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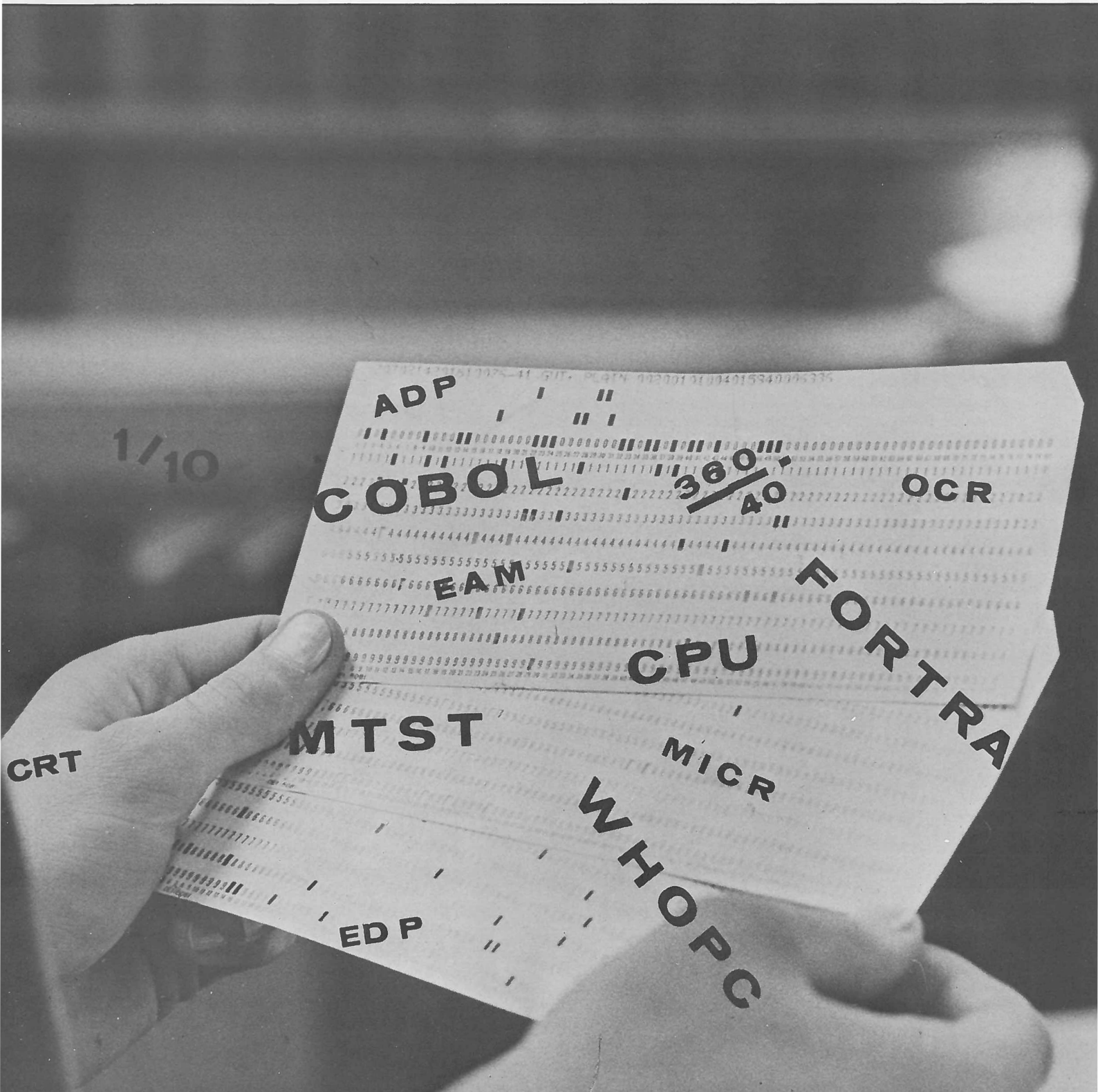


MOUNT SINAI TABLET

Vol. 21

948 North Twelfth Street, Milwaukee, Wisconsin 53233

APRIL, 1968



COMPUTERS COME TO A MODERN HOSPITAL

Card Hopper, Data Processing, Digital Computer, Central Processing Unit, Software, Hardware, and Flow Charts hardly seem the type of words to begin the text of a hospital publication, but the business of a hospital must be conducted on a highly skilled and efficient manner.

In today's world everyone's life and activities have become more complex. Hospital activities are no exception to this rule. The co-ordination of a thousand employees, 270 physicians, and 1,400 Auxiliary members to provide the best care for the over 320 patients occupying our beds is becoming an overwhelming job because of all of the details. Our job is to maximize the care while minimizing the confusion. Hence, it is our job to increase the time spent in direct patient care while decreasing the time spent on paperwork and other details. Wouldn't it be wonderful if we could almost completely eliminate the paperwork and detail and spend all of our time in direct patient care? Such a dream is not beyond our reach, but it is a tremendous undertaking.

To give you some idea of the mammoth job, you must realize the complexity and number of tasks carried on by our employees. Each patient admitted to Mount Sinai Hospital has an average of 45 different Laboratory tests performed during his average eight day stay. In addition, he has x-rays performed, drugs delivered, physical therapy treatments and many other diagnostic and treatment services. With each of these, there are quite often as many as 12 individual activities resulting from an order by the doctor and performed for the patient. Following the performance of the service a charge must be rendered to the Business Office. To fill the orders requested, our Stockrooms must have over 1,200 separate items, and they must make certain that each of these items is available at the right time in the right place. Having the people available to perform the service, handling the accounting functions, billing the insurance companies, and the many other details that go into the provision of these services is consuming more and more personnel time. In order to overcome these problems Mount Sinai has turned its attention to automatic data processing, more commonly known as the computer.



The world of computers leaves many people in a fog.

No major change ever occurs without some concern and many questions. This issue is written to help you understand how important the computer is to our method of operation.

When we could no longer handle the detailed paper work efficiently, a new, more effective system was investigated. The result of this was the introduction of words unlike any others heard before in hospital terminology. "SHAS," "COBOL" and "C.P.U." were the beginning signs of our involvement in Computer Data Processing.

In 1887, Doctor Herman Hollerith, a statistician with the United States Census Bureau, designed a punch card to be used in what was to become the computer systems we know today. The size and shape of the card remains exactly the same today as then. In 1914, a method of putting numerical information on cards was founded; however, while it could add, it could not subtract in the manner we are familiar with. 1933 found alphabetical information being added; and during the Second World War, this type of computer was used to calculate information needed to keep up the supply of ships and aircraft. Computers were being used in business by 1955, and in 1959, the announcement was made that high speed computers, as we know them now, would be on the market soon. Computers have always calculated faster than a human. During the past few years, the time necessary to make a calculation on the computer was one-one millionth of a second. A new computer put into operation today makes calculations in one-one billionth of a second.



The Systems Department was created to bring about a smooth, effective transition to Data Processing.

The Mount Sinai Systems Department was organized to analyze present methods and help re-organize them, thereby maintaining or reducing the cost levels. Thus, this department becomes the intermediary between the present and the future. Someone other than an existing department head is necessary to do this as the department head already has a full time responsibility and is rarely sufficiently familiar with data processing equipment and other systems techniques. The Systems Department has grown rapidly with the addition of staff who are responsible for the analyzing of special areas.

From the Desk of
LEON FELSON. . .



Mount Sinai continues to make progress in certain areas while we work together with our hospital consultant for the long-term programs which are essential to a progressive metropolitan hospital. Our program report, prepared by Dr. Eugene Rosenfeld, was recently received and made available to the joint committee of the Milwaukee Jewish Welfare Fund and Mount Sinai Hospital. The recommendations contained in the report are numerous and will require thorough study on the part of this committee before a final program can be presented to you and to our community. As developments take place, we will try to keep you posted in this most important area.

Among the changes currently taking place is remodeling of our X-Ray Department with the additions of several pieces of equipment. These changes will enable us to perform more procedures for more patients and reduce congestion.

In the months ahead we will be reviewing our emergency standby electrical system so that in the event of electrical failures major services provided by our hospital could be conducted without interruption. Major power failures in metropolitan communities in past years have made standby power a very important part of all hospital activity.

We are devoting continually more effort toward the development of the personnel in our institution. In addition to the In Service programs conducted for many of our employees, we have recently begun a program of Management Development for our department heads. This program is aimed at developing the full potentials of personnel in the key management positions.

To give you some idea of the complexity of conducting a hospital in this modern age, we would like to indicate a few of those agencies with whom we work in planning the future goals of our hospital: The Milwaukee Jewish Welfare Fund, the Milwaukee Hospital Council, the Hospital Area Planning Committee, the Regional Medical Center, the Health, Stroke and Cancer Programs, the Medicare fiscal agents, the State Health Department, the City Development Commission, and many others.

These plans are being made to insure better patient care. Without the dedication of our staff and our employees, none of this could be accomplished. Together we can strive to make Mount Sinai an outstanding Metropolitan hospital.

Until the next issue. . .

Leon Felson



Mount Sinai Hospital wishes to acknowledge its deep gratitude to the many employees and staff who made the transition to Data Processing possible.

We feel that many gave more than was required and that everyone involved gave their most conscientious attention.

Without this loyalty, we could not have accomplished our goal.

We hereby express our sincere appreciation to all!



AMERICAN ENTERPRISE

The power to choose the work I do,

To grow and have the larger view,

To know and feel that I am free,

To stand erect, not bow the knee,

To be no chattel of the State,

To be the master of my fate,

To dare, to risk, to lose, to win,

To make my own career begin,

To serve the world in my own way.

To gain in wisdom day by day,

With hope and zest to climb, to rise,

I call that "American Enterprise."



In January of 1966, a new system of payroll processing was instituted. Hours worked and overtime had been manually tabulated, deductions figured and subtracted, and the net amount typed on the employee's check. It took 2 full time employees and 1 part time girl working exclusively on payroll to meet the pay day deadline. This work was in addition to the preparatory work done in each department. No records could be kept up-to-date on such things as cost of overtime, sick pay, vacations, nor did an employee know each pay check how much Federal income tax, State tax, and Social Security had been withheld to date.

In order to make the conversion from manual to computer operation, new time cards had to be designed. A master record was established and recorded on a magnetic memory disk in the computer for each employee. This record contains all data needed to process the employee's earnings when the computer receives the information of hours worked, overtime hours, sick hours, vacation, holidays and call time which is key punched from the employee's time cards. In addition, this record has all earnings, taxes, vacation hours and sick hours used for each employee.



Sorting punch cards containing overtime hours must be done before each pay day.

The computer is programmed to make the computations for salary earned, subtract all deductions and prepare the check itself. It requires approximately 20 minutes to compute this information and another 20 minutes to process the checks for our 1,000 employees.

The distribution of the dollars spent for the payroll is prepared for each department giving management and department heads the dollars spent in their department for payroll. Several government reports are also processed quarterly and annually. Our savings have not only been in personnel, but the reports now prepared are more meaningful and timely.

The hospital is currently using a computer from one of the major industries in Milwaukee. All the material for payroll and inventory control is kept on 6 discs that are about 15 inches in diameter. Each disc will hold about 2 million characters.

As is the case with any computer, it can only do what it is instructed to do. The machine is programmed to do several specific things, i.e. read the card that is inserted, and verify the employee number. If they coincide, it begins to perform approximately 10 instructions. When it has completed that card, it is ready to read another one. The average time required to feed in, calculate, up-date all records and print the check for each employee is 3 seconds. The computer calculates so fast that the printer cannot keep up and must store the information in a buffer, or storage area, until it catches up.

Generally viewed by the average person as an intellectual monster, it is really an idiot for it cannot do anything until told exactly what to do. Once programmed though, the speed with which it can make calculations is almost impossible to comprehend.

"GIGO" is a favorite expression to people in this field, and it means, "garbage in - garbage out." You only get out of a computer what you put into it.



The clerk transcribes information from the patient chart to a P.A.S. form.

P. A. S.

It is the responsibility of each hospital to periodically provide the Joint Commission with a record of each disease treated, operation performed and the name of the attending physician of each patient admitted to our hospital. Prior to October of 1965, a separate record was kept for each procedure. If a patient had 10 diagnoses, it was necessary to pull 10 cards to record it. Then the material was manually gleaned from these records to compile the necessary reports . . . a tedious and time consuming task that left much room for error or omission. With the inception of P.A.S., Professional Activity Study, once a patient is dismissed from the hospital, his chart is sent to Medical Records where the information is entered on one Master Case Abstract. These are then sent to the Commission on Professional and Hospital Activities at Ann Arbor, Michigan.

Not only is the information forwarded to the Joint Commission, but 6 reports come back to the hospital with statistical information such as number of operations, number of specific diseases, who was the attending physician, etc. Each physician can then have a complete report for verification of his files on each patient he treats here at Mount Sinai.

Perhaps the significant result of this program, like all data processing, is the ability to obtain more specific information hereto unavailable. Moreover, now a department may request data to make a study or evaluation of certain past incidences. The Research Laboratory makes use of this information in their work. Very important to the 20 women currently working in Medical Records is the fact that their records are now up-to-date while previously this was virtually impossible. While it won't put an individual record at one's finger tips, it does serve many very important functions.



A card, punched for each item ordered from stock, is used in the master computer.

Perpetual Inventory Control

With more than 1,200 items that must be available at all times to the various departments of the hospital, the task of knowing what to re-order and when was rapidly becoming impossible. In order to run the Purchasing Department with a maximum of efficiency, a careful study of the best methods of handling the problem was made. Many inventory systems were investigated by the Purchasing Department to be sure that they were choosing the one that would benefit them the most.

Each requisition written in the various departments is sent first to the Stock Room for filling. Items are all ordered by a stock number that is found in the catalog. Numerical coding of Stock Room supplies was one of the first steps taken in upgrading this department. By reading the stock number, the men can tell exactly where the stock item is stored.

After the requisition is filled, it is sent to our Hospital Data Center where an IBM card is made for each item on the requisition. Once a week these cards are taken to the master computer that reads and calculates the exact number of items still in store. The computer is programmed to alert Purchasing when the item is less than 10% above minimum, at minimum, at critical stage, and again if it should be out of stock.



A monthly Distribution of Issues Report is printed to enable the department head to analyze costs to his department.

MASTER PURCHASE RECORD					
1 043 20 BIO-SORB POWDER - #B-208					
CATALOG NO.	1 043 20				
UNIT OF ISSUE	MINIMUM				
BX	1				
SUB-ACCOUNT NO.	VENDOR PACKAGING				
015	CS - CS/12 BXS 288				
DESCRIPTION					
BIO-SORB POWDER - #B-208 ENVELOPES - BOX/288					
V	DATE	P.O. NO.	QUANTITY ORDERED	VENDOR COST	UNIT PRICE
1					1.72
1 11-15-67 RO 2350 4 Bx out - Ben Reys					
No key punch on 22					

Each item in the Stock Room has a card like the one shown here. All pertinent re-order information has been preprogrammed on the side of the item card. When re-order is necessary, the card is pulled from the file, the new order is recorded and it is then sent to the Purchasing Department. A vendor card, preprogrammed with a name and address, is inserted in the Mach 10 — a semi-automated typewriter — where this information is transferred to the order form. Then the item card is inserted and this data is added to the order. Thus the manual work has almost been removed. Also important is the fact that at any point, the computer can print a "STOCK STATUS" that records every single item in the Stock Room.



Working with the master purchase records in the stock room facilitates the maintenance of an up-to-date record of stock room items.

Typical of the feelings prevalent all over the hospital when a new change is made was the reaction of Helen when she said, "I didn't want them to remove my old files at first, but now just a few months later, they can take them away for there is nothing I can't find on the Data Processing Report."

Standard Register

There was perhaps no other time in our hospital's history that so many people were involved in a complicated change at a given moment as when the Standard Register System went into effect on December 17, 1967.

The beginning of this system dates back to October, 1966. Dissatisfaction with our present system was expressed by key department heads. Their primary complaints were:

1. Illegible copies
2. "Dirty" carbons
3. Excessive sorting time prior to posting
4. Inadequate space for entering information
5. Imprinters were difficult to operate
6. Too much handwriting was required on the forms

An Equipment Selection committee of eight employees was selected to evaluate other systems that would solve these problems. An evaluation was made of 3 major systems currently used by other hospitals. It was decided that the Source Record Punch would best meet the requirements of Mount Sinai Hospital. A recommendation for this equipment was presented to Administration and approval was given.

In December of 1966, a volunteer Forms Committee was created. The responsibility of this committee was to oversee the design and implementation of the new patient charge forms using the Source Record Punch.

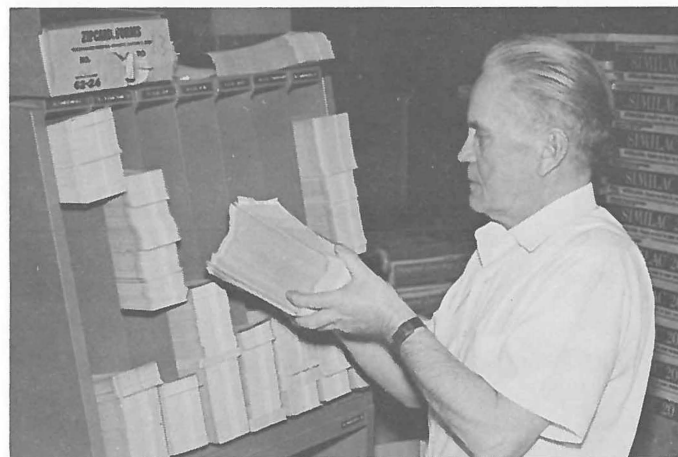


Practice sessions were held for all employees who would use the Standard Register System.

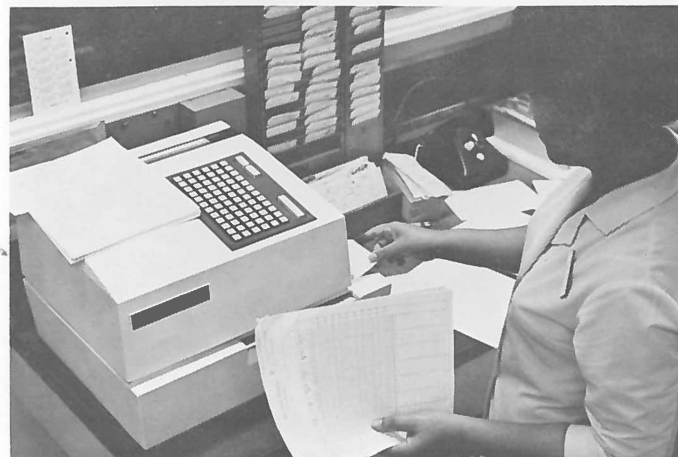
When the system was efficiently and smoothly put into operation, it culminated almost 15 months work. Careful planning had been done between department heads with the Systems people. Standard Register orientations were held in the Doctors Auditorium for one week and during all 3 shifts. Details of the new equipment were explained carefully. A time was designated to practice the correct use of the machine. New forms, new equipment and new techniques meant a great deal of careful timing in order to effect an orderly changeover at midnight, December 17, 1967. New terms like "trolley cars" to move the supplies; "master cards" for patient identification; and "zip cards" for patient charges were frequently heard. The transition that could easily have been hectic was orderly and effective. Certainly there were problems and many questions among those who had to use this new "monster," but it soon became evident that it was more efficient, and most certainly cleaner.

Zipcard

A Zip Card similar to the one shown here is used in each nursing station to order tests from the various departments. Departments were given the task of designing their own cards to utilize the space to its maximum. Radiology found that their card, with its four sheets fastened together, eliminated many needless hours of typing by utilizing the master card for imprinting the necessary information on our report form and index card. Long dreamed of in this department, it could now work multiple examinations more efficiently and doctors can receive their reports the same day the x-ray is made. The large daily patient load has necessitated greater efficiency, less typing, and more expeditious billing of patients. These extra benefits have been indirectly obtained through the new system.



Forms are delivered to the departments on this "trolley."



A unit secretary records a charge on the floor.



A member of Central Supply punches charges.

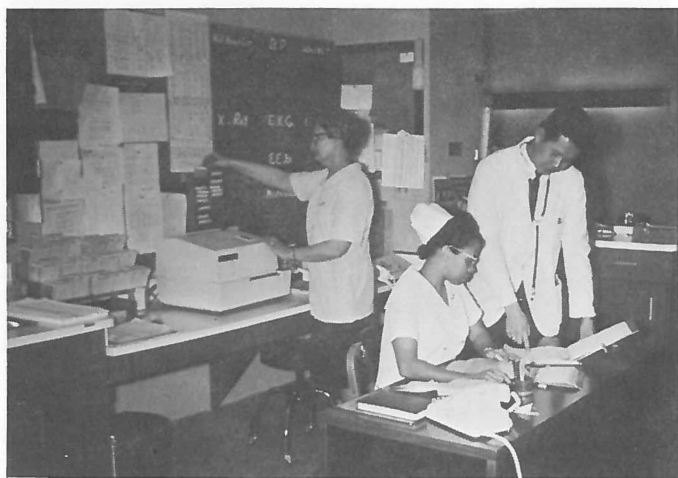
Teletype Machine

Upon entering the hospital, each patient is assigned a hospital unit number for identification purposes. Through a Teletype System set up between the Admitting Office and Medical Records in September, 1967, the Admitting Office is able to obtain the same hospital number for this patient no matter how many times he returns to the hospital over a period of years. This teletype system will also enable Medical Records to keep a running file for each patient's medical history. Prior to this system, consecutive numbering was used.

The patient's name and age is teletyped to Medical Records where his previous chart is pulled, if he has one. Medical Records then teletypes the hospital unit number back to the Admitting Office. This system eliminates tedious, repetitious work and assures accuracy of records.

H. A. S.

Another data processing program that this hospital has availed itself of is called H.A.S., or Hospital Administrative Services. Statistics are forwarded to Chicago where they are compiled and returned. Monthly reports are received which enable the Administrator to view the activity of his hospital in relation to other hospitals.



The Standard Register machine has become an integral part of all nursing stations.



The instructions to perform certain operations must be programmed by wiring panels such as this one.



This is the Central Computer at Blue Cross.

SHAS

In 1962, a group of hospital administrators under the chairmanship of Leon Felson, Mount Sinai Hospital Administrator, began discussing the need for computers in their hospitals. It was the consensus of opinion that if there was a central computer to which all of the hospitals in the State could be connected, the value of the shared information would be far better than individual computers within each hospital. From this committee came the plan now known as SHAS or Shared Hospital Accounting System. Designed primarily for more effective accounting, it will be expanded in the future to include patient records and medical technology.

This Central Computer will be housed in a newly constructed unit at Blue Cross. The 10 hospitals who have banded together to organize this service are Mount Sinai, Children's Hospital, Doctors Hospital, Waukesha Memorial, Misericordia Hospital, Columbia Hospital, West Allis Memorial, Oconomowoc, Kenosha and Deaconess Hospitals. One at a time, they will begin using the Central Computer via direct telephone hook-up to Blue Cross. Mount Sinai sees the target date of approximately September, 1968.

Accounting will be more accurately done. The part of the bill covered by insurance will be automatically subtracted and submitted to the proper insurance company.

A very good example of the value of a Central Computer would be this: "Tom Jones has an allergy to penicillin. He has a serious accident in another part of the State. His name can be put into the central computer, and if he has ever been at a hospital who programs into the central unit, his records can instantaneously be made available to the attending physician who would then know about the allergy and treat accordingly.

Keeping all of the necessary information within each hospital for the doctors' availability in this rapidly advancing world where new discoveries are every day events becomes virtually impossible.



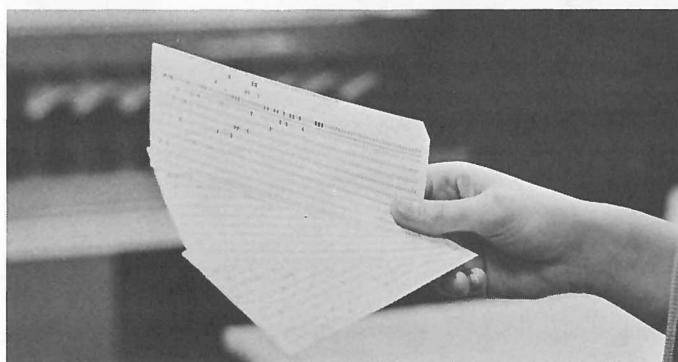
Source information is stored on these magnetic tapes and can be fed into the Central Computer.

The Hospital Information System

The system is designed to relieve employees of paperwork. Ultimately, when the doctor gives an order, it will be programmed directly into the computer. It will automatically send an order to the pharmacy and bill the account. This will allow the nurses to return to the things they were trained for — "nursing the sick." At specific set times these orders will be printed by computer which will tell the nurse what medications she must give. After the medications are given, she will tell the computer by punching buttons what she has done. If she has omitted anything, the computer will issue another order reminding her. Nurses are now spending approximately 45% of their time on paperwork and 55% on patient care.

It would be extremely difficult at this time to understand all the ramifications of what a computer could do for this hospital. As each department began its phase of Data Processing, questions like, "Will I be out of a job?" went through the minds of the employees. Looking back, no one was displaced and it has been the opinion of each department head that the quality of the work output from their employees was of a much higher caliber.

This issue of the Tablet has tried to show what happens when computers and data processing become a way of life. It is something that will make the work of everyone here at Mount Sinai much more effective and important. It takes teamwork, co-operation and much dedication to institute this program, but when finished, it is the PATIENT, the reason for our very existence, who will benefit by better service.



Punch cards are a symbol of change and new techniques being used to maintain our high standard of patient care.

Mount Sinai Tablet

A publication by and for hospital personnel, medical staff, Ladies' Auxiliary and friends. Mount Sinai is a 363 bed general teaching and research hospital serving the greater Milwaukee area. It is an affiliate of the Milwaukee Jewish Welfare Fund.

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Mount Sinai Hospital
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THE INSIDE STORY

MOUNT SINAI CALENDAR OF EVENTS

April 4th	Health Information Forum "The Pill"	Pfister Hotel 8:00 p.m.
April 23rd	Hospital Corporation Annual Meeting	Brynwood Country Club
May 12 - 18th	National Hospital Week	
May 14th	Employees Slide Tour Presentation	Doctors Auditorium
May 16th	Spring Clinic Day	Doctors Auditorium
May 30th	Memorial Day	
June 13th	Health Information Forum "Obesity"	Pfister Hotel 8:00 p.m.

QUESTIONS AND ANSWERS

Many times the suggestion box is used to ask questions rather than giving a workable solution to a problem. The next issue of the "Tablet" will have a column entitled, "Questions and Answers." Submit any questions you have which relate to the hospital and its procedures to the Public Relations office. Please sign the question with a name and department (which will not be published) in order that the question may be answered privately should there not be enough room in the column.

CONTROL

You can't control the length of your life,
but you can control its width and depth.

You can't control the contour of your
countenance, but you can control its
expression.

You can't control the other fellow's
opportunities, but you can grasp your own.

Why worry about things you can't control?
Get busy controlling the things that depend
on YOU.



Rose Wilks, Volunteer, receives an award which provided better patient care and comfort.

SUGGESTIONS MEAN MONEY TO YOU

Suggestions can mean money to the hospital in dollars saved and to you in dollars earned. An **AWARDABLE SUGGESTION** is some constructive idea, not a part of the employee's regular job or responsibility, which will improve hospital operation. Pointing out a problem without an idea for its solution is not considered an awardable suggestion.

Here are some hints to improve your suggestions. What will your suggestion accomplish?

1. Provide better patient care and comfort.
2. Promote better and safer conditions for patients, employees or visitors.
3. Save costs by improving methods, equipment and/or procedures.
4. Improve personnel and public relations.
5. Eliminate waste of supplies, equipment or time.

Present Condition:
Suggestion:

Be sure that you used the official yellow form which can be found near every suggestion box. Only suggestions received on this form will be accepted.

"POTPOURRI"

Miss C. Holley, R.N., has been promoted to the position of Acting Assistant Head Nurse on 6A.

Due to an error, the following names were omitted from the list of employees receiving service awards in the February issue of the "Tablet": 5 years: Lelia Cheatham, Helen Cukrowski, Minerva Davids, Gladys Dockery, Essie Harper, Colleen Hershberger, Nancy Hintz, Edmee Hutchinson, Catherine Krauth, Shirley Link, Cecelia Majeski, Bertha Nera, Jane Ostrowski, Kathleen Schreier, Ruth Vick, Valarie Woods, Delores Ceraso, James O'Melia, Irene Perry, and Ann Perchonok; 10 years: Alice Braun, Helen Bretzmann, Ruth Fleming, Toby Granof, Bessie Hollis, Martha Magnin, Bethola Mayweather, Marie Tatrow, Gladys Williamson, Doris Kimball, and Dr. L. Mark.

Mrs. Elaine Friesler, Surgery, had a baby girl in February.

Miss Rose Marie Pellegrino, Surgery, became Mrs. Richard Plautz and spent her honeymoon in Nausau.

Miss Deborah Morris, Surgery, had surgery in March . . . all wish her a speedy recovery.

Four new employees were added to the Inhalation Therapy and Pulmonary Function Department: Miss Leslee Christiano, Secretary, and Nancy Zielke, Lillie O'Bee, and Frances Jones, all technicians who graduated from our School of Inhalation Therapy and Pulmonary Function.

The Barbecue Supper, sponsored by the Freshmen on February 18th, netted several hundred dollars for their treasury; and they want to thank all hospital personnel who attended.

Four Mount Sinai students, under the sponsorship of the Milwaukee County Medical Wives Auxiliary, sold cut flowers at the Fifth Annual Flower Show at the State Fair Grounds on March 6, 1968.

The Wisconsin Student Nurses' Association biannual convention was held at the Milwaukee Technical College on Saturday, March 16th, and many of our students attended. Our School of Nursing was responsible for the decorations for the tables at the noon luncheon.

Several students will represent Mount Sinai at the National Student Nurses' Convention in Dallas, Texas, from May 7 - 13th.

Commencement exercises for the graduating seniors will be held at the Emanu-El B'Ne Jeshurun Temple on East Kenwood Blvd. on Saturday evening, June 15th . . . everyone is invited to attend.

Cupid has been busy judging from the number of new diamond rings sparkling on the left hand of students Jean Frazier, Linda Polivka, Linda Newton and Ellen Weithaus.

Miss Barbara Ryan, Medical Records, is recovering nicely and is due back in several weeks.

tomorrow (and as many tomorrows as you can)

Mend a quarrel. Seek out a forgotten friend. Dismiss suspicion and replace it with a trust. Write a love letter. Share some treasure. Give a soft answer. Encourage youth. Manifest your loyalty in word or deed. Keep a promise. Find the time. Forgo a grudge. Forgive an enemy. Listen. Apologize if you were wrong. Try to understand. Flout envy. Examine your demands on others. Think first of someone else. Appreciate. Be kind. Be gentle. Laugh a little. Laugh a little more. Deserve confidence. Take up arms against malice. Decry complacency. Express your gratitude. Go to your house of worship. Welcome a stranger. Gladden the heart of a child. Take pleasure in the beauty of the world. Speak your love. Speak it again. Speak it still once again.

Wisconsin Jewish Chronicle

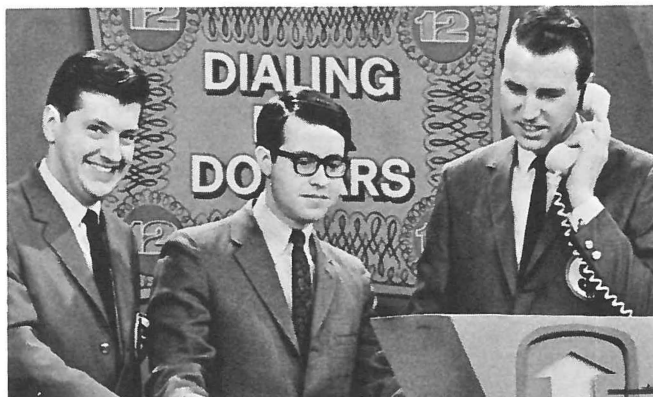
WON'T YOU JOIN US?

Do you wonder what the other people who work at Mount Sinai do? What new departments and innovations have happened in the past few years?

On May 14th, all employees are invited and encouraged to attend one of the showings of the Slide Tour of the hospital. Won't you join us in the Doctors Auditorium for refreshments and to view "Mount Sinai - A Modern Hospital." It will be shown at:

2:00 p.m.
3:00 p.m.
7:00 p.m.
8:00 p.m.
12:00 midnight
1:00 a.m.

in order that all our employees may have a chance to view it. We think you will be very proud to know what has been happening. Won't you join us?



Allan Dennenberg, Administrative Assistant, made a television appearance for the Variety Club/Epilepsy Center on February 7th on the program "Dialing for Dollars," Channel 12.