded easily into the clinical years, to meet him again as Clinical School Supervisor and urologist extraordinary. In these capacities, he has influenced us considerably. In fact, he is the only one of our teachers to have a syndrome named after him (Duncombe's syndrome: polydipsia, ataxia and diuresis) and the only one to attempt to discuss the important subject of rugbiology (which, as we all now know, is nothing to do with bugs in rugs).

PETER HOWARD GREENWELL

*"Do they do that in Singapore, Richard?"*

Quietly spoken and considerate, Mr. Greenwell earned the undying gratitude of his patients and female students by deploring the barbaric practice of scrotal invagination in the diagnosis of inguinal hernia. This concern for his patients he extends to his "embryo doctors" and "grilled student" never appears on the Greenwell teaching rounds menu.

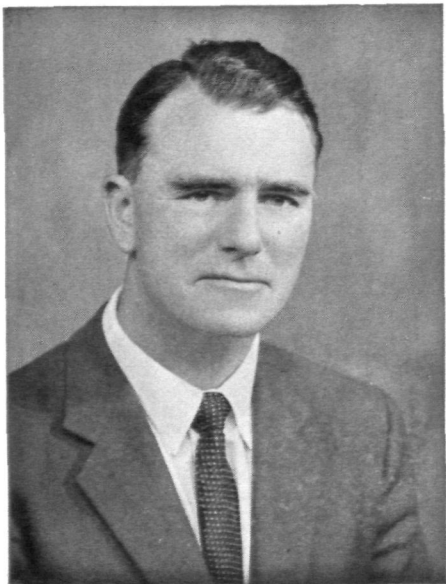
Abounding with information on the state of surgery in the Pacific and South-East Asia, he has given us the great benefit of his extensive experience in the practice of surgery. We shall remember him with gratitude.



ERIC ALFRED EDGEWORTH HEDBERG

As Mentor to the fifth-year student's Telemachus, Mr. Hedberg guides the way to truth in clinical surgery. Emphasizing the importance of method and logic, he begins by teaching the meaning of the word "clinical" and proceeds to demonstrate a masterly approach to the problems of disease and its management.

The student learns that diagnosis can only be accurate when based on a logical interpretation of the available data and a consideration of regional anatomy. He also discovers that surgery provides the only truly precise form of treatment, since tablets can always be changed but operations are fixtures. Most important of all, he comes to realize that practice is the essence of the art and that art is the essence of practice.



WILLIAM HENRY McCARTHY

Of the following statements, the best description of Bill McCarthy is:

- (a) expert on bony tumours;
- (b) teacher of practical surgical principles;
- (c) accomplished portrayer of fat, forty-year-old females with abdominal pain;
- (d) all of the above;
- (e) none of the above;

Answer: (d) "all of the above".

N.B.: He has done much to make all such questions as easy to answer as this one.

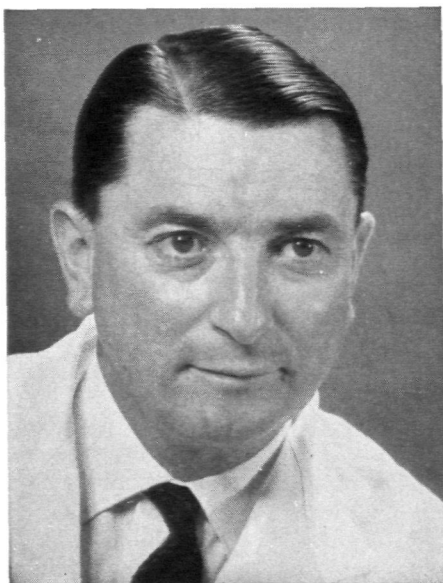


ALAN EDWARD McGUINNESS

*"Serum zinc, Bob?"*

The last Lancelot Spratt of British colonial medicine, Dr. McGuinness likes to conduct his ward rounds in traditional imperial splendour. These are hazardous undertakings for the students, for if one avoids being shot down in flames there is still considerable danger of slipping on one of the pearls he casts en route.

Noted particularly for lengthy dissertations on the Australia antigen and chronic active hepatitis, he has also provided us with thrilling insights into the monoclonal gammopathies, particularly IgE myeloma. His abrupt manner and impossible questions are always tempered by a benign smile and the erring student is assured of discovering the truth ("Why are you half right, son?"). His teaching is an experience we shall not readily forget.

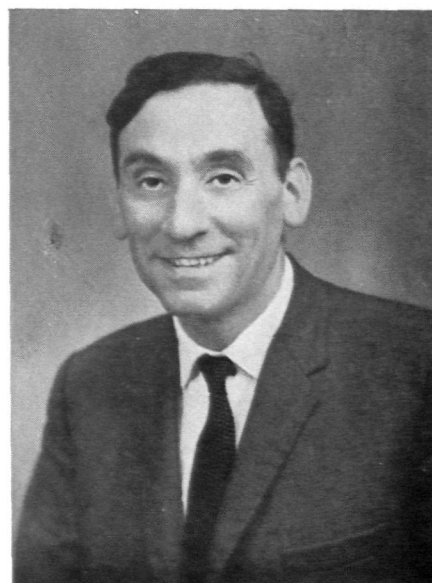


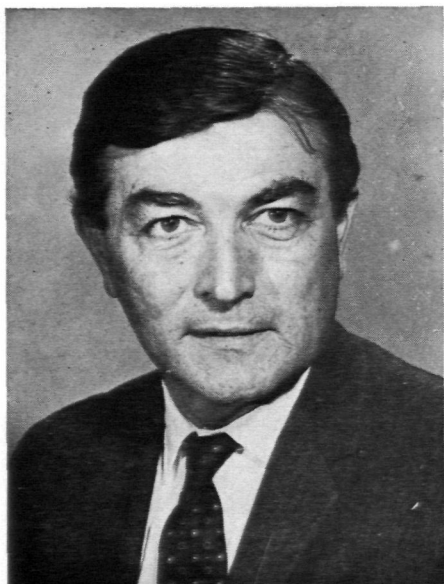
Associate Professor of Medicine:

SOLOMON POSEN

*"I am a 34-year-old plumber with chest pain."*

Sol left his footprints on us all. If we thought we knew everything a few cryptic questions dispelled the illusion. If we thought we knew nothing his guidance in logical thinking showed us we were wrong again. If we thought we knew enough, his example stimulated us to greater efforts. What he provided was the incentive to seek the answers for ourselves in the wards and in the library. The precision of his thinking, the warmth of his personality and his droll sense of humour have provided lasting improvement for even the most refractory student amentia.





## JOHN RAFTOS

It is no good trying to waffle to J.R.: he never hesitates to take the bull by the horns when this is necessary to separate fact and fiction. Consequently, his tutorials in medicine are marked by a distinct clarity of purpose. Subjects are discussed in the light of the available evidence and without bizarre postulations or flights of fancy. His positive thinking rips away the debris of doubt and confusion that clutters the student mind and he stresses the fundamental importance of commonsense and attention to detail. He makes his points emphatically and reinforces them with a subtle wit which slips easily from his laconic exterior. His contribution to our education is one we will value.

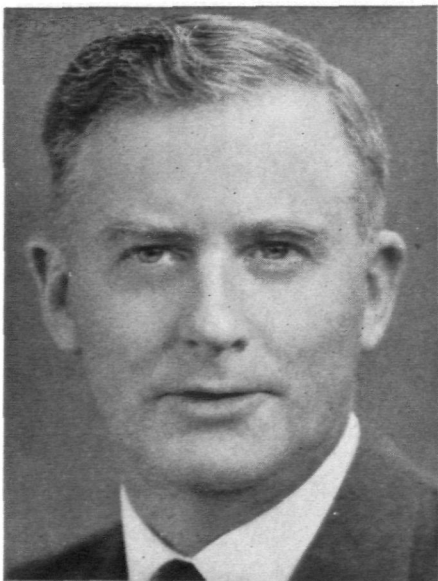
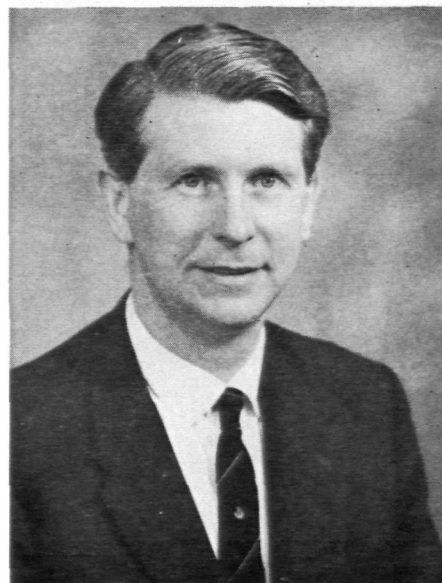
*Warden of the Clinical School:*

## JOHN EDWARD REIMER

Any resemblance that John Reimer bears to the average everyday clinical school warden is purely coincidental. Air-conditioned, radio-equipped and capable of more than a hundred miles per hour, he is the sophisticated prototype of a whole new concept in clinical school administration.

As a surgeon, he is equally exceptional, with a capacity for work unrivalled since Hercules performed his multiple craniotomy series on the Hydra. As a teacher, however, he shows the other side of his personality: painstaking, unhurried and with an intense concern for his students' welfare, he is a very valuable friend in need.

Altogether, a remarkable man without whom the Clinical School would not be.



## THOMAS INGLIS ROBERTSON

*"Are these girls really all mine?"*

After some initial alarm on discovering five girls in his first tutorial group, Tom swiftly regained his composure. Only his characteristic tolerance enabled him to maintain it through the sessions that followed.

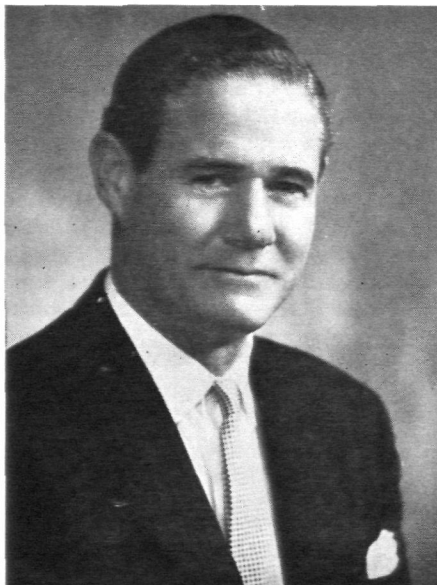
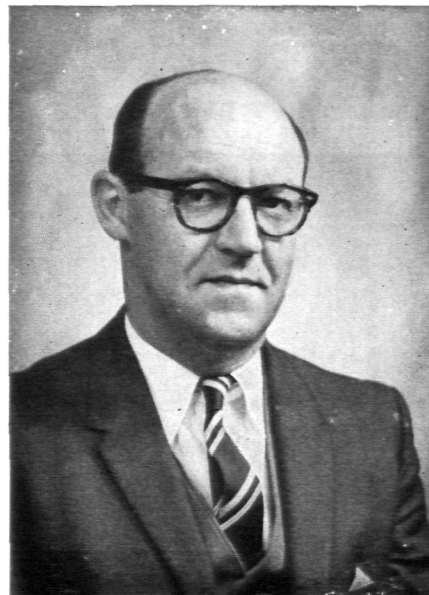
A distinguished hæmatologist, with leanings towards general and Crown Street medicine, he believes in striking directly at the core of the most complex problems. Tapping his foot through our "meticulous" case presentations, he would frequently guide us to the truth with a gentle plea such as: "I think we are all a little lost, what is the patient's main problem now?" The secret of his teaching lies in his subtle combination of medicine—the art, and medicine—the science.

## JOHN NELSON SEVIER

*"How long did that history take you?"*

John Sevier is a gentleman of the old school of physicians, with charm appreciated not only by his patients but by the staff as well. In fact, he is regularly seen with a red carnation in his lapel donated by the sister in Ward Two.

He has proved to be a very capable and reassuring tutor. Amidst the gross anxiety engendered by the stresses of final year, his tutorials are both soothing and highly informative. Thanks to him, we can now all reel off a good differential diagnosis for P.U.O., as well as for most other common medical conditions. His experience as an examiner also proved very valuable to us, especially his information about patients with rare diseases at other hospitals.



## ALAN CATHCART RITCHIE SHARP

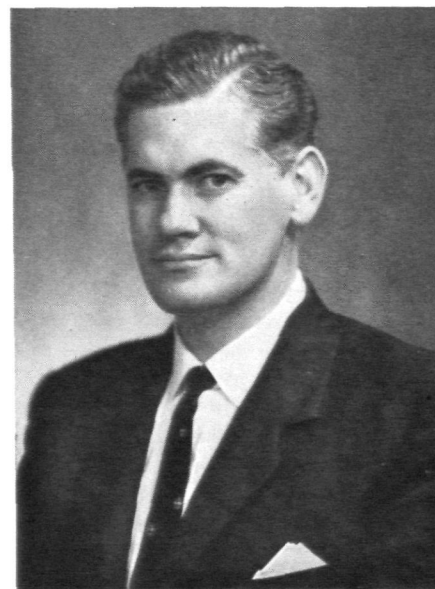
A romp through the fields of surgery with Alan Sharp is one of the few real entertainments provided in the student's timetable. Over a few bottles in the museum or a case or two in a side-room, his group is treated to a mixture of wit and wisdom which is guaranteed to both amuse and enlighten. Methodical but never mechanical, and with a keen sense of perspective, he rapidly dissects situations to display the lighter aspects of life lying beneath the cold hard realities of clinical practice.

All this adds up to painless education, which is supplemented by an abundance of homespun philosophy in the form of advice for very young doctors. His interest and sincerity are widely appreciated.

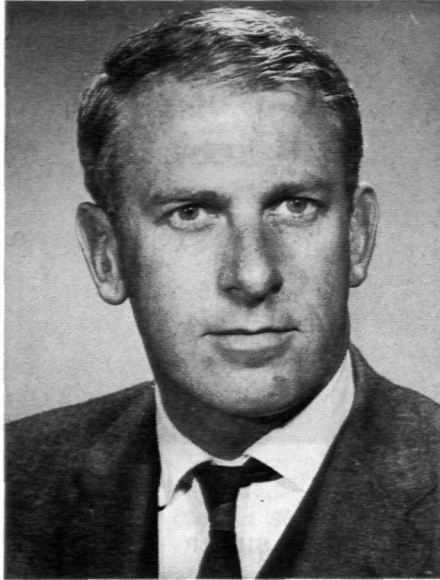
*Associate Professor of Surgery:*

## FREDERICK OSCAR STEPHENS

Fred Stephens has been away on sabbatical leave for most of our time in the Clinical School. We have thus not had the personal contact with him that we would have had otherwise. From what we have seen of him, as lecturer at the University and informally in the wards, it seems that we have missed out on a valuable experience.







IAN LYALL THOMPSON

*"You mean you don't know Zieve's syndrome?"*

With tailored silk shirt almost covering his naked torso, Ian Thompson always looks dressed to kill: however, he hardly ever does. This is a constant source of comfort to his patients. His students sometimes wish he would make just one mistake: his cool efficient manner can be a little overpowering, like the atmosphere in the side-room at the end of one of his long, tense, eponym-riddled tutorials.

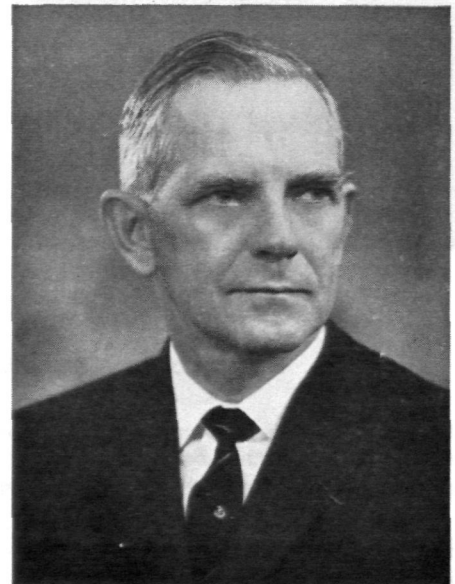
At other times he is mild-mannered and reassuring, as keen to discuss the news of the day or the latest film releases as he is to discuss the virtues of Enterovioform. His versatility and enthusiasm make him a model physician and a teacher to be remembered.

THOMAS EDWARD WILSON

*"In the olden days. . ."*

Degree-studded surgeons may not be rare in a teaching-hospital environment, but very few of them could claim to have an M.R.A.C.P. "Alphabet" is outstanding for his academic record, yet he remains quiet and unassuming in the classical tradition.

Although proctology is his *forte*, he can readily be induced by the inquiring student to display an almost encyclopædic knowledge of medical practice in general and surgery in particular. In addition, periodic reminiscences provide fascinating insight into surgical problems in "the bad old days". Yet for all this, he concentrates on the sparrows rather than the canaries, and his emphasis on the practical aspects of his subject is something that we will do well to emulate.



## . . . and Uncle Tom Cobley and all

As we reach the end of the medical course, it does not seem presumptuous to suggest that we at Sydney Hospital have been a more closely-knit group than other students elsewhere. After all, this is a "personal" hospital and we have come to regard it, in a sense, as home. The encouragement and assistance that the members of the medical and general staff have always offered to us are responsible for this and it is to them that we now look back with gratitude.

The medical and surgical registrars who have given so much of their time to tutor us in final year deserve special mention. David Hendrick has performed a minor miracle by maintaining a very stiff British upper lip in the face of his group of colonial yahoos: we hope that his opinions of antipodian medicine have not been permanently damaged by the experience. The other medical registrars probably felt more at home, if not more at ease, with our academic imperfections. Bob Batey must have; how else could he have endured the five tutorials per week which his students found necessary to tap even a fraction of his vast store of knowledge? Alf Calvert gave smaller doses less often but made up for this by teaching his group to organize what they did know into useful lists: he demonstrated the principle by helping them to develop an almost interminable differential diagnosis of "non-specific *ST-T* wave changes". David Palmer used a less rigid approach, guiding his followers along the way to knowledge through enquiry, while Mick Swinburn eased the anxieties of his group by directing much of their attention to a sweep he was apparently running on the attendance figures.

Of the surgical registrars, Alastair Brown led the field in the rush towards fame and fortune, with accomplishments including a fellowship in surgery and a leading role in the production of "Oliver". "Mr." Mal Goldsmith was not far behind, at least in the academic field; no doubt he, too, is destined for a productive future. Richard Ho and Michael Moont both played down the showmanship side of surgery, concentrating rather on the essential principles and facts, while John Payne went to the other extreme by demonstrating how easily all surgical knowledge could be reduced to a few basic sentences which could then be stored for easy reference on pocket-sized filing cards.

The honoraries who versed us in the specialties are brave men. By risking being authoritatively misquoted by students, they willingly jeopardize their professional

reputations for the cause of medical education. In this regard, the specialist physicians are particularly daring, since their weekly clashes in the arena of Medical Grand Rounds provide all sorts of opportunities for student misunderstanding. However, even when some allowance is made for this, many of the claims which admiring students made for their mentors amounted to nothing short of libel. For instance, Bill Wolfenden would probably have a fit if he heard some of the statements casually attributed to him. Similarly, Ron Lewis might have a heart attack, Frank Read might blow his top, Peter Francis could vent his spleen and Ross Jeremy might wreck the joint. Just exactly what Con Reed could do is uncertain, but it would undoubtedly be something bloody terrible; what Bruce Hurt might do is the conundrum of 1969-70, and the mind simply cannot fully comprehend the probable effects of such an explosive situation on the normally placid Pat Harvey.

The erudite gentlemen of the clinical research department are something of a separate breed. John Stewart and Krishna Mani of the renal unit, and Fred Gunz and Paul Vincent of haematology are used to labouring under difficult conditions and so were able to take the additional strain of teaching more or less in their stride.

The dermatologists have a more difficult time. In a field in which a guess is as good as a diagnosis, John Rae and Geoff Finley tried hard to teach us something definite, while Doug Shepherd and Lance Cains undermined their good work by showing us how easy it really can be.

The specialist surgeons are practical men. Rather than speculate about the serum rhubarb, they like to go straight to the guts of a problem. Mark Killingback is particularly notable for this: almost before his patients know that their waste matter is held up somewhere, he has it "in the bag". David Failes is of similar ilk: he enjoys widespread fame for artful performances with the almost magical "Silver Bullet", often working close to the wind. Geoff Latham goes one step further by putting the wind inside on purpose: it is no wonder his patients often feel light-headed.

Of course, this is all hot air compared to the extraordinary feats of downright good tradesmanship performed by the plumbers (Harry Learoyd, Geoff Gibson, John Blackman, Ian Potts and Co.), who strive to keep the water running at all costs, and the welders (Rusty Rhydderch, Bernie Bloch, Jim Ellis, John Allman and

Dick Tooth) who achieve miraculous results with many of their patients simply by pointing the bone. Equally mysterious are the ophthalmologists (Frank Claffy, Ted Freshney and John Hornbrook), who manage to keep both their patients and their students in the dark while they perform elaborate rituals understood only by the initiated.

In the E.N.T. department things are a little different: there an all-star cast including (as advertised) "Biscuits" Arnott, Bruce Benjamin, Vic Bear and Frank Ellis do their utmost to clarify (with the aid of mirrors, lights, special instruments, diagrams and film shows) what initially seemed to be a straight-forward subject.

Other stars of the surgical galaxy include Alan Jessup, who constantly demonstrates the potentiating effect of dignity on efficiency, Ross Campbell, who specializes in long lists of d.d.s., of which the first twenty-seven are the most important and, in a lighter vein, Mal Inglis, who somehow always manages to look happy no matter what he is doing. Deserving of special mention are Gus McKessar and Lochie Glen, who always find time to talk matters over with students, and Bruce Conolly, who is always prepared to lend a hand. David Perry is another big-hearted gentleman (with chest to match) and, of course, the back-stop of the team is Max O'Mara, who seems to spend his life repairing the complicated lesions that his colleagues consider too difficult and the messes they occasionally make of the ones they do not.

In the shadows behind the physicians and surgeons lurk the roentgenologists, a veritable battalion headed by Colin Hambly, Gus Heller, James Wright and Jim Roche. Whether their reticence is due to excessive modesty or to feelings of superiority is uncertain, but one need not be astute to observe that, having mastered the art of diagnosis, they are rapidly encroaching on the field of treatment with their apparently omnipotent machines.

At the other end of the spectrum are the obstetricians and gynæcologists, who are still striving to imbue original sin with an aura of beauty and light. Rob Gill, James Furber, "Bacchus" Baccarini, Ian Thew and John Newlinds all performed magnificently during lunch-hours at Sydney Hospital itself, whilst the efforts of Jock Murray and Vic Pannikote in after-hours sessions at Crown Street defy adequate description. We will undoubtedly be much better able to handle the weaker sex in the future because of the help they have provided.

Fred Berry taught us what we know of anæsthetics by bullying us in a manner which we found difficult to take seriously. We were much more impressed when on social occasions he demonstrated the important concept of tolerance to C.N.S. depressants. Bob Speirs and Len

Shea provided him with excellent support, and if we did fall asleep regularly in their tutorials this must be regarded as a credit to their professional expertise.

A different type of hypnotic experience was provided in psychiatry term by Bruce Peterson, who destroyed our illusions by pointing out that things are not always as they sound. Miss Short, the chief social worker, provided excellent balance by proving that sometimes they are.

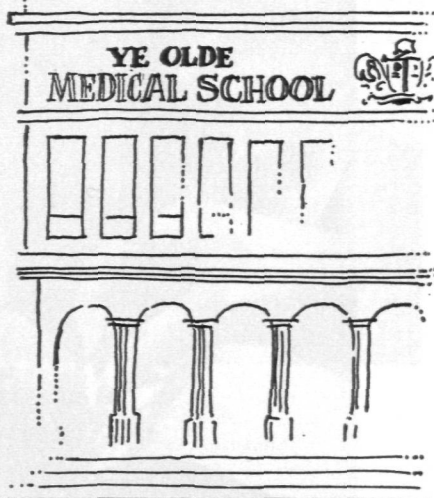
Eddie Hurst, the chief pathologist, took this further by demonstrating that appearances are never deceptive provided that they are correctly interpreted. We were quick to appreciate his value as a source of information and as the ultimate authority in numerous academic discussions. So much did we come to respect him, in fact, that we readily forgave him for never knowing the cause of death at a P.M. and for not having heard of sarcoidosis: we even tried to understand when he threw us out of the Kanematsu lift or the staff toilets.

Of course, there are times when we looked for this sort of understanding in others, and it was then that we took our woes along to the office in the Ward 8 side-room where Margaret Coyle, the Warden's secretary, reigns supreme. There she would do her best in the circumstances (which frequently meant re-arranging the whole hospital) and if that was not sufficient she would delegate higher authorities to see that things were satisfactory. Not surprisingly under these conditions, few of our worries became chronic: those that did require frequent visits were considerably eased by frequent words of comfort from Lesley Payne.

The library was another haven for those in distress and there Margaret Power and her off-sider Jenny Wuyts quickly found the answers to our academic dilemmas. In addition, they provided a forum for (quiet) discussion of issues of current social and political import, thus widening the scope of what would otherwise have been a much narrower education.

Finally, mention must be made of the unsung heroes, the men behind the organization. Bill Piggott, currently Clinical Superintendent, will be remembered also as Medical Registrar, in which capacity he provided much of the "oomph" in our medical term in fifth year. Bruce Herriott, the Medical Superintendent, and Hubert Beer, the Chief Executive Officer, have done more than most students realize to make the function of the Clinical School, in fact, the function of the Hospital itself, possible. We owe them and all the rest of the staff a great debt of gratitude, not only for the education we have received but for maintaining that intangible *esprit de corps* which makes this a friendly and personal hospital and which will make us proud in the future to call ourselves Sydney Hospitaliers.

# AFTER GRADUATION .... WHAT?



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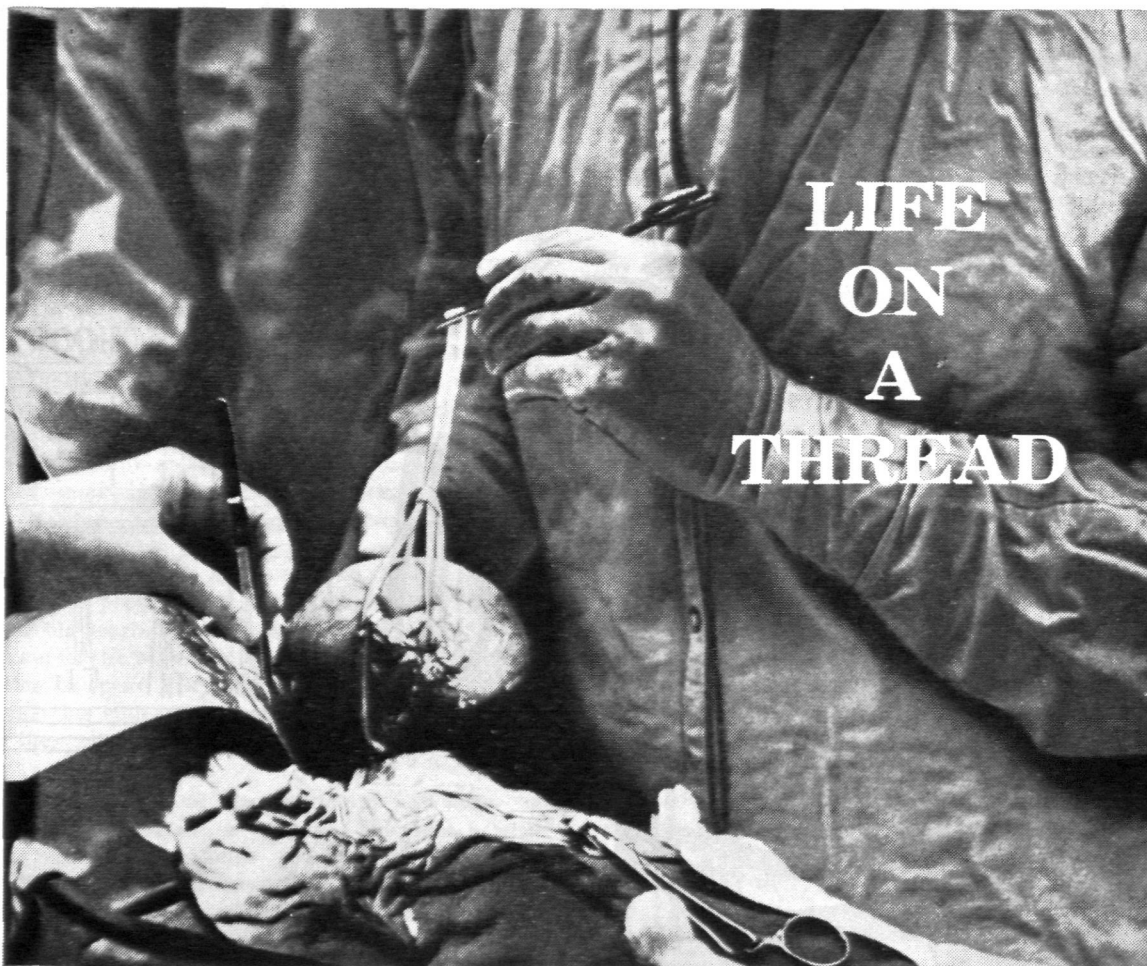
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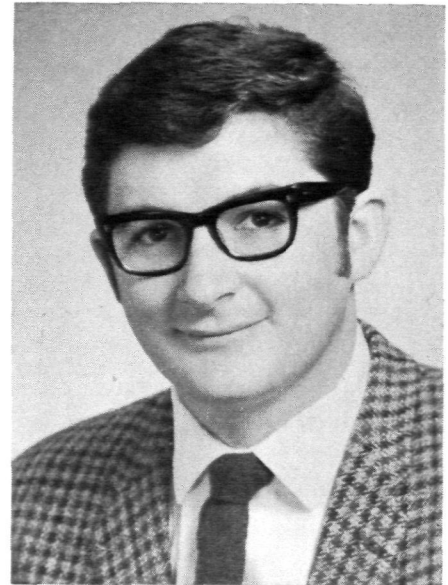
## THE STUDENTS

### BARRY JOHN ABESHOUSE

Barry has been a well-known and liked contemporary for the past six years. This gentle giant with the broad smile and infectious humour has made many friends in the student body.

Barry's most positive effort to true medical knowledge was Leonora. Marriage provided him with something he had been missing—her lecture notes—enabling him to consolidate his now-considerable medical knowledge. Also, by stimulating his desire to understand children, it induced his superior effort in the pædiatrics exam.

Barry is a good and reliable friend. We wish him well and feel sure his future career will be studded with success and satisfaction.



### MARY LOUISE ALI (NÉE DONE)

*"Like the schizoid man from the Great Outback."*

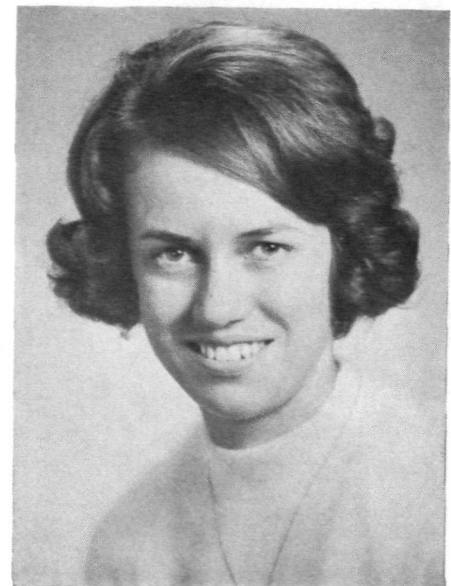
Long-haired;  
Petite;  
Alternately organized and disorganized.  
Science to Med.  
Flat at Newtown.  
Open house, listener to psychotic and  
other imaginary problems.  
Poetess; profundo;  
Painter, part-time.  
Thoughtful dissenter; euthanasia.  
Champion of the cause (? the cause).  
Curry, sailing, happiness and Leo.

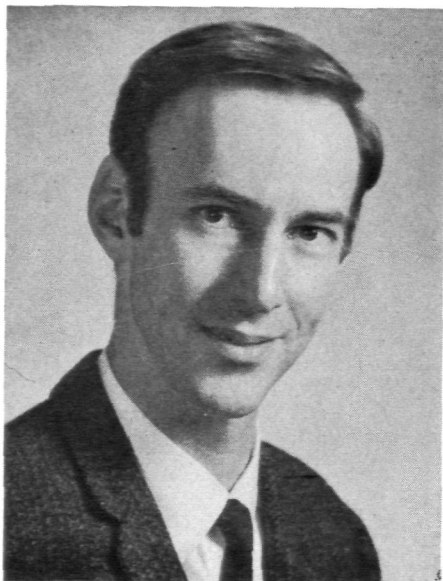


### LORRAINE RUBY ANGUS

*"How about a cup of tea?"*

Commuting each day from Bexley in an ancient green Anglia that has somehow miraculously survived through the years, Lorraine has become a well-known and much-liked figure at Sydney Hospital. Fifth-year highlights of her student career included midnight tea-and-toast parties at Crown Street, ice-skating at P.A. Park, pancakes at R.A.H.C. and, finally, an excellent pass in psychiatry. Weekends she spent in teaching Sunday school and in rather mysterious trips to Newcastle and later to Wollongong. The experience gained from an unallocated term in the highlands of New Guinea will stand her in good stead, and we wish her all the best in her chosen career.





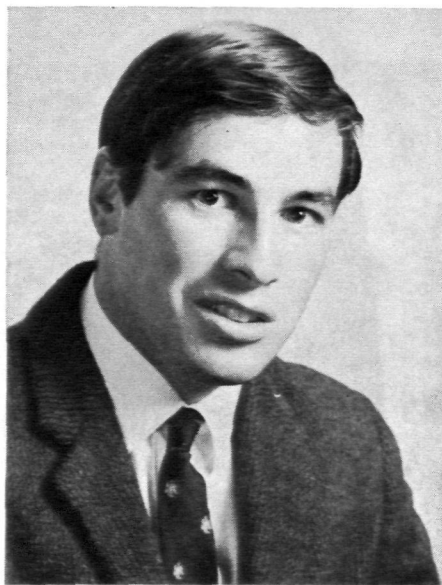
## ROBERT GEORGE ARNOLD

Bob has a brain.  
 He can think.  
 He does think. Often. In fact, nearly always.  
 He is not a normal Australian.  
 He thinks about politics, medicine, philosophy;  
 And how to fix the oil leak in the car.  
 Bob has two long legs.  
 He can run fast.  
 If he ran earlier, he would catch the train.  
 Bob can enjoy.  
 He enjoys Beethoven, and a good red.  
 He enjoys being married to Val.  
 He has enjoyed becoming a doctor. Very much.

## BRIAN PATRICK BAILEY

Brian is usually behind a yellow or tartan tie and standing in riding boots. He joined us in second year after successfully completing a science course. He has resided all this time at St. John's College, except for a few summer months of fifth year "holidaying" at Manly. That year was climaxed by a four-month American tour, and spending the first few weeks of final year on board the "Canberra". As well as displaying excellent academic results, Brian has shown good form at year dinners, at which he has been well supported.

With this vast experience and enjoyment behind him, Brian should be able to find a bright future ahead.



## GREGORY FRASER BINNS

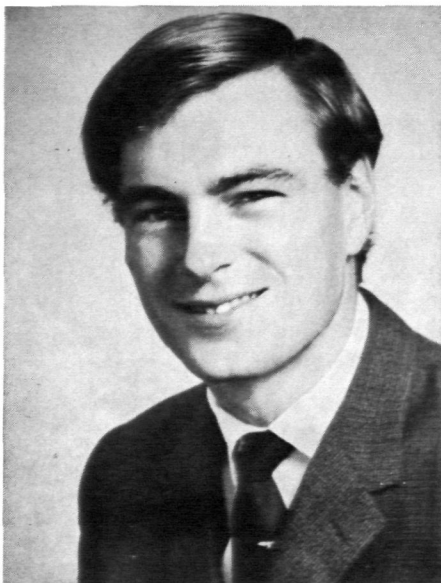
A tall, lean, chain-smoking pacifist, Greg manifests interest in chess, bridge and *l'amour* in that order.

Finding feminine company both enjoyable and socially acceptable, he married in 1968 but postponed the honeymoon for one year.

He spends most of his time indulging his masochistic whims by consistently losing at chess (occasionally at bridge) and then feeling guilty for not having studied instead.

His stutter is no handicap, indeed, it is often used to advantage in tutorials, providing time to confabulate a plausible answer when a question catches him asleep.

Greg has post-graduate globe-trotting aspirations; with his long legs he is sure to realize them.



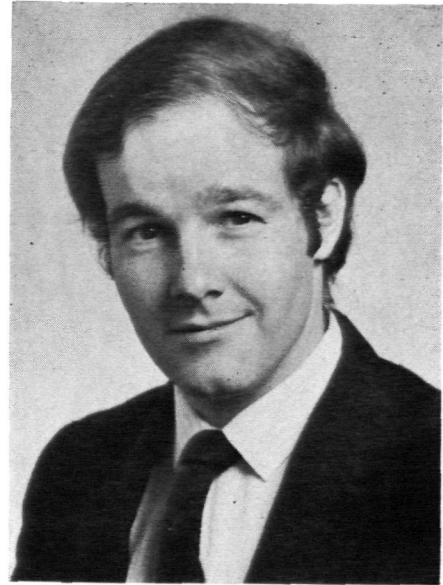
GEOFFREY DAVID CAINS

*"Well I'm not exactly sure, Sir, but. . ."*

Geoff started Uni relatively unscathed after the traditional King's education of the military, religion and rugby combined. After early Newtonian ideological difficulties, he has made light of the course, specializing in cutaneous manifestations including an ability to magically turn certain group members "pink like pink pages".

During holidays he has often forsaken the city, donned his trusty riders and Harry Read hat to head for the sticks (and dem ol' cotton fields). Unallocated term provided time to fly to London's attraction(s) and hospitals. Geoff's party flew only first class—because of weaker resistance.

His genial personality and sound principles augur well for the future.



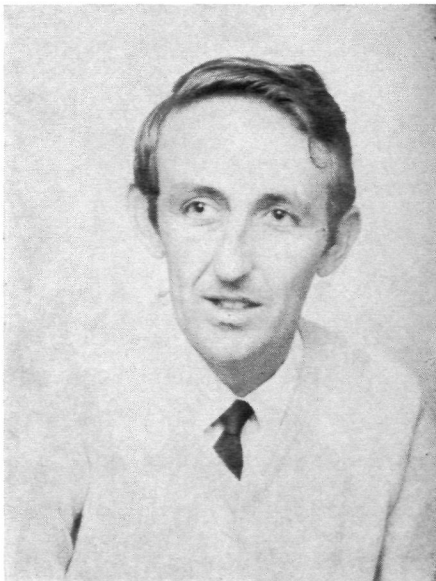
JOHN RICHARD CAMERON

*"The accessory nerve, Sir? Well, with my experience, what I usually do. . ."*

Somewhat older and wiser, John entered medicine via pharmacy. After an uninterrupted course, with leanings towards biochemistry and pharmacology, John intends to head for the country to become a G.P. Any future specialization will undoubtedly be in the cattle industry.

Keen on cricket, hockey, the stock exchange, his future cattle stud, large textbooks and, not least, his wife Judy, John still finds time for clinical work.

With his friendly manner, quiet confidence and a desire to help people, John should be successful in his chosen field.



ERIC JULIAN CASPARY

*"I don't like aggression, Mr. Caspary."*

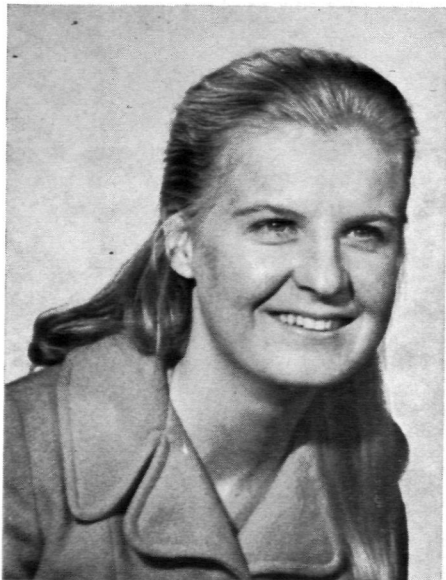
Having imbibed all that Vacluse High could offer, Eric entered medicine in 1965. Medical education was always with him; even at ten he studied plastic bones.

Eric's interest in humans is surpassed only by his concern for animals—on his motorcycle he campaigns actively for their right to live in peace and plenty.

Reserved, loyal, good-natured and cynically witty, Eric adopted a thoughtful, pleasantly aggressive approach in tutorials. He has stood up to the most awesome honoraries, rarely emerging second best from these verbal gymnastics.

We can imagine our friend in future years beaming over many an open abdomen. We wish him every success.





### SUSAN BEATRICE COCK

*"Well . . . sort of. . ."*

Born in Essex, of white Anglo-Saxon Protestant ancestry, Sue managed to persuade her parents to migrate to the colonies to avoid the N.H.S. and the Labour Party.

After pirouetting through school, she decided the only life for her was in medicine. Leaving broken hearts strewn through Med. IV and V, and having exiled a registrar to Ryde, she still managed to top pædiatrics in her term. The elective term saw her a biochemist, with sidelines involving normal S.A.P.'s and a friend with a white Mercedes.

With the weight of the Methodist Girls' Comradeship behind her, Sue is assured of a successful future.

### RONALD CHARLES DILGER

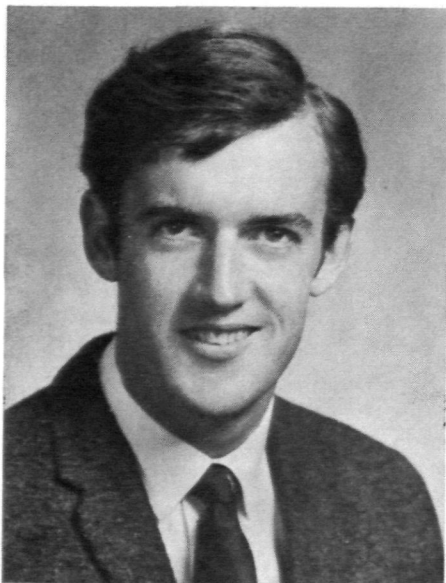
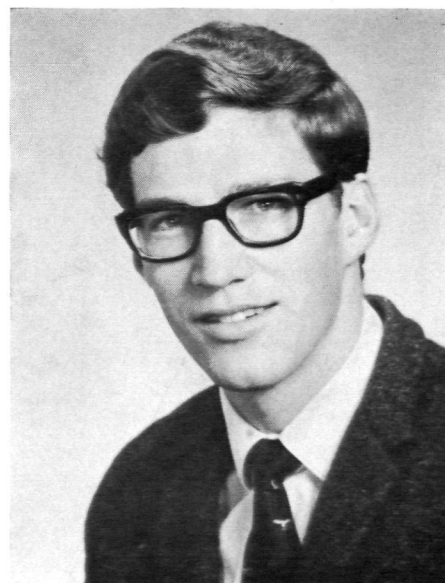
*"They won't ask you that."*

It wasn't really surprising that Ron decided to do medicine, coming as he does from a medical family. It's not surprising either, that his ambitions include general practice (with weekends off, naturally, courtesy of the Emergency Service).

Deciding that he needed moral support for final year, Ron finally popped the question in unallocated term and joined the swelling married ranks. Post-Buck's, he was duly seen ball-and-chained to a "No Standing" sign.

Despite these hindrances, he still finds time for a spot of fishing, skiing, golfing, or a quiet weekend at Lake Eucumbene.

Ron's down-to-earth attitude and conscientious approach assure his success after graduation, and we wish him and Dorothy well.



### JAMES MICHAEL DOWLING

*"I've had the 'flu for the last few days."*

An apparently slow-moving country chap (and a member of Dorriggo R.S.L. to boot), Mike "bounded" into the Faculty and St. Paul's College.

He set about dispelling this illusion of lethargy by proving himself to be a natural sportsman in athletics, billiards and riflshooting. Despite his chain-smoking between events, he broke the intercollege broad-jump record and won the 1968 University broad-jump championship.

This, however, was not the highlight of his College career, for it is rumoured that nocturnal visits to Women's College culminated in his meeting his wife, Lyn. He is now the proud father of a rapidly-expanding brood.

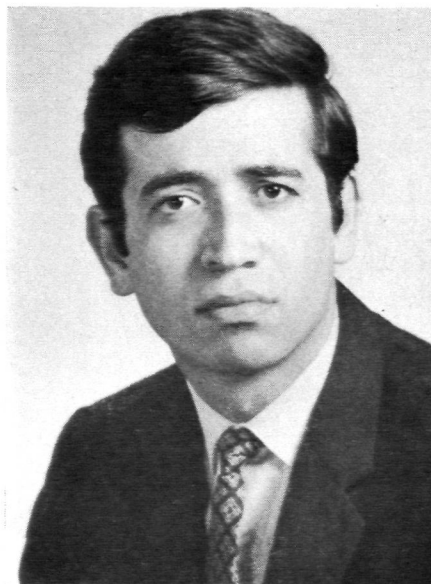
We wish Mike and his family all the best.

## GEORGE FISHMAN

*"It's all above the eyebrows!"*

George entered medicine in 1965, having spent his earlier years in that den of iniquity, Maroubra Bay High School.

Although sometimes very thoughtful and introspective, he has, on many occasions, brightened a dull moment with his riotous impersonations of a number of his colleagues and members of the medical staff. Not one to be called shy, he has often been found cross-examining the fairer sex in regard to their romantic escapades. His many loves include old Humphrey Bogart movies, the 1920 jazz era, his newly-acquired fiancée (not necessarily in that order), and yachting. We wish him smooth sailing.



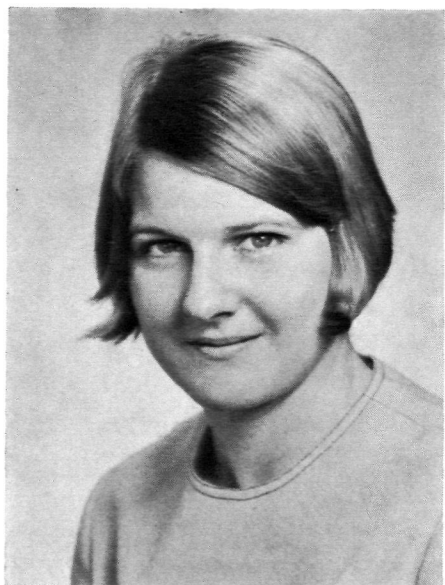
## RUTH FITZHARDINGE

*"Fitzhardinge? Was your father's name . . . ?"*

Ruth arrived in Sydney after spending her school days commuting between Warwick in the north and Frensham in the south, and soon settled into life within the shaded cloisters of Women's College.

After getting a good start in surgery in fourth year by learning the difference between right and left, Ruth has continued undaunted. Other notable episodes include the acquisition of a white Torana which, despite several minor skirmishes with offending cars, still remains intact, and an elective term spent in the wilds of Papua-New Guinea, learning the intramuscular administration of penicillin and the dangers of burning mosquito coils in grass huts.

Appearing demure and thoughtful, she has a quick sense of humour and the ability to describe a situation aptly. Despite her insistence that she is going to "Oonagalabbie Base", we are certain she will have a successful and happy future.



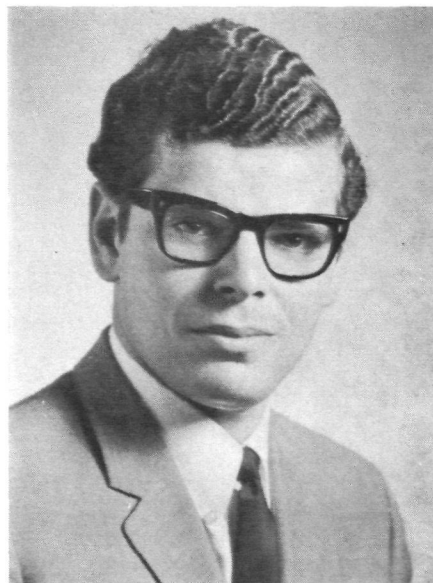
## GEORGE FLEISCHER

Take a head of curls, a cheerful voice and a pleasant personality and you have George.

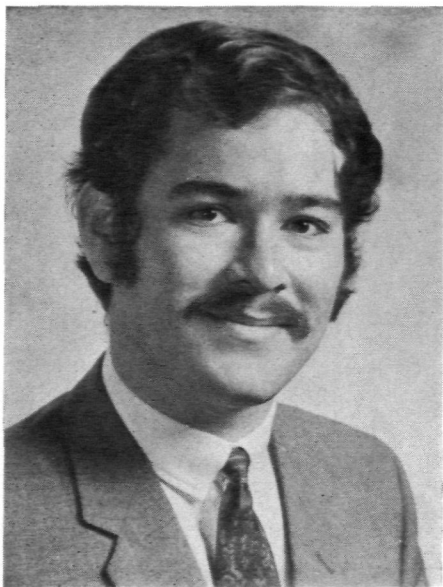
He entered Medical School from Randwick Boys' High and immediately settled into a life of picture shows, card games and infrequent attendances at lectures—a timetable which persisted into his clinical years.

George has always pursued a conservative image which isn't in keeping with his underlying "devilment".

His bright outlook, unruffled attitude and understanding made him a good friend and a pleasant companion. These qualities assure him of certain success in the future.







#### GEOFFREY CHARLES FOWLER

Geoff will be one of the first students from Kingsgrove North High School to graduate in medicine.

By nature sincere and friendly, his intensely happy approach to his work is characterized by a certain hearty laugh which at times proves to be infectious.

Inconspicuously conspicuous with his flair for "mod" dressing, he seldom fails to take the eye.

After cutting himself adrift from society in second year, he returned to the fold and thereafter successfully integrated work and social activities, culminating in a glorious unallocated term at Tamworth.

Geoff's likable personality ensures a happy future for him as a bedside physician.

#### CHRISTINE ELIZABETH GARRICK (NÉE EWAN)

*"I'm perfectly happy to go to the tute as long as it's finished by three-thirty."*

Christine is remembered as the girl who left her torch light burning in her pocket through most of fourth year. She has an enviable attendance record, an obsessive approach to work (she even summarized her summaries), and a knack for relating funny situations and recognizing the ridiculous. Christine attributes her exam successes to an extensive reference library of "Readers' Digests" and to her very patient husband.

Plagued by tutors who misinterpreted her closed eyes, she eventually confounded them by wearing her wig and appearing absent. With such resourcefulness, Christine's future is assured.



#### RAYMOND GARRICK

*"Does anyone know where my group is . . . ?"*

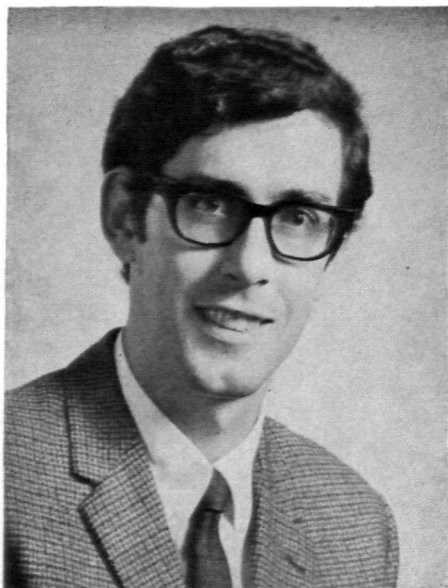
Leaving behind a successful water polo career, Ray found his way from Enmore Boys' High School into medicine.

Never known to arrive anywhere on time, Ray has the ability to make his presence felt by quoting medical exotica or, more usually, by falling over the only chair in the room.

Following a series of exam successes, he demonstrated true versatility by winning an ophthalmology prize and a wife during fifth year.

Apprenticed to Sol Posen in elective term, he is now the proud possessor of his own calcium series—but he is still wondering what to do with it.

An enthusiastic student, Ray has a bright future ahead of him, somewhere.



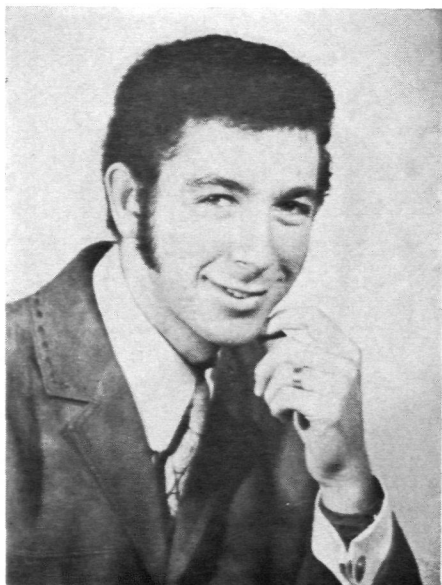
## JOSEPHINE GERRING (NÉE MAZENGARB)

*"If you lot can hear that murmur you've all got imaginitis."*

One of the few girls in the year who has the distinction of being known to everyone, Jo entered medicine as an afterthought to home-making and starting a family.

Subsisting largely on prizemoney for the first five years, she faced final year with her usual enthusiasm, devastating candour and highly infectious panic.

Jo has been known to miss many tutes; but never a med. dinner or a good party. She is capable of phenomenal academic achievements—and of losing an eighteen-gallon keg in her backyard! With such potential, this girl really has a future, and we wish her well.



## IVAN GOLDBERG

*"Hi there!"*

This suave ex-bachelor stormed Australia from the wilds of South Africa only eight years ago. In this time he captained Vaucluse High and dabbled occasionally in debating, demonstrating, wife-importing and sundry other activities.

"Ive" also put in six years of medicine, proving to be deeply interested in the personal welfare of his assigned patients. Despite his eloquent diction and superb good manners, his appeals for the "Freedom from Hunger Campaign" met only with a pelting of ha'pennies. However, the radical changes of the '69 Journal were better received.

Our friend's natural liking for people, and his ability in both work and play ensure future success. We all wish him well.

## DIANE ELIZABETH GOODALL

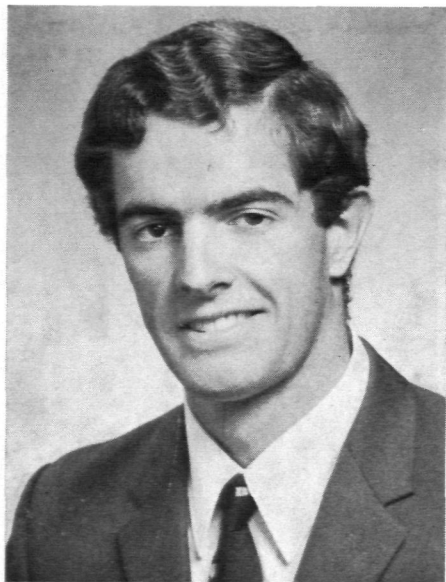
*"A woman's duty is to be beautiful."*

Diane lives almost exclusively on grapes, apples and the occasional orange. Not surprisingly, this Bacchanalian diet provides the fuel for fires of considerable passion. She is a truly feminine "med. bird".

With her captivating smile and dimples, and with a notorious record of hard working and hard cooking, she is well equipped to soothe the most ferocious examiner.

Her expositions on human nature are a tonic for the depressed and a rationalizing influence for the delirious. In particular, her advice to her fellow creatures on the management of the male of the species always seems founded on profound sensibility, if not entirely on sensitivity. Her future is assured.





## OWEN LINDSAY GRAHAM

*"I say, troops, what a beaut day for a picnic."*

After a long trek from Yass via Scots, Owen decided to sublimate his humanitarian tendencies by studying medicine. His great interest in clinical material has contributed to his knowledge of the geography of Sydney Hospital so much that he is the only reliable guide.

Fresh air is his other great love; he has walked the Kokoda Trail and is known to contemplate a jaunt to Mt. Everest. He also displays rare talents in the fields of canoeing, bushcraft and spreading blankets on picnics. His love for the outdoors could well determine his future abode, where his conscientiousness and easy-going manner will assure him of success. We wish him well.

## DOUGLAS JAMES GROSE

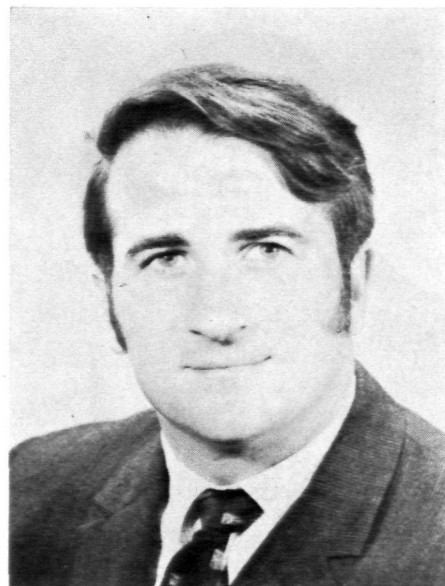
*"Would you stop table-talking and bid!"*

After leaving Barker College in 1963 with a sporting rather than academic reputation, Doug joined us in fifth year, wedded with a B.Sc. (Med.) in pharmacology.

He soon established himself as a regular fourth for bridge. An ardent exponent of the short club and fast playing, he seldom wasted more than a few hours per week at tutorials.

His extra-curricular activities included the Medical Society for whom he edited "Innominate" and the occasional appearance on the football field for the Faculty and the Sydney Hospital residents.

As long as there are three others and a pack of cards, he is assured of a happy and prosperous future.



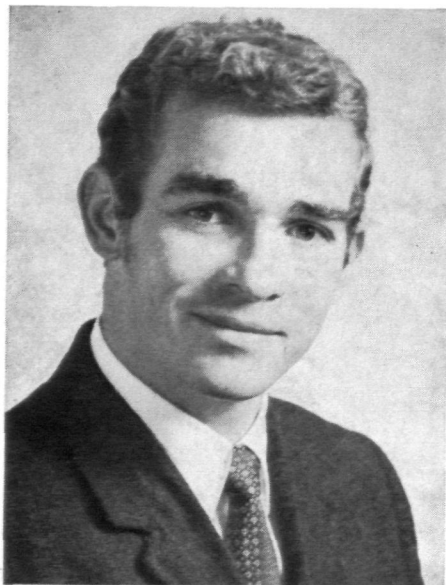
## RANDALL ERIC HARKNESS

*"If the wind doesn't change the fish will be on tomorrow."*

On completion of his school career at C.B.H.S., Lewisham, Randall worked at St. George Hospital as a medical technologist for five years prior to commencing medicine in 1965.

He has managed since then to get married, work part-time at Balmain Hospital, go fishing on alternate days and pass each year as it comes.

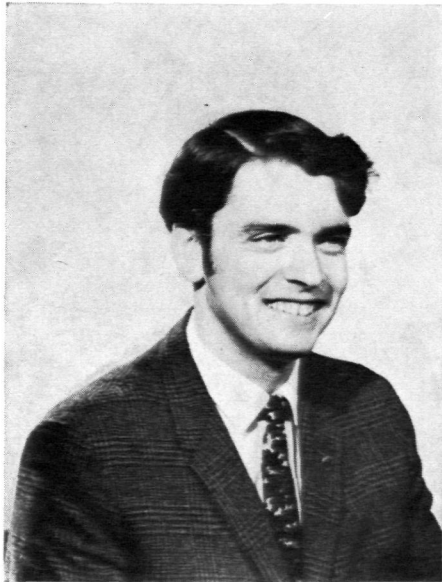
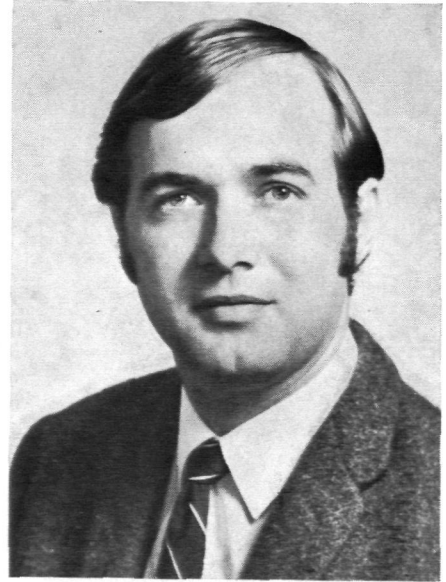
His easy-going and friendly nature, together with his forthright and outspoken manner, leave little doubt that his ultimate ambition of a successful practice (preferably near fishing grounds) will be attained.



ROBERT HENRY JOHN HENNINGS

*"Got time for another?"*

We are grateful to the Faculty of Pharmacy and the Bathurst outback for sending us Robert. After completing pharmacy in 1967, "Humpty", as we have come to know him, discarded his pharmaceutical garb and rejoined medicine (he had already completed the first four years, claiming several D's and C's on the way). We hope that Robert's academic strivings have at least been satisfied. In the past two years he has firmly established himself as "one of the boys", and his readiness to tilt a glass will be long remembered. We feel sure that his pleasant nature and sincerity, together with his limitless repertoire of conundrums, will ensure for him a bright and successful career.



ANDREW HOLLO

Hailing from Jaszbereny in that paradise of the communist world, Hungary, Andrew decided to trade the promises of the Social Revolution for a capitalist career and so defected to the West at the age of eleven.

He spent his time in school growing tall, dark and handsome, and getting used to dealing with the local natives whom he found friendly and harmless.

He launched into med. with boundless enthusiasm, but dark side-interests kept him in first an extra year. From then on his progress was uneventful. He spent his days equally divided between bridge (with other budding medicos), Sydney Uni. (a certain dark side-interest) and hospital wards.

He came, he occasionally saw, he graduated.

DONALD ANDREW HOLT

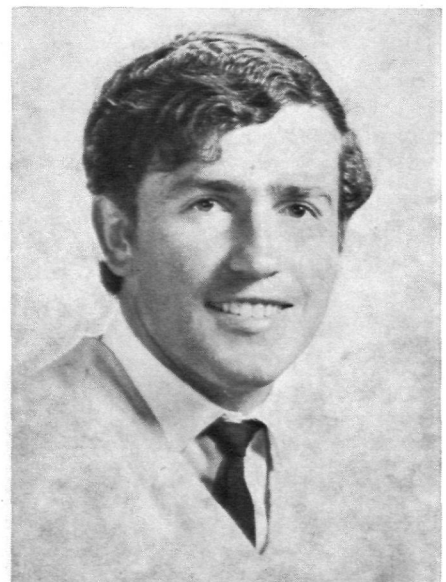
*"Tom and I are just good friends."*

Don came from T.K.S., and with his easy-going manner, had no trouble in adjusting to the diverse demands of university life.

His achievements include selection in inter-varsity rowing and skiing teams, an R.A.A.F. commission (draft dodging), an invitation from the Faculty to prolong his stay in second year and, more recently, a win in the Paul's George Street pub crawl.

Later, with diligent application, Don was "selected" to study pædiatrics in Honolulu during unallocated term. Upon his return he was accompanied by the inevitable surfboard, mind-expanding records and a collection of "customs questionable" American campus literature.

His versatility and widespread popularity with both sexes ensure a bright and promising future.





#### WADE MALTON KING

*"Well, Sir, there are two schools of thought."*

Wade would probably be the most extroverted gentleman in the year. As such he will argue about anything, organize anything or anybody and force his partner to play impossible bridge contracts.

His uniform of riding boots, tweed coat and woollen tie gives him the image of a country squire. This is supported by frequent visits to the north-west and by rumours about unallocated term activities at Tamworth Base Hospital. To complete the picture he gallops about on a highly-spirited motor cycle which he hardly ever falls off.

His generosity, honesty and sincerity, plus a certain blonde encouragement, leave no doubt that he will become a most popular and competent country practitioner.

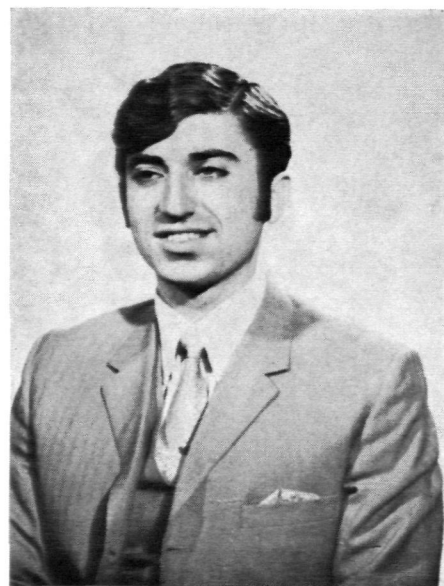
#### MICHAEL KISTER

*"Yummo—you deal!"*

Born of Polish parents in Hungary, on the way to France, he finally made up his mind and arrived in Australia at the ripe old age of four. After meandering through primary and high school he started his tertiary education in the Faculty of Engineering. Deciding that the course wasn't long enough, he transferred to medicine, where he showed his intelligence in the share-market, film industry, bridge, contemplating the female sex and other medical subjects. However, he still found time to develop such side-interests as gynæcology, surgery and anæsthetics.

Like most "with-it" med. students, Michael decided to specialize. The above pursuits competed for his favours, but after a number of trips to Melbourne in fifth year his field was obviously matrimony.

May his way be strewn with many little specialties!



#### DAVID CHARLES KNIGHT

Dave spent his first three years in medicine equally divided between the old med. school and the Union Refectory (where he acquired the name of "bunny-rabbit"). During fourth year he learned to hate bacteria so much that he followed Professor Faine down to Melbourne and did his B.Sc. (Med.) with him on antibiotics.

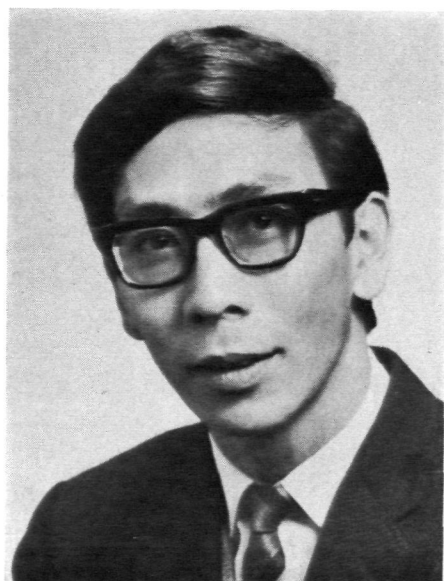
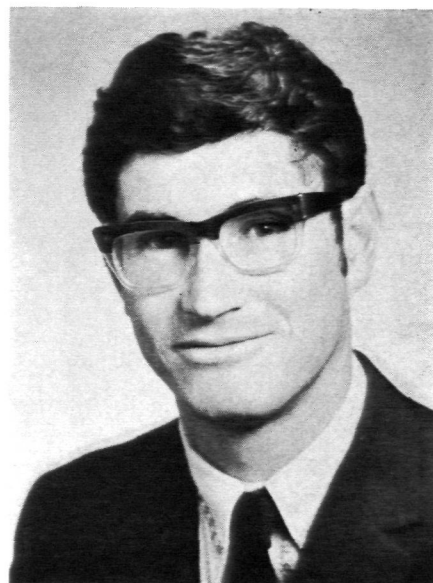
After getting his degree (with honours), he returned to us lesser mortals in Sydney, where he amused the general populace by eating "Vegemite"-and-banana crackers for lunch and bidding seven-no-trumps at every possible opportunity.

We knew he was searching for something in life, and always supposed it was hair, until he returned from unallocated term with the news that he was getting married. This he promptly did, and we wish him luck in this venture as well as his future career as a surgeon.



MICHAEL KOCSARD

After a most traumatic experience with the Ophthalmology Department, during which he contemplated the burning down of Sydney Eye Hospital, Michael entered final year armed only with the "Turf Guide" and his by-now-familiar 4" x 4" note pads. Adding to this Davidson, Macfarlane and Thomas, Townsend and L-Jones, he left no page unturned; to further equip himself for the coming fight he did many laps of the oval—just in case! Seeing his horoscope is bad for the next six months we expect him back next year, but we have our fingers crossed.



BERNARD LAU

*"Double!"*

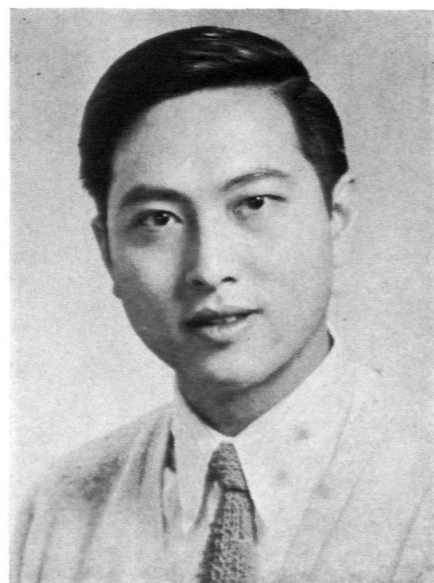
Bernie came into the Faculty armed with quiet determination and a knowing smile. These proved to be formidable weapons, as anyone who has challenged him at the card table or on the chess board will testify.

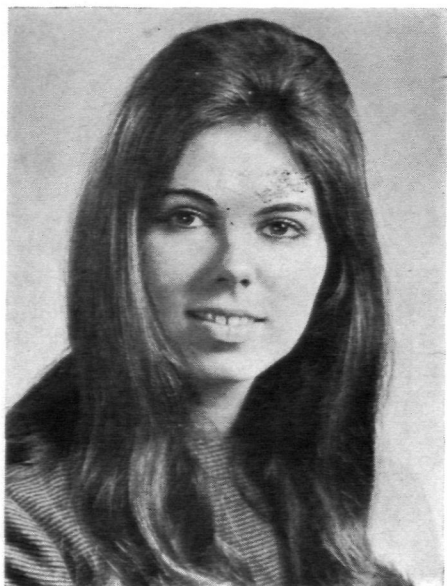
His clinical training has been remarkable for his application of a unique sense of perspective. Early in the course he mastered the art of predicting which tutorials would be worth attending, and this allowed him to utilize his time better than most. As a result, his activities have been somewhat mysterious but undoubtedly fruitful, since he has made a habit of regular success in examinations. It seems likely that he will continue to combine inscrutability and achievement in the future.

JOHN TIN-YAN LEUNG

After spending his embryonic days in Hong Kong, John came to Sydney at the end of 1961. He then hibernated for a few years at Sydney Boys' High before plunging into the wonderland of medicine. Eventually, and by this time in a state of mixed bewilderment and enchantment, he found his way to Sydney Hospital. Here, despite innumerable threats to his health, he managed to contract vast amounts of knowledge and only the occasional cold. He will be long remembered for the highly colourful notes he invariably carried.

Eminently well-dressed (and well-fed), he enters professional life with all the makings of an excellent physician.





#### MARCIA WYNNE LLEWELLYN

Marcia entered Medical School from Newcastle Girls' High School. Her early university years were spent in residence at Sancta Sophia College where her warm personality gained for her many lasting friendships.

At the end of her harrowing second year, Marcia eased all tensions by gallivanting overseas to Europe in the pleasant surrounds of the "Marconi"—under the admiring eyes of many chief officers.

Being the only girl in her tutorial group, she was often the target for questioning by her tutors. In many a D.D. she gained credit with her feminine wiles, a field where her male colleagues could never specialize.

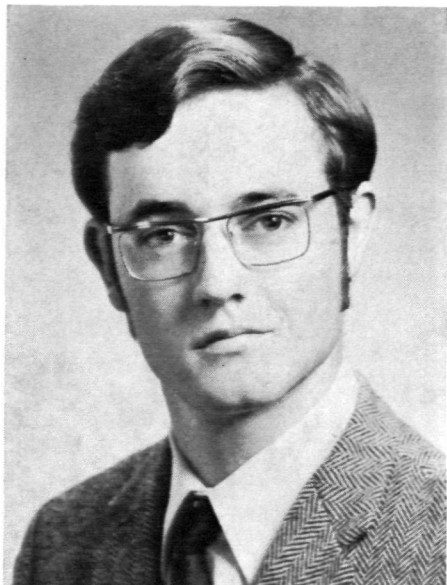
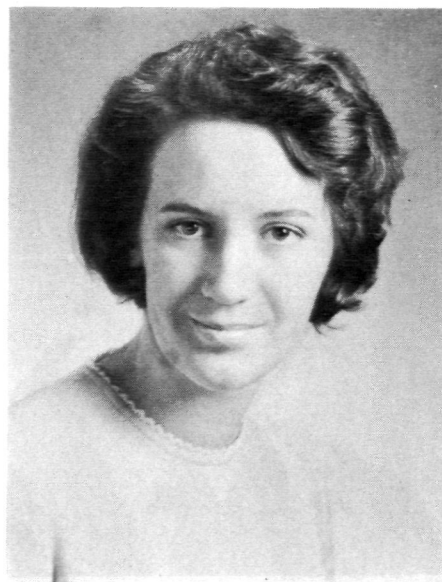
So now Marcia stands on the threshold of many success stories. What patient wouldn't respond to her friendly smile and charming bedside manner!

#### ELIZABETH ANNE McCUSKER

Taciturn and modest, but not to be described as shy, Liz entered medicine in 1965. In spite of the cerebral anoxia she surely must suffer at her altitude, she, like other women of our year, has excelled academically—a fact of not inconsiderable embarrassment to the collective male ego. A prosectorship, prizes in fourth-year surgery and medical history and an excellent academic record have considerable prognostic significance for her career.

Needless to say, she also has impressed us with other talents such as a P.R. technique using "Xylocaine" jelly, an incredible aptitude for tea drinking, and an attitude of unruffled commonsense uncanny in a woman.

All will attest that a successful future is assured her.



#### DAVID GEORGE PENNINGTON

*"Oh, come now. . ."*

From Randwick High, David burst upon the Faculty of Medicine in 1965.

His early years were spent deep in the study of such Freudian pursuits as archery, rocketry and paper gliders, culminating in the near scalping of a certain embryology tutor with one of his more unstable models.

Leaving the pre-clinical school, he proceeded to Macquarie Street with a sizeable collection of D's, Cr's and a prosectorship. There he found himself in great demand, especially by the army (a sudden desire to leave the country resulting in a three-month elective term in Singapore).

Throughout what must certainly be a successful career, David's intelligence, frankness and capabilities will always find him numerous admirers and close friends.

JANICE DOROTHY ROBERTS

Jan began the course with a pile of writing pads and an innate immunity to writer's cramp; she has since compiled a roomful of notes and shows no signs of stopping. Endowed with a quick wit, Jan has a ready explanation for any incident to brighten a dull day. That her success in medicine is due to regular attendance at lectures and tutorials is debatable—it must be the result of hours of solid study on peak-hour trains.

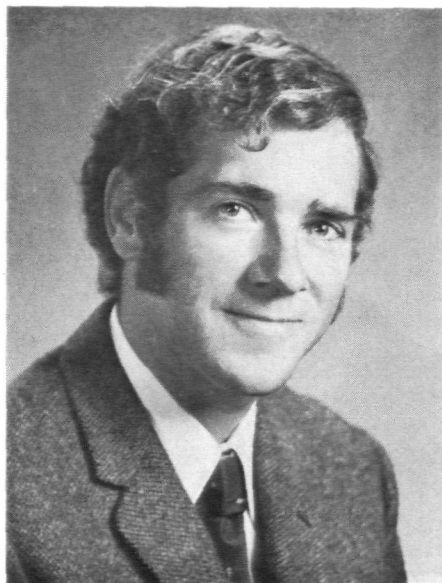
Her remarkable composure and ready smile master any situation. Armed with these attributes and her fountain pen, she has a very promising future in which we wish her all the best.



PETER JOHN ROGER

*"Are you the mythical Mr. Roger?"*

Standing on a windy, desolate beach, handkerchief held in the air, looking out to sea, waiting for any sign of a ground swell, "Surfing Bobbie" Roger is in his element. In keeping with his interest in the more bucolic facets of medicine, much of his education has taken place at the Taree District Hospital, while floodbound at such an unlikely place as "Ugh's Reef". Inimitably elegant, he caused considerable consternation amongst honoraries by appearing at tutorials resplendent in suit and vest. The same sartorial splendour served him well at the Children's Hospital and during frequent forays north of the Harbour. One of the last gentlemen of Paul's, he will prove a valuable asset to medicine and surfing.



DANIEL PATRICK RUSSELL

One of the more senior members of our year, Dan entered medicine after gaining his Leaving Certificate from Sydney Technical College, having been a commercial artist for a number of years prior to his deciding to do medicine.

Dan, with his easy, sophisticated manner, must have, at times, been somewhat dismayed at the behaviour of his younger colleagues, but never allowed himself to show this, mixing well with all with whom he came in contact.

He has continued to amaze us in tutorials with his knowledge of recent journals, a reflection of his avidity for reading.

With his calm, responsible approach Dan will, we feel, have a highly-successful medical career.





#### PAUL ALFRED RUSSELL

Paul started University full of enthusiasm and strong intentions for studying hard. This was reflected in good passes in first year. However, as a sophomore living at St. John's College, he realized that one need not work quite so hard to pass exams. Thus emerged an interest in the sport of Kings, and sessions at the "Grose Farm". This philosophy changed towards the end of Med. V, after an episode of hæmatemesis requiring 50 units of blood and two gastric operations. Paul was now reduced to "Valium" and no alcohol (or very little). The result has been increased study of such a degree that credits are a distinct possibility, and Paul's future looks assured.

#### ROBERT MATHEW SERICH

At 34, an exile from Broken Hill, Bob is a recognized authority on females. Completing Med. I in 1956, he researched his field for nine years under the guise of a drug detailer. The experience gained will prove invaluable as it is rumoured that he will publish a definitive text.

A persuasive talker, Bob has reputedly induced examiners to answer their own questions. This technique should provide a high cure rate among his patients, and matching income. However, the R.A.A.F. have claim on four years after registration, to enable Bob to clinch the sale of the F-111 to Israel.



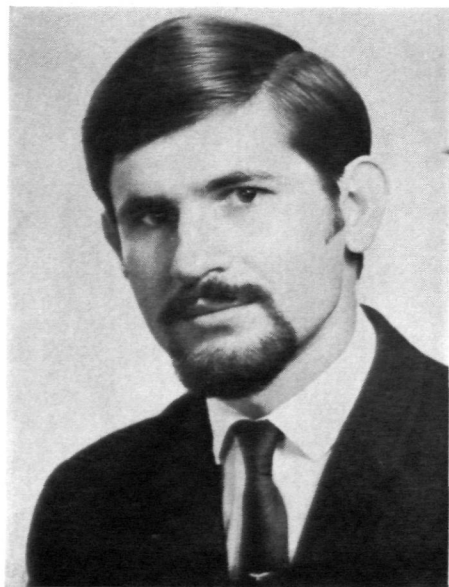
#### SERGIO STARAJ

*"Would you rephrase the question, Sir?"*

A dapper, diminutive, determined dynamo from Drummoyne, he is known to some as Steve. Peering out from his beard and sideburns, he calmly aggravates tutors who, in ignorant futility, probe until they are reduced to a demented heap of frustration. Amongst his other pastimes are chess, bridge, photography and roaming the Tasmanian wilds in pouring rain.

Greatly interested in gynæcology and pædiatrics, he has acquired a wife and five-year-old son—though not simultaneously.

An industrious student in his spare moments, he solemnly promises to devote more time to medicine after graduation.



ROBYN JOY THIEL

Hailing from Albury, Robyn quickly adjusted to the ways of the "big city" while still retaining the youthful vitality of a country girl. Her self-assurance has stood the test of being the only girl in her group.

Romance blossomed in fourth year and culminated one year later in acute left-wrist drop.

As a result of an "absorbing" elective term at the Children's Hospital (studying small-bowel atresia), Robyn's future in pædiatrics seems assured.

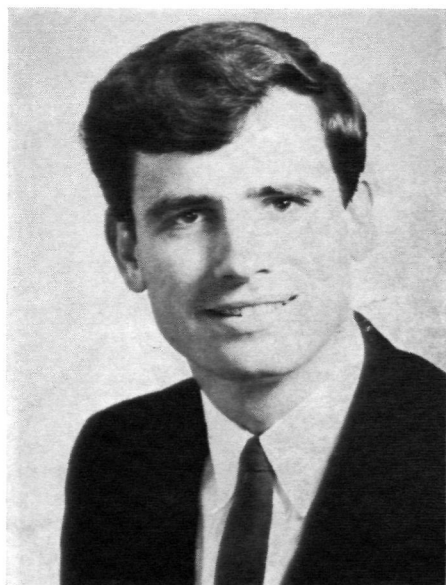


KENNETH WILLIAM TIVER

Ken had difficulty in deciding whether to become a second "Ben Casey" or a roving, carefree geologist. Finally he decided upon medicine, but never really pushed his "geological" urges to the background and compensated by doing geology as an optional subject in first-year medicine.

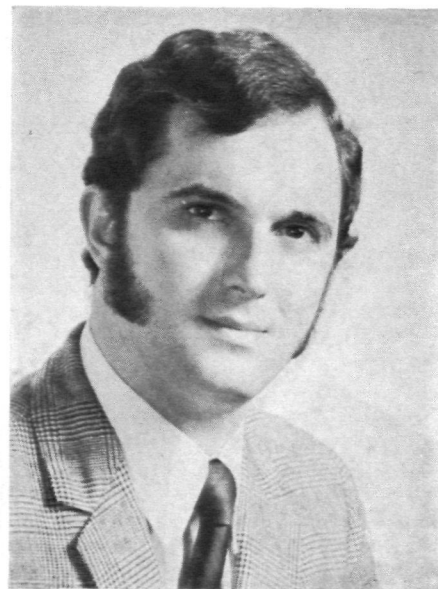
Ken takes every available opportunity to retreat to the hills, where he spends many a long hour tunnelling through muddy caves to catch a glimpse of nature's beauty. He is, of course, also a compulsive bush walker and rock climber.

Throughout his medical course, Ken has been a keen, conscientious hard worker. Because of this dedication, together with his fine sense of good humour, we know he will achieve much in future years.

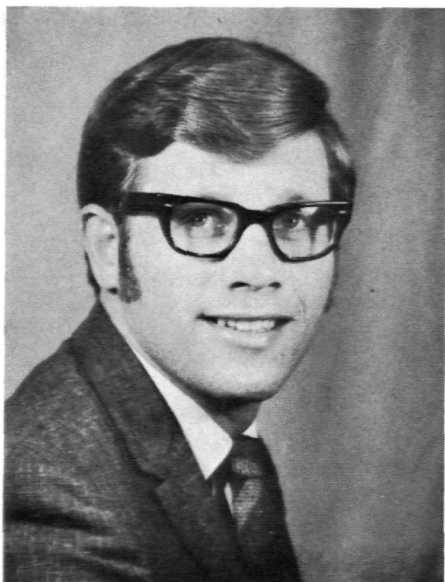


KENNETH JOHN VAUX

Impeccably dressed, Ken commutes daily from Oatley to the Sydney Hospital with a copy of the *Herald* which he takes with coffee until 10 a.m. Then, donning a white coat, he performs his daily rounds of the female wards, charming his way into the confidence of the latest pretty admission. With seductive bedside manner and legendary nostrils (he can detect social disease from afar), Ken naturally favours gynæ. Compulsively attending all lectures and tutorials, he still manages to eat, play bridge, wash his hands countless and, occasionally, to 'phone his fiancée. Such are his qualities that the Army has insisted on his service for at least two years.







ERIC WAJNRYB

*"What was the lecture about?"*

Eric's entry into medicine was a familial one, and from first year he has passed through the years unscathed by the hazards of examinations—something which has continually amazed those who know him. In spite of his studies, he has managed to fit in an active social life, learn to ski, and has even renovated his car a few times. He has often been seen emerging from under his car perfectly clean—this, no doubt, being an extension of his general aseptic technique.

Eric is an admired and respected colleague, a true and generous friend, and we wish him all the success which is sure to be his.

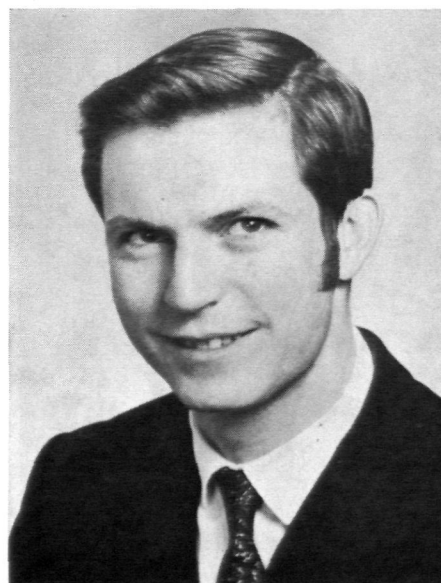
IAN BARRY WECHSLER

*"How yer goin'?"*

Gesticulating his way through many a tutorial answer, and constantly supporting the underdog, Ian has made many friends during the past six years. His acquaintances are not only restricted to his medical colleagues—they extend enthusiastically to female students, nurses and patients. Cardiology for Ian consists in repairing broken hearts—he is the only medical student to feel a thrill through the left breast.

Leaving Canterbury High, Ian's decision to enter medicine came as no surprise—he followed a familial pattern. This bridge-playing, demoniacal driver from the west has impressed many with his generosity and good-naturedness.

Ian's conscientiousness and dedication assure him a bright future. We look forward to sharing his successes with him.



JOSEPH WELTLINGER

*"The happy mo."*

After escaping from Hungary with all but his hair intact, Joe settled down on a chicken farm in Israel. The plucking business was getting him down, so he migrated to Australia. Although he knew no English at the time, he has now acquired a very good accent with only a touch of English.

He transferred his acting talents (he was a pirate in "Pirates of Penzance") from Randwick Boys' High to the field of medicine, where he has been acting ever since. His unusual lunches amused (?) his colleagues throughout the clinical years.

He is a "thoughtful" bridge player, never spending more than two hours on one hand. The same thoughtfulness has been extended to his studies and we are sure he is going to mumble his way into the heart of many a patient.

MAXWELL JAMES WILLIAMS

After gaining the Intermediate Certificate at Lismore High in 1949, Max began work on the family dairy farm. However, in 1957, he entered motor racing with an M.G. "T.C.", and competed regularly on N.S.W. and Queensland circuits for the next four years. After visiting England in 1961, he returned with a factory-built racing car, only to retire from the sport soon after. He threw himself into farming once more and began a programme of diversification and expansion—taking over another farm, and establishing a pineapple plantation. Finally, in 1964, he joined the day matriculation class at Sydney Tech; here he met his future wife, whom he married at the end of Med. I.



GEORGE KAM KWONG WONG

*"Can I physically examine you?"*

Forsaking the nefarious pleasures of his native Hong Kong, George came to us via the Christian Brothers' College, Waverley. Despite this Westernized education, however, he has retained many of his native customs, as those of us who ate abalone and noodles at R.A.H.C. or shared sweet-and-sour pork at a former fan-tan den in Dixon Street can testify. He has also retained a subtle Oriental charm invaluable in his approach to patients: "Have you got any lumps or bumps in your axillæ?"

With the process of Vietnamization almost complete, we trust George will now receive sewing lessons from his charming girl-friend, completing an education begun in the labour ward of Crown Street.



HELEN ROSE WOOD

Helen entered Medical School from Newcastle Girls' High with an enviable academic record, smiling innocence and sublime charm. Based at the Women's College, her earlier years were spent in social bliss and various romantic interludes.

In her clinical years, Helen suffered from stage-fright in her first hernia examination. She brightened many dull tutorials by her unprecedented answers.

Her private life remains a mystery, in spite of frequent quizzing by both her colleagues and her tutors.

Better known as "Westy", she was often seen in a pair of shiny boots, which led us to believe there was more to Helen than her conservative, lady-like exterior.

Helen's bright personality ensures her much success in the future, and we wish her all the best.





DAVID RONALD WOODHOUSE

*"C'est moi, c'est moi, I blush to disclose. . ."*

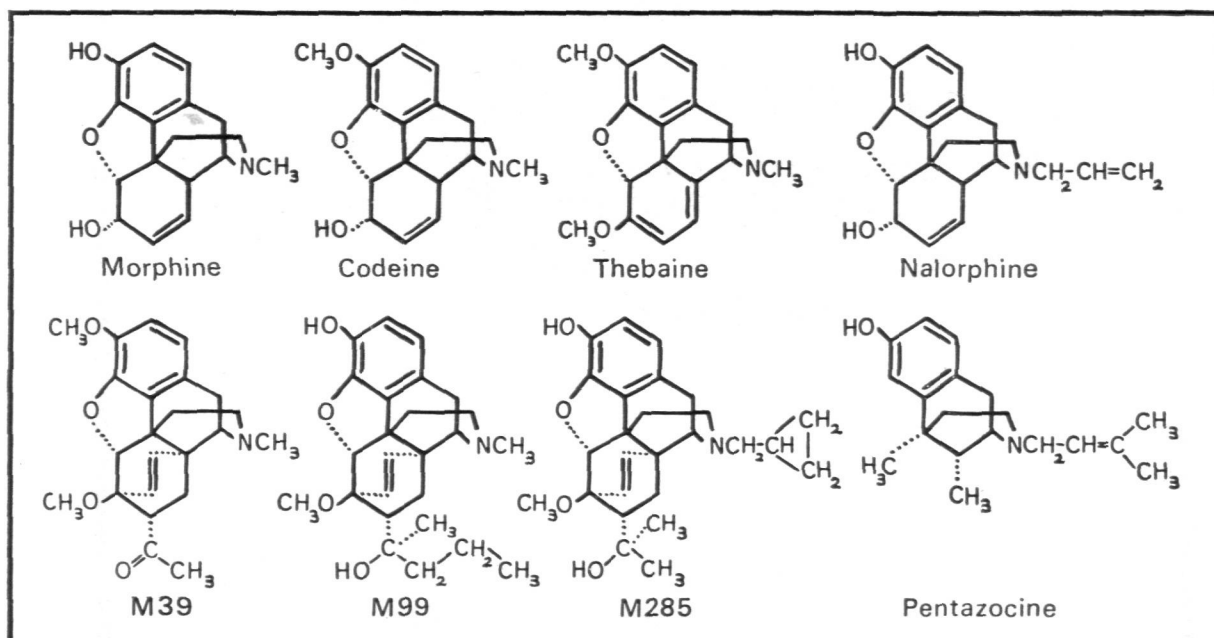
Entering Med. I in 1965 from Sydney High, David soon distinguished himself academically, but kept a surprising number of talents temporarily concealed. In succeeding years he has demonstrated remarkable artistic feats of caricature (directed principally at lecturers of note), an active interest in the Medical Society, a sense of humour occasionally of almost epileptic proportions, and a pathological interest in gynæcology, both social and professional.

Foremost fond memories are of archery on Sundays, Manning lunches on Mondays, Thursday comedy sessions and Saturday-night etceteras.

We are sure that David's Cheshire grin, able mind and conscientious manner will make him as good a medico as he has been a student and friend.

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A dramatic new discovery in the field of analgesics is represented by the diagram above. From the initial compounds prepared, further research has resulted in the development of compounds with 1,000, 5,000 and even 10,000 times the potency of morphine. It is this type of research that makes Reckitt & Colman a leader in its field, both here and overseas.



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*"Caritas Christi Urget Nos"*

## ST. VINCENT'S HOSPITAL

The year 1970 sees the close of an era, for St. Vincent's Hospital now completes its long and happy association with the University of Sydney.

Dating from the first group of students attached to the hospital in 1924, there has grown up a splendid *esprit de Corps* in the Clinical School, in which teachers and their pupils have been closely associated to the benefit of all, and the hospital authorities and nursing staff have contributed so very much to a most effective liaison.

And now, after producing nearly 1500 graduates of fine distinction, with the added honour of being St.

Vincent's men, we say farewell, with great regret, to the University of Sydney. It has been a time of great satisfaction to us all.

It is fitting that our Final Class of Sydney University students should show the promise of even greater distinction than the successes that have preceded them. We know that they will uphold the honourable traditions we have come to cherish, and we wish you well in your careers.

I am confident of your success.

P. J. KENNY,  
Warden of the Clinical School.

## THE HONORARIES



WILLIAM JOHN GERARD BURKE

*"Where could the lesion be?"*

At the commencement of the year, Dr. Burke's tutorials were episodes of intrigue and mystery, but gradually, through the perseverance of Dr. Burke, we have come to appreciate how challenging and satisfying neurology can be.

After a constant barrage of the "picking the lesion" competition, we have all learnt to attack the problem in a similar and calculated manner as does this very knowledgeable and impressive gentleman.

We are indeed grateful for this guidance.

RICHARD DANIEL CONDON

Until final year, few of us knew this dynamic teacher, who combined an extensive knowledge of surgery with a systematized, lucid and entertaining presentation. His sense of humour and personality lifted us out of our late-afternoon stupor to new and exciting levels of participation.

His ward rounds were always easy on the psyche—his reprimands were always gentle—"Of course, that means failure, you know!"—he would often be seen hurrying through a ward to the blackboard outside, a gaggle of earnest-faced students forty paces behind.

We will always remember Mr. Condon for his interest in our academic welfare, for his sympathetic approach to patients and students, and for his wide knowledge and his readiness to impart it.



IAN COPE

The greatest test of an obstetrician is when his keenest critics, the students, send their wives to him in later years. So it is with Dr. Cope.

When we first met this unassuming man in fifth year, out-patients we were impressed by the efficient, sympathetic way he handled his patients, but it was not really until final year that his depth of knowledge quietly became apparent.

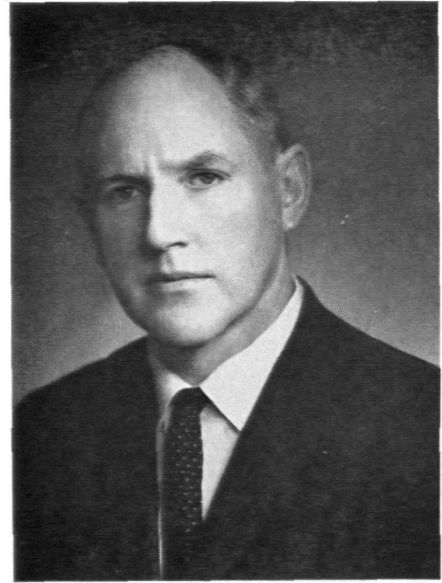
We are indebted to you, Sir, for your fine example and for all you have taught us.

## BRIAN CURTIN

Tutorials with Dr. Curtin, with his quiet and unassuming manner, resulted in us developing a logical and relevant approach to the patient and to his whole situation.

Dr. Curtin exemplifies how successful and rewarding this approach is, especially when combined with his sincere dedication and interest in all his patients.

We are grateful for the opportunity to appreciate and to learn this gentleman's enlightened attitude.



## REAY IGNATIUS EAKIN

*"That's a bit flash, Doctor."*

Through his thorough understanding of the needs of his patients, this fine physician taught us a great deal about the problems of medical management that will confront us in future years.

Very friendly and aware of the backwardness of medical students, we soon found ourselves in the unique position of offering opinions on the treatment of the apprehensive patient whom the group had surrounded. Many a time the rounds came to a standstill, due to his comical humour in summing up a situation that we were confronted with.

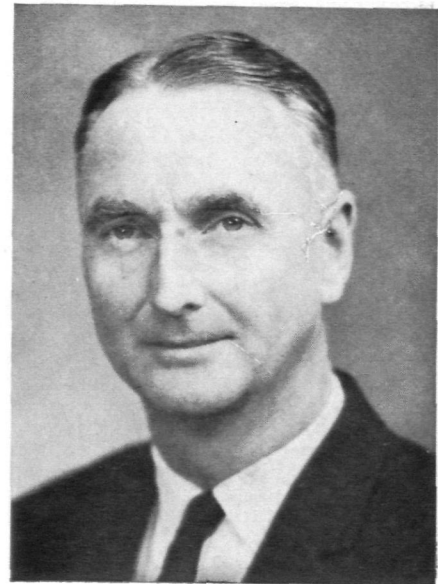
## JUSTIN PAUL FLEMING

*"And who belongs to this patient?"*

From our first acquaintance with Mr. Fleming, with a firm "No hands in pockets and no chewing gum", we began to appreciate how enlightening it is to follow up and completely "work up" a patient at a time.

Mr. Fleming agrees that with a questioning and demanding teacher, students can learn and remember.

We appreciate being able to have listened to and to have learnt from this very capable and intelligent gentleman, with his systematic and decisive approach to all his patients.





GEORGE VINCENT HALL

*"You don't always have to have the bloody lot."*

After a series of excellent therapeutic lectures in fifth year, we met Dr. Hall again in final year, both as a tutor and a lecturer in medicine. His practical, clinical approach was invaluable to the student, so confused with theoretical concepts and with a jumbled idea of the approach to a patient with a particular disease. His searching tutorials, at times, left us slightly depressed, for at the end of any list forwarded by the student came the inevitable question, "Yes . . . and what else?" We are grateful for all his help.

PATRICK JOHN KENNY

*"Sit down, son . . . what can I do for you?"*

Our first duty to our "father figure" is to congratulate him on his appointment to the presidency of the Royal Australian College of Surgeons.

Although our tutorial contact with him has been kept till final year, it is obvious the good wine was kept till last. His tutorials are lucid and practically orientated and the attendance bears witness to their worth.

Mr. Kenny has that classical surgical charm that engenders trust and confidence in his patients and students alike.

For his help and encouragement over the last three years we thank him sincerely!



ROBERT McINERNEY

*"I'll be there unless the stork intervenes."*

This dignified obstetrician is renowned for his impromptu tutorials at St. Margaret's at 3 a.m. This year he has been "rounding off" our knowledge and making sure we treat the woman and not the uterus.

He is often seen in person in the foetal breech position. Occasionally he has been seen in the newspapers in the extended position. Although he always has a tip for the races or a comment on the football, his judgement of the pregnant woman is sounder.

We all appreciated his enthusiasm and careful clinical guidance.

## NOEL NEWTON

*"If what you mean to say is. . ."*

Tuesday's tutorial at 10 a.m. was probably the most gruelling of them all. He was never satisfied with an answer less than completely right and, one by one, members of the group fell by the wayside until, at noon, we cried "Enough!"

His precise and thorough surgical tuition was always illustrated by carefully-chosen patients. We found him both entertaining and stimulating, and appreciated his interest in our academic knowledge and extra-curricular activities.

Thank you, Mr. Newton.



## KEVIN WALTER PRIDDIS

*"'Lichen sclerosis et atrophicus'—you can tell it's Latin by the 'et'."*

This remark, while being no indication of his knowledge, is typical of the way in which Mr. Priddis simplified and clarified those strange conditions that are peculiar to the female. We first met him in fifth year, and were delighted by the way in which he was able to impart an hour's lecture in half that time, thus allowing thirty minutes for pre-dinner drinks.

Mr. Priddis is rather unique in that he is senior gynaecologist at St. Vincent's while being a senior general surgeon at another teaching hospital; thus it was we were given the best of both worlds, and our only regret is that we didn't see enough of him.



## ERIC WILBERFORCE SIBREE

*"Morning, boys and girls. My name's Sibree and I'm going to show you the simple things."*

With the optimal balance of authority and understanding, Dr. Sibree's teachings were always well-formed, regular, frequent and with little blood loss.

His teaching acumen lay in his ability to start the students thinking rapidly and logically, and helping them to present their thoughts with a new-found and surprising efficiency.

We feel we have seen both sides of Dr. Sibree—from the tall, tailed, dashing figure at the Easter Ball to the kind, sympathetic honorary physician during a ward round.

He successfully practised and taught medicine both as a science and as an art. For this example, Sir, we will always be grateful.







## FRANCIS KHIN-YOONG THONG

*"Are there any Catholics in this group?"*

A welcome addition to the teaching staff, Dr. Thong's generous devotion to his patients and students was immediately appreciated. He has brought to the students of St. Vincent's Hospital not only the benefits of his extensive post-graduate training, but also of his own characteristic attitudes.

His awareness of the more recent gynæcological advances reassures us that gynæcology is a progressive branch of medicine.

Practising medicine as a humane science, he has shrewd insight into his patients and their motivations, and treats them not as medical cases but as people in a permissive society.

Dr. Thong leaves fond memories of ancestral wisdom, braces and "owarian" tumours.

## HARRY MATTHEW JOHN WINDSOR

*"I don't know what the physicians tell you, but. . ."*

This dedicated thoracic surgeon will long be remembered for his interesting and well-prepared ward rounds, centred around the third floor of "Windsor Castle". He taught us all, and more, about thoracic surgery. He was always willing to give us all his spare time, which was exemplified by the throngs of students following him from bed to bed on a Saturday morning.

As well as his knowledge of surgery, he found time to teach us about electrocardiographs, which we had missed from the physicians.

Equipped with a fine sense of humour, Harry will long be held in our highest esteem.



## OUR OTHER TUTORS

We are grateful, first of all, to those members of the U.N.S.W. staff who spared the time to teach us. Professor Tracy was most willing to give of his time, and gave us a series of excellent surgical lectures. Mr. Hugh's lectures were also well received, and were lacking only in their frequency. Professor Hickie's lectures on the cardiovascular system were also much appreciated.

From Mr. K. Bleasel and Mr. A. Connolly we learnt the basics of neurosurgery, whilst Mr. H. Windsor and Mr. M. Shannhan, with a series of lucid lectures, made thoracic surgery slightly less formidable.

A special note of thanks goes to Dr. G. Chapman and Dr. T. Hanks, for their truly Spartan effort in never once missing an 8.00 a.m. radiology tutorial. Their

sessions were really valuable and their new system of "teach-yourself radiology" by using tape recordings was very well received. At a slightly more respectable hour of the day Dr. McManis gave some most worthwhile and enjoyable sessions on the chest X-ray.

Mr. Rowe and Mr. Roarty covered the subject of orthopaedics in a series of relaxed lectures, whilst Mr. McNamara taught us the fundamentals of urology.

Dr. Hennessy's lectures on the gastrointestinal system were clear, useful summaries, for which we were most grateful.

To these men, and to all the many others who were so generous with their time and helpful with their knowledge, goes our sincere thanks.

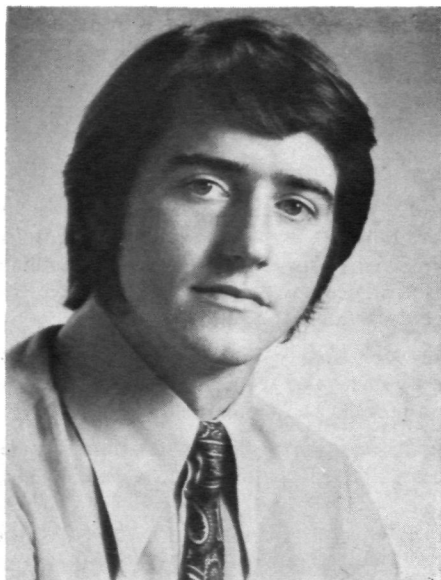
## THE REGISTRARS

Being so close to the management of emergency conditions and first-hand patient care and not so far away from their own student days, tutorials from these doctors were invaluable:

TIM BOHANE  
DAVE BRYANT  
ALAN CONCANNON  
MERV. CROSS  
NOEL DAN  
TONY D'APICE  
JOHN EDMONDS

VIC FAZIO  
JIM ISBISTER  
BOB McKENZIE  
JIM RYAN  
DAVE RAMSDEN  
JOHN SOLOMON  
MAX WILSON

## THE STUDENTS



ROBERT PAUL ALLISON

*"Excuse me, Professor, I'M speaking!"*

Paul came from the heart of the St. George district intent on painting the town red (and white).

Acquiring a woman quietened his behaviour but not his colourful clothing or his somewhat forceful nature that comes to light in discussions with lecturers, tutors and occasional visiting professors.

By swindling Deluxe Cabs, Paul financed a full non-academic life, specializing in "coarse" rugby, lousy golf and suicidal surfing.

Paul has been a willing friend, especially when getting some of us jobs for unallocated term. Incredibly, we highlighted his organizing by offering an unpaid job and camel in Afghanistan.

We're sure he'll succeed wherever he goes—probably New Zealand—provided some of the clothes and hair stay behind.

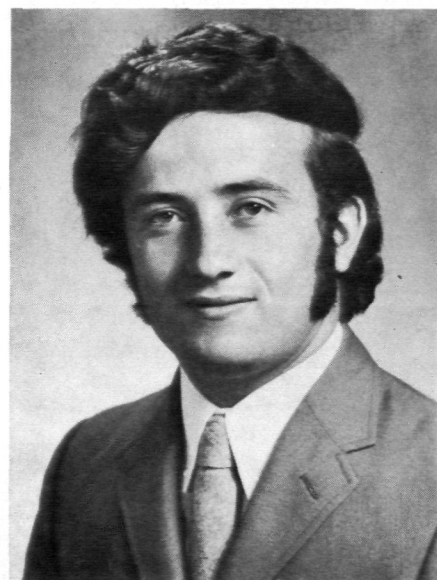
PAUL FRANCIS ATKINS

*"Life is so smooth, man, there ain't no bubbles that'd burst in this cat's mouth."*

Leaving Bronte Beach, Paul entered the portals of medicine in search of more acceptable academic activities. However, he often regresses to his old ways in loving search of sun, surf and supertan.

Remaining remarkably free of pilonidal sinuses, Paul went on to wage a passive-aggressive campaign against barbers (with his periodic hyper-hirsutism), text books (with his polaroid cerebrum), and the establishment in general (with his sandshoe shufflings where shufflers shouldn't shuffle.

Undoubtedly, his good nature and infectious grin will win him the respect of colleagues and patients alike.



FRANCIS JOHN AUGUSTUS

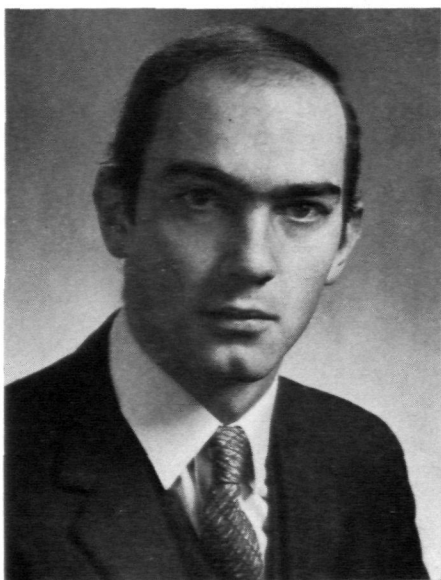
*"Great!"*

". . . and so too is the world and the people in it." Thus he believes. John has a ready ear for the joys and woes of people and is sympathetic or enthusiastic as the occasion demands.

Under strain, John's constant stroking of his head has left its mark (see replica). The more he worries, the worse it gets.

A lover of all that's fine in the arts, music and haute hospital cuisine, he is sure to emulate his namesake, Augustus John (pity he got it muddled) in acquiring fame.

In the future, John, with his kind, sensitive manner towards patients, will surely be a distinguished practitioner of medicine.



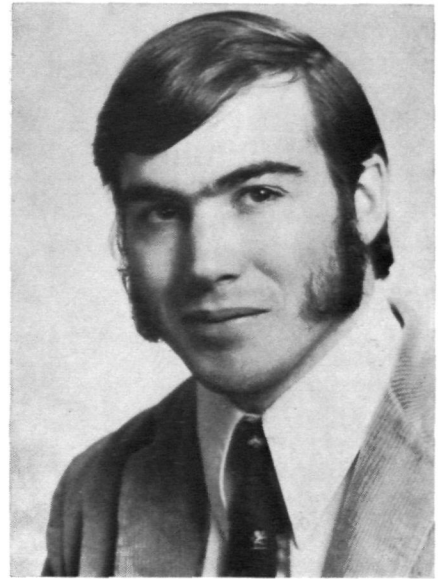
## CHRISTOPHER PETER BAMBACH

*"You can't drive a ten-inch nail with a tack hammer."*

Since leaving Scots, Chris has had an exciting series of encounters with authority figures, particularly University guards, who vainly attempted to keep his V.W. limousine off the campus. The V.W., incidently, was last seen heading across the Nullarbor in a cloud of rust.

His many outside activities include water-skiing, Christine, professional singing, Christine, a promising football career frequently curtailed by fashionable injuries, Christine, golf with his specialty shot—an over-the-shoulder-into-the-bushes club throw, and Christine.

He will undoubtedly be best remembered by his friends for the development of a sensational new party trick and a rather unique method of examining rectal carcinoma.



## SYLVIA BARBER

*"Do itashi-mashité (don't mention it!)."*

Sylvia surrounds herself in mystery, having entered medicine as an alternative to artistic Bohemian pursuits. Love of adventure sent her to the East, where we nearly lost her to the Japanese. Now she's settled for a Mazda and a beard.

Social organizer extraordinaire, familiar with most night spots, Sylvia can arrange anything in a flash. Always remembered for an acute exacerbation of extroversion at the Music Hall; Grade A. screams; Japanese lessons in Med. V.; and a tutorial in obstetrics at Martin Place.

Apace with the times in thought and gear—plus an exuberant spirit and love of life acting as a prophylaxis against stasis, combined with understanding and warmth towards people, ensures Sylvia a satisfying and rewarding career.



## GEOFFREY LEONARD BARRATT

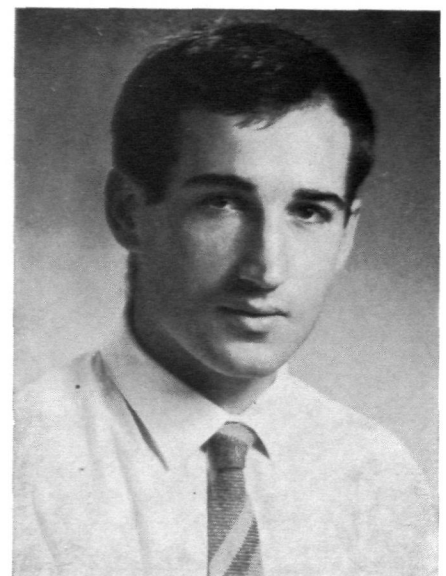
*"More breasts. deedleedleedle!"*

This St. Paul's collegiate from Deepwater entered medicine in 1964 and was soon captivated by anatomy—"A wild, groovy scene!"

Later he switched his ecstatic attention to a certain pharmacy student from Women's College. Tricia and Geoffrey soon decided to make their liaison permanent and in 1969, Trish crowned their association by presenting Geoff with two sons. She now has her hands full keeping her three boys in check.

His ingenuous nature makes Geoffrey something of a Peter Pan personality (you won't find it in Noyes and Kolb). His permanent links with childhood would be an immense advantage in pædiatrics, but he seems determined to enter general practice.

Whatever his future, happiness is assured for the entire Barratt family.





## MICHAEL NORMAN CHESTER

*"Hey, Igottagrayscale. . . !"*

Confused or confusing, is he mad, or are you? This is a quandary one is sometimes left in after being presented with one of his racy word salads. Perhaps this is a result of his international associations—a sojourn in Israel, a term in Japan, and tomorrow the world.

Lately he has developed a new sense of fashion—striking combinations of elegant striped shirts with foreign Medical School ties.

Outside of crashing through Junior Med., Mick took up taxi-driving for kicks, now he is a qualified Kamikaze driver . . . possessed of a good insurance policy!

Warm, generous, kind-hearted, unpredictable, how did he manage in Japan, or did he just reply to a giggle with a giggle?

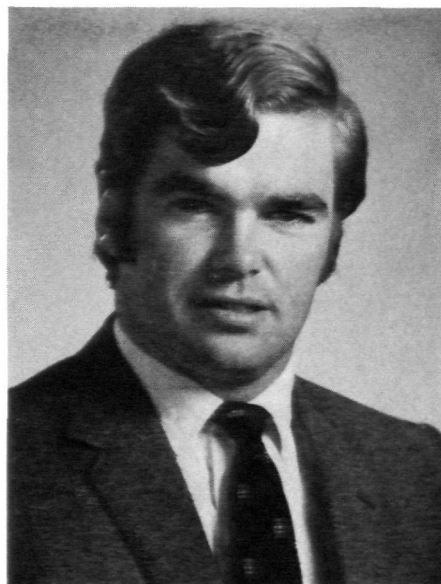
## SIMON DOMARA CLARKE

*"Whippy repartée, Pete!"*

Following a distinguished career at Scots, Simon was given shore leave by his father to do medicine.

One word describes Simon—"Keen". He is the one person who can answer a yes/no question with a ten-minute discussion of the most obscure aspects, drive to Newcastle to see a girl, or run around Paddington for months in preparation for football. Rugby Union is one of his main loves, and his chief concern about final year is it cuts into his playing time.

During holidays, Simon is liable to disappear hitch-hiking, turning up at extraordinary places at extraordinary times. He is a big guy with a big future ahead of him.



## STEPHEN COLAGIURI

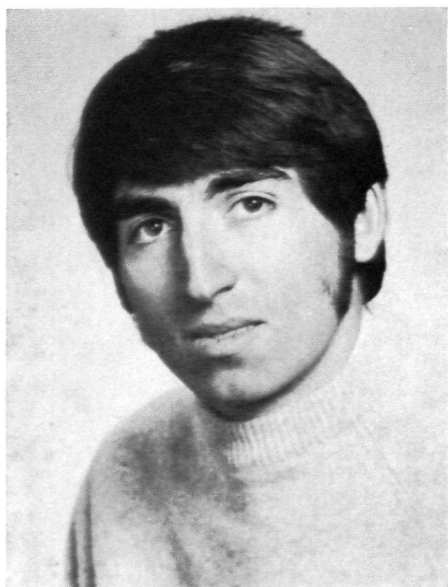
*"Hooley dooley."*

Aspiring to a career in mathematics, Steve entered the Science Faculty, but seeing the error of his ways, spent Med. I in full-time biology and professional soccer.

Little is known until fourth year, when he burst into the world of cards, turns, quick trips to Thredbo and continued academic success.

Socially adept (apart from his demolition of St. Margaret's during soccer practice), and forever well dressed (down to his tailor-made clinical coat), Steve always knows of several turns, and is renowned for his ample supplies of home-made red wine and purple feet.

His new red M.G. "A" bears witness to his somewhat flamboyant character, and we are sure he will be a "screaming" success in gynæcology and a little obstetrics.





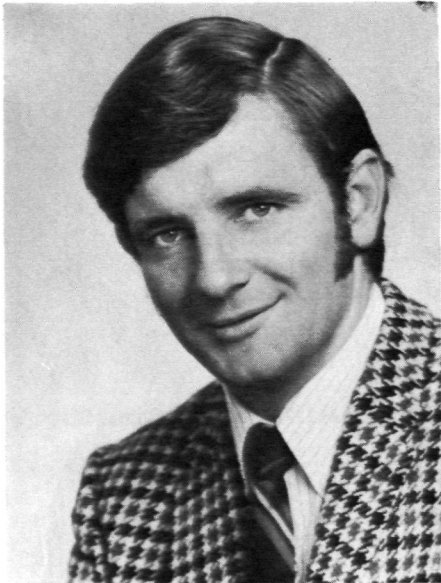
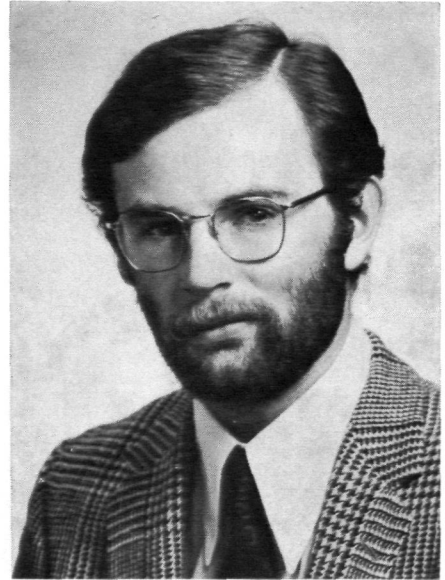
## STEFAN ALEXANDER CURTIS

Upon graduating from Randwick High, Stefan migrated to the sands of Bondi, and upheld a firm belief in the formula of surf, sun, sex, skiing and soccer while creditably attacking the medical course.

He has interrupted these pursuits with such anomalies as spina bifida and assorted imagined fractures, resulting in a personal X-ray library.

After an enjoyable term amongst the natives of New Guinea, he prepared for final year with a haircut and yet another beard. He longs for a seaside hospital resort and sufficient capital for a "VW" combie.

With his natural and intelligent approach to life, Stefan will enjoy a very satisfying career, with success an inevitable accompaniment.



## JOHN FRANCIS DAVIS

Upon leaving Waverley College, John entered engineering, but to his horror, "there was only one bird in eng.", and swiftly changed to med. where the odds were slightly more favourable; exams? . . . another matter, so we next find him in science. Still discontented, but armed with maturity, a B.Sc. and a new scalpel, John again challenged med.—with every success.

John is well known for his social energy, which has remained unchanged despite the passing of years. We do not wish John success, for if ever there was a Midas in medicine it must surely be he—as witnessed by the miraculous conversion of one Morris "1100" to a gold M.G. "B" during fifth year. We simply have confidence in his future.

## ROBYN DOHERTY

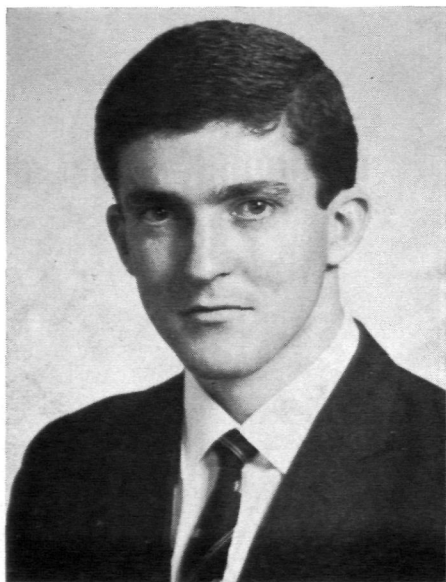
*"I've got to get a new man."*

Bubbles came to us from Sydney High. She is one of the more intelligent, attractive and neurotic birds in the year. Her figure won her Miss Med. and Miss Surface Anatomy and has been seen beneath pyjamas at St. Margaret's tutes. Despite neurotic episodes before exams, Robyn excels academically.

She is intimately known by many for her keen interest in the interpersonal complexities of her associates—responding to these with sympathy and understanding. Her spare time is spent on the beach, playing solo or pokies with the blokes.

There is no doubt that Robyn will be a success in medicine, and we wish her all the best.





## JOHN MURRAY FLYNN

It was no surprise to anyone that John, after a fine record at Riverview College, entered medicine, for both his grandfathers, his father and his father's five brothers were all well known and respected medicos, a record which makes the Flynn family unique.

As a person, John is a fine friend, and his unselfish willingness to put aside his own problems to help another has been appreciated by more than one of us. He is admired by all for his high standard of personal conduct and for his sincere dedication to medicine. His intelligent, enquiring mind, coupled with an innate sensitivity and feeling for others ensure that he will more than live up to his family tradition.

## JENNIFER JILL GORDON (NÉE BARTROP)

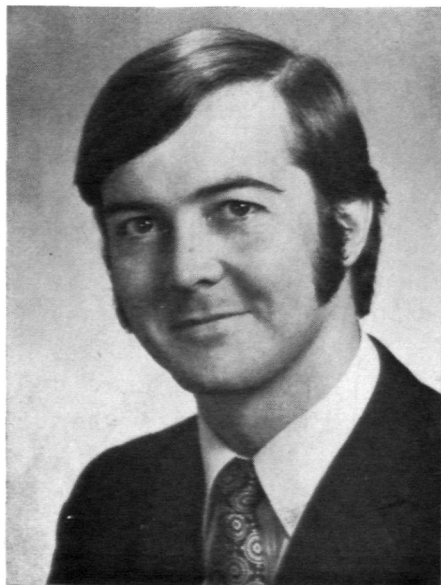
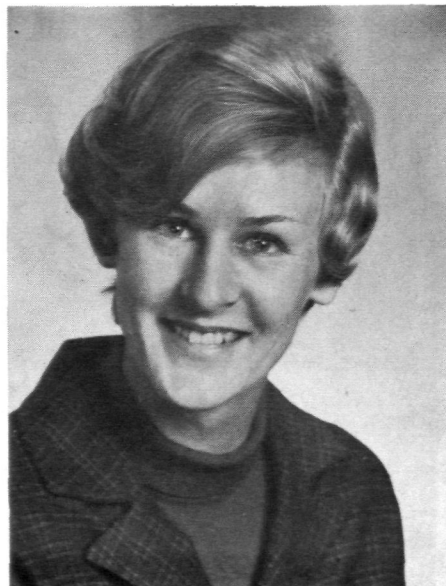
*"Where thoughts serenely sweet express how pure,  
how dear their dwelling place."*

This enigmatic, blue-eyed blonde entered medicine in 1964, and might have sailed serenely through the course but for a dose of infectious mononucleosis which, Jill claims, was due to a burning desire for personal research into this fascinating disease.

The year 1967 saw further research, this time into golf, when Jill represented Sydney University at I.V. in Brisbane. Curiously, Sydney finished fourth out of five teams.

Undoubtedly, 1969 was Jill's most glorious year, for in August she married Richard. "More research", she said, smiling, but refused to elaborate.

Jill has always had a penchant for psychiatry, and has her sights set on a couch and notebook once she has provided Richard with heirs.



## PETER RICHARD ADAMS GORDON

Observing an X-ray:

*"It's either a male or a female with a bilateral mastectomy."*

PRAG entered the Faculty in 1964 from King's, and proceeded to follow his burning ambition—to become a golf pro. However, he found it expedient to devote a proportion of his time to medicine, and has yet to realize his ultimate aim—a zero handicap. In 1968 he discovered that he could make a better impression on a certain fellow student than on the little white ball, and accordingly left Andrew's to marry Jill in August '69. He is even rumoured to have been seen pushing a buggy (correction—trolley) in the local supermarket, but doesn't seem to mind. A sunny future awaits the Gordons in Belmont, Richard's home town.

## ANTHONY MOSS LIVINGSTONE GREENBERG

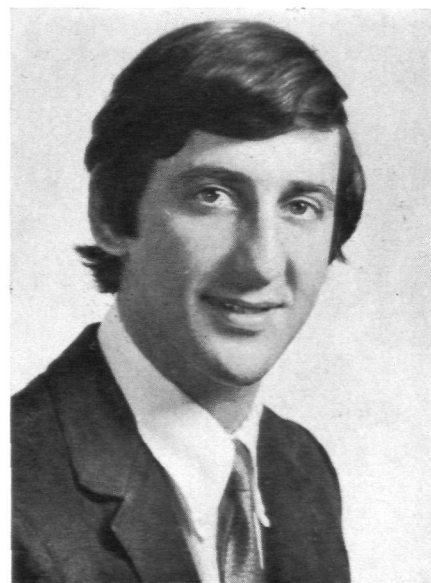
*"It'll only take five minutes to get there!"*

—"GRUB."

Tony entered medicine via dentistry following a successful football career at Scots. He was late entering medicine and has been late for everything since. It is reputed his friends work on both E.S.T. (Eastern Standard Time) and G.M.T. (Greenberg Mean Time). Although a dedicated student, he has, nevertheless, found ample time for football, golf, water skiing, repairing his M.G. "A", and Suzie, achieving proficiency at none.

Tony has enjoyed considerable success in exams, but undoubtedly would have done better had his spelling been less unique.

Tony has made many friends in medicine with his warm personality and outgoing nature, and we consider that e-"N"-t is undoubtedly the speciality for him. However, Tony assures us appearances can be misleading.



## FRANCES HANLY

*"I told you—I don't know . . . Sir!"*

Although intolerable at school, Frances is really quite approachable if one is tactful—a fact that more than one honorary has overlooked. This petite, invariably well-dressed female of unmistakable appearance—blue hands, black eyes, waist-length hair—is one of the more silent types of the group.

Frances' interests include good books, good theatre and—any Scotch. She leads an active social life, which reached its peak late last year with the ablation of an Armstrong Sidley.

An outstanding and dedicated student, Frances is assured of prominence in medicine and will be remembered by us all with affection.

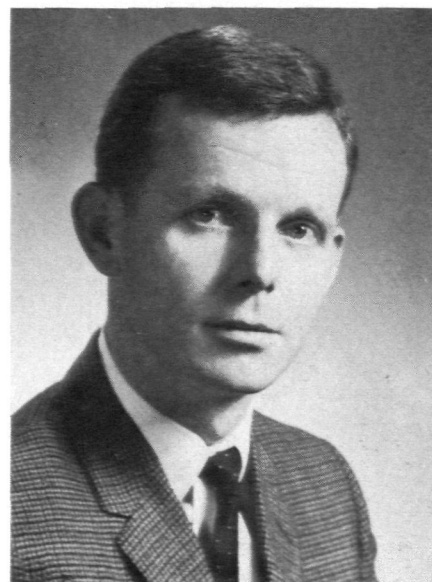
## MARK ROBERT HARDY

*"Why is it sometimes better to say nothing?"*

Mark commenced his University life following a sojourn at St. Patrick's College, Goulburn. Although his early days in medicine remain somewhat of a mystery, Mark joined us in second year with much enthusiasm and determination bred from a detour into the business world.

A man of many capabilities, Mark has since majored in cards, taxi-driving, hamburger-cooking, pump-jockeying *et al.*, and since the arrival of his third son has taken a keen interest in the tonsorial art.

To Mark, who has exerted a mature, conservative and fatherly influence over the younger members of the group, we wish the very best for the future, assured as we are that no matter which facet of medicine he chooses, he will succeed in it.





## ELIZABETH HEKS

Although Elizabeth did not escape during the Hungarian revolution, there is no doubt that she is a revolutionary Hungarian! This charming girl came to us in September, 1964, and in a few months picked up enough English to get her into second year.

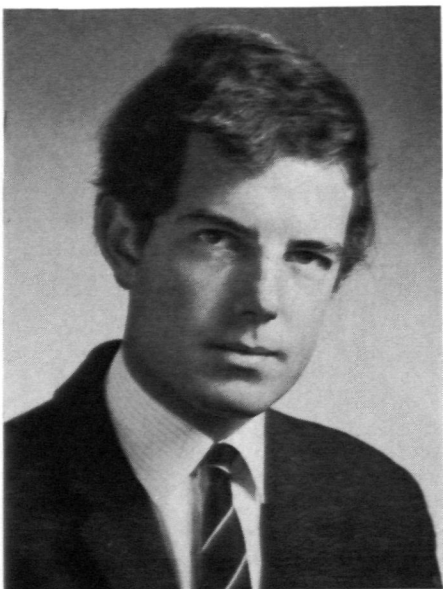
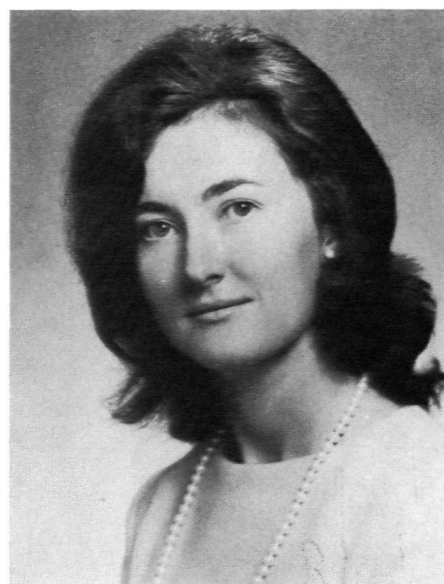
Elizabeth's arrival began a new phase in Australian-Hungarian relations. Her warm smile and witty personality, coupled with her knowledge of the arts and classical music, made her a welcome member of many student gatherings.

Following in her father's footsteps, Elizabeth promises to benefit medicine not only in its practical aspects, but also by adding charm and a little spice to every company she keeps.

## KERRIE LEE HILDER

A petite figure, Kerrie pervades a quiet, unobtrusive presence, unless she breaks out into that unmistakable laughter—infectious and decidedly high-pitched. Kerrie has a keen sense of humour, and is renowned for her dedication to medicine and studies, at which she has done so well; but to her friends she is a double delight—to palate and with palette; her skill with the brush is surpassed only by her ability to “whip up” an excellent cheese cake.

Peaceful New Zealand, in elective term, cast the spell, and may be lucky enough to receive Kerrie as a resident. Wherever the brass plate is hung, we know she will be an efficient doctor and that her career will go far.



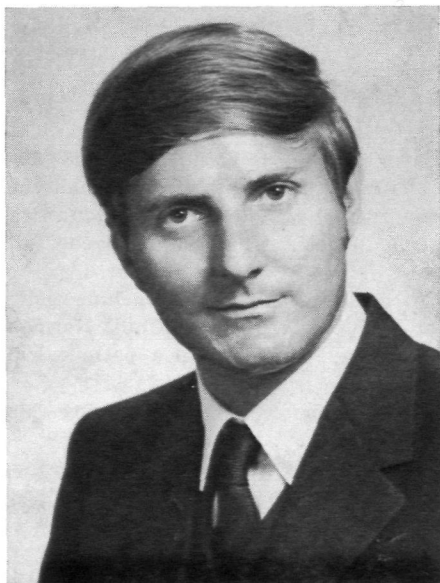
## ROBERT PAUL SIEBRAND JANSEN

*“Best seen in the lateral— isn't it, Sir?”*

Buried amidst back copies of *Punch* and *The Economist*, Rob works away, silently surrounded by his vintages (his artistic ability is well known to those who frequented his old studio at St. Paul's). Misguided by college traditions and carrying a B.Sc. in rat testicles, Rob brought his blue cravats, Porsche and humour to St. Vincent's for final year. Obviously well equipped to handle the rigours of clinical medicine, he pacified his board lumps and took another step into the uterus of life.

Idealistic and well motivated, his concepts of medicine and its function are worthy of his intelligence. His deeper feelings, together with his personality, ensure success in his chosen field.





LESLIE FRANCIS KAMAKER

*"The Count."*

Inspired by an early enthusiasm for psychology, Les entered the Faculty from Riverview, where he had made his mark as a linguist.

Les' boundless *joie de vivre* is well known to his friends. Sporting a year-round suntan he has often been seen heading for the tropics. An overcast day will find Les voraciously reading or playing an expert hand of bridge. Brave losers sometimes accept his challenge at squash. A man of impeccable taste, his love of fine foods and wine is equalled only by his excellent company at table.

Recently, his white dinner jacket has been replaced by a clinical coat; his stereo earphones by a stethoscope. With knowledge added to this sincerely humane and quietly charming personality, Les' success as a doctor is undoubted.

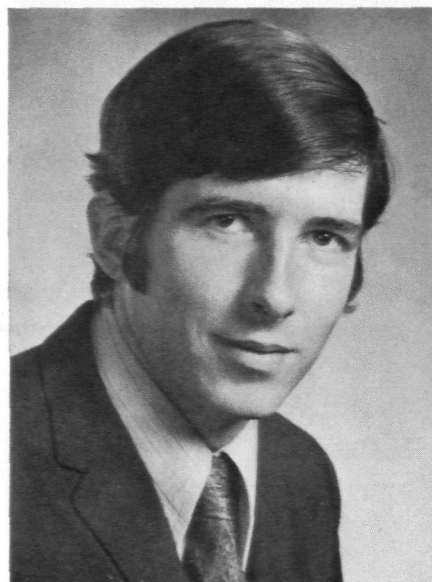
GRAEME JOHN KEIGHERY

*"Why can't I have a quotation?"*

This likeable drink-waiter came to medicine from Riverview. An ability to sound most erudite on subjects he has never heard of has continually silenced his tutors and examiners. His heavy social life was highlighted by his "crashing" success at the Music Hall.

Graeme is delighted both by his own jokes and those he is the victim of; his sense of humour only deserted him when chained in his bed to a parking-meter at St. Margaret's Hospital. For relaxation, Graeme frequents Randwick Racecourse, Killara Tennis Club, the card table and an unknown resort at Northbridge.

Graeme's friendliness, ease of manner and ability to establish rapport should ensure his pacification of any dermatological patient.



JON KOCHANSKI

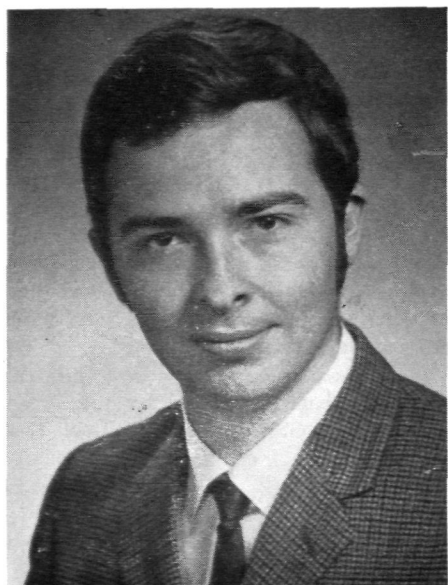
*"Shut up and deal, Purcell!"*

This 5' 6" tall giant among men (vocally that is) came to us from St. Patrick's, Strathfield, like a pup left off his leash. The recoil took him through first year; but then, during a hypertrophied second-year course, he found that he could keep all of his knowledge on the back of a card. So, he set out to multiply his knowledge by 52 before final year.

Jon enjoys a good turn, is a true-blue movie fan and an avid rugby league spectator. He retains the image of the eternal bachelor despite his recent marriage. But we feel that his boundless energy and enthusiasm will assure him of success in his chosen career.







### NORMAN RAYMOND LYONS

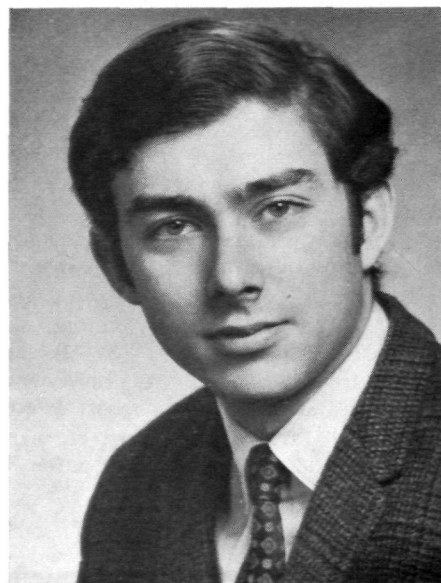
*"I haven't had a drink all day, Sir!"*

A Waverley Collegian, Norman entered medicine and first distinguished himself by topping anatomy in Med. 2, having done the extended Med. 2 course. He then retired to study in the Randwick Union Club Annexe to Fisher, from which he has gained a cue full of knowledge.

His interests, besides booze, birds and billiards, include golf; a former junior pennant player for the Lakes Golf Club, Norman now plays off a flattering 14 handicap. Norm is also a pathological South Sydney supporter.

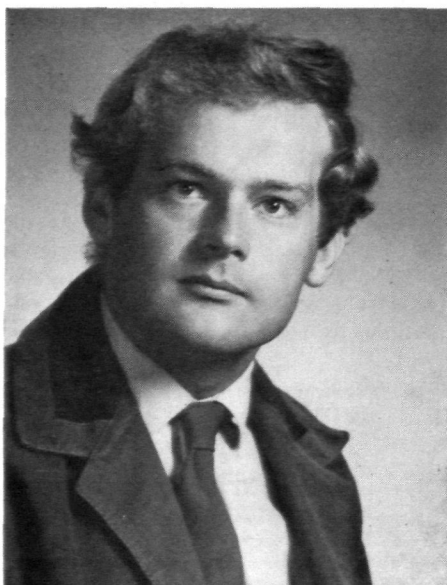
He stunned family, friends and fiancée by announcing his engagement on Xmas Day in fifth year.

Where ability counts, Norman is assured of success in medicine, and we wish him well.



### DAN GEORGE MILDER

Commenced 1964, departed 1970—thought it all a waste of time.



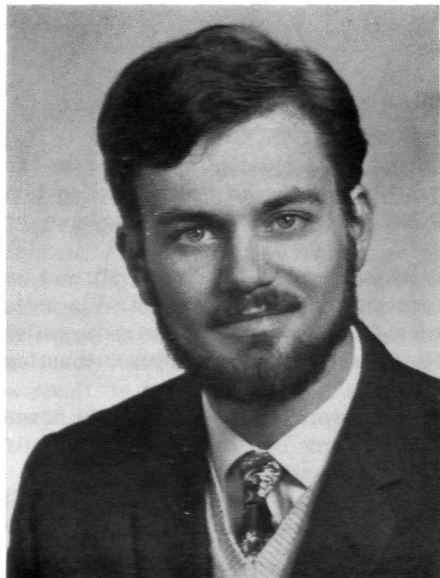
### DAVID "DOC" MILLER

*"Two beers—one with a dash."*

A recognized conservative, Miller's meander through medicine has been marked by the monumental wearing of cast-off service clothes, a yellow tie and "sensible" black shoes.

Bathed in medical tradition, and a historian of note, if not submerged amongst mountains of notes, Doc is usually discovered in a state of slumber, the mattress imprints bearing witness to his love of academics.

Doc's interests include sailing, a dabbling in trumpet, and an obsessional preoccupation in annoying his critics. A demolisher of sacred cows and a humanitarian at heart, he remains a terrific individualist and a good friend and companion to those who look beneath the overalls to the guy below.



ANDREW JOHN MITTERDORFER

*"Want a 'Drum'?"*

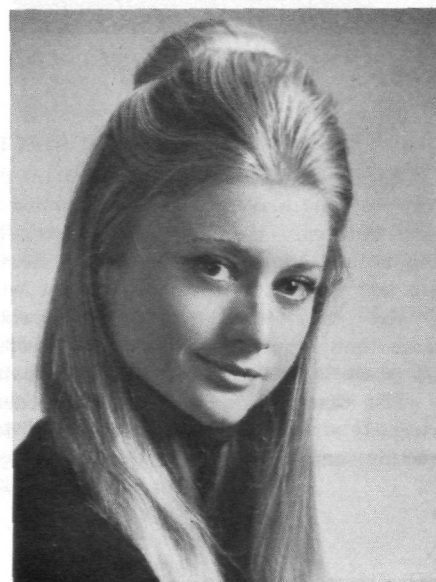
The first Vincent's man to go the way of all good bachelors, Andrew dispelled all our fears of married life by showing us that it did not change his pleasant personality, his uncanny sense of humour, nor ruin his successful studies. Not content with just the indoor life of a medical student, he spent most Sundays as gardener and game-keeper in a well-known Women's College.

Apart from his keen interest in medicine, Andrew enjoys the finer things in life, such as serious music, fine cuisine and Hungarian wines. Between the busy schedule of ward rounds, lectures and political discussion groups, he still manages to while away the hours over a chess board.

JANICE DIANNE MITTERDORFER (NÉE RUSSELL)

*"That's the Laurence-Moon-Biedl syndrome, Sir."*

This minute blonde danced her way into St. Vincent's at the start of fifth year, soon after abandoning her carefree, single status. She proceeded to dumbfound us with the most obscure of medical facts. Jan's the only girl we know who can clad herself in the latest from "Tempe tip", and still look like something out of a fashion magazine. She shows her disgust for accepted values by wearing the most wayout jewellery, including a nose clip for a ring. Beneath the quaint exterior, however, lies a warm and sensitive individual. With her infectious laughter and constant good humour, Jan has been a most welcome addition to our group.

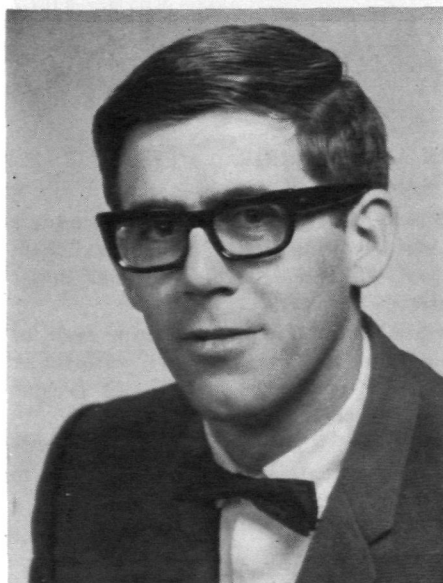


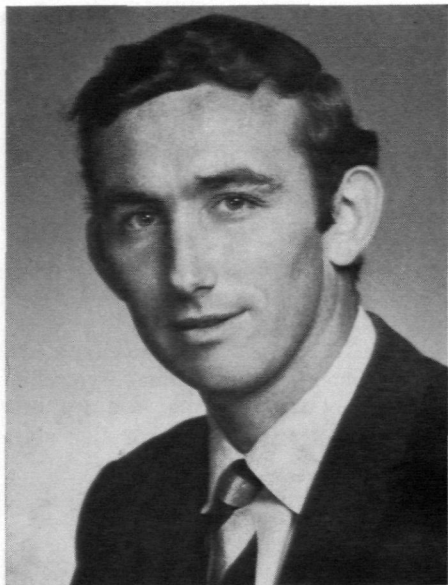
THOMAS MICHAEL MOON

*"Gee's you've got a dirty mind, son!"*

Tom, a senior member of the group, has lived a very chequered life, working at any job anyone could think of. His bachelor way and expensive tastes seem deeply ingrained, like his interest in the opposite sex, and making his fortune on the stock exchange.

Despite consistent jeering, mockery and general hostile reaction from the rest of the group he persists in wearing a bow tie—convinced they're more hygienic; confidently expects the rest of the medical profession to follow suit—"Just wait till bow ties are in fashion."





NOEL GERARD NEWTON

*"I don't owe you a cent."*

A "temperate lad", Noel combines conscientiousness with an infectious sense of fun. His affability has opened many doors to him and thus allowed escape from the explosive situations incurred by his frivolities.

A keen sports fan, an avid consumer of "Steam Rollers", and an atrocious taste in ties, Noel brought his humour to St. Vincent's, where his social life revolved around a mysterious hide-away he called "Just Out", a place that has recently provided him with his enchanting Danish fiancée.

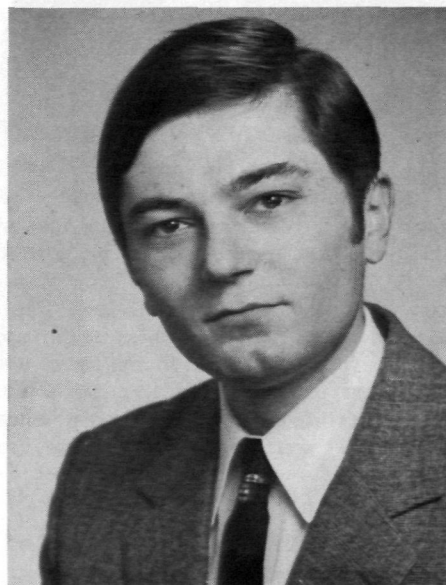
Noel's enthusiasm and consistent work, together with his down-to-earth approach and geniality, must allow him to express the family gene that will ensure success in his family and medical life.

GEORGE NIKOLIC

Born in 1945 and matriculated in 1963 in Belgrade, Yugoslavia. Came to Australia in 1964 and enrolled into medicine the following year. Allegedly he found the country less British and less exotic than he had hoped it to be; nevertheless, he took Australian citizenship last August, throwing in his lot with us irrevocably.

Many may remember his usual cigars and unusual remarks, more ironic than otherwise. Should total body biochemistry with mortar and pestle be added to our armamentarium?

The Common Room foibles included indulgence in chess and extremely strong coffee, apparently in order to maintain some cerebral function and wakefulness during this crucial period of his life.



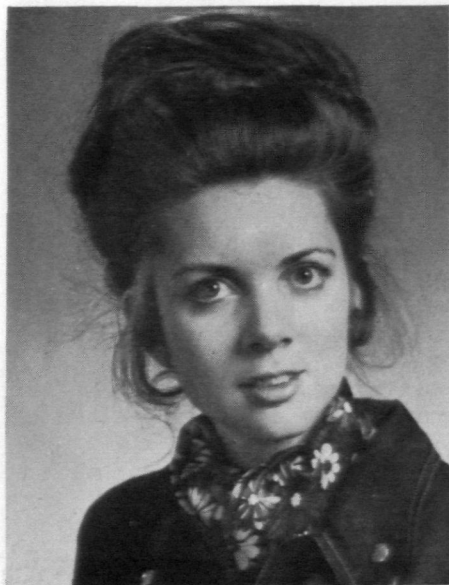
CHRISTINE ANNE NORRIE

*"I was SO embarrassed. . ."*

Christine, on entering medicine, took to the task with feminine vigour and guile. Since then, her friendliness and charm have kept her tutors and examiners at bay, while she engaged in her major interests—music, art, books, antiques and skiing.

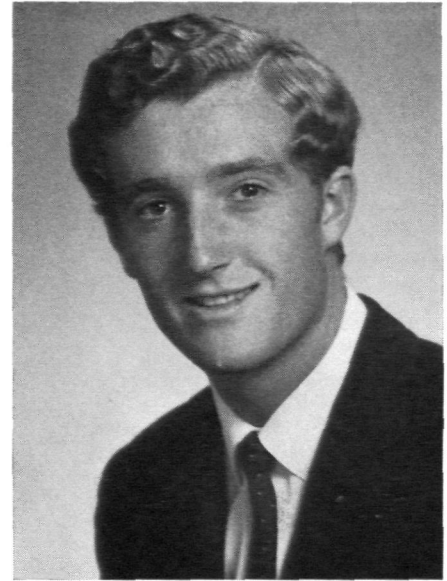
Bestowed with good looks and an M.G. "B", Christine will be remembered for being ten minutes late for every lecture, tutorial or party. During unallocated term she toured the world, and became engaged on her return to a fellow student.

With her easy, confident manner, Christine will undoubtedly make a good doctor. We all envy her patients, who never seem to mind holding their breath or giving one more cough.



## TERENCE WILLIAM O'CONNOR

When Terry entered medicine after a fine record at Riverview College, it was to be expected that he would do well; and do well he has, so much so that in his final year he earned the title of "Super-Student"; however, there is far more to Terry than his application and ability. From his Irish ancestors he has inherited a certain easiness in his manner, sincerity in his approach and loyalty in his friendships, and these have endeared him to fellow students and patients alike; but he has also inherited their temperament and, as a result, is firm in opinion, decisive in action and high in integrity. In Terry, then, we have that rare entity—a scholar and a gentleman.



## JOHN D'ARCY O'DONNELL

*"Loan me a dollar, I'll pay you back."*

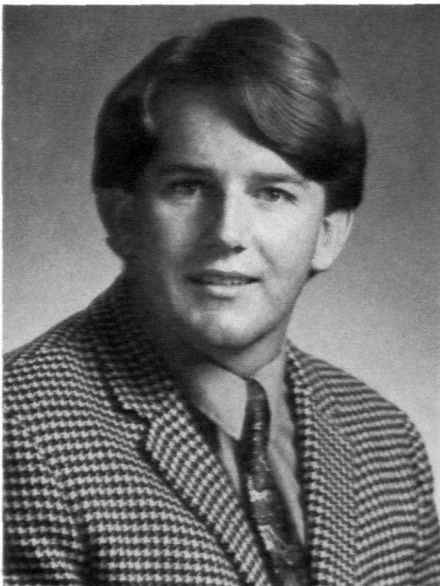
In 1964, D'Arcy successfully evaded the pulpit, bubbled over into medicine, and pursued a most erratic and, at times brilliant, course.

Surrounded by the blue smoke of his ancient Morris, and heralded by loud laughter, he is quite likely to appear in knickerbockers and safari jacket.

Although constantly broke, D'Arcy manages a standard of living unsurpassed by his wealthiest colleagues.

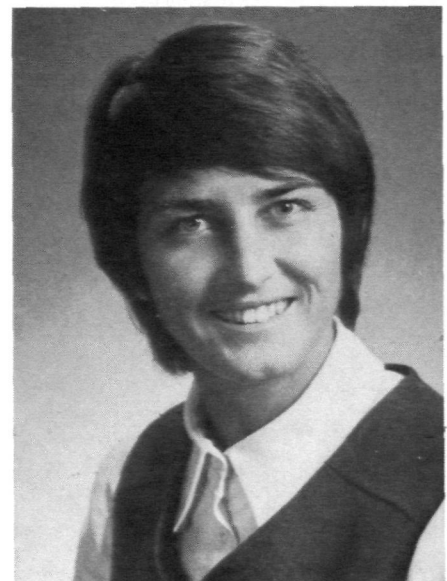
His bizarre and crazy sense of humour and ability to mock reality, mixed with sincerity and great depth, make him a welcome oasis in troubled times and a good companion in any tavern.

Whatever field he chooses, D'Arcy's infectious happiness and keen mind will make him a most-sought-after doctor.

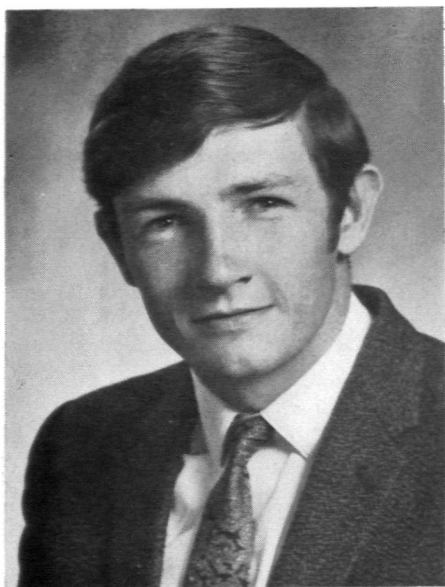


## SUSAN JOAN OGLE

At 21, Sue is one of the youngest in the year, a fact which attests to her ability and determination. Yet, in spite of this, she finds time for many extra-curricular activities: as a lover of the arts she is widely read and is often to be seen at plays and concerts, while as a lover of the outdoors, she likes nothing better than a big rolling surf and a vigorous game of tennis. She often amazes us with her flare for the unconventional, and her recent exploits in the British Solomons are no exception. With her good looks and her cheerful, effervescent personality, Sue is greatly appreciated by all of us, and we wish her all the best.







GREGORY JOHN PURCELL

*"I'll hop onto that."*

Greg came to the Faculty young and innocent and, after passing the junior years in obscurity, he rose to great heights at Notre Dame and early in fourth year became the darling of the St.V.H. nurses.

He has never let exams interfere with an active social life, which often sent him "choofing off" to the country. Despite this, and his costly presence at cards, where he was forever hopefully "copping", Greg has done well academically, highlighting his career with a credit in E.N.T., gained with a working knowledge of the pleasures of skindiving.

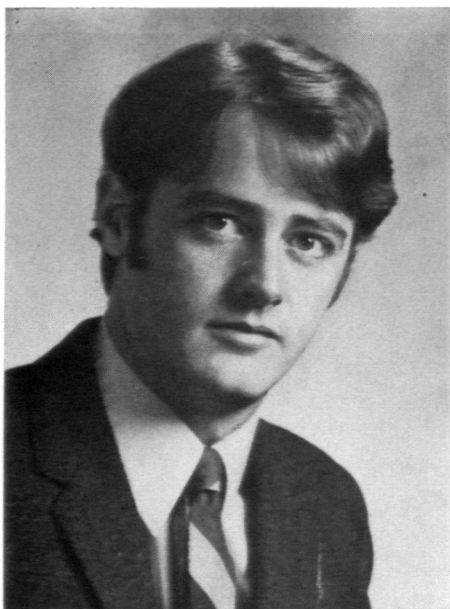
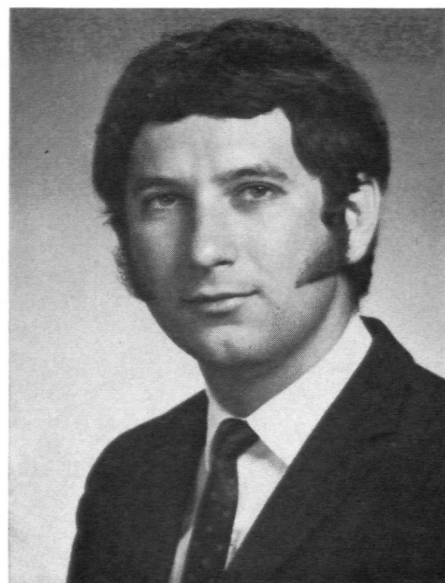
Greg's humour and carefree manner will always provide him with friends, and his keen mind will fashion him into an astute clinician.

ALEXANDER ANTHONY RADOJEVIC

*"What do you mean, open misere!"*

When Mr. R-a-d-o-j-e-v-i-c joined us, he emerged from relative obscurity. He had, until then, been engaged in multifarious pursuits ranging from Science I to the more exotic arena of canine coronaries [the subject of his B.Sc. (Med.)]. His application to his studies and his academic prowess spurred us to elucidate the benefits of more basic human pursuits—and with some success! In final year, Alex, tiring of the desert wastes of the western suburbs, migrated to that well-known and respectable suburban haven, Darlinghurst.

We have no doubt that Alex will continue in the pattern of success he has already established, and it only remains for us to wish him well for the future.



CHRISTOPHER MICHAEL ROGERS

*"Don't think I'll come in tomorrow."*

Chris never ceased to amaze us with his many non-medical interests. He was always keen to discuss philosophy or politics over the card table, while some say he came to St. Vincent's because of its proximity to Randwick Racecourse and The Lakes Golf Club.

He played cricket for Sydney Uni., and also managed to incorporate Commerce I at New South Wales Uni. in Med V, while becoming handy with an ophthalmoscope at the same time. Despite his bachelor pursuits, Chris got engaged this year and spread the virus through his group.

His quick wit and humour amused us all. These attributes, together with his generosity and keen mind, ensure his success in medicine.





## KATHRIN NAOMI ROSENMEYER

*"Who said I'm paranoid?"*

No two topics seem more unrelated than Kathy Rosenmeyer and medicine, yet somehow we find her in final year having successfully negotiated each previous year with minimal study—not because of her disinterest, but as a result of the diverse activities otherwise occupying her time.

Her unallocated term was spent in New Guinea, chiefly among the native children—an experience she describes as thoroughly enjoyable and rewarding despite her souvenir, *Tinea vesicolor*.

Kathy likes Paddy's Market, skiing, seances, her Siamese cat, S.C. porches; she dislikes being asked questions she can't answer, cold snow, Med. VI.

Despite the latter, success this year and in her future career seems assured by her past performances.

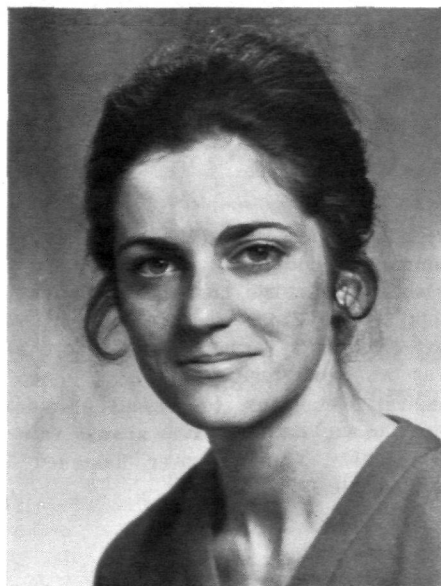
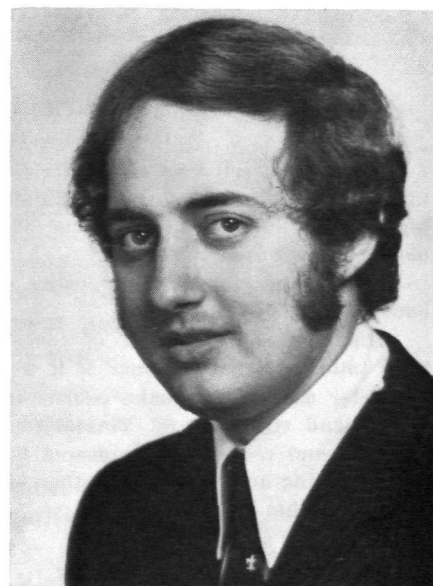
## PETER SCHWARTZ

*"Aaaaaaagggghh!"*

Peter arrived from Sydney High School mistakenly thinking he was enrolling in a two-week course in the "rag trade". However, he soon settled into a fine set of extra-curricular activities. His main sporting interests are squash, at which he is tolerably efficient, and golf, at which he is intolerably inefficient, never being known to reach the eighteenth green in daylight.

Devoting his spare time to medicine (negligible), Peter has nevertheless obtained the occasional credit, and with his warm personality and quick wit, has constantly kept us all entertained.

Peter's elective term was devoted to teaching an English hospital the intricacies of solo. It is hoped that he will eventually find true happiness in the big card game in the sky.

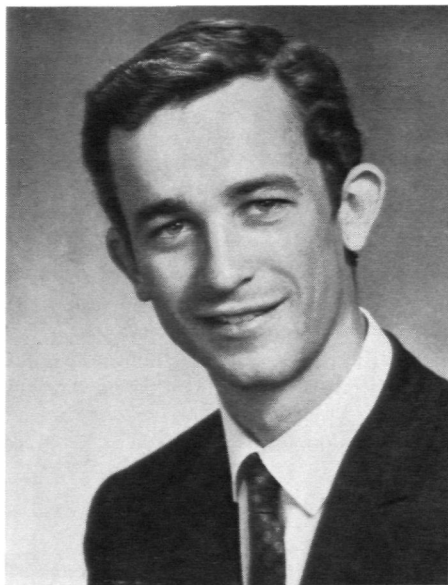


## LAURELIE RAE SHEARER

*"... and then you ask the patient to expire."*

A lady in every sense of the word, Laurelie has survived Women's College and a predominantly male hospital environment, retaining both a broad outlook on life and the essence of femininity. We are thankful for her moderating influence on tutors and her exact, if somewhat verbose, explanations. Organized, but never for too long, Laurelie is a girl who never skims over the details—she is forever watchful for that 'berg beneath the surface.

Her sense of humour, understanding and unique personal charm, ensure her many rewards and successes. We wish her good luck and happiness in the future.



## MICHAEL MAURICE STEVENS

*"More tea, anyone?"*

Our favourite obsessional, Mick entered medicine hoping to find out why he had to keep on keeping his pencils parallel. He has a systematic approach to life. To every event in Mick's life there are three phases: anticipation, actuation and reflection. Equal time is devoted to each, so that the event will not lose in its enjoyment, or torture, depending.

Rarely, the system faltered. Oh for those nights when "I'd triumphed with brown ale!"; but always next day, Superego would once more reign supreme ("Well, I don't remember doing *that!*").

Best wishes, Mick, your rewards will be well earned. Your quick wit, keyboard cadenzas and ready smile will always be remembered and will make your absence felt.

## PETER JOHN FRANCIS SULLIVAN

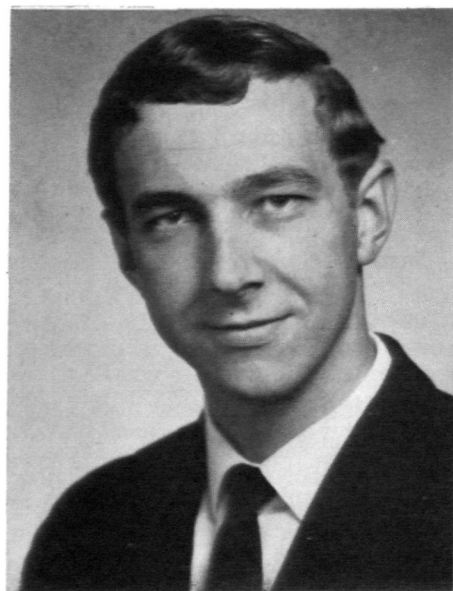
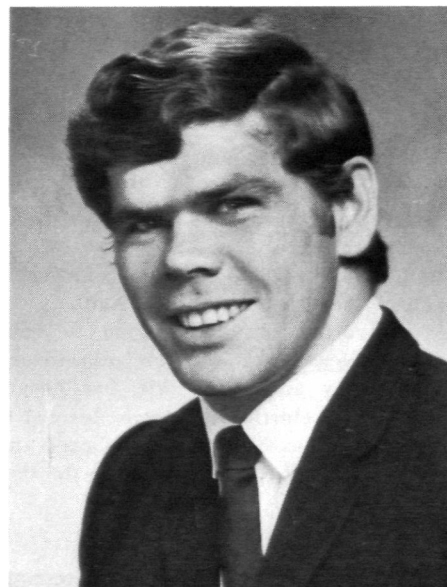
*"Uh, excuse me, Sir. . . ?"*

Despite the setbacks of coming from a one-street town to follow the family tradition in medicine, Peter has certainly conquered the big city, as indeed, all else that challenged him, whether she be blonde, brunette or redhead.

His keenness to rectify injustice earned him the title of "bloodhound".

His frightening attacks of concentration when under pressure from tutors relieved everyone if it were the right answer.

Peter managed to make friends with every staff member, nurse, worker and visitor at St. Vincent's. Peter's friendliness, generosity, sincerity and ready smile endeared him to his fellow students. His understanding and warmth, together with his "dogged" determination, will ensure his future success.



## GUNARS ZAGARS

*"The psyche lurks behind every pimple."*

This tall Latvian boy came to us from a B.Sc. (Med.) in histology. Possessing a fine sense of humour, he had many in laughter as his six-foot frame went through attacks of athetosis, chorea, hemiballismus and the like. As many of his friends discovered, he is positively devastating at the chess board ("I won"). Other activities are not entirely unrelated to a familiar brand of spirit.

His ability to analyse medical phenomena, to present his ideas clearly and simply, and his scientific explanations, were always valued by his contemporaries. Commendably, Gunars never hastened to display his knowledge of things medical.

# **"But who's going to read the ad if there's such a lot of copy..?"**

To those who won't, we'll be brief:

**Watson Victor, since 1888, has been a pioneer in the field of scientific equipment for medicine, research and industry in the Southern Hemisphere — and continue to be so.**

To those who have a moment, the WatVic story is one of quiet history-making, swift growth and progressive development.

Originally filling the role of distributors of microscopes and allied appliances in the late 1890's, Watson Victor was supplying X-ray apparatus and equipment just **THREE YEARS** after Roentgen astounded the world.

Ever since, we have kept pace with overseas advances in the scientific and medical fields, making available the very *latest* equipment.

The two world wars made heavy demands on our specialised production capacity, and we are justifiably proud that these demands were met.

Progressive expansion has continued. Watson Victor is now the largest manufacturer and distributor of quality medical/scientific equipment in the Southern Hemisphere, and our export record is a healthy one.

This reputation for fine equipment and organised service is 80 years young.

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**DOCTORS AND DENTISTS REGISTERED  
IN AUSTRALIA ARE ELIGIBLE  
FOR MEMBERSHIP**

**Secretary:**

**Philip H. Addison, M.R.C.S., L.R.C.P.**

**Dental Secretary:**

**A. H. R. Rowe, M.D.S., F.D.S.**





## ROYAL NORTH SHORE HOSPITAL

In 1887, Sir Henry Parkes laid the foundation stone of what was called the North Shore Hospital. This was in Willoughby Road and was a public hospital to serve the community of the northern area of Sydney. Later, the foundation stone of a new hospital was laid by Sir Henry Rawson on a site of eight acres at St. Leonards. This building is still standing on the site of the present hospital. In that same year, 1902, King Edward VII gave permission for the institution to be designated "The Royal North Shore Hospital of Sydney". Early in its development, therefore, the hospital became a metropolitan as well as a district hospital, not only in name, but in function. Early in its history it developed special clinics, some of which were the first to be established in this country. Its Institute of Medical Research has an international reputation, especially the work associated with the name of Professor M. R. Lemberg, whom the hospital had the foresight

to invite to join the staff over thirty years ago. In 1948, the Clinical School for Medical Undergraduates was inaugurated and this was granted permanent status as a Clinical School by the Senate of the University of Sydney in 1954.

In 1968 the Mater Misericordiæ Hospital became a teaching hospital affiliated to the Royal North Shore Hospital thus establishing a teaching complex. The first group of students commenced at the Mater Misericordiæ Hospital in January, 1969. Since then the teaching commitments between the two hospitals have steadily increased and promise to further develop.

What should one say to those about to start a long pilgrimage? Now that the seemingly long student days are over and the difficulties, tribulations, frustrations and periods of boredom are already fading from mind you will come to treasure the memories of happy times and associations. You are about to enter what usually



is the happiest period of your life—the days of hospital residency. It is time to relax for a while after the long six years, at the same time remembering that your future course may be decided during this time. Give some thought to recreation and hobbies and also to physical activities, because physical and mental health is perhaps the best investment that any young doctor can make for his later years. Apart from professional preoccupations and such happy prospects as marriage, it is worth considering the immense opportunities that your profession offers. Travel, the opportunity to work in other hospitals and other lands, the opportunity to work in a foreign country with a different culture, or the chance of adventure as the medical officer to some expedition, are just some of the few things that come to mind. Some of your elders feel that in recent times there has been a regrettable tendency for a stereotyped pattern of progress to be adapted after graduation for those who believe that their fulfilment lies in obtaining an appointment to the staff of a teaching hospital. If

any man or woman were to spend a few years broadening their experience generally and then obtain appropriate qualification and training there will never be a lack of opportunity for such people.

No one would be so unwise as to try and predict the future, except to draw attention to what has happened, or is happening, in other Western countries. The practice of medicine in Australia has seen less change than almost any other country within living memory, and in the very nature of things change is overdue. This is a period when every value is in question, when the mass media have speeded up communications and influence public thinking, so that this is a time above all for the medical profession to think deeply and carefully. However, there is a shortage of doctors throughout the world, not only in the so-called under-developed countries, but also in the more highly sophisticated societies, because of ever-increasing demands. There is, therefore, no real cause for doubt as to your future place in any community.

IAN MONK.

## THE HONORARIES

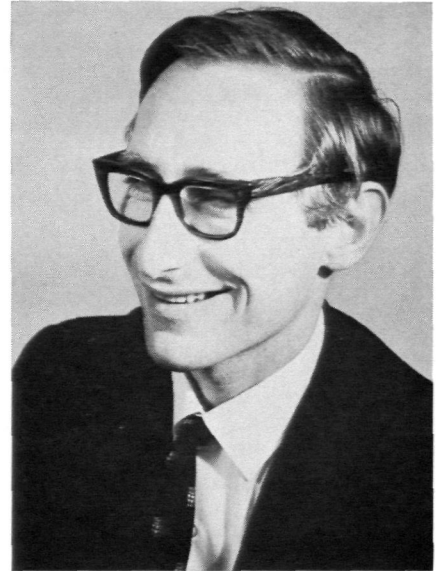
### PETER ERNE BAUME

Burdened with a Cheshire-cat grin and an unrecordable P.B.I., this lanky dynamo, already known for his outstanding abilities as a teacher, has been observed to undergo in recent years the subtle mellowing that accompanies success.

Simultaneously with the advent of side-levers, we noticed classical quotations from Shakespeare and Milton creeping into lectures and Tokien replacing the M.J.A. under the proverbial armpit.

A natural disinclination to conventionalism resulted in his instigating group learning as an adjunct to the monotony of the course and there would be few left unbenefited from these.

Despite his departure from the Clinical School, Peter remains very approachable and will do his utmost to help any student. Combined with his outstanding qualities as a doctor, this will make him one of our most-remembered tutors.



*Senior Lecturer in Surgery:*

### ARTHUR EDWIN COUPLAND

Looking like a gentle bloodhound in school shoes by no means detracts from Mr. Coupland's excellence as a tutor. Occasionally we note a touch of despair when he finds that we still don't know about fluid and electrolytes, despite his attempts each year to stir our interest in the topic. He imparts in us a sense of sorrow at wasted opportunity: "Every patient has a message"; we feel sure he is right, yet so often some heavy lassitude prevents us from experiencing this ourselves. We accept all that he teaches, for to us he seems a man "of sober mind and in full possession of the facts".

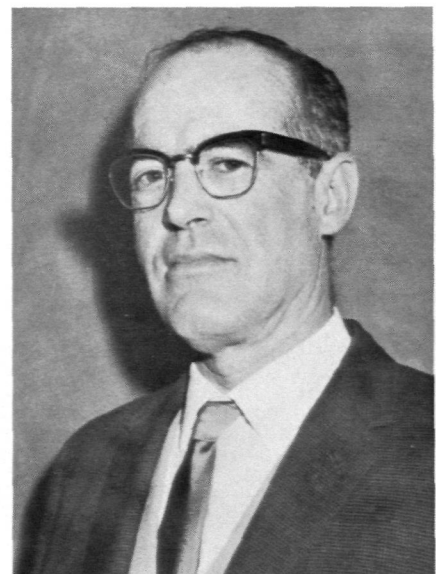
He is one of our best examples of a skilled and devoted surgeon.

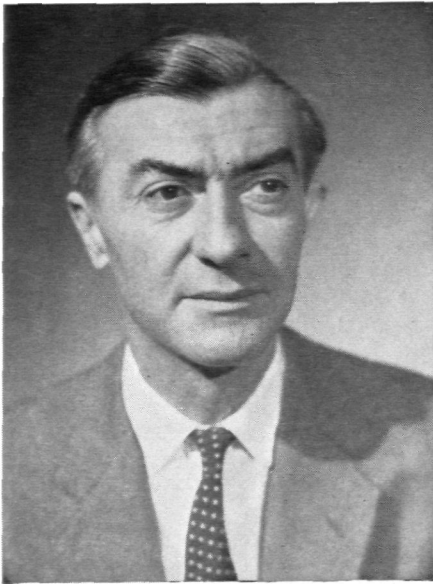
### VICTOR HENRY CUMBERLAND

*"Don't you chaps know anything?"*

Tutorials with Mr. Cumberland proved to be a series of soliloquies, with a dumbfounded, enraptured audience listening to Mr. Bailey's or Mr. Love's re-incarnate. Despite an obsessive-compulsive passion for classification, be it ætiology, pathology or staging of tumours, Mr. Cumberland proved to be one of our most popular and highly-respected surgical tutors. He has perfected the "invisible scar" technique; indeed, many students suspect Mr. Cumberland has found a surgical procedure which doesn't require a skin incision.

His kindness, consideration and understanding of his patients has been an example to all of us, and one which we will all try to emulate.





BRUCE LYNE GEDDES

*"Don't get me wrong, now!"*

In an energetic, hypomanic rush around the Thoracic Unit, showing us his selected patients, Dr. Geddes, a softly-spoken, enthusiastic teacher, took us back to the basics of respiratory medicine in final year.

While always ready to listen to everyone else's point of view, he is a firm believer in the importance of a good physical examination and intelligent interpretation of the signs.

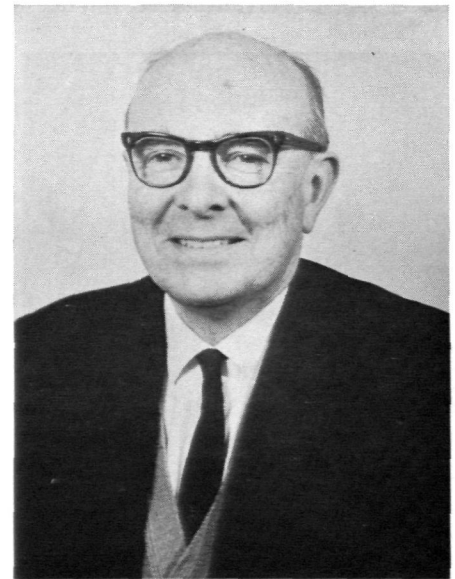
Lighting up yet another cigarette and hitching his trousers a little higher on his tall, thin frame, he impressed on us the radiological anatomy of the lung, the importance of the chest X-ray, and taught us how to correlate what we found—invaluable help in final year!

JAMES ISBISTER

This Scottish gentleman, apart from his medical acumen, is renowned for wearing a jaunty little cap to protect his "cranial thermostat". He is seen regularly at Tuesday's R.N.S.H. physicians' meeting conferring on guest speakers "the order of the microphone".

As students, we have come under the influence of both Doctors Isbister and have learnt the benefits of breast feeding as well as the importance of climatic factors in asthma.

Undoubted doyen of the Clinical School, Dr. Isbister has shown his formidable ability as an examiner. Many a student has fallen into the trap of mismatched patient and X-ray. This preconditioning, we are sure, will stand us in good stead in the final examinations.



IAN MONK

*"I'm a frustrated picnicker."*

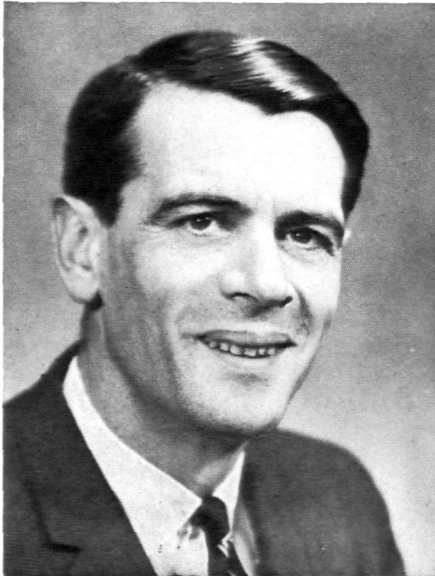
Mr. Monk, our warden for two years, already is a well-known and respected figure to students and colleagues alike. As well as being the senior thoracic surgeon, he is also a very active clinical teacher, keenly interested in all facets of student activities, as evidenced by the very popular discussions in the paramedical field he has organized. His interests are not confined to medical fields, however: he is a keen participator in all student functions and occasionally disappears for several days when the skiing season is at its best. We will always remember him as a person with many of the attributes which we hope one day to acquire.



## EDWARD MORGAN

*"I dips me lid to you, Jo."*

We will never forget those early-morning encounters with the Director as we trooped, gowned and capped, from general theatres to X-ray, looking more like apprentice painters than budding anaesthetists. There we were met with carpets laid out—in the form of theatre towels—to cope with the venesection that accompanied induction. The Director always had our interests at heart; he has even been known to rouse sleeping students from the quarters to attend his sessions. Dr. Morgan was always willing to draw from his vast knowledge and deep understanding of anaesthetics to answer all our questions with characteristic facility, and his whole-hearted assistance could only endear him to us.



## DAVID WALTER PFANNER

Noted more for his superb imitation of a steam train passing through a tunnel than for his sympathetic accouchement, David Pfanner entertained us with his novel approach to obstetrics.

More relaxed with bone forceps and foreskins than with Neville Barnes and neonates, he was overheard to remark: "What do you think it's got—feathers?"

Regarding gynæcology out-patients as a psychiatric annexe, he instituted psychotherapy with bidigital dexterity.

Nevertheless, this rough diamond showed a keen interest in our studies and was always willing to give an extra tutorial if he missed out too many.

*Associate Professor of Medicine:*

## DOUGLAS WILLIAM PIPER

*"Medicine is trivially simple, don't you agree?"*

This good man's tutorials were anticipated as times of clear instruction and pleasant entertainment. During such, all explanations for a case diagnosis would often be deemed inadequate. The answer to such enigmas would be heralded by the consolation to despair not, but remember that this was a matter about which trolley boys understood all, and first-year nurses diagnosed over back fences. The subject in question would then be reduced to a few basic fundamentals, abiding by fewer rules, all compressed into four or five chalk marks containing the essence of one hundred pages of Harrison. May his reward be junior residents, hair combed, shoes brushed, following his simple rules.





*Associate Professor of Surgery:*

THOMAS SMITH REEVE

*"Well, what would your granddaddy do?"*

Since we first met Professor Reeve, we have grown to appreciate his sensitivity to the needs, not only of his patients, but also of his students. He has laboured to keep alive in us an awareness of the wider world, for which we are thankful.

In the surgical wards, his teaching is informative and practical and enriched with many facets not covered in the "story books", while in the theatre his lively descriptions and unfailing consideration dispel the fears of the shyest student.

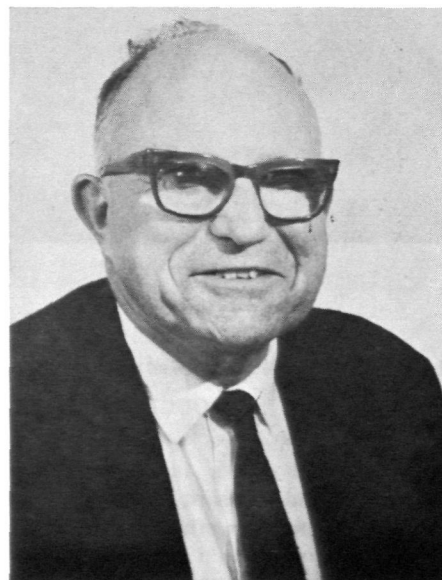
His gentle manner belies his busy life crammed, we know, with patients, students and sheep. It is hard for us to imagine how any surgical upbringing could be compete without him.

#### THOMAS FREDERICK ROSE

Tradition has it that Wednesday afternoon is reserved for the Rose spectacular. At 2.00 p.m. to 2.15 p.m. sharp, Mr. Rose emerges from his four-bedroom, two-bathroom automobile to conduct a magical mystery tour of the gloomy depth of "A" wards, where students seldom dare to venture. Armed only with his faithful resident, he encounters many species of lumps and herniæ which are duly pummelled into submission by his student followers.

After a short interval, the Rose Oration commences, embellished by slides of shapeless, gory masses and of yellowed pages from text-books which might have been dug up with the Dead Sea Scrolls.

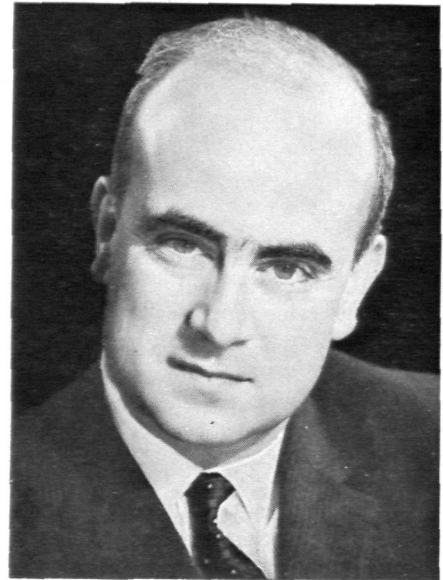
This master of witticism and anecdote will long be remembered by us all.





## GEORGE SELBY

Dr. Selby has charmed yet another year of students with that easy, enthusiastic manner of his. While the intricacies of neurology may not appeal to most, it is very hard to remain unaffected by his obvious delight in his subject, still harder to come away without some further insight into ways of the neuron. From beneath the urbane exterior there frequently emerges a light and almost playful manner, which not only relieves the less happy aspects of chronic neurological disease, but makes his few formal lectures the masterpieces they are. May that apparently inextinguishable pipe burn on . . . may Selby's sign be with us always.



## IAN DAVIES THOMAS

*"So now, according to the Goon principle."*

Exhorting us to "summarize succinctly, please, the important features of this patient's history", this tall, impeccably-dressed physician introduced us to the precise use of the English language, Thomas' toe-tapping test (infallible), the importance of ægophony, scepticism, understated humour and onycholysis. We note that one of his quotes: "Let us get it quite clear in our minds. . . .", comes into use at physicians' meetings as well as student tutorials, with its usual intellectually devastating effect. Nevertheless, it would be hard to find a tutor with such student empathy and evident ability as a teacher and practitioner. He was made a senior physician last year and still manages to participate in group discussions in his spare time.



## OTHER PERSONALITIES

There are very many other notable personalities who should be honoured in this book. This page is a small tribute to some of these men who have struggled, pleaded and suffered with us to get the best out of our available brainpower.

As fresh-faced tyros in fourth year we encountered the varied and even eccentric characters of our first clinical teachers. Remember Max Elliott (snuff box, red spotted handkerchief and dented Volvo), Murray Lloyd (heart sounds made easy with a little classical music), Gabriel Nagy (a real gentleman with a sincere interest in a sound medical basis for students) and the dynamic Peter Baume (then Medical Clinical Supervisor). Surgery also had its notables, especially the lofty Geoff Cutler, the stocky yet agile Martin Flood (recently seen a lot at a local Leagues Club), the charming and thoughtful Doug Caspersonn, and diminutive Brian ("Bopsy") Parker.

Fifth year saw partial fragmentation of us with a more civilized and sensible mellowing of enthusiasm. We were introduced to the subtleties of psychiatry by Ralph ("ego") Shureck and its more practical aspects by John Ellard.

O & G saw us variously capable in our new roles as accoucheurs, ably if somewhat erratically guided by "Blue" Kemp, dapper Hugh Patterson, Ian Truskett (the lady killer), Ewen Sussman (with his vast array of instruments), Bill Jasper (memorable lectures and soliloquies on sailing) and the quiet John Leaver (an avid tree-gazer).

Immaculate Eric Davis (ever cheerful in the face of dire neurological signs), didactic "Chook" Fowler (rumoured to have a certain sister's eye on him),

likeable Harry Richards ("Don't argue, I'm always right") and Dr. Gee (complete amazement when actually seeing even one student at urology clinic) helped to make that year one of fond memories. Augmented by the dermatological gymnastics of Keith Myers and Rex Becke ("B.B.C. is a tip for the exam"), the dark and wondrous clinics of Miles Sterling Levis and his ophthalmoscope wielding company, together with the opening up of new vistas in E.N.T. by Mr. Dowe and Mr. O'Donnell, fifth year was well complete.

Final year saw a swing back to the more serious side of medicine with Bob Puffett's five heart sounds, bundle branch block and ever dwindling audiences, Doug Stuckey's heart murmur guessing games, Laurie Donnelly's cheerful lectures on the obscurities of cardiac catheterization and arrhythmias, Keith Daymond's and Ron McGlynn's excellent orthopaedic course, and Tom Rose's amusing and vastly informative surgical lectures and rounds.

To our registrars who persevered in the face of increasing student hypomania goes a special vote of thanks: John Snowden ("anyone for tennis?"), Tim Heap ("sure, sure, but what's a common cause?"), John Gill, Steve Leeder (a master of subtle wit), Jim Wiley ("You *can't* hear the opening snap?"), Ken Wilson (who grilled us on hernias in the thoracic unit), Bob Griffin ("right, now I'm the examiner"), John ("J.C.") Pennington (who taught us the very latest in O & G), Bill Buddee (did you see his smile?), Gino Luchesse (the migrant's friend), Bruce Pardy and John Vandervord ("a heavy weekend").

Words are insufficient to thank these generous doctors.

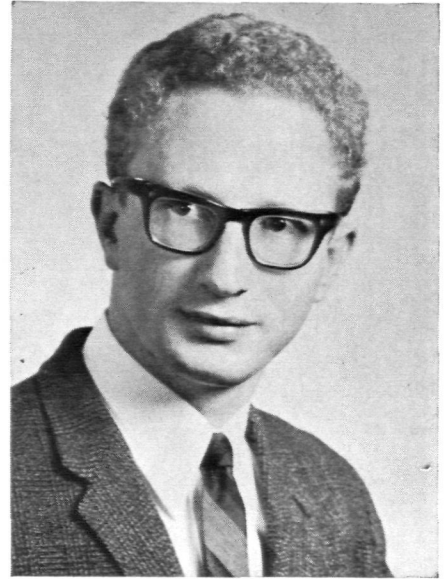
## THE STUDENTS

### KIMBALL ABBOTT

A common sight in the wards, the "Red Flash" has always been a universal source of knowledge about the latest patients, books, articles and golf handicaps. Med. V opened new vistas for Kim, with 3 a.m. sessions in the students' quarters, midnight chats to all the sisters in E5, and a certain med. dinner. Final year has seen a further change—the red socks we had grown accustomed to were replaced by white buckskin shoes.

Kim has always maintained good relationships with the nursing staff: recently, rumours about a certain red-haired sister at Mona Vale have been in the air.

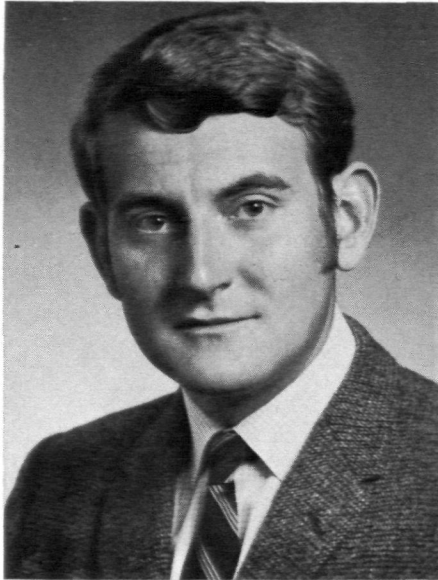
Kim will no doubt be as great a success in his profession as he has been as a student.



### IAN RICHARD BARRETT

Ian started medicine quiet and inconspicuous, but blossomed in clinical years into an avid nurse enthusiast, a situation he enjoyed for a short time, leading up to his engagement in fifth year. He has always shown an ability to master challenging situations: tennis, golf, grogging-on and other sublimating activities. His impeccable taste in cars was demonstrated whenever he drove his late-model, rust-covered Morris Minor, suitably inscribed "BAA".

Ian's quick-witted humour and booming laugh have brightened up many conversations and woken sleeping students from their tutorial slumber. We wish Ian and his charming fiancée, Pam, every success for the future.



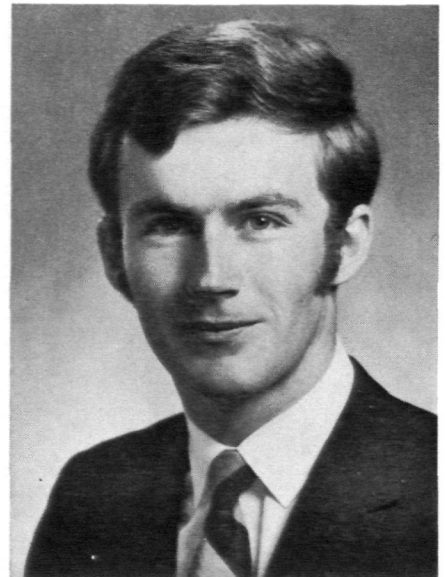
### IAN GEOFFREY BECKE

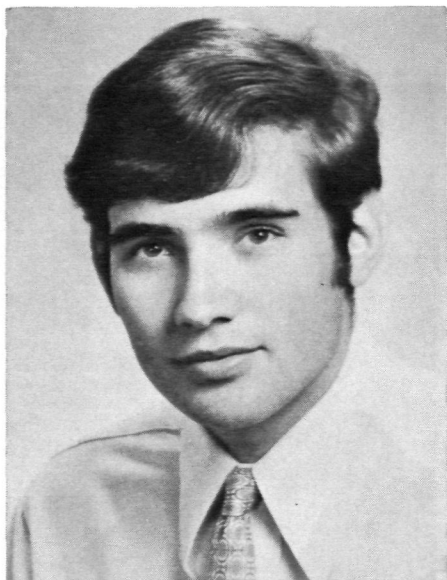
"Okker."

Entering the Faculty from Shore, Ian soon settled down to enjoying University life to the full. Early in his career, he became known for his friendly invocation: "Let's have a few beers!", and for many of his contemporaries such times were our first opportunities to experience his good fellowship.

Known for his *esprit-de-corps*, infectious laugh and multitude of nicknames, Ian has progressively widened his circle of friends whilst passing through medicine. His passage has been academically smooth, despite occasional distractions by the fairer sex. His other loves include skiing, fine motor cars and dinner parties. For three years he has been the conscientious year rep. at R.N.S.H.

Ian's quiet charm and thoughtfulness for others assure him of a satisfying and successful career as a doctor.





## JOHN ENZO CHARLES BENTIVOGLIO

*"Educational programmes are crap!"*

Many generations of Italian aristocracy have produced this sophisticated scholar. Immaculately dressed in coloured shirts, matching ties and occasionally pants, he was once seen in the wards; but unable to find a fourth, he spent the rest of the year underlining everything he could lay his hands on. So popular was he at the hospital that one equally popular physician was moved to remark:

"Tell Mr. Bentivoglio I'll kick him in the pants."

Habits: Include sleepwalking and/or ward rounds.

Likes: Television, water skiing.

Dislikes: Radical mastectomies.

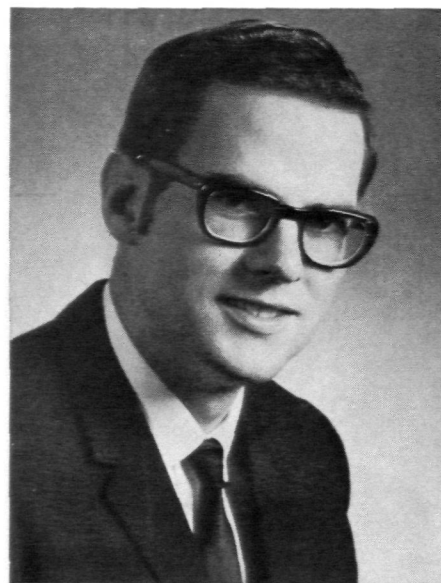
Hates: Bilateral radical mastectomies.

Prognosis: With careful management, Italian lessons and his father's practice he's sure to do well.

## NEIL ANTHONY BERRY

*"I know just enough to be a nuisance."*

This swashbuckling scholar is equally at home with a rapier, sabre or scalpel. Neil's popularity was confirmed in a landslide election win (*in absentia*) as group leader, for we all knew that in this capacity he would always say the right thing at the right time. His finesse at the card table is legend and is directly proportional to his clinical prowess, which is hardly surprising, as he devotes equal time to both. Neil's selfless concern for his fellow man—as evidenced by organizing extra teaching for us—will guarantee his future success.



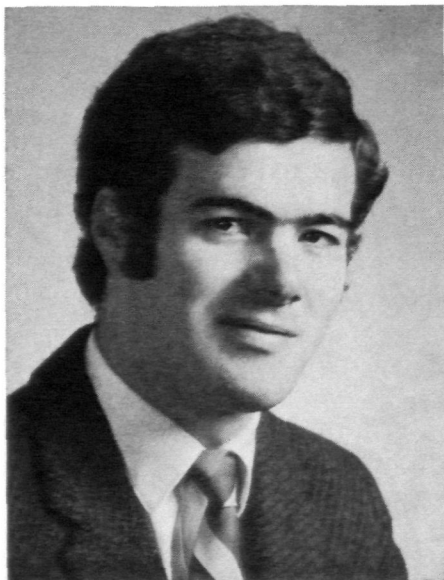
## RODERICK JOHN BINSTED

Rod's characteristic chortle can often be heard in the precincts of the Clinical School, but this beamish bloke manages to devote his energies to many pursuits besides medicine. He is by no means averse to the good life, or good restaurants, but has also managed to include regular tennis and irregular football in his curriculum.

His enthusiasm for medicine led him as far as Darwin and Alice Springs Hospitals in the unallocated term, where he worked with characteristic energy.

Judging by his anecdotes, his affinity for people led him to study them everywhere, even in the pubs!

Rod's cheerfulness and understanding nature will surely be assets in his chosen career, and we wish him every success.



## JOHN ALBERT BOOTS

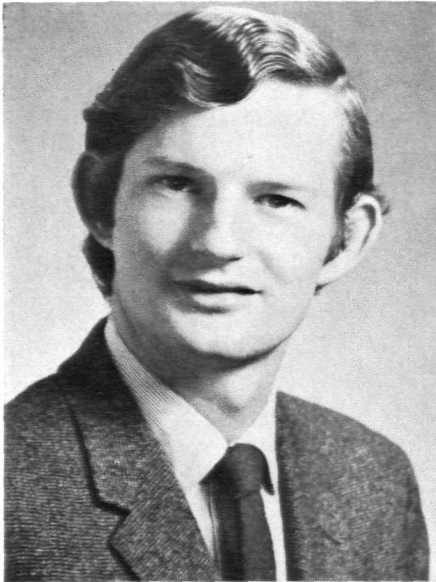
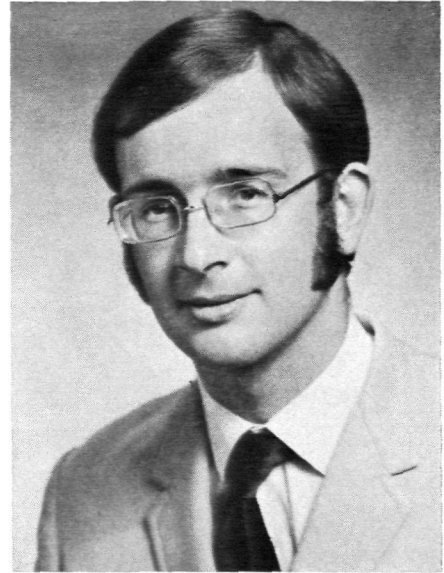
*"Then you'll have to use your fertile imagination, Mr. Boots."*

With a definite leaning towards the classics and highly developed circumlocutive ability, John's career in law would have seemed inevitable but for an (unproven) cerebrovascular lapse, during which he enrolled in medicine, and having much fortitude he proceeded to embark upon this twist of fate, enhancing it with many suspect paramedical pursuits.

Numerous television appearances, political campaigns and eisteddfod blue ribbons later, John emerged from a carefully-planned extended pre-clinical course.

Comfortably esconsed in the students' quarters bathroom, surrounded by various antiviral and optic accoutrements, John proceeded to shatter many a sacred early morning silence (and numerous orthopaedic plasters) with a series of impromptu concerts.

The more lurid aspects of this commentary having been censored, it remains only to say that John's main interest in life is people.



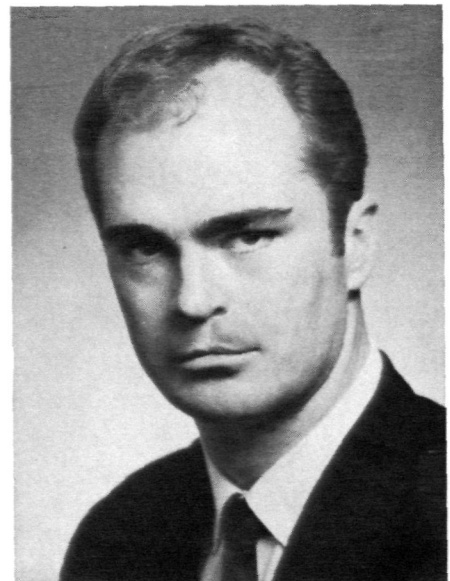
JOHN CHAMPION

## ANTHONY RICHARD BURRELL

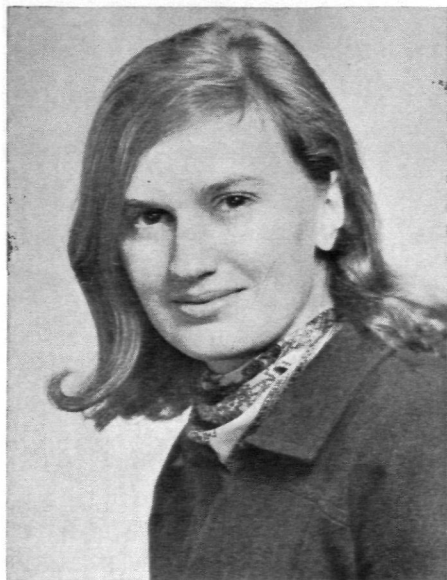
Tony, our international playboy, after a period of procrastination in the pre-clinical years, breezed into the "Country Club" way of life. Here, disguised as a peptic ulcer, he made many pioneering advances in the field of student-nurse relations.

The trained observer will note, as well as a singular wardrobe, an anal orientation in the meconium-coloured sports car and an oral propensity in his much-investigated idiopathic hypercalcaemia. His interests include music, skiing, afternoon naps and, occasionally, medicine.

Nevertheless, it is obvious that his smooth manner, personal concern for patients and, indeed, that worn-out grey pullover, will keep him fresh in our memories.







#### VIVIAN VERNON COLLETT

*"I wasn't really asleep!"*

Preceded by brother Paul, Viv entered medicine with determination and enthusiasm, showing she could equal any male. After spending much time in the wards at R.N.S.H. and with extensive knowledge of happenings at Sydney Hospital, she could always claim that she had seen something bigger and better than anyone else.

In fifth year we came to know her \$29 Renault which she lovingly nursed through many mechanical and emotional crises.

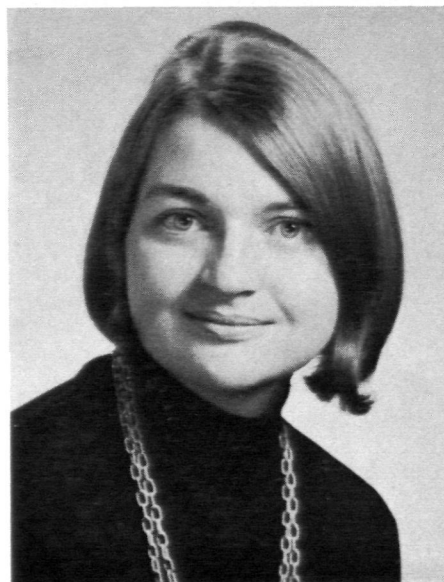
Away from the "Country Club", green-eyed Viv was to be found in the real country bushwalking, photographing mountains and collecting innumerable rocks, and competing in "Sun-Castrol safety drives".

With her interest in people and her tea-making ability, she is assured of a successful future.

#### HELEN WILKINSON COX

Six years of medicine have not substantially influenced Helen's basic character; she remains one of the most charming and personable women ever to grace the medical fraternity. Many times Helen has been a source of quiet assurance to those who know her well. She is a keen skier and has always been ready to join in many of the refined activities of her colleagues, and has even been known to partake of the occasional medicinal spirit.

We look forward to the day that Helen becomes a capable and experienced practitioner. We wish her the best of good fortune in the years to come, for we can be sure she will always be a warm memory to us.



#### GRAHAME CON CTERCTEKO

Grahame is well known but hard to write about. Always cheerful, he never has a cross word for anyone. Having spent his early years on a motor-bike, he seems to have now retired to a Volkswagen; neither of these seem to carry a very good prognosis.

Little is known about his social life, but he is always tired on Monday mornings and looks awfully happy in Friday afternoons.

Grahame spent his long vacation in New Guinea, which has left him suffering from facial hirsutes and a great desire to the return to the less hectic rate of life.

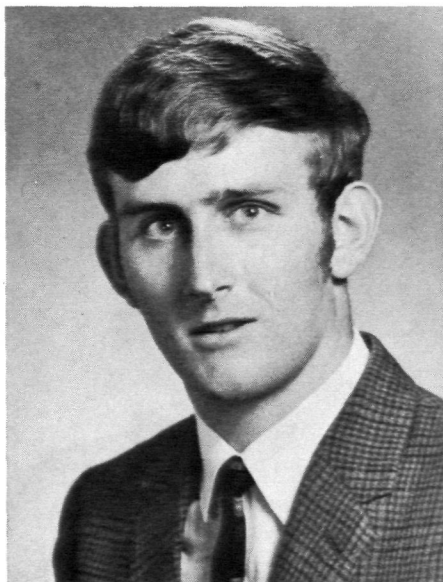
Grahame will undoubtedly make a competent and popular doctor in whichever field he may choose.

## ANTHONY DREW DIXON

*"Are you happy about it, Drew?"*

—MAX ELLIOT

Drew came to medicine from Barker College, and his stay has been characterized by enthusiasm, brief episodes of bashing the books, waiting for the pearls to drop, copious note-taking, swallowing remunerative gastric tubes for Professor Piper, 80-m.p.h. exits from North Ryde, and populating his room with owls. We got to know him well in fifth year, as the puns, nocturnal riots and his description of a certain hairy nævus were highlights of the year. His wholehearted participation in activities ranging from group discussions to inter-hospital rugby (complete with beret), and practical approach to medicine, are appreciated by his friends and should stand him in good stead as a future medical practitioner.



## TONY GORDON DONALD

Tony started medicine with an enviable advantage—the ability to see over other people's heads in bedside tutorials. With this, his blue-eyed thyroid stare, a reluctance to conceive that he might, on occasions, be wrong, a love of the minutiae of medicine and Australian geography, Tony became a distinctive member of the group.

In fifth year, we also came to know the Clan Donald tartan tie and scarf, a weakness for strong black tea, which developed on one of his many camping holidays, and in residence, his ability to talk or study into the early hours of the morning.

With his radiographer wife Sue, and a taste for luxurious living, Tony is ensured of a successful future.

## JOHN FREDERIC DONNELLY

*"Sing, Boots, sing!"*

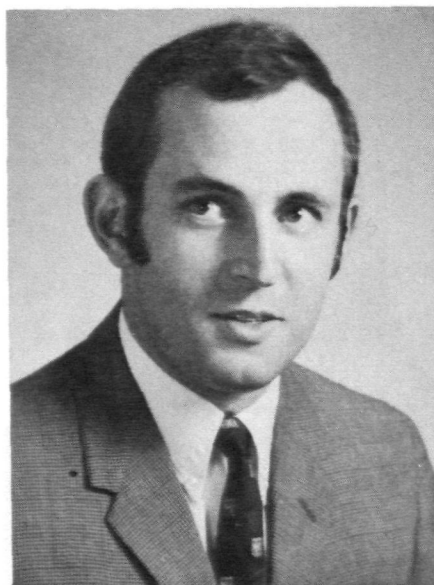
Attempts to break through the five-o'clock-shadow barrier have unearthed revealing facts about this distinguished, pipe-sucking physician prototype.

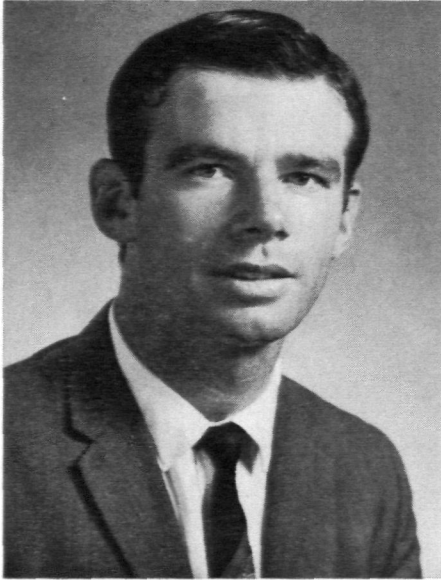
A connoisseur of wine, women and suspect verse, John's talents, previously concealed, were brought to light during residence.

His caffeine capacity, predilection for fulminating cheeses and rough red, medical and psychiatric perspicacity and mobile art gallery raised many eyebrows. The night of the cockroach hunt will be especially well remembered.

A particularly successful raid on Labour Floor, extensive investigations into hæmatological minutiae and fierce attacks upon all things dermatological highlight a productive undergraduate career.

John's diligent, sincere approach to medicine and his understanding of those things particularly human make future success inevitable.





## CHRISTOPHER LEON DORNEY

*"... and then the pulmonary emboli fell like raindrops from Heaven."*

Chris is always on the go, rushing off for a quick game of table-tennis between lectures or panting into tutes after completing major repairs to his bike. He enthusiastically pursues physical fitness through squash and football and is frequently running table-tennis competitions.

Dramatically eloquent in case presentations and debates, he is not averse to adding embellishments of his own when the history becomes too dull; the black-belt karate exponent disguised as a mild-mannered Japanese gentleman will long be remembered.

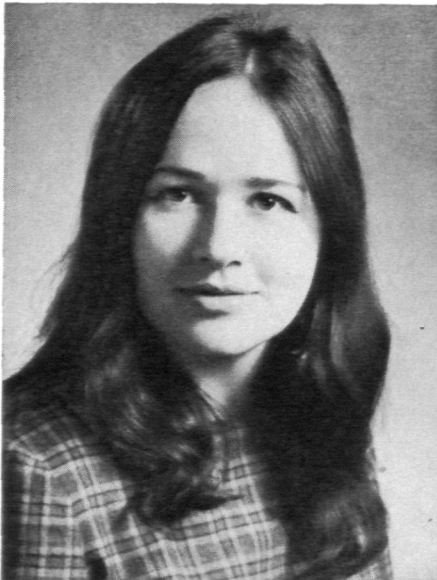
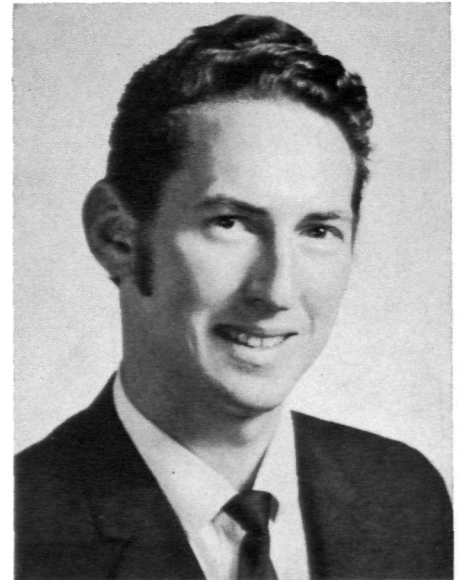
Tables of his dealings with the taxi-travelling public assure that life for Chris will never be dull.

## RICHARD STANLEY DREW

Richard is hard to write about. He is studious, courteous, loyal, kind to dogs, and stands up for the Queen. We are very worried about him.

Six years of medical studies have not altered him in the slightest. Even the acquisition of a wife and mother-in-law has apparently had no effect on him! He doesn't drink or smoke, but we have, thank God, taught him how to play bridge, and at the moment we are working on gambling; but, as yet, with little success.

I think we can regard Richard as a failure of the medical system—he has emerged unscathed!



## MARY SUSAN ELL

Final year was something of an anti-climax for Susan until the cards reappeared. Her form was established by two years of solid training at the bridge table.

Her time of residence during fifth year revealed to us her appreciation of the finer things of life—grog. Her cultural interests also include concerts, opera, literature, ballet, champagne, cocktail parties and a European trip from which she returned with the latest maxi-gear.

This trend in fashion has been extended to R.N.S.H. with the acquisition of a clean, new, white coat.

In spite of her apparent nonchalance, Susan has always risen to the occasion at exam time.

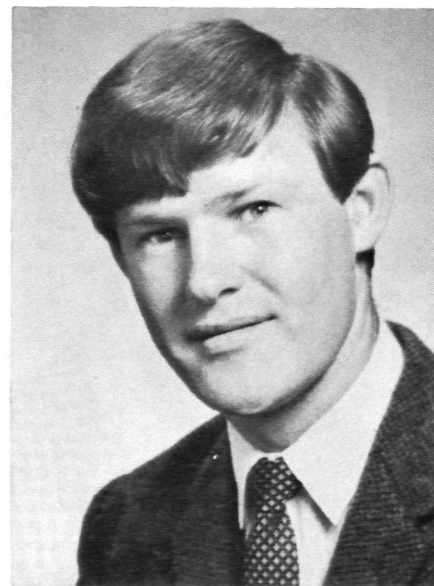
## ARNO ENNO

*"I thought he was an effervescent biscuit."*

"Ugh" first presented to North Shore in 1968. With his acromegaloid features and a pair of megalic crimson sideburns to match, he unnerved many a patient as he advanced on them, wielding his percussion hammer like Excalibur. In fact, his sideburns initiated the craze which was to sweep North Shore, with only Professor Piper remaining refractory.

Leading exponent of the useless fact ("increased incidence of cancer in Danes who have sauna baths"), first in psychiatry ("there is no such thing as a good mother"), and disciple of the school of high-powered medicine, Arno was held in awe by both fellow students and those surgery tutors who had not read the latest journals.

With his ability, there is no doubt he will achieve his burning ambition to add an Enno syndrome to medical knowledge.



## JOHN CHRISTOPHER FORD

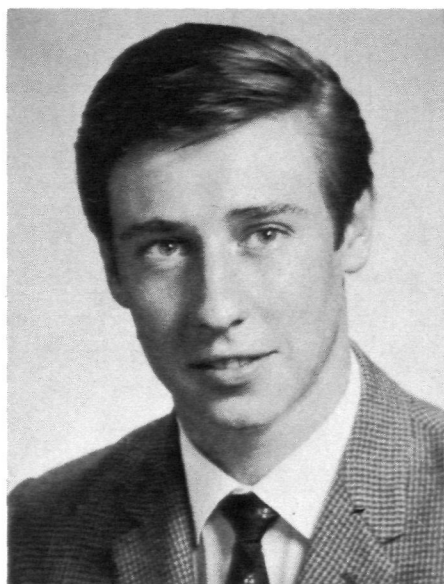
Chris is not really notable for anything in particular, but he talks a lot.

Primarily a conservative, he hates circumcision, flared trousers and paper pants.

He was once reported to have worn a coloured shirt in third year, but we feel this may have been exaggerated. We do know that he has worn the same tie since second year and has kept it very clean.

Chris is cheerful and mild until behind the wheel of his automatic Hillman which he drives with hypertensive enthusiasm. Pedestrians can indeed be grateful that it doesn't go very fast.

Overheard in tutorial: "I'm afraid reading X-rays is the one thing I can't do." Has been under close observation since, but has not as yet walked on water.



## JOSEPH ISIDORO GANGEMI

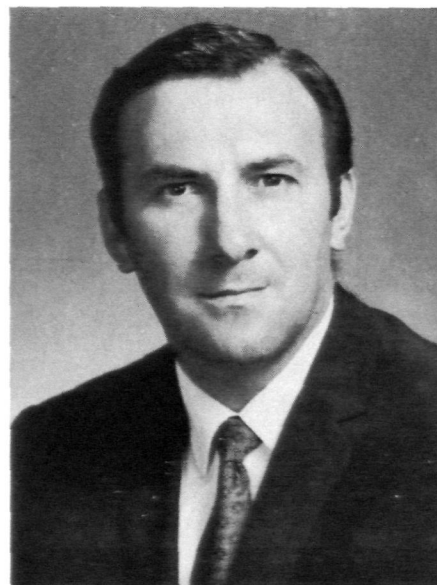
*"I thought he was an SP bookie."*

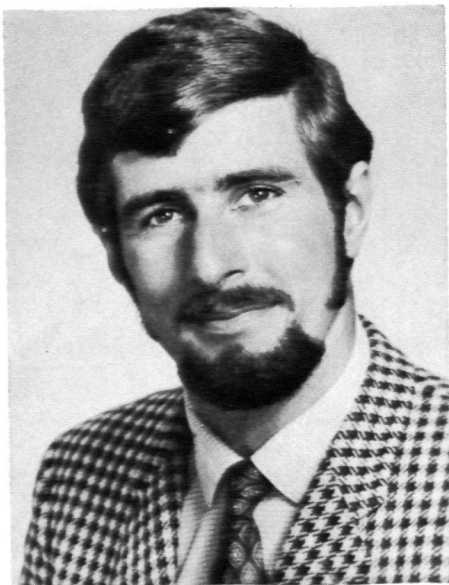
—DAVID PFANNER.

This mature Sicilian has already distinguished himself in the fields of pharmacy, finance and family cramming. Rumours of absent Y chromosome have been squashed by the recent arrival of a son.

Affectionately regarded as the father-figure around the hospital, he is always willing to advise on income tax, real estate and bridge. Despite his globular morphology, he has proven a match for all on the squash court.

Joe's philosophy that "one hour's tute = one hour's sleep" has caused an eminent plastic surgeon to remark: "Quick, wake him up before he falls off the seat." Nevertheless, he has absorbed sufficient knowledge, by simple diffusion across his ample surface area, to stand him in good stead in his rural practice.





JOHN ERNEST GLASCOTT

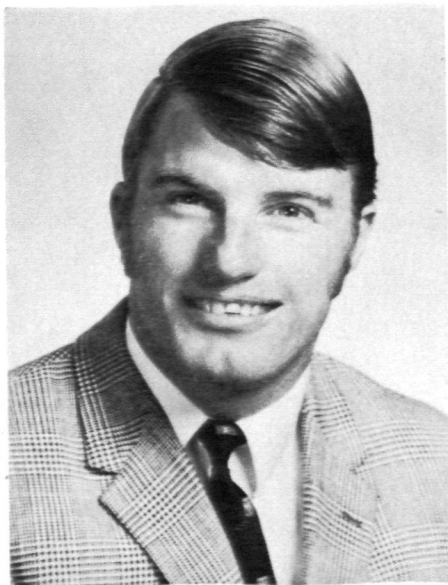
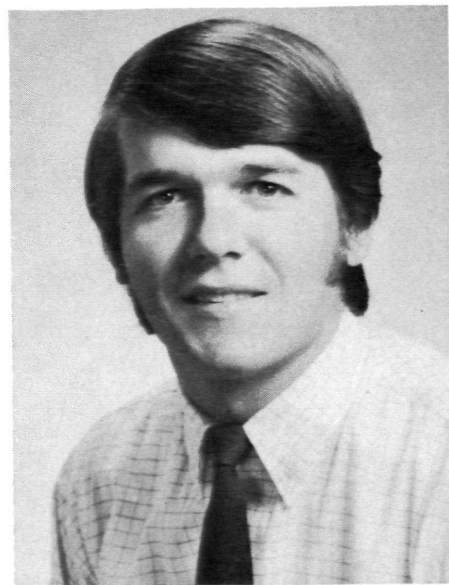
*"Dime, nickel, quarter, buck."*

This personable young man, of variable facial hirsutes, accelerated into the Faculty in an XK 150 and was undoubtedly the first full-time mechanic to embark upon medicine. Apart from several debates with examiners, this sartorial Don Juan had refused a course in aviation to progress further in the world of medicine, mechanics, and now, matrimony. Glimpses of his ever-present sense of humour, such as "Goon" renditions and other Turkish delights, have been all too few. Collecting during the course an appreciation of the finer things of life, such as vintage Rileys, Meerschaum pipes and a beach château, his finer sensibilities have been sharpened, pointing towards a promising future in his chosen field.

PETER HENRY RAE GREEN

After scooping the pool in second year, Peter convinced himself that you don't have to look intelligent to be intelligent, and proceeded to "do his own thing in his own time". The choice of the "Country Club" Hospital was fortunate, for it was a passport to many turns, providing him with raw material to further his reputation as a raconteur. His repertoire included midnight atrocities and the latest jokes told with an unusual eye for detail. This was extended to memorizing lengthy lists of causes and consequences of every conceivable (and inconceivable) disease.

There are few who can kick a football, ride a wave, chat up a pretty face and answer curly questions with equal aptitude. Peter is one.



DAVID ROBERT GROUT

*"Let's get back to basics. . ."*

Athletically and academically well equipped, Dave descended on the Faculty with three main aims: to finish medicine in record time and by correspondence, to overindulge in high living on a negligible income, and to pursue his incomprehensible obsession with the finer points of higher calculus.

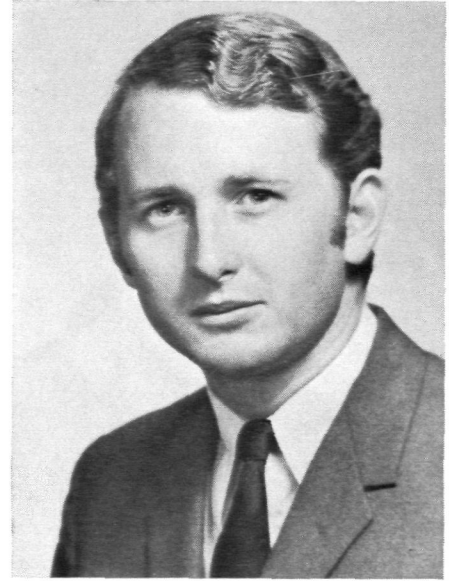
Some more memorable aspects in a colourful undergraduate career include: a drastic reduction in lung capacity, development of resistance to most microorganisms and ethanolic beverages, a brief period as superintendent of a New Zealand orthopaedic hospital, and numerous stimulating two-way psychotherapy sessions with tutors climaxed at the Camperdown Kinderclinic and with the director during anaesthetics.

To place a prognosis on Dave would be superfluous—an agile mind and a positive approach to medicine guarantee a successful career in his chosen field.



## KEITH GEORGE HARTMAN

Fresh from Riverview, Keith bounced into medicine full of enthusiasm and determination to succeed. Academically, his start was a little slow—and it was not until preventive medicine that he achieved distinction. Keith, however, did quickly establish himself as an easy-going personality, always willing to help others. A term as Med. III year rep. was his introduction to the Medical Society, of which he later became honorary secretary and perennial supporter. Time has mellowed his burning drive, so that now he is better known for his love of the finer (and more expensive) things of life, including fine food, old wines and lady lawyers. Without doubt, his sympathetic and kindly approach, together with his keen sense of humour, assure him of success.



## DAVID HERMAN ISAACS

*"I'm the only person who has to stand in the same place twice to cast a shadow."*

David came to us from the Arts Faculty, turning his back on a promising career as a classical actor. From relative fame he disappeared into medical obscurity, only to re-emerge in fifth year where he distinguished himself in several of the specials such as anaesthetics. He is known equally for his wit as his bodily habitus and it has been postulated that his presumed thyrotoxicosis is the result of a retro-choanal goitre. David will go far as a doctor, one of these days, mainly because of his basic interest in life and people.

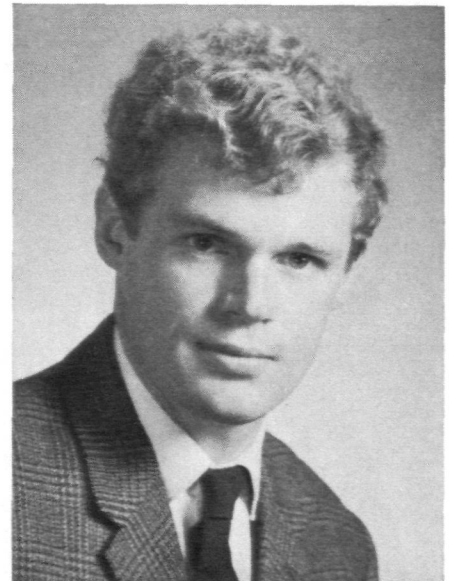
## MICHAEL JOHN KILBURN

*"Still waters run deep."*

Michael's regular attendance at nurses' parties probably shows that his interest in the wards does not lie entirely with the patients. His interest in the group commenced with a superb dissection of the inguinal lymph nodes when Mick took the prosector's prize.

Mick's clinical acumen is bettered only by his ability to maintain an adequate blood alcohol level. Intense concentration on the tee, night swims in the para. pool, and frantic football training with the residents will make him one of the fittest final-year students.

An uncanny ability to sift out the facts before exam time will ensure a successful future for this curly medico.





## JUDITH LORRAINE MARISH

*"Let's have coffee."*

A willing chauffeur, dispenser of "Lifesavers", and a source of reference on all problems pertaining to air conditioners, Judith has forsaken pharmacy to take up pædiatrics. Quietly efficient, she divides her time between home and hospital, and can always manage trips to "Perisher" when relaxation is required.

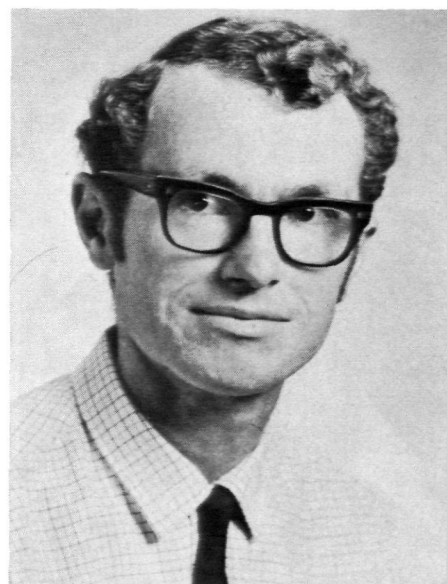
Whether spending most of obstetric term in the nurseries or at pædiatric out-patients, reading Nelson like a novel during live-in at "Kids", or staying on to spend elective term dissecting chicken lenses, Judith's interest and determination, coupled with her husband's support and encouragement, assure her of success in her chosen field.

## JOHN MALCOLM McCLEAN

*"Now suppose someone came into Casualty at 12 o'clock at night, what would you DO?"*

John's first challenge came in the shape of a pot; from this is derived his unusual retentive qualities. With crisp speech and a high-powered vocabulary he was ready to pose the most searching questions to patients, tutors and fellow students. An avid reader of *N.E.J.M.*, *B.M.J.* and *M.J.A.*, John can be relied upon to provide the latest information on anything from magnesium metabolism to hypertensive cerebral lacunes.

A broad background of guitar-plucking, cigar-smoking and trout-fishing make for an enlightened psychiatrist.



## MORNA LOUISE NANCARROW

Morna was the name chosen from some earlier work of literary merit, but the name has much more significance to the medical male, for this is "that" girl with "those" eyes.

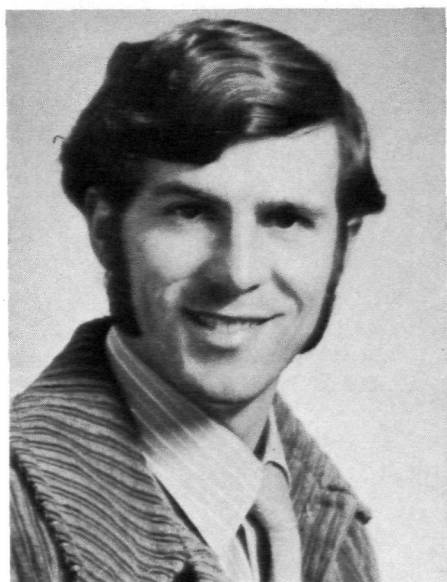
Renowned for her devotion to the intricacies of medical life (*Les cartes et les hommes*), she has managed both with equanimity. Morna's interests are not restricted to the "banalities" of medicine, but extend to the multi-faceted field of psychiatry, a field in which, even in her student days, she has excelled.

Morna will continue to bedazzle, bewilder and be successful throughout her medical career, and it is fitting that the puzzles of psychiatry should be solved by the enigma of our year.

## HANS JOCHEN ORLAND

Not much is known about this mysterious individual, who arrived from Germany after the war claiming to be a graduate of Fort Street Girls' High School. Pursuing his own devices, he single-handedly built the Snowy Mountains Scheme, and got married. However, these accomplishments were not enough; one day Hans decided to do medicine. Slowly but surely Hans has slipped from year to year with no one noticing him. You will find Hans in the library, his natural habitat, or perhaps you may see him entering early in the morning or leaving late at night.

His conscientious approach and his application to his work should assure him of success in the future.



## DAVID ANTHONY ROSE

Renowned for his ready wit, this refugee from the coal mines of Wales is lucky that there are occasionally 29 days in February to accommodate birth of those whom God is unsure about setting loose.

Aged four, he trod gently through pre-clinical years, enthusiastically pursuing fact (especially after late afternoon lectures!). Gaining foothold confidently, Dave hit the wards garbed in "clip-on" tie and registrar's coat enveloping his little legs.

An original thinker in many fields, he introduced group discussion and the matrimonial trend to the "Country Club". Supported by Dale, his gorgeous bird, the Roses reside in a dream unit overlooking the Pacific.

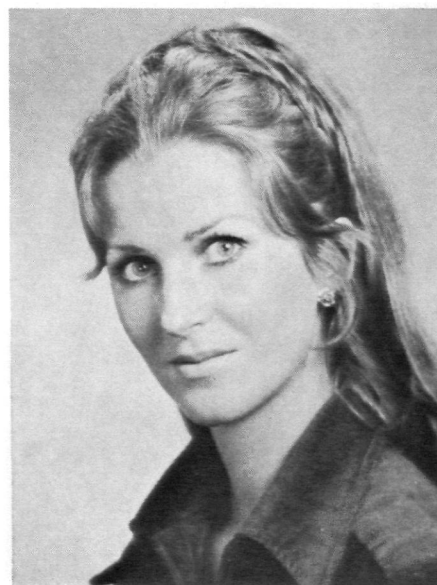
Genuine interest in people, conscientious approach to his work and a pathological abhorrence of tobacco make Dave a starter for a telegram from the Queen (provided she accepts 25 leap years as longevity!).

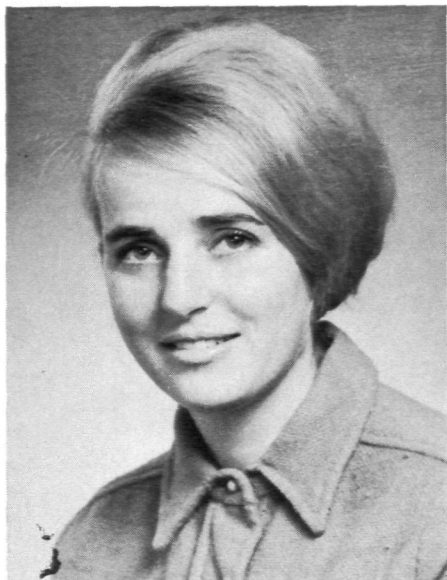
## PATRICIA MARY SCOTT-YOUNG

Tricia's red hair, long legs and fabulous clothes have stunned the medical world over the past six years, exploding the myth of the dowdy medical woman. Many a tutor has been left speechless by this tall, glamorous redhead, not only because of her appearance, but also by her searching questions.

Tricia's inevitable late arrival at social functions is usually due to her hurried finishing of the latest haute couture creation. Don't let this domesticity beguile you; this redhead has all the debating abilities of her fiery Irish ancestry.

A feminist at heart, Tricia hails from a medical family whose standing we are sure she will ably uphold, perhaps in the field of dermatology.





## CLARISSA DOROTHY SIMONS

*"Jesus, it's terrible. I'll believe anything I'm told."*

A rosy-cheeked delicacy of Dutch descent, our Clarry has a knack for brightening up a potentially boring tute. It matters not whether we laugh at her or with her, her slips of the tongue and subsequent attempts at explanation have become the hallmark of this zany dame.

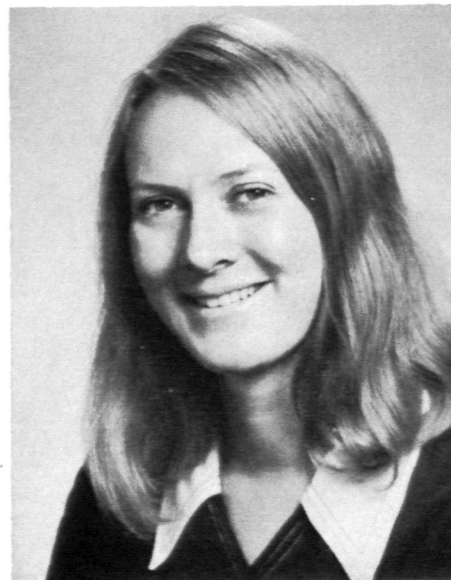
Her right hand leaves a vacuum in its wake as it traverses page after page of didactic screed. We all know who to turn to for the "bits we missed" in any lecture.

A well-seasoned traveller of sound mind and sound body, Clarissa has had few problems with the medical course, as evidenced by her great success in both written and viva-type exams, success which assures her of a rosy future.

## KATHLYN VALERIE SKINNER

Kathy very properly began University wearing skirts, jumpers and "Hushpuppies", joined the judo club and went along to E.U., but slowly realized that for her, life has other doors. The tiniest freckled lady among us, she braved in fifth year not only the labour wards, where Kathy-sized screens had to be introduced, but also the wild cannibal territory of New Guinea, from which she has never quite recovered.

Judging from the revealing crayon portraits penned by Kathy of our unguarded night moments at the students' quarters, she is a likely contender for the Archibald Prize, an ambition she places somewhere between being a G.P. of tiny-tot orientation and having a houseful of kids.



## SANDRA MARGARET TAYLOR

*"Oh, it doesn't matter."*

Country raised, Sandra spent her early years of medicine in "College", and this, coupled with her participation in university athletics, has given her a large circle of friends. Her truly phenomenal memory for names and faces makes her a walking "who's who".

Senior years saw her in a group composed largely of redheads, but fires blazed only when Sandie and a red-haired Estonian crossed swords. At other times her engaging smile prevailed.

Elective term saw some decline in her paediatric leaning and considerable rethinking about her medical career, but renewed interest in the country way of life could well be the deciding factor in her future practice.

## JOHN CLIFFORD TIDMARSH

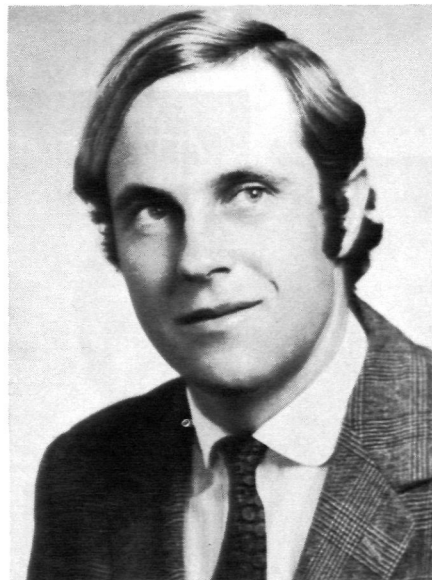
*"Let's look at the notice board, something might be cancelled."*

After his studies in Latin I, John resigned his ambitions of becoming a classics scholar and continued with the less enchanting but still ambitious task of medicine.

After a slow start, John's enthusiasm wound up and reached an almost frenzied pace in final year with an attempt to remove the minutiae and collect up a few simple facts so as to make medicine easy.

John's heroes number many; at first Rod Laver, Noel Kelly and, later, as he entered the clinical years, Professor Piper, and later still, as the finals loomed up, W. C. Fields.

What this means we do not know, but we are all quite certain that with his conservative approach to life, John just cannot take the wrong turn.



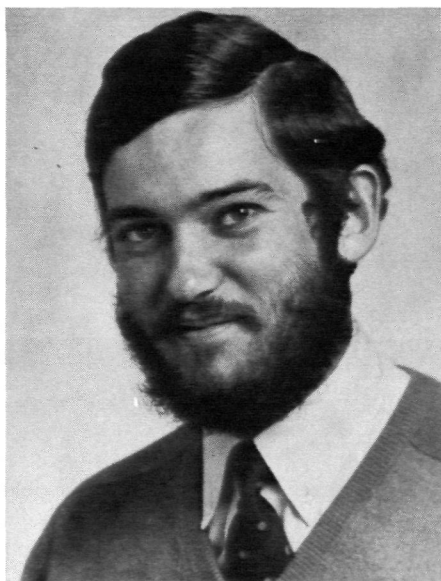
## TREVOR JAMES TIERNEY

*"Trevorstotle Tiernopolis."*

Brandishing helmet, goggles and yellow raincoat, astride his truly powerful machine, you would think Trevor's main objective in life would be to remain corpus intactus and not M.B., B.S. You're wrong, of course. Even the pessimism of a certain orthopod hasn't dented this young man's visor or his cyclic enthusiasm.

Besides being brave and daring, Trevor is a bush-walker and lover (!) of note. His appreciation and knowledge of the outback, both geographically and botanically, is impressive. For instance, his claim that quandong-nut juice promotes growth is difficult to dispute in the light of his recently-acquired facial shrubbery.

Perhaps he will become a Picasso or succeed in climbing the Himalayas, but his love of ouzo and the santuri may well succeed in luring him to his utopian Zorbian isle.



## GABRIELLA URBANSKI

Her visage obscured by a dark perspex screen, Gaby defied for a time popular speculation as to her ocular beauty.

European by both birth and inclination, she has ignored the influence of Australian philistinism and has continued to pursue her love of Bach, jazz and the theatre.

Gaby is a source of general information on items ranging from Strawberries Romanoff to the Bachianas Brasileiras No. 5—a result perhaps of her immense personal library and a wide circle of esoteric acquaintances.

Beside a passionate love of literature, she has an equal ardour for sports cars, particularly a red MGA which trails cigarette smoke and Givenchy.

Intellectual, accented and emotionally gymnastic, Gaby . . .







## MARTIN MICHAEL WAINBERG

*"Clint."*

"Clint" was once noticed jammed in a doorway exclaiming "I'll have to take this jumper off to get my shoulders through".

Together with diverse talents (door-to-door salesman, nightclub photographer, swimming-pool maintenance, wife, plus, lately, a daughter), and a refreshing, enquiring mind, we found his solidarity an example to slightly more frivolous colleagues.

A man of few words and kindly manner, Martin is bound to be appreciated by those under his care.

## PETER JOHN WHITE

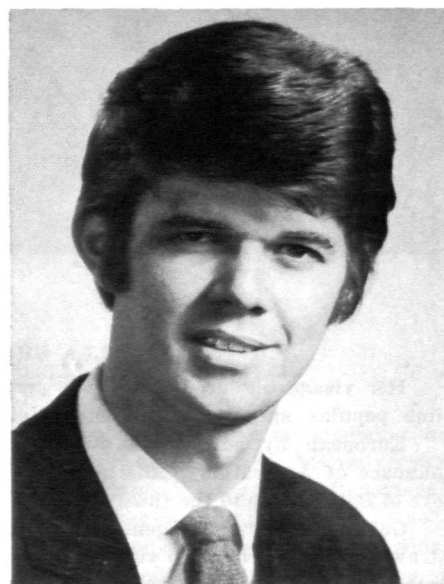
*"You're much too young, Mr. White, to be so cynical."*

—DR. THOMAS.

Peter was: in earlier years, able to commute successfully between Adelaide, the Silver City and Uni;  
 mastermind of THE Journal;  
 able, somehow, to give up smoking.

Peter is: still struggling unsuccessfully with the lure of the bridge table;  
 still fighting to gain mastery of his lenses;  
 belligerent champion of the underdog;  
 supported by Rebuck's weekly sixpenny stipend.

Peter will: keep up his wide circle of non-medical friends;  
 not join the largely conventional, insular medicos.



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## REPATRIATION GENERAL HOSPITAL, CONCORD

With the commencement of the seventies, the Clinical School at the Concord Repatriation General Hospital has entered a phase of activity unequalled in the relatively short eight-year span of life which has followed its rebirth as an undergraduate teaching institution in 1963.

These years have been of absorbing interest to those intimately connected with the moulding of the teaching characteristics of this hospital. The lusty infant, which was the Clinical School of the mid-sixties, is rapidly passing through an adolescent phase (with its associated growing pains), and now well within sight is the early approach of what we hope will be the beginning of a long and fruitful adult maturity.

From an original intake of a small band of some 16 students in January, 1963, the school has now grown to total 85. This number is anticipated to increase over the next few years to approach the century mark.

Concurrently with the growth of the student population, certain structural changes have taken place in the hospital, none of which can but fail to aid student teaching. The new operating theatres, new pathology department, both with physical adaptations to subserve undergraduate (and post-graduate) education are examples of this. The newly-conceived and long-awaited department of Nuclear Medicine has commenced operations this year and promises to perform an interesting function; it will provide this hospital with one of the facets that is part of modern medicine, and which will allow us, it is hoped, to soon become self-reliant in this field. Building has commenced of a new block which, amongst other things, will house a new medical records department.

Perhaps of most interest to the students was the completion early in 1970 of the first stage of the Clinical

Sciences Block. The second stage, with its envisaged areas for research laboratories, animal operating theatres, large lecture theatre and department of medical illustration, *inter alia* is planned to commence in 1971 and will bring this hospital into line with our longer established clinical schools.

What remains to be added?

The physical changes will occur basically as the need arises and as the dollars become available; less tangible and more difficult to define has been the slow, but definite evolution of what is spoken of as the local (hospital) "atmosphere". Our original students perhaps felt this was missing, even if only because their contemporaries from older, more senior institutions told them so; but in their own way they were, of course, helping to create it. The subsequent parade of students has added to this. It is, we hope, a close, friendly atmosphere with extremely good teacher-student relationship and will prove to be (as elsewhere) unique to the institution.

I think it is true to say that graduates from this hospital have been inculcated with an approach to their practice of medicine, that is, though far from devoid of the academic frills, basically an honest and practical one. It remains for the graduate to add his individual stamp to what has been only the beginning of a lifetime of learning.

To those of you who will graduate from this School this year, your tutors wish you well; we hope we will see some of you among next year's junior residents, and to see many, if not all of you, at reunion times.

We would like to believe that all of you will recall with satisfaction the years you passed with us as time well spent.

S. G. KOOREY.

## THE HONORARIES



ALBERT BRUCE CONOMY

*"That's naughty."*

At all times, Dr. Conomy's knowledge of medicine proved indefatigable. Literally a walking encyclopædia, he could "off the cuff" deliver a lengthy and enthralling treatise on any subject from histiocytic medullary reticulosis to blue lunules, punctuated by useful points on examiners' favourite topics, multiple journal references and numerous relevant digressions.

Perhaps most helpful of all was his emphasis on precise physical examination and accurate history taking, with a view to channelling our thoughts toward the most likely diagnoses, and his decrying of absolute reliance on special investigations over and above the clinical status of the patient at the bedside.

We, his students, very much appreciated his teaching, and know that it will be of benefit not only before, but also after, we graduate.

NEIL DAVID GALLAGHER

*"Pronounced GALLA-HER."*

Our association with Dr. Gallagher began in fifth year when he assumed the post of Senior Lecturer in Medicine at Concord. He was the first appointee to this position and has been responsible for the setting up of the first full-time (and much-needed) Medical Professorial Unit.

We as students have undoubtedly benefited from the arrival of Dr. Gallagher. Apart from his chosen field, Dr. Gallagher has always shown a keen interest in student affairs and requirements. He has made many efforts to improve the quality and the quantity of our medical tuition.

His tutorials, marked by his patient and helpful criticism, have been enjoyable as well as instructive. The quality and method of his teaching, marked by his dry sense of humour, shall be remembered by all.



STANLEY GEORGE KOOREY

*"I wouldn't put that first. . ."*

As a fourth-year tutor he was well known for his "stand up" tutorials which, apart from promoting venous stasis, provided us with the necessary fundamentals of B.C.C.'s, melanomas and, of course, Dupuytren's contracture.

As Clinical Supervisor he has proved most elusive, possibly because his office was constantly being moved. There are hopes that his office in the new Clinical Sciences Block, where he is aided and abetted by his able secretary, Judy, will make him more accessible.

Despite his many responsibilities, he has always found time to follow our progress through our clinical years, as well as providing a sympathetic ear for any problems we have had.

P.S.: Would anybody knowing the whereabouts of Mr. Koorey please contact his office?





# DOUGLAS CAMERON MACKENZIE

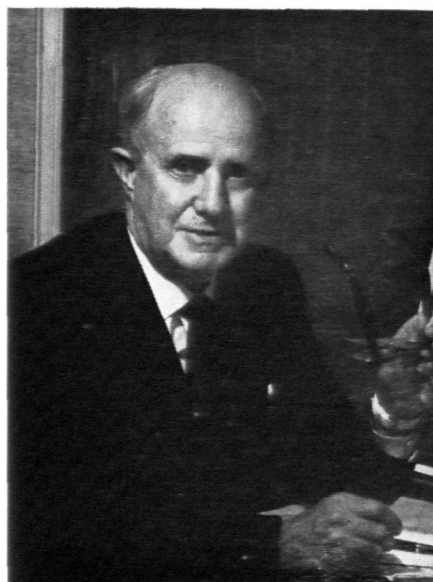
*"I just happen to have such an X-ray here."*

Anything written about Doug Mackenzie must be an understatement. He has to be seen in action to be "appreciated". We have seen him in action and we soon realized that this man was *different*.

No spoon feeding from him. Every tutorial a verbal battle, a matching of wits and a clashing of personalities. The field was strewn with casualties (namely females).

Far from being just a lot of hot air, these "vivas" taught us not to accept everything the patient told us and to disregard the irrelevant.

Apart from the short-term benefits (i.e., exams), our association with Doug has certainly helped to prepare us for the "cold cruel world" outside.



# JOHN PATRICK O'NEILL

*"Write down your diagnosis. . . ."*  
*"Surely you're joking, Mr. . . . ?"*

Students of yesteryear noted the way in which this gentleman subtly rubbished any false notions they may have had. Might we add that occasionally an equally subtle, sadistic smirk accompanied such situations?

Excusing this perhaps paranoid vision of the hierarchy (as final years are prone to see it), we see more sympathetic facets of this personality. Mr. O'Neill provided light when things were blackest. His genuine concern for those in the group with hopelessly shambled thinking was evident, even if these occasions provided more than a little embarrassment.

We can do no more than thank him for his enthusiasm and attempt to justify his efforts.

# SIR WILLIAM MORROW

We approached our initial encounter with Sir William (or Sir "Bill" as he is better known) with some apprehension. We were subsequently much relieved when, apart from the formidable title, Sir William proved to be one of our most understanding tutors.

Our association with Sir William has provided us with an opportunity to view the practice of medicine in its proper perspective: a combination of clinical acumen and understanding of the patient as a whole. As a result, our relationship with patients in the future cannot be other than improved.

Sir William's patience and efforts are remembered and appreciated by us all.





#### KENNETH WILLIAM PERKINS

*"I'll be there in half an hour."*

From "fascinoma" to "cactus profundus", Dr. Perkins demonstrated that just the simple things of medicine expose a wilderness of student ignorance.

His tutorials, punctuated by frequent telephone consultations on the "Hornsby Hotline", nevertheless demonstrated his unique ability to hold simultaneous conversations. We were thus required to distinguish the remarks intended for us and those intended for the unseen voice on the end of the telephone ("cover the concrete?").

We would like to thank him for the practical, down-to-earth approach he imparted to us.

#### *Associate Professor of Surgery:*

#### MURRAY THEODORE PHEILS

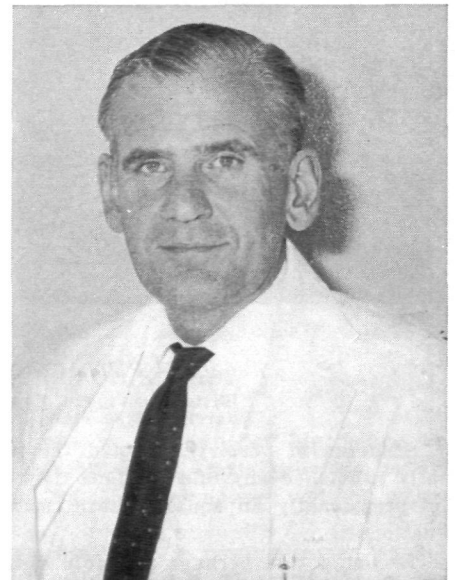
This immaculately-attired, articulated and knowledgeable English gentleman became known to most of us through a fog of piles, polyps and proctoscopes in fifth year. If the fog has become a smog to some in final year, it is not for want of the Prof's honest endeavours.

A victim of the Mother Country's privations, the Prof. came to us (scalpel in hand), more than adequately qualified to impress the colonials.

Impress us he has.

Perhaps most fondly remembered were the Friday afternoon liquid refreshments before the path. conference siesta. For those at the other academic extreme—who could complain?

From one and all, and those who got lost on the way, thanks, Murray.



# ROBERT PETER SILVERTON

Bob Silverton is one of those rare surgeons who is not hypomaniac, his idealistic zeal being tempered by experience and an unusual amount of common sense.

Invariably immaculately, though conservatively attired, his reputation as gentlemen and surgeon is enhanced at every tutorial. Always there before the students, he manages to discuss an amazing number of cases without losing anyone's attention, thanks to his willingness to share a joke and tendency to make the sleepiest student do the most work.

His approach to teaching and enviable knowledge of his subject, his attitude to students and outlook on life, ensure his continuing popularity both as a tutor and as a man.



# NORMAN RICHARD WYNDHAM

*"Thank you so much."*

"...."

A thoroughbred whose ancestry  
Goes back to ages dim,  
No student in his wide domain  
Need fear to speak to him.  
Although he never showed a sign  
Of naught save sympathy,  
He was the only gentleman  
That shamed the lout in me."

(Not totally original, but apt—An admirer)

## OUR OTHER TEACHERS

Our basic training at Concord began in fourth year under the command of:

- DR. EVANS, continually baffled us by detecting grade I murmurs with his amazing "Sanborn" stethoscope.
- DR. NOBLE, remembered for his unique sense of humour and his "painless" tutorials.
- DR. ROYLE, his deceptively efficient (and unique) method of teaching had a measure of success. We think!
- MR. KOOREY, fibromas are NOT common tumours!
- MR. HEALEY, his unruffled and systematic manner succeeded in simplifying any clinical problem.
- MR. HUGHES, better late than never; but always worth waiting for.

These seasoned campaigners had the formidable task of imparting to us some of the fundamentals of medicine and surgery. They must have achieved some measure of success, since we all passed our clinical exams and they're *still* teaching fourth year.

In fifth year we emerged from our relatively sheltered existence and exposed to this battalion of seasoned campaigners:

- HUGH GIBSON, his brief appearances from behind that pipe were to reach for a match.
- TOM BURFITT-WILLIAMS, his down-to-earth approach to medicine was always enlightening.
- ROSS DUNN, you can't argue with that—Champ! No one typifies the Concord spirit more than this surgeon's surgeon.
- DAVE PERRY, a hypomanic thoracic surgeon whose manner ensured no one slept during his tutorials.
- MR. FURBER, able to see any lesion in terms of Z plasties, rotation flaps, full and split thickness grafts and even tube pedicles!
- DR. BEAR, impressed us with his emulsions containing liq. piscis carb, ung. zinc oxaquosum and a dash of neatsfoot oil!
- DR. BYERS AND DR. O'LEARY, their tutorials far from having an anaesthetic effect, gave us an insight into the "art of gassing".
- DR. DAVIES AND DR. WOOLCOCK, never have we seen such men of endurance in the field of ears, noses and throats.
- DR. LENNON, renowned for the tea and sandwiches in his tutorials. Unlike any orthopod we've known.

DR. CHAMBERS, unlike his manic patients, he never lost his head.

DR. LENNOX, by way of illustration, let me tell you a story; or as my "old boss" used to say. . . .

MICHAEL BARRATT, from making cufflinks to being an expert on obscure tumours in dogs, this pathologist always held our attention, especially with his bizarre sense of humour (during P.M.'s particularly).

In final year our anxiety neurosis finally decompensated. Acute panic reactions were precipitated by anything pertaining to the finals. Reality was tempered, however, with soothing words of wisdom from these experienced gentlemen:

PROFESSOR BLACKBURN: Anyone who can think so logically at 8.30 a.m. must be good! He was always ready to bring us up-to-date on any topic with information from the "green journal". His tutorials were thus informative as well as enjoyable (even at that hour).

DR. CARRODUS: Although his double-breasted suit may have seemed to some old-fashioned, it soon became apparent that his teaching of urology wasn't. We hope our *retention* of it is as good.

DR. MCGARRITY AND DR. MEARES: Ably guided us through the maze of obstetrics and gynaecology. As a result we feel more confident not only about the exams, but also of our long-term understanding of the afflictions of women.

DR. GRANT AND DR. MCGLYNN: Ensured a sound union between us and orthopaedics. Their lucid and practical approach left no one in doubt about the essentials of proper management of orthopaedic patients.

DR. FAITHFULL AND DR. MATTHEWS: Our "eye of faith" reached its peak acuity under the guidance of these two radiologists who showed us that dark rooms *can* be fun (also very useful).

Without teachers we would remain students. We have been fortunate in having received the benefit from our association with these men with their obvious wealth of knowledge and experience. Their willingness to impart it to us was always apparent.

We "trust the end justifies their means", but we are nonetheless grateful for their efforts.

## THE REGISTRARS

These ubiquitous members of any hospital surely must possess the most efficient grape-vine known. They had at their fingertips the names, locations and clinical features of any *interesting* patient in the hospital.

They were never possessive with regard to this information. In view of the frustrations involved, they

were singularly keen to bring them to our attention by way of numerous impromptu bedside vivas.

We would like to think their efforts were rewarded. Our association with them was *certainly* a gratifying and stimulating one.

## OTHERS

In talking about Judy (Mrs. Vitens!), it is difficult to exaggerate. Her unlimited patience is unbelievable, her smile superb, and her organization immaculate.

She has been secretary, wet-nurse and den-mother to us for three *long* years.

For services rendered far above and beyond the call of duty she has our eternal gratitude.

A rather indispensable part of a hospital, it is generally agreed, are the sisters and nurses. At this point we would like to acknowledge their co-operation during our many visits to the wards and in our dealing with patients.

## THE STUDENTS

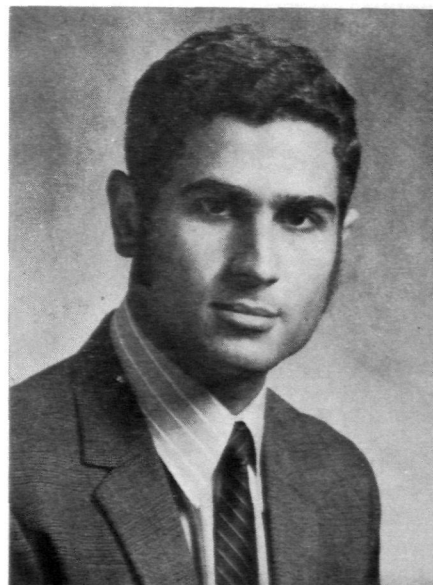
### JOHN BANDOUVAKIS

*"Good grief!"*

John has always displayed a diverse range of interests. Giving up potentially successful careers as a bass player, a television and radio repairman and a V.W. panel beater, he has finally decided to concentrate on medicine.

Not satisfied, however, with basic medicine, he has acquired an ever-expanding repertoire of esoteric clinical syndromes, using them to break the monotony during those long tutorials. To supplement his *thirst for knowledge*, John spent his unallocated term in the hæmatology department *researching* into the *intricacies* of vitamin B<sub>12</sub> metabolism. Following this, he received the honorary title of "The Visiting Hæmatologist".

His exuberant manner and good humour have provided comic relief on many occasions. Together with an interest in the abstruse as well as the patient, John should experience a most interesting career (in medicine!).







### NORBERT BEREND

*"Borderline mental defective . . . twit!"*

Norbert started his junior residency in fourth year at Blacktown Hospital, where he soon began to spend most of his time. The experience and knowledge he gained there has proved of great benefit in tutorials.

His likes include red wine, Scotch, jazz, playing the guitar, and members of the opposite sex (not necessarily in that order of preference).

Norbert is conspicuous during tutorials by his confidence and ability to answer in detail even the most obscure questions.

His physical examination of patients always includes attempts at eliciting the elusive Kenawy's sign (we had to look it up, too). This is typical of the determination which characterizes Norbert's approach to medicine.

We therefore predict a satisfying and successful future.

### BRUCE REGINALD BILBE

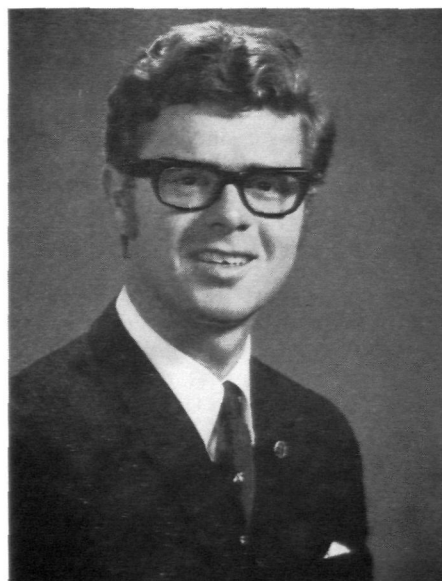
*"I don't know."*

Bruce's conspicuously-red hair belies his normally quiet and unassuming nature, yet is well in keeping with his behaviour after lights out.

He has a natural flair for all types of sport, excelling in tennis, squash and surfing as well as being the best table tennis player at Concord.

Fifth year saw the emergence of yet another interest, when Bruce became engaged to Karen. Since then his medical studies have been interrupted by the writing of numerous aerogrammes to Belfast (Karen's home city).

Along with preparation for the finals, Bruce has already booked a one-way passage to Ireland (on several flights just in case), where he is assured of a warm reception, and we wish him and Ireland all the best.

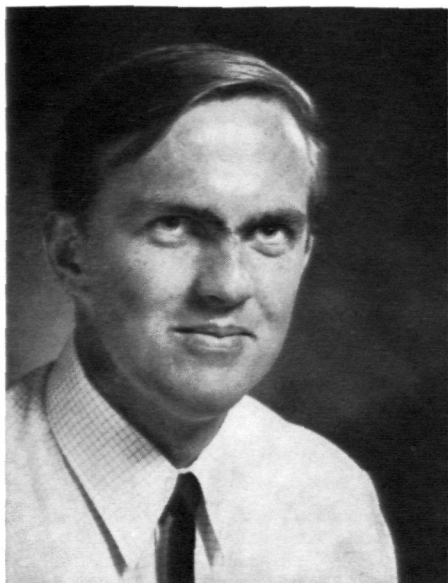


### WARREN JOHN BROOKS

Hailing from Werris Creek, Warren came to the big city to do medicine (that's his story, anyway). He applied himself to the task at hand and made it to final year. Here he turned his hand to fields anew, and his reputation soon became legendary. He also developed a unique system of bidding in bridge, and established himself as a gambler with uncanny luck!

Being basically an outdoors type, however, he could not resist the call of the wild, and so joined the hospital football team and has again been conspicuous on the field.

In view of his successes in such a wide range of activities, we feel Warren cannot help but succeed in his chosen career.



# JUNE-SEONG CHOONG

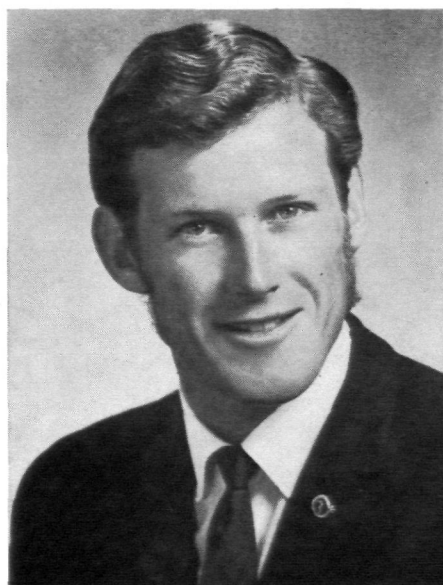
Arrived in Fremantle, Perth, 1956, and after taking Fort Street by storm, proceeded to medicine. All went well until a blind date in fourth year began the inevitable downward path to the altar.

After changing to science and achieving his B.Sc., Joe supported his lovely wife until the yearning for wards and study triumphed and he returned to our Faculty. Fourth year saw our group congratulating Joe on the arrival of a "little Choong".

Joe's extracurricular taxi-driving ensured that anyone who accompanied him to Concord took a different and much longer route.

We were often impressed with Joe's lightning exits when threatened by practical jokes from other group members.

We wish him well.



# JAMES ROBERT DEVES

Jim entered the Faculty by mistake in 1964, his L.C. from Fort Street being perfect for arts. He became a regular at Union movies, Manning and local pubs, and at the fourth-year dinner became the first student to sleep on the road outside Manning.

A man of property, he has owned 3½ cars and a boat, and succeeded in wrecking them all at least once. As a hedonist, his fondest memories are of St. Margaret's.

Academically noted for last-minute bursts, he has been known to take six case histories in two hours on a Sunday morning. However, this year, even the Concord pontoon school cannot distract him from study. We wish him well for the future.

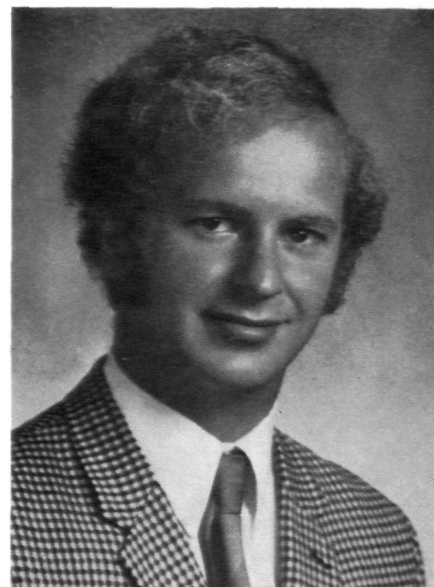
# PETER DI MICHIEL

*"Honest, mate, it can't lose."*

Pete entered medicine, a wide-eyed, clean-minded, virtuous product of St. Patrick's College, Strathfield. Fortunately, most of this changed as he progressed through medicine, acquiring academic (and more basic) skills over the years.

Rarely to be seen without form-guide in hand, this Italian-extracted lover of life amazes all by keeping well ahead of Bailey & Love, etc., yet not letting such trivia interfere with the critical business of Saturday's selections.

After savage financial duels with one M.G. in third year, the demon drink, and various frantic women since then, little remains to divert Pete from his ultimate goals. Whatever they be, *he can't lose*.





#### FAY MARY HINES

After an uneventful passage through preclinical years, Fay arrived on the wards, where her clinical ability continually startled our tutors: "Is that lump abnormal?", and "I can't hear any murmur".

She will long be remembered for her unusual approach to driving, by which she manages to ignore red lights, pedestrians and all other vehicles, especially trucks.

Although Fay did not spend the long vacation advancing her studies ("I didn't go near a hospital!"), she returned to us in final year engaged, so we believe that the time was not entirely wasted.

Her extracurricular activities include church work, watching "Star Trek" and receiving a mysterious caller on Wednesday evenings.

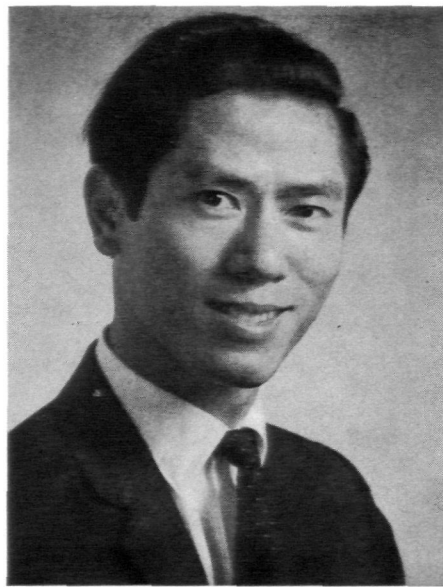
We wish her well.

#### BIG TONG JEFFREY HO

An enigmatic Chinese from Hong Kong with an inscrutable oriental mind that defies analysis. Jeff has made a reputation for himself in several fields, including his frequent disappearing acts.

His medical knowledge is surpassed only by his driving skill—"Jeff, that was a red light!". His winning strategy at chess is sharply contrasted by his inexpertise at cards. We have always admired his generosity in parting with his life savings to aid his fellow card players.

His kindness, thoughtfulness and willingness to help others are features of Jeff's character. As a result of this, and his ability to apply himself to his job his future in medicine is a sound one.



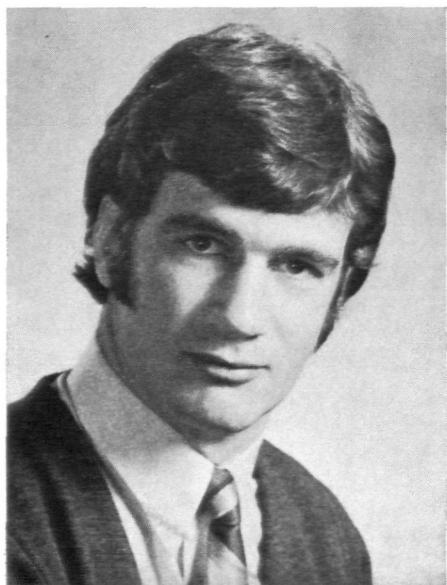
#### ROGER FREDERICK HOLLOWAY

Garnished and nurtured by Homebush High; picked up and flung into medicine by a miracle; standing on his own two feet by second year; Roger pushed, pulled, bulldozed and animalized his way to final year.

On the way: the one woman, the occasional women, the "Lodge", football, wrecked cars, poker, sun, fun, many friends—all came; few went.

Hospital was an institution; patients—people; football—a religion; study—a bore.

Frayed nerves soothed at the Repat. retreat—time for introspection. What was this rat-race all about? Studying it from all angles, he was glad of the diversions taken, the friends made. "At least some of my time wasn't wasted."

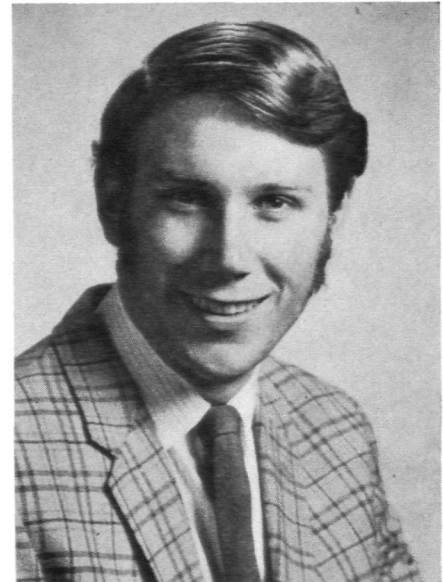


# BRIAN WELLESLEY HOLT

*"Okay, troops, let's face it."*

After a successful career at Shore, Brian entered medicine determined to make his undergraduate years ones of achievement. His first step was to build a trimaran while the rest of the second year studied anatomy. His second was to obtain a credit in E.N.T. His third was the discarding of his pseudo-bachelor image to acquire a wife.

Brian's raucous laugh, bouncing gait, steer tie, scruffy blond hair and blue "Mini" will always be remembered by his friends, and despite his ability to lose his "contacts" in the weirdest places. His insight into medicine from the G.P. point of view, coupled with his personality, assure his success in practice.



# PETER RONALD KLUGER

*"You actually managed to stay awake!"*

—TUTOR.

This unusual mixture of the classical and the contemporary soon made his presence felt in fourth year, with his many candid comments about patients and fellow colleagues alike. If nothing else, he did help to break the silence of many a tutorial.

Peter's classical leanings are towards the music of Schubert, while his more contemporary likes include golf and bridge.

After years of study, Peter finally arrived in final year, which has provided him with his first real taste of wine, women and cigarettes, not necessarily in that order. "Life is not all medicine; God, if only I'd known!"

We can only say "all the best in your chosen career, Peter".



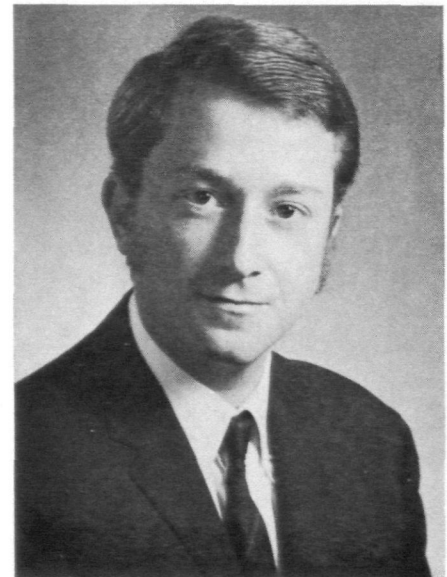
# PETER RONALD LINDBERG

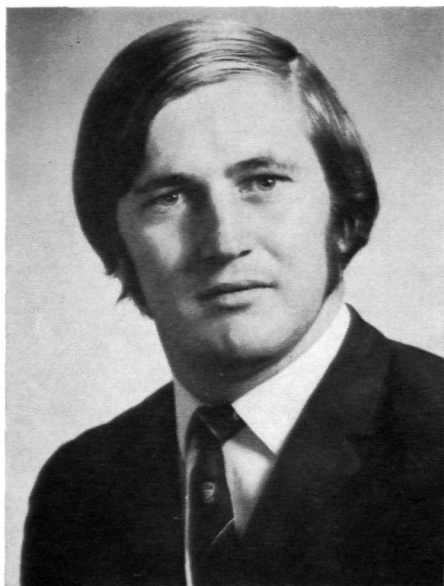
Peter entered University with the sole intention of studying medicine. It was not long before he realized that the extra-curricular "courses" had much to commend them, and he soon developed a flair for good food and wine, and the best shows in town.

In the more recent years we watched him emerge as a shrewd "financier" (or "mad gambler") with a passion for stock market reports and quick hands of cards. Fortunately, he has acquired the ability to combine all of this with successful study, as evidenced by his happy progress towards the finals.

His friendliness and confident manner will no doubt be of continuing benefit to him in the years to come.

We wish him luck.





## MURRAY WALLACE MELVILLE

*"Shut up and deal."*

After a spectacular career at Homebush High, Murray joined us with the scars of the good life already deep.

Although enjoying a prolonged stay in second year, he has at times baffled lesser beings with his pre-exam nonchalance and hidden talents in music.

In spite of a shaky bachelorhood, he has emerged unscathed. This has provided more time for his real love, a little 5-tone Morris ("at least I paid cash!") which defies all known mechanical laws. Preserving this undying love has demanded many a ruthless night at pontoon or the cabs.

From his many friends, there is no need for wishes of success, as with his attributes he is assured of this.

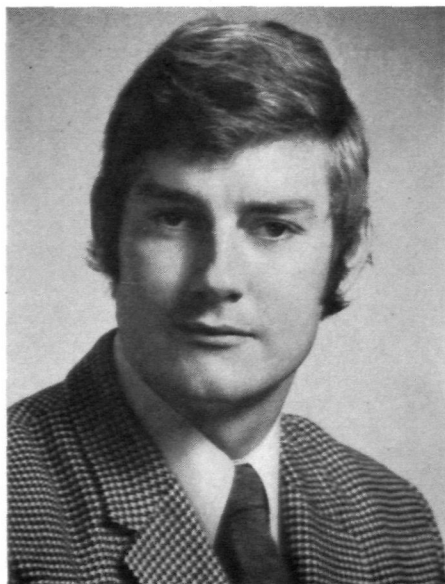
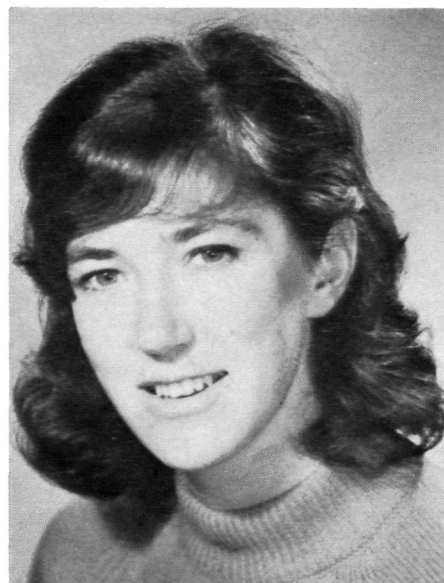
## GLENYS MARGARET MILLER

*"I'm getting a little confused."*

In between trips to Kathmandu and Marble Bar, undertaken with energy and enthusiasm seldom seen during term time, Glenys actually found time to squeeze in medicine. Even more remarkable, she also found time to read every "Time", "Life" and "Bulletin" magazine in the common room.

Being the only female member of her group, she was constantly interrupted in this "work" by frequent requests for cups of tea—which she has been known to make on rare occasions. She brought to the group a much-needed touch of culture and femininity which somehow managed to survive the three years in the overwhelmingly male environment.

We wish her success wherever she chooses to practise—? South America.



## DAVID CLIFFORD NEWMAN

Dave arrived from England some twelve years ago, and soon found out what life in Australia was all about, living as he did then in the depths of the western suburbs.

His Uni. career has been varied, and he has made many friends along the way.

Having survived sky-diving, water-skiing and the rigours of the daily road rally from the University to Concord, Dave reached final year—only to become married. Since then he has been seen less at the "Country Club" while his medical knowledge has increased concomitantly. His clinical acumen and assured bedside manner will always stand him in good stead.

We wish him luck in the future.



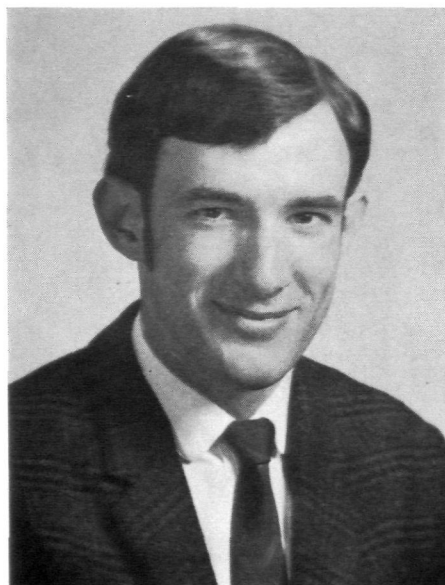
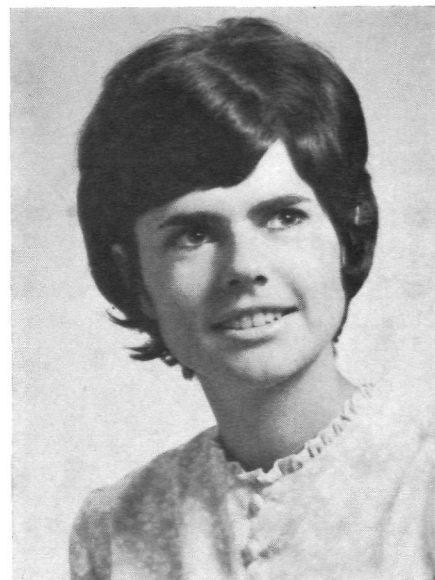
# JILL HELEN NEWTH

Defender of the "underdog", Jill remained unhardened by the long, tough years of medicine, and surrounded by stalwart married body guards, was protected from residents and registrars.

Her culinary expertise was shattered by her pancake recipe in surgery term. The consequences of flipping these "scrambled eggs" are still being collected for the Pathology Museum.

Jill's spelling and that of the Oxford Dictionary tended to be somewhat at variance, and this was not improved by her decision to learn Italian in fifth year. However, not being content with this, Jill spent her elective term at a mission hospital in the New Hebrides, and despite harrowing experiences with volcanoes and cord prolapses, acquired two more languages—French and Bislama.

Conclusion—a multilinguistic medico.



# GEOFFREY HOWARD PAUL

Entering medicine after a preamble at the wild west (some call it Parramatta High), Geoff became well known for his impersonations of various people, particularly anæsthetic tutors and certain professors.

His well stocked vocabulary of rare and voluminous medical names and his uncanny ability to be sound asleep and yet appear alert and interested to the lecturer made him a valuable asset to any group.

He proved himself unique in Med. V by summarizing the medicine course in obstetrics term—a feat which showed that he was no mean acquisition for a fiancée.

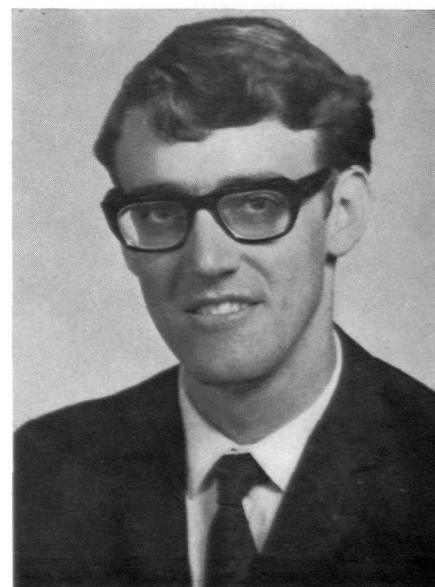
As a married man, Geoff's attitude changed in Med. VI—this time he was summarizing obstetrics in medicine term—sounds confusing, doesn't it? May his "studies" be rewarded!

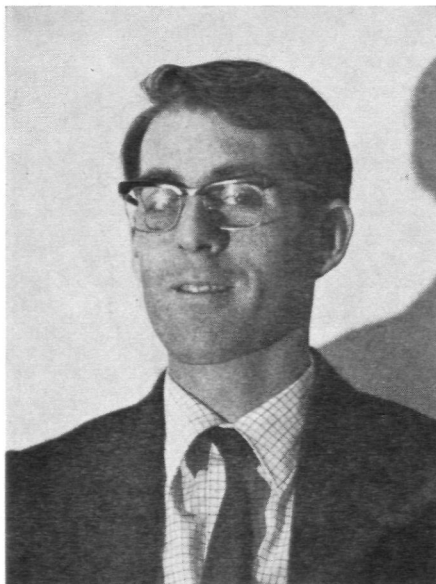
# PAUL RICHARD PERCY

Entering medicine from Meadowbank High, Paul spent the pre-clinical years deciding whether or not to marry Leonie, and the early clinical years proposing, the decision having been prompted by his Clinical Supervisor.

In Med. V, Paul proceeded to show the results of years of watching one "bird" by pulling in his chest, pushing out his chin, growing a beak and metamorphosing into . . . "Superstork", the "deliverer" of St. Margaret's.

Paul's genuine interest in his patients is readily apparent at the bedside, and his determination in obtaining a detailed history and precise physical examination of each patient will stand him in good stead in the years to come.





#### PATRICK MAURICE PURCELL

Cleverly disguised as a mild-mannered photographer, Pat announces his presence by a flash of light and a clicking of shutters.

Having missed his true calling in life, Pat found that he could still combine medicine with his favourite hobby, photography. Other fields of interest include red wine (it is said that he does some of his best work whilst sober), billiards and the trampoline.

With such a versatile personality (and a good camera) he should do well in something!

#### JOAN MARGARET SANTER

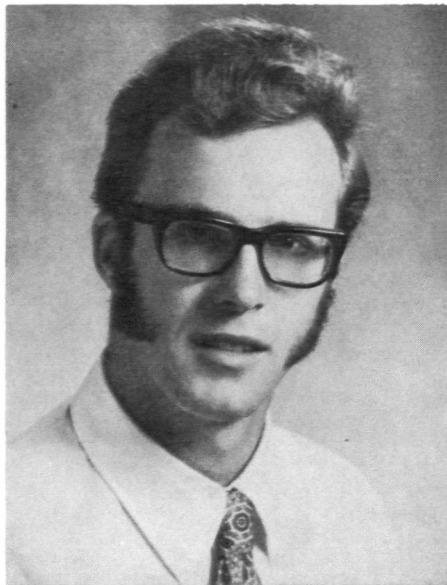
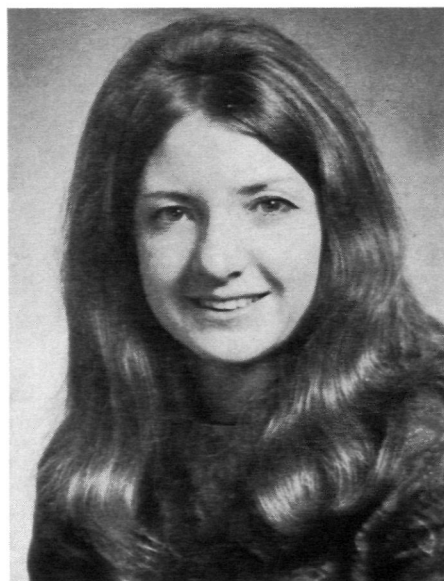
*"Good heavens . . . I don't know anything!"*

Entered University with enthusiasm, but soon faced the realities of a medical course and was disillusioned. However, determination remained with her, and she aspires to be a G.P., perhaps dabbling in obstetrics and pædiatrics.

Quiet and retiring as a student, she occasionally muttered some words of wisdom to the amazement of her all-male fellow students. Joan gained further experience at St. Margaret's Hospital and Burnie.

Seen regularly on the route from Uni. to R.G.H. driving the green Valiant in which she no longer worries about speeding fines since the acquisition of an influential acquaintance.

She promises to be a sympathetic listener to her future patients and to advise them well.



#### MICHAEL CLEMENT SYMONS

*"Well, you know. . . ."*

Michael, known as a conservative in previous years, suddenly blossomed in final year, sprouting bushy sideburns and moratorium badges. His willingness to take on all comers in political and social "discussions" contrasted sharply with his more passive role during tutorials.

His obsession with Harry Belafonte records often prompted numerous vocal outbursts (his own and others).

His inclination toward the minor specialties should stand him in good stead as a minor specialist (he really did read De Weiss and Saunders twice!).

His flashing smile and constant good humour assure a successful medical future—but one more Belafonte record and he's out!

# JOHN ERNEST VAN DYCK

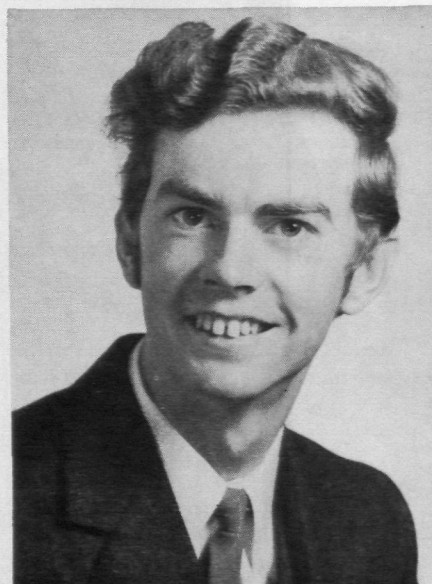
*"Do you mind!"*

Characterized at a distance by a crop of curly reddish hair and a youthful appearance, the diagnosis of John is established by finding unilateral left-sided digital callosities, a feature pathognomonic of chronic guitarism.

Since 1965, when he commenced medicine, John has shown no difficulty in making same a pleasant pastime in between more serious activities such as music and marriage. We are sure, however, that certain financial advantages of the first will stimulate maximal interest in the Hippocratic code.

John's passage through the Faculty has been characterized by cardiac interests (both anatomical and otherwise), paper aeronautics and a friendly, sincere manner.

We wish John well, as he surely will do.



# PETER HON JUNG WONG

*"What the hell's going on?"*

Hailing from Indonesia, Peter could be called an exemplary ambassador. Already a graduate in pharmacy, he continued his masochistic ways by doing medicine.

Having mastered English, he decided to teach his colleagues Indonesian by conducting 2 a.m. tutorials. To those fortunate enough to have tasted Peter's inscrutable cooking, his mysterious air remains unsolved: an air created by lights burning till early hours of the morning, strange stereo music (at any hour), jaunts off into the densities of Dixon Street, and an undying love for a game called "Monilia".

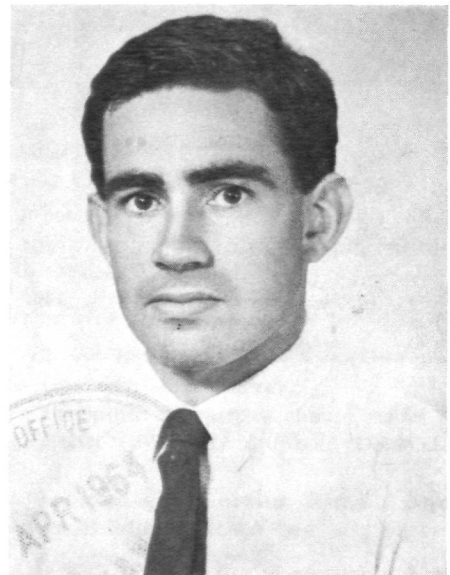
Peter, we know, has all the attributes of making good in his profession ("I should have been a jockey") and we all wish him the best of luck.





## THE WOMEN'S HOSPITAL (CROWN STREET)

If Crown Street is the *alma mater* of a select band of budding obstetricians and gynæcologists, then surely Jock Murray is the *pater familias*. Both have been of invaluable assistance to us: the hospital as a place of learning (about all sorts of things) and Jock as student supervisor, organizer and tutor *par excellence*. We owe them both a great debt.







## The Johnson Medal

The Johnson Medal for Research and Development was established in 1960.

It is awarded annually at the discretion of the board of directors to scientists throughout the world-wide Johnson & Johnson organization for outstanding achievements within the extensive research and development programme.

Bearing the likeness of General Robert Wood Johnson, the medal represents the company's high respect for its men and women of science.

*Johnson & Johnson Australia is proud to be part of this world-wide Research Operation, with Scientists working constantly towards the development and improvement of medical products.*

Johnson & Johnson

JH22/FP



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Your angina patients on 'Inderal' can enjoy the freedom of playing an occasional round of golf. They can be more active and become easier in mind. There are more painfree days; the frequency and severity of attacks are reduced and your patients depend less on glyceryl trinitrates.

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(PROPRANOLOL)  
for relief of  
anginal stress  
now N.H.S.(R)



Imperial Chemical Industries  
of Australia & New Zealand Ltd.



## ST. MARGARET'S HOSPITAL

The fifth-year obstetric term spent at St. Margaret's was something to which we had all looked forward, and after overcoming the cholinergic crisis which accompanied our first delivery, proceeded to become the proud fathers of fourteen or so babies.

Even now, the picture in one's mind of a hardened medical student with a tear in his eye as he "Johnson" takes the pink behind of his latest prodigy brings back warm memories.

Countless parties, days beside the pool and beers at the Beresford added a holiday note to the hectic days and nights that we spent in the somewhat dilapidated but charming tenement house down the road from St. Margaret's.

Perhaps our most enjoyable term, we shall remember it with nostalgia for years to come.



*The Obstetrics Block*

## ROYAL NORTH SHORE HOSPITAL

The Obstetrics Unit at Royal North Shore Hospital is, by University standards, not a very large one and yet it is, without doubt, one of the busiest and most interesting hospital departments for a student to visit.

Who can ever forget the fear and trembling of his first delivery when babies seemed as slippery as bars of soap and when the sisters-in-charge appeared as veritable student haters? Nevertheless, becoming involved with a happy mother and a live healthy baby gave us for the first time a sense of achievement and satisfaction. Such are a few of the many joys of a student of the ancient art of obstetrics.

Despite its hard work (at times), obstetrics term in fifth year most certainly had its merits. We may

(if our neuroses are not too sluggish) be able to recall those delightful summer (sometimes winter) afternoons spent in our luxury residence or soaking up U.V.'s at the beach or in the garden of our temporary home. The onset of near darkness saw an emergence of a vast number of nocturnal colleagues (where had they come from?) and a general increase in tempo, so that by the time our patients were in labour, we were all very much oblivious of the fact.

To us all, obstetrics term will have mixed memories. We can only thank those who persevered and taught us the basics and wish them continued success with further student groups.



## KING GEORGE V MEMORIAL HOSPITAL

King George V—constructed in the late 30's across the street from the general section of R.P.A.H.—was probably received by the students of the day with mixed feelings as two popular drinking houses—the old “Grose Farm” and “Prince Alfred Hotel” formerly stood on the site of this modern obstetric and gynaecological teaching hospital.

Today, K.G.V. becomes home for a term in fifth year for the majority of Prince Alfred students. By maintaining the traditions of the site and of generations of obstetric students—this term proved to be the highlight of the course for most students. It was the first opportunity for practical participation in medical procedures, which combined with the general revelry of living in together, will hold many happy memories for all of us. As the years increase, so will the colour of

our obstets term tales, as we recount them with friends whom we made for life during this term.

Not to be forgotten is the academic side of the term (we did fit some tutorials and out-patient sessions in between times) and our teachers (there are too many personalities amongst the honorary staff of K.G.V. to mention in this short tribute). But we must respect them all for the way they persisted in their efforts to teach us a little; even if we did think they expected a little too much at 8 a.m. after one of those late nights in labour ward or elsewhere.

Ultimately, the success of the term would be measured by the liaison between the sisters and P.M.s in labour ward—of course, this success varied, but all students at K.G.V. had a very fair go—viz., an enjoyable term to remember.





## ROYAL ALEXANDRA HOSPITAL FOR CHILDREN

One term in fifth year we were uprooted from the more familiar adult teaching hospital and thrust upon The Children's Hospital; in this short time we were to be reorientated to thinking of children as patients and also to acquire what knowledge we could of the vast spectrum of diseases peculiar to them. Obviously this was an impossible task, but Tom Stapleton and John Walker-Smith did their best in providing a most comprehensive and full timetable.

Perhaps the most refreshing differences at Kids—were the mixing of groups which although to some the

method of selection seemed a little antiquated, it did allow many to meet their colleagues from other hospitals. Also the group discussions with G.P.'s on social aspects of medicine was a refreshing addendum to the course, as were trips to various suburban centres.

To be comprehensive in this short space is an impossibility so our thanks to all the honoraries who tried to teach us a little about kids.

Our stay at Royal Alexandra Hospital for Children on the whole was a friendly, happy time, and we all have our personal memories to recount.



## THE MEDICAL SOCIETY

FOUNDED in 1886 to "provide a common meeting ground for teachers and undergraduates in Medicine" the Medical Society is the second oldest society of the University (the Union was founded twelve years earlier in 1874) and the oldest faculty society. Maintaining its initial aims it has continued over the years to widen its activities for members and increase its prestige within the University. The history of the society shows that many members who were actively involved in society affairs as undergraduates have acquired eminence in their professional and public careers.

Few members of our year have not participated in or benefited from some of the society's activities or services. To most the Med. Soc., as we knew it, centred around the office on the ground floor of the Blackburn Building. In our early years a musty intimacy surrounded the overcrowded and make-shift office, however in the 1968-9 long vacation the University generously extended and modernized these facilities to provide the modern bookroom and offices as we now know it.

From these rooms one could purchase all the adjuvants to academic success that any medical student would need. It was here that as raw second year students one purchased (new or old) Cunningham's Manual of Practical Anatomy, White Handler and Smith, and the other classical works so essential for the preclinical library. In later years with a little more discrimination and individuality one could make a selection of clinical texts, stethoscopes (-phones) and printed lecture notes from the Med. Soc's ever increasing range.

Mother confessor to two decades of medical students, Mrs. Sheila Nicholas (Mrs. Nic) was ever willing to advise students on any problem including the latest books. As general secretary of the society she imparts her natural charm into the day to day problems of the society as well as administering the ever expanding bookshop. Helped by Mrs. Gregson, Pam and Kerry, this book service is unique for any faculty society in Australia.

Socially the annual ball had been an institution at the Trocadero until this year when it was transferred to the Town Hall—they were organized by the Ladies Ball Committee who always succeeded in raising funds for the War Memorial Library which supplies books to the hospital libraries. The annual year dinner has always provided an opportunity to meet the professors and lecturers on an equal footing, while wakes and animal shows in second and third year were in a lighter vein.

Lambie Dew Orations over the last few years have given many the opportunity to hear and meet such international medical personalities as Christiaan Barnard, Sheila Sherlock and Lorimer Dods.

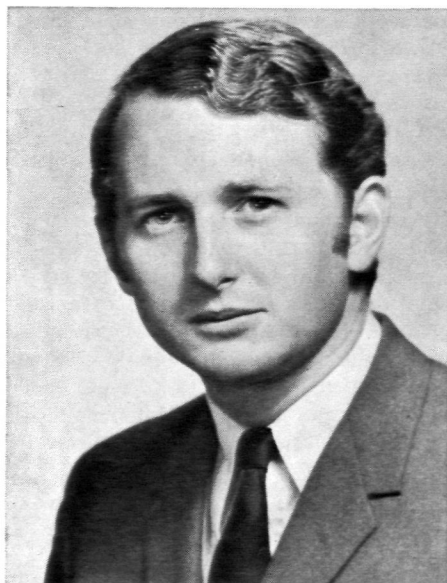
In sport the faculty teams have always been near the head of the winning list and the Penfolds Shield for interfaculty sport has been won on several occasions in the last few years.

These are but a few of the reasons we shall remember the Medical Society as part of our undergraduate days.



*Mrs. S. Nicholas,*

## "ROBIN MAY" MEMORIAL PRIZE WINNER FOR 1970



KEITH GEORGE HARTMAN

The "Robin May" Prize is somewhat unique as academic prizes go. It commemorates a singular tragedy—the loss of the launch "Robin May" which resulted in the deaths of five medical graduands in 1945. It is awarded not for one display of proficiency but for several important qualities: scholarship, leadership, involvement in extra-curricular activities and all the intangible things that add up to an outstanding personality. Perhaps most important of all, it is awarded by ballot rather than by appointment, and it represents the opinion of all the students in Final Year.

Keith Hartman has displayed all the qualities necessary to make him the very popular winner of the Prize for 1970. He has been everybody's friend throughout the course, and for many of us that has meant seven years.

After having been hidden from society among the ivy-covered cloisters of St. Ignatius College, Riverview, for several years, Keith entered the Faculty in 1964.

His progress through First Year was steady and in due course he left behind the cloud chambers and disembowelled dogfish to enter second year in 1965. That was the year he joined the University Squadron and also ('tis said) the year he learnt to hold his liquor. Like many others in that year, Keith found his world opening out: every day there were new heights to conquer and new things to learn. In fact, he learnt so much that he was able to completely confuse the second-year examiners—so much so that they invited him back to share his thoughts with them again.

When he reached Third Year in 1967 he found that life was, after all, serious. In place of some of the more frivolous activities of his youth, he now began to take a serious interest in the Medical Society. He was elected Third Year Representative in 1967 and thus sat on Council for the first time. Once there, however, he saw the work to be done and, characteristically, set about doing it.

He was elected to represent the Society on the Student Committee on Medical Education of the Australasian Medical Students Association in 1967. In 1968 he was elected Honorary Secretary of the Medical Society and he filled the position with some distinction. In that year, too, he began his clinical training at the Royal North Shore Hospital and here he found yet another new horizon.

By 1969 he had become one of the Medical Society's "elder statesmen", and that year became an Undergraduate Vice-President on the Council. He also showed a very active interest in the Staff-Student Liaison Committee, where he could continue to air his views on medical education. He has held these two positions up until the end of Final Year, always taking a very keen interest in the working of both bodies. Those who have worked with him will realize just how much of the achievements of these groups have been due to Keith's personal contributions, by both word and work.

In all these things Keith has devoted himself to the service of others. It almost goes without saying that in his graduate career he will continue to do so. Those who have known and worked with him, as student, councillor, committee member, office-bearer, officer and gentleman will count his acquaintance as one of their valuable acquisitions "while passing through Medicine".

# FINAL EXAMINATION RESULTS, 1970

## PASS

December, 1970 (Alphabetical)

Abbott, K.  
Abeshouse, B. J.  
Ali, M. L.  
Allison, R. P.  
Angus, L. R.  
Arnold, R. G.  
Arnold, V. R.  
Atkins, P. F.  
Augustus, F. J.  
Avramidis, N. Z.  
  
Bailey, B. P., B.Sc.  
Balderston, J. S.  
Bambach, C. P.  
Bandouvakis, J.  
Barber, S.  
Barrett, I. R.  
Becke, I. G.  
Bedkober, B. J.  
Bennett, R. F.  
Bentivoglio, J. E. C.  
Berdoukas, V. A.  
Berend, N.  
Berry, N. A.  
Besser, M.  
Bilbe, B. R.  
Binns, G. F.  
Binstead, R.  
Blessing, S. E.  
Blombery, P. A., B.Sc.  
(Med.)  
Boleyn, T. A., B.Sc. (Med.)  
Boots, J. A.  
Bowen-Thomas, L. M.  
Bradbury, R.  
Brooks, W. J.  
Broughton, A.  
Brownlie, P. K.  
Buckingham, J. M.  
Burnet, N. M.  
Burrell, A. R.  
Bye, W. A.  
  
Cains, G. D.  
Cameron, J. R., B.Pharm.  
Caspary, E. J.  
Champion, J. R.  
Chester, M. N.  
Cheung, M. P. C.  
Chong, J. E. L.  
Chrepacz, D.  
Clark, E. H.  
Clarke, S. D.  
Cock, S. B.  
Colagiuri, S.  
Collett, V. V.  
Commens, C. A.  
Cox, H. W.  
Cropley, T. E.  
Ctercteko, G. C.  
Currie, J. O.  
Curtis, S. A.  
  
Davis, J. F., B.Sc.  
DeBurgh, S. P. H.  
Deves, J. R.  
Dilger, R. C.  
Dixon, A. D.  
Doherty, R.  
Donald, T. G.  
Donnelly, J. F.  
Dornet, C. L.  
Dowling, J. M.  
Drew, R. S.  
  
Edwards, K.  
Ell, M. S.  
Enno, A.  
Ewan, C. E.  
  
Farebrother, T. D.  
Fishman, G.  
Fitzhardinge, R.  
Fleischer, G.

Fleming, K. J.  
Flynn, J. M.  
Ford, J. C.  
Fowler, G. C.  
Foy, A., B.Sc. (Med.)  
Fuzes, R. L.  
  
Garrick, R.  
George, J. M.  
Glascott, J. E.  
Goldberg, I.  
Goodall, D. E.  
Goodman, P. L.  
Gordon, J. J.  
Gordon, P. R. A.  
Graham, O. L.  
Graham, P. M.  
Green, P. H. R.  
Greenbaum, M.  
Greenberg, A. M. L.  
Grose, D. J., B.Sc. (Med.)  
Grout, D. R.  
  
Hall, B. M.  
Halmagyi, G. M., B.Sc.  
(Med.)  
Hamor, G. P.  
Hanel, K. C.  
Hanly, F.  
Hardy, M. R.  
Hartman, K. G.  
Heitner, Y. M.  
Heks, E.  
Hennings, R. H. J.  
Hilder, K. L.  
Hines, F. M.  
Hollo, A.  
Holt, B. W.  
Howe, B. G.  
  
Isaacs, D. H.  
Itzkowic, D. J., B.Sc. (Med.)  
  
James, M. A.  
Jansen, R. P. S.  
Jewell, S. E.  
Joshua, D. E., B.Sc.  
Judzewitsch, R.  
  
Kamaker, L. F.  
Keighery, G. J.  
Kenny, O. H.  
Kilburn, M. J.  
King, J. B.  
King, W. M.  
Kister, M.  
Kluger, P. R.  
Knight, D. C., B.Sc. (Med.)  
Koch, W. E.  
Kochanski, J.  
Kocsard, M.  
  
Lackey, E. F. C.  
Lancaster, K.  
Lane, R. J.  
Lee, I.  
Leung, J. T. Y.  
Lindberg, P. R.  
Llewellyn, M. W.  
Lyons, N. R.  
  
McIntosh, P. K.  
Marchant-Williams, R. H.  
Marish, J. L.  
Mazengarb, J. B.  
McClean, J. M.  
McConnell, G. S.  
McCossin, R. B., B.Sc.  
(Med.)  
McCusker, E. A.  
McDonald, H. M.  
McKeown, J. A.  
Melville, M. W.  
Milder, D. G.  
Miller, D. D.

Miller, G. M.  
Mitterdorfer, A. J.  
Mitterdorfer, J. D.  
Moon, T. M.  
Morgan, E. J.  
Moss, T.  
  
Nancarrow, M. L.  
Nasser, F.  
Newman, D. C.  
Newth, J. H.  
Newton, N. G.  
Nikolic, G.  
Norrie, C. A.

O'Connor, D. E.  
O'Connor, M. C.  
O'Connor, T. W.  
O'Donnell, J. D.  
Ogle, S. J.  
Ooi, C. H.  
Orland, H. J.  
  
Paul, G. H.  
Pennington, D. G.  
Percy, P. R.  
Piggin, R. E.  
Purcell, G. J.

Quail, A. W.  
  
Radojevic, A. A., B.Sc.  
(Med.)  
Rapaport, A.  
Rapson, P. J.  
Roberts, J. D.  
Roger, P. J.  
Rogers, C. M.  
Rose, D. A.  
Rosenmeyer, K. N.  
Russell, D. P.  
Russell, P. A.  
Ryan, M. G.  
Rylands, P. I.

Santer, J. M.  
Savage, G. R.  
Schwartz, P.  
Scott-Young, P. M.  
Serich, R. M.  
Sevier, D. P.  
Sham, M. B. K.  
Shearer, L. R.  
Shuhevych, M. S.

Silverton, J. J.  
Simons, C. D.  
Skinner, K. V.  
Smythe, S. D., B.Sc. (Med.)  
Staraj, S.  
Steg, J.  
Stephens, P. R.  
Stevens, M. M.  
Sullivan, P. J.  
Sussman, W.  
Symons, M. C.  
Szwarc, J. G.

Tall, A. R.  
Taylor, J. N. J.  
Taylor, S. M.  
Telford, H. J.  
Thiel, R. J.  
Thompson, J. F., B.Sc.  
(Med.)  
Thomson, M. R.  
Tidmarsh, J. C.  
Tierney, T. J.  
Tiver, K. W.  
Turnbull, T. V.  
Tyler, J. A.  
  
Urbanski, G.  
Uren, R. F.

Van Dyck, J. E.  
Vanderlaan, P. J.  
Vaux, K. J.

Wainberg, M. M.  
Wajnryb, E.  
Watts, C. J., B.Sc. (Med.)  
Wechsler, I. B.  
Wegner, F. H.  
Weltlinger, J.  
White, P. J.  
White, R. F.  
Williams, M. J.  
Williams, R. D.  
Wilson, P. C.  
Wong, G. K. K.  
Wong, P. H. J., B.Pharm.  
Wood, H. R.  
Woodhouse, D. R.

Yip, R.

Zagars, G., B.Sc. (Med.)

## HONOURS AT GRADUATION

### Class I

Abbott, K.  
Joshua, D. E., B.Sc.  
Blombery, P. A., B.Sc.  
(Med.)  
Mazengarb, J.  
Clark, E. H.  
Green, P. H. R.  
Bye, W. A.  
McCossin, R. B., B.Sc.  
(Med.)

### Class II

Bailey, B. P., B.Sc.  
Silverton, J. J.  
Hall, B. M.  
Simons, C. D.  
Tiver, K. W.  
Ell, M. S.  
Rose, D. A.  
Judzewitsch, R.  
Buckingham, J. M.  
O'Connor, D. E.  
Enno, A.  
O'Connor, T. W.  
Tall, A. R.  
McClean, J. M.

Itzkowic, D. J., B.Sc.  
(Med.)  
Roberts, J. D.  
Garrick, R.  
Smythe, S. D., B.Sc. (Med.)  
O'Connor M. C.  
Kilburn, M. J.  
Bradbury, R.  
Pennington, D. G.  
Collett, V. V.  
Lancaster, K.  
Yip, R.  
Donald, T. G.  
Ewan, C. E.  
Angus, L. R.  
Barrett, I. R.  
Leung, J. T. Y.  
McCusker, E. A.  
Wong, G. K. K.  
Zagars, G., B.Sc. (Med.)  
Nikolic, G.  
Champion, J. R.  
Bandouvakis, J.  
Knight, D. C., B.Sc. (Med.)  
Radojevic, A. A., B.Sc.  
(Med.)  
Kenny, O. H.  
Colagiuri, S.

## SPECIAL PRIZES

## University Medal:

Shared:

Abbott, K.  
Joshua, D. E., B.Sc.

Arthur Edward Mills  
Graduation Prize for  
Distinction over the  
Whole Medical Course:

Shared:

Abbott, K.  
Joshua, D. E., B.Sc.

Carnation Prize in Pædi-  
atrics:

Thiel, R. J.

Norton Manning Memorial  
Prize for Proficiency in  
Psychiatry:

McLean, J. M.

Robert Scot Skirving Me-  
morial Prize for Highest  
Aggregate in Medicine  
and Surgery Papers:

Joshua, D. E., B.Sc.

Upjohn Prize in Clinical  
Pharmacology and Thera-  
peutics:

Blombery, P. A., B.Sc.  
(Med.)

Dagmar Berne Prize for  
Proficiency among  
Women Candidates at  
the Final Year Examina-  
tion:

Ell, M. S.

George Allan Prize for  
Therapeutics:

Joshua, D. E., B.Sc.

Harold John Ritchie Me-  
morial Prize for Clinical  
Medicine:

Shared:

Blombery, P. A., B.Sc.  
(Med.)  
Hall, B. M.

Harry J. Clayton Memorial  
Prize for Medicine and  
Clinical Medicine:

Joshua, D. E., B.Sc.

Sidney B. Clipsham Me-  
morial Prize in Opera-  
tive Surgery:

Shared:

Jansen, R. P.  
Newton, N. G.

Glaxo-Allenbury's (Aust.)  
Pty. Ltd. Prize:

Green, P. H. R.

Hinder Memorial Prize in  
Clinical Surgery:

Barrett, I. R.

William Henry and Eliza  
Alice Sharp Prize in  
Clinical Surgery:

Green, P. H. R.

Dame Constance D'Arcy  
Memorial Prize in Gynæ-  
cology for a Woman  
Student:

Clark, E. H.

Mabel Elizabeth Leaver  
Memorial Prize in  
Obstetrics:

Abbott, K.

Albert Hing Memorial  
Prize in Gynæcology:

Bye, W. A.

## DISTINCTION AND CREDIT LISTS

## MEDICINE

## Distinction:

Joshua, D. E., B.Sc.

## Credit:

Bailey, B. P., B.Sc.  
Blombery, P. A., B.Sc. } Aeq.  
(Med.)

Enno, A. }  
Hall, B. M. } Aeq.

Ell, M. S.  
Roberts, J. D.  
Green, P. H. R.  
Tiver, K. W.  
Abbott, K.

Pennington, D. G. }  
Simons, C. D. } Aeq.

Bye, W. A.  
Itzkowic, D. J., B.Sc. }  
(Med.) } Aeq.

Kilburn, M. J.  
Tall, A. R. }  
(Med.) } Aeq.

McCrossin, R. B.,  
B.Sc. (Med.) } Aeq.

Rapaport, A. S.  
Augustus, F. J. }  
Collett, V. V. } Aeq.

Goodman, P. L.  
Lane, R. J. }  
(Med.) } Aeq.

Graham, P. M. }  
McClellan, J. M. } Aeq.  
McDonald, H. M. }  
Besser, M. }  
Donald, T. G. } Aeq.  
Hanly, F. }  
O'Connor, T. W. }

## SURGERY

## Credit:

Lancaster, K.  
Angus, L. R.  
Barrett, I. R.  
Buckingham, J. M. } Aeq.

Ell, M. S.  
Leung, J. T. Y.  
Abbott, K.  
Szwarc, J. G. } Aeq.

Bye, W. A.  
Clark, E. H.  
Green, P. H. R.  
Hall, B. M. }  
Joshua, D., B.Sc. } Aeq.

Mitterdorfer, J. D.  
Bambach, C. P.  
Besser, M. }  
Collett, V. V. } Aeq.

Goldberg, I.  
Itzkowic, D. J., B.Sc. }  
(Med.) } Aeq.

Tall, A. R.  
Taylor, S. M. }  
(Med.) } Aeq.

Becke, I. G.  
Blombery, P. A.,  
B.Sc. (Med.) }  
Cock, S. B. } Aeq.  
O'Connor, T. W. }  
Roberts, J. D. }  
Thompson, J. F.,  
B.Sc. (Med.) }

OBSTETRICS AND  
GYNÆCOLOGY

## Distinction:

Bye, W. A.  
Abbott, K.

## Credit:

Blessing, S. E.  
Blombery, P. A.,  
B.Sc. (Med.) }  
Buckingham, J. } Aeq.

Clark, E. H.  
Williams, R. D. }  
(Med.) } Aeq.

Binns, G. F.  
Goldberg, I. }  
Halmagyi, G. M., } Aeq.

B.Sc. (Med.) }  
O'Connor, M. C. }  
(Med.) } Aeq.

Bradbury, R.  
Joshua, D. E., B.Sc. } Aeq.

Besser, M.  
Green, P. H. R. }  
Simons, C. D. } Aeq.  
Yip, R. }

Balderston, J. S.  
Burnet, N. M.  
Mitterdorfer, J. D. } Aeq.  
O'Connor, T. W. }  
Uren, R. F. }

Bambach, C. P.  
Bowen Thomas, L. M. } Aeq.  
Zagars, G., B.Sc.,  
(Med.) }

Bailey, B. P., B.Sc. }  
(Med.) }  
Becke, I. G. }  
Ell, M. S. }  
Farebrother, T. D. }  
Fitzhardinge, R. }  
Jansen, R. P. S. } Aeq.  
Judzewitsch, R. }  
Keighery, G. J. }  
McClellan, J. M. }  
Morgan, E. J. }  
O'Connor, D. E. }  
Silverton, J. J. }  
Smythe, S. D., B.Sc. }  
(Med.) }

# HOSPITAL APPOINTMENTS

## ROYAL PRINCE ALFRED HOSPITAL

Dr. R. G. Arnold	Dr. D. E. Joshua (Profes-
Dr. M. Besser	sorial Unit)
Dr. P. A. Blombery (Pro-	Dr. R. Judzewitsch
fessorial Unit)	Dr. J. B. King
Dr. R. Bradbury	Dr. R. J. Lane
Dr. A. Broughton	Dr. R. B. McCrossin (Pro-
Dr. W. A. Bye (Profes-	fessorial Unit)
sorial Unit)	Dr. E. J. Morgan
Dr. E. H. Clark (Profes-	Dr. A. Rapaport
sorial Unit)	Dr. J. J. Silverton
Dr. J. O. Currie	Dr. A. R. Tall
Dr. A. Enno	Dr. H. J. Telford
Dr. T. O. Farebrother	Dr. J. F. Thompson
Dr. P. L. Goodman	Dr. K. W. Tiver
Dr. P. M. Graham	Dr. R. F. Uren
Dr. M. Greenbaum	Dr. R. D. Williams
Dr. B. M. Hall	Dr. M. J. Williams
Dr. G. M. Halmagyi	Dr. R. Yip
Dr. D. J. Itzkowicz	

## REPATRIATION GENERAL HOSPITAL

Dr. B. J. Abeshouse	Dr. F. M. Hines
Dr. J. Bandouvakis	Dr. J. B. Mazengarb
Dr. I. G. Becke	Dr. A. J. Mitterdorfer
Dr. N. Berend	Dr. M. L. Nancarrow
Dr. W. J. Brooks	Dr. J. Weltlinger
Dr. C. A. Commens	Dr. P. J. White
Dr. R. Fitzhardinge	Dr. P. H. J. Wong

## ST. VINCENT'S HOSPITAL

Dr. J. M. Buckingham	Dr. G. Nikolic
Dr. S. Colagiuri	Dr. T. W. O'Connor (Pro-
Dr. R. Garrick	fessorial Unit)
Dr. F. Hanly	Dr. A. A. Radojevic
Dr. O. H. Kenny	Dr. G. Zagars
Dr. J. T. Y. Leung	

## ROYAL NORTH SHORE HOSPITAL

Dr. F. J. Augustus	Dr. D. C. Knight
Dr. C. P. Bambach	Dr. J. M. McClean
Dr. I. R. Barrett	Dr. H. M. McDonald
Dr. J. E. L. Chong	Dr. J. D. Mitterdorfer
Dr. V. V. Collett	Dr. D. E. O'Connor
Dr. J. F. Davis	Dr. M. C. O'Connor
Dr. T. G. Donald	Dr. E. J. O'Donnell
Dr. R. S. Drew	Dr. R. E. Pigin
Dr. M. S. Ell	Dr. D. A. Rose
Dr. P. H. R. Freed	Dr. P. A. Russell
Dr. K. L. Hilder	Dr. C. D. Simons
Dr. R. P. S. Jansen	Dr. S. D. Smythe
Dr. G. J. Keighery	Dr. J. C. Tidmarsh
Dr. M. J. Kilburn	Dr. P. C. Wilson

## ST. GEORGE HOSPITAL

Dr. G. C. Ctereteko	Dr. J. H. Newth
Dr. A. Hollo	Dr. H. J. Orland

## PRINCE HENRY HOSPITAL-PRINCE OF WALES HOSPITAL

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Dr. V. A. Berdoukas	Dr. N. R. Lyons
Dr. L. M. Bowen-Thomas	Dr. P. K. MacIntosh
Dr. H. W. Cox	Dr. N. G. Newton
Dr. S. A. Curtis	Dr. G. J. Purcell
Dr. R. Doherty	Dr. C. M. Rogers
Dr. G. Fleischer	Dr. J. G. Szwarc
Dr. J. C. Ford	Dr. R. J. Thiel
Dr. D. R. Grout	Dr. C. J. Watts

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Dr. B. P. Bailey	Dr. E. A. McCusker
Dr. J. S. Balderston	Dr. F. Nasser
Dr. S. E. Blessing	Dr. D. G. Pennington
Dr. C. E. Ewan (Profes-	Dr. J. D. Roberts (Profes-
sorial Unit)	sorial Unit)
Dr. J. M. George	Dr. K. V. Skinner
Dr. I. Goldberg	Dr. M. C. Symons
Dr. A. M. L. Greenberg	Dr. I. B. Wechsler
Dr. D. J. Grose	Dr. G. K. K. Wong (Pro-
Dr. R. H. J. Hennings	fessorial Unit)
Dr. W. E. Koch	Dr. D. R. Woodhouse
Dr. I. Lee	

## ALBURY BASE HOSPITAL

Dr. J. M. Dowling	Dr. R. F. White
Dr. M. W. Melville	

## AUBURN DISTRICT HOSPITAL

Dr. K. Edwards	Dr. C. A. Norrie
Dr. G. S. McConnell	Dr. P. R. Percy

## BALMAIN HOSPITAL

Dr. S. D. Clarke	Dr. R. H. Marchant-
Dr. S. P. H. DeBurgh	Williams
Dr. E. Heks	

## BANKSTOWN HOSPITAL

Dr. V. R. Arnold	Dr. N. A. Berry
Dr. R. F. Bennett	Dr. G. M. Miller

## BLACKTOWN DISTRICT HOSPITAL

Dr. T. M. Moon	Dr. S. Staraj
Dr. R. M. Serich	Dr. T. V. Turnbull

## CANBERRA COMMUNITY HOSPITAL

Dr. S. B. Cock	Dr. D. P. Sevier
Dr. K. Lancaster	Dr. M. M. Stevens
Dr. P. I. Rylands	

## CANTERBURY DISTRICT MEMORIAL HOSPITAL

Dr. D. Chrepacz (now	Dr. D. C. Newman
Newman)	

## FAIRFIELD DISTRICT HOSPITAL

Dr. N. M. Burnet	Dr. K. C. Hanel
Dr. A. D. Dixon	

## GOSFORD DISTRICT HOSPITAL

Dr. J. M. Santer

## GOULBURN BASE HOSPITAL

Dr. C. H. Ooi

## HORNSBY AND DISTRICT HOSPITAL

Dr. J. R. Champion	Dr. L. R. Shearer
Dr. P. R. Kluger	Dr. J. E. Van Dyck
Dr. G. H. Paul	

## LEWISHAM HOSPITAL

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Dr. J. A. Tyler	

## LIVERPOOL DISTRICT HOSPITAL

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Dr. J. A. Boots	Dr. M. M. Wainberg
Dr. E. J. Caspary	

## MANLY DISTRICT HOSPITAL

Dr. S. Barber	Dr. P. J. Roger
Dr. G. C. Fowler	Dr. P. M. Scott-Young

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Dr. P. F. Atkins	Dr. M. R. Hardy

## MATER MISERICORDIAE HOSPITAL, WARATAH

Dr. J. E. C. Bentivoglio	Dr. D. D. Miller
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## NEPEAN DISTRICT HOSPITAL

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Dr. K. N. Rosenmeyer	



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**ROYAL NEWCASTLE HOSPITAL**

Dr. G. D. Cains      Dr. A. W. Quail  
Dr. R. C. Dilger      Dr. P. J. Rapson  
Dr. J. F. Donnelly      Dr. S. M. Taylor  
Dr. G. Fishman      Dr. T. J. Tierney  
Dr. B. W. Holt      Dr. G. Urbanski  
Dr. J. Kochanski      Dr. H. R. Wood  
Dr. J. A. McKeown

**RYDE DISTRICT SOLDIERS' MEMORIAL HOSPITAL**

Dr. A. Foy      Dr. M. W. Llewellyn  
Dr. K. G. Hartman      Dr. J. L. Marish

**ST. JOSEPH'S HOSPITAL, AUBURN**

Dr. D. E. Goodall      Dr. S. J. Ogle

**SUTHERLAND HOSPITAL, CARINGBAH**

Dr. B. R. Bilbe      Dr. Y. M. Heitner  
Dr. T. E. Cropley      Dr. E. F. C. Lackey  
Dr. G. P. Hamor      Dr. M. R. Thomson

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**NELSON DISTRICT HOSPITAL (NEW ZEALAND)**

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**VICTORIA**

Dr. M. Kister

**EDITOR'S NOTE:**

The above list appears as issued by the Hospitals Commission of N.S.W. at the time of going to press. We believe that a number of transfers are being negotiated, but details are not yet confirmed. We shall do our best to compile a corrigendum list to be distributed with this publication.

## ACKNOWLEDGEMENTS

*Contributions:**By invitation —*

The Dean  
Dr. R. Winton  
Mr. P. A. Tomlinson  
Dr. G. L. McDonald  
Mr. P. J. Kenny  
Mr. I. Monk  
Mr. S. G. Koorey

*Art —*

Mr. Alan Gamble  
Mr. Peter Kesteven  
Illustration Department, Sydney Hospital  
Freeman Studio and others

The students of Final Year Medicine, the University of Sydney, 1970.

*Production:*

*Publishing* — Australasian Medical Publishing Company and especially  
Mr. J. H. Noldt.

*Advertising* — Mr. J. T. O'Mara.

*Blocks* — Associated Photo Engraving Pty. Ltd.

The Sydney University Medical Society and especially Mrs. S. Nicholas.

The aims of this book have not changed since its inception. We hope that in future reading you recall not only people but characters, not only events but atmosphere, not only memories but emotions, and that over the years the value and pleasure you gain from this approaches the enjoyment and experience we derived in producing the 1970 Year Book.

THE 1970 YEAR BOOK COMMITTEE,  
Sydney University Medical Society.

WHOLLY SET UP AND PRINTED IN AUSTRALIA  
BY AUSTRALASIAN MEDICAL PUBLISHING  
COMPANY, LIMITED, 71-79 ARUNDEL STREET,  
GLEBE, SYDNEY, N.S.W., 2037



