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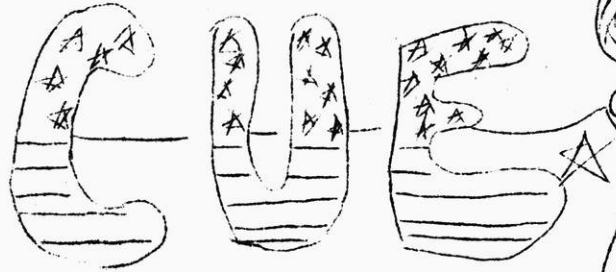
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This is America?

THE Fourth of July



Vol. VI, Issue 11

July 2, 1971

Air Pollution

Revolution

Population explosion

capitalism

war

politics

Peace

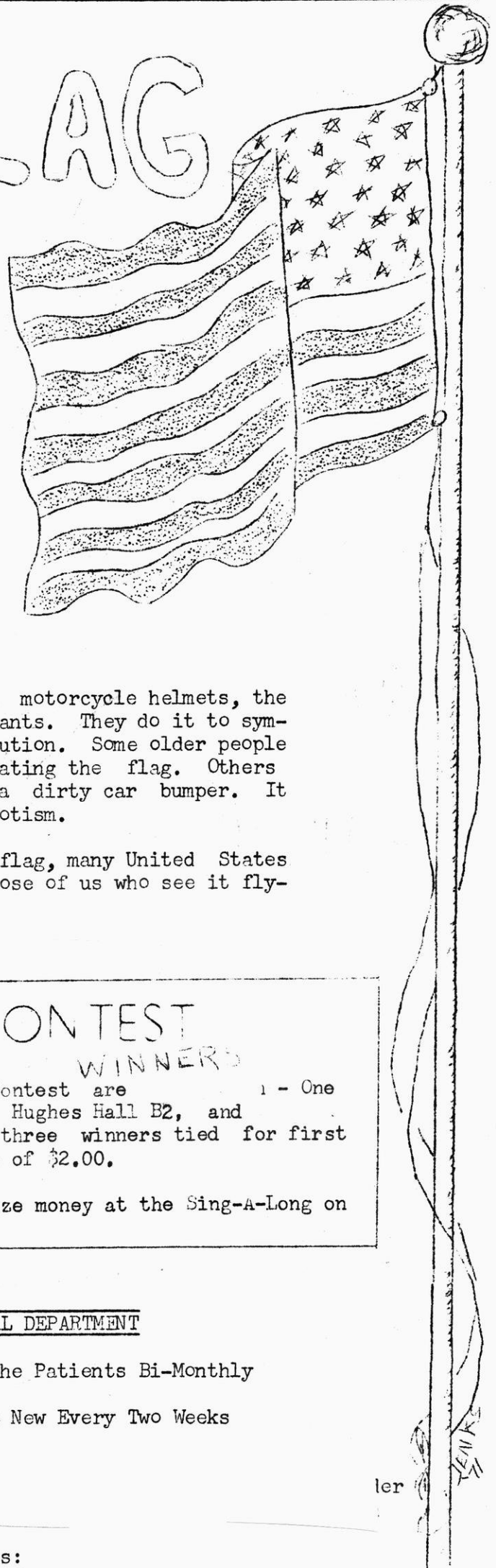
Love

equality

LAND OF THE FREE
AND THE HOME OF THE BRAVE?

1971

OUR FLAG



The flag of the United States is flown on several holidays, such as the upcoming Fourth of July. It is also flown daily by many people. People have different and conflicting reasons for displaying it.

One woman from Iowa says it gives a good feeling to see it, because we have a lot to be thankful for. The flag symbolizes the freedoms we have. Another feels people fly it to show they disapprove of all the dissent in our country. They fly it as a symbol of their support of sons fighting overseas and of our country.

Many young people display the flag on motorcycle helmets, the backs of jackets, and the seat of their pants. They do it to symbolize unfulfilled promises of the Constitution. Some older people feel this is a disrespectful way of treating the flag. Others claim it is no worse than having it on a dirty car bumper. It could be a way of showing dissent or patriotism.

Whatever the reason for flying the flag, many United States citizens are proud to see it, including those of us who see it flying at the hospital every day.

CUE'S PUZZLE CONTEST

WINNERS

The winners for the Cue's Puzzle Contest are 1 - One West, Kempster Hall, - Hughes Hall B2, and - Ward 5, Sherman Hall. The three winners tied for first place, so each will receive a cash prize of \$2.00.

The winners were awarded their prize money at the Sing-A-Long on July 1, at the Canteen at 7:30 p.m.

CUE'S EDITORIAL DEPARTMENT

Published By and For The Patients Bi-Monthly

Four Years Old, But New Every Two Weeks

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Advisors:
Lucy Jeffers
Chuck Lemieux

CONFIDENTIALITY

A recent staff development presentation on "confidentiality" was presented with Jerry Stein as moderator. Panel members were Dr. Treffert, Superintendent of WSH, and James R. Pleyte, Collection and Deportation Counsel for the State Department of Health and Social Services. Because the subject is of equal interest to patients at the hospital, the CUE borrowed the tape of the session and Judy Lorenz transcribed the lecture. The following is a digest of the material.

Mr. Stein observed that confidentiality seems a deceptively simple concept at first glance. The closer you look at it, the more confusing it becomes and the more gray areas and questions that seem to evolve.

First of all, a line of distinction should be drawn between confidentiality and privileged communication. Confidentiality is best seen as an ethical principle. And privileged communication is rather a legal or statutory concept. "Confidential" is defined in the dictionary as being secret or private. As a principle, it applies to the preservation of secret information given by a patient in a professional relationship. Privileged communication is the legal concept and it reflects statutory law. In most states, communication between a patient and his physician is privileged. The information cannot be acquired or the records relinquished without the patient's consent. The statute applies only to medical doctors and, by court precedent, to social workers.

In making a distinction between a few subcategories, there are at least three types of confidential communication. An actual secret would be information which if revealed would make a person unhappy, sorrowful, or affect their reputation. To preserve somebody's reputation, we do not need all the gory details. An actual secret is based on the premise that everybody is entitled to a good reputation.

The next type of confidential communication would be called promise. After a secret is given, the confidante agrees not to divulge it. This gets us into trouble because we find

ourselves wishing we had not promised to keep it a secret.

The third type, called an entrusted secret, is a secret communicated to a confidante with the explicit or implicit understanding that it will not be divulged. Professional relationships take this premise for granted. A patient consulting a doctor assumes this.

Here at the hospital, when a patient reveals a secret to a staff member, he is really revealing it to a treatment team, or more broadly yet, to the hospital.

The principle of confidentiality is relative, although there are exceptions to it. The exceptions come because of some higher duty or responsibility that can be considered in several dimensions such as a confidential communication involving a person who assaulted another, or a suicide or some type of gross criminal act. Yet while talking about confidentiality being relative, it is also dominant. It will always be dominant until there is considerable evidence that it needs to be considered relative.

How can things be considered confidential and yet be shared by staff and by a hospital?

Dr. Treffert. The patient, as well as the staff has to understand that treatment, in a setting such as this, cannot occur in isolation. The patient must have some understanding that information which is made available to the staff is made available through him. That puts a special obligation on the staff to realize that information gathered in that way is confidential even though they themselves may not have gathered the information.

Are all disciplines of the hospital tutored in confidentiality or covered by a hospital code?

Dr. Treffert. This could be answered only by the individual department heads. Each individual employee is exposed to the reasoning and the cautioning of handling information.

(Continued on Page 4)

CONFIDENTIALITY

(Continued from Page 3)

How available are hospital records to lawyers, insurance companies, employers, police, probation officers and motor vehicle departments?

Mr. Pleyte. Generally speaking, hospital records are not available to these people for a number of reasons, and not just because they are medical records. Hospital records fall into more than one classification of kinds of information. In the first place they are public records; and laws dealing with the availability of public records do apply to hospital records, in general. The records also include medical information necessary for the treatment of the patient, and only to that extent. The communication between the patient and the physician is privileged. It must be remembered that, in general, the privilege is that of the patient and not of the physician. The statute that deals with this relationship says that the physician may not make these disclosures except at the consent of the patient with some exceptions.

So you have some information that falls into two classes: public information on one hand; privileged on the other. The problems involved with both of these classes of information must be solved before an answer can be given to anyone on whether information can be released--that is, anyone outside the Department of Health and Social Services.

There are some exceptions to this concept of privileged communications. One is a murder trial, and this is specifically recognized by statute. Another is during a hearing to determine whether a person is mentally ill and should be committed.

The real answer, when asked to make a disclosure to an outside person, should be that information is disclosed only on advice of legal counsel.

Who owns the hospital records?

Mr. Pleyte. The State Department of Health and Social Services owns the hospital records.

When patients are sent to the county hospital, what type of information can be properly sent along?

Mr. Pleyte. All records relating to the treatment of the patient.

Is the CUE a confidential communication?

Dr. Treffert. The CUE is not considered a confidential communication. An interesting point is that just the bare fact that a patient is in the hospital is not considered privileged or confidential information.

Everyone likes to talk about his work and relate interesting experiences. If names are not used, is it a violation of confidence to discuss an exciting case, an interesting reason for hospitalization, or other bit of behavior evidenced by a patient at the hospital?

Mr. Pleyte. This would depend on the purpose of the disclosure. If one is trying to illustrate the kinds of people that come into our hospital so that the public is aware of the reasons for coming, it would be perfectly legitimate. If it is just an attempt to make interesting conversation, it is not recommended.

What would happen to an employee who breeches confidentiality about a patient while imbibing at a bar?

Mr. Pleyte. This would be a subject for disciplinary action, whether it be verbal reprimand, suspension, or discharge. If it were really damaging, one could push for the dismissal of that employee.

What happens when the privileged information statute is violated?

Mr. Pleyte. The courts have taken a rather dim view of these statutes relating to communications because they view it as an impediment in the search for truth. A statute that creates such privileged relationship must be construed and will not be extended on the exact words of the statute.

The privilege under Section 885.1 extends only to physicians and surgeons. Even this has been drastically limited. It has been held that the testimony of the nurse who assisted the physician seeing the patient is admissible as is the record (kept by the nurse) which was used by the physician in treating the patient.

Is a code of confidentiality discussed among patients at admission time?

Dr. Treffert. No, not necessarily.
(Continued on Page 9)

LIBRARY: INTEREST SURVEY

The Patients' Library announces the results of a Reader's Interest Survey, May 1971, of a representative selection of 160 patients (about 20% of the patient population). Three-fourths (124) of those questioned like to read, librarian Mrs. Marsh reports. Of the 160 queried, 122 use either the Library or the Book Cart.

In the area of Fiction, patients most like to read, in order of interest: short stories, popular or best sellers, adventure novels, mystery stories, historical novels, science fiction, romance, and westerns. The number of patients interested in any one category did not drop below 35.

The results in Fiction are not too surprising. On the "outside," short stories are undoubtedly the most popular kind of fiction. They can be read at a single sitting and often touch emotional or intellectual chords in weary minds. Popular novels also usually touch responsive chords in those enjoying them; they are diverting and often current.

In the Non-Fiction area, Magazines and Newspapers led the field with a total of 156 patients interested. Current happenings and ideas are always of interest to those who are forcibly secluded, and our hospital is no exception.

Literature followed in second place with 152 patients indicating interest. The category was subdivided into Poetry, Fiction, and Drama.

Next in line were Religion, Psychology, Philosophy, Biography, and The Arts. Following these, a cluster were on the same general interest level: Sociology, Geography and History, Education, Law, Customs and Folklore, and Mathematics.

Astronomy, Political Science, and Parapsychology and Occultism shared the same general interest level with Commerce and Business.

Bringing up the rear in reader interest were science and economics: Physics, Chemistry, Economics, and Botanical Sciences. Anthropology was low with 9 patients showing interest in it.

Ninety-seven patients welcomed the Art Print Collection as an addition to library services.

Mrs. Marsh will use the interest survey as a guide in buying books for the library. For example, it has been observed that short story interest is not equalled by a proportionate number of short stories now owned by the library, and the disparity is being remedied.

BIRTHDAYS

Men

l		7-2
l		7-2
l		7-2
l		7-3
l		7-4
l	ek	7-5
l		7-6
l	r	7-6
l		7-7
l		7-9
l	cks	7-11
l		7-11
l	elmann	7-12
l		7-13
l	erson	7-14
l		7-18
l	ky	7-18
l		7-23
l		7-24
l		7-25
l		7-25
l	hel	7-29
l	an	7-30

Women

l		7-7
l		7-8
l	hski	7-9
l		7-10
l	ning	7-11
l	on	7-11
l		7-11
l	son	7-26
l		7-29
l		7-31

One of the most important trips a man can make is the one required to meet the other half way.

If living conditions don't stop improving in this country, we're going to run out of humble beginnings for our great men.

What You Should Know

Legal matters that involve privileges and duties in the outside world are always of interest to patients. What rights do they have, and what rights, if any, are lost?

Dr. Treffert, superintendent of the hospital, has answered questions most frequently asked by patients. He also reviews some of the provisions in the new Mental Health Act pending before state legislature and which will be considered when they next convene.

DO I HAVE THE RIGHT TO WRITE PERSONAL CHECKS?

A patient can cash personal checks by following this procedure: he endorses the check and the money is placed in his account at the hospital. For any amount up to \$8.00 a week, the patient may sign a ward request for weekly withdrawal on Sunday evening. The money will be received on Wednesday. If money is needed between these withdrawal times, or more money is needed for a special need, a special-request slip signed by the patient and the doctor is needed to obtain any withdrawal.

The special-request slip may be presented to the business office any time between the hours of 7:45 and 11:55 a.m., and 12:45 and 4:15 p.m. Please note these hours as no money can be released after the cashier's window is closed.

YOU ARE ALLOWED TO COMMIT YOURSELF, THEREFORE CAN YOU SIGN YOURSELF OUT WHENEVER YOU WISH TO LEAVE?

Assuming that this would be a case of leaving against the doctor's order a regular voluntary admittance can leave when he wants to except in a situation in which the doctors (or treatment team) feel the patient is dangerous to himself or others. In such a case, the hospital has thirty-five days to institute a regular commitment. The new Mental Health Act would reduce this time limit to ten days.

When a person is committed as mentally ill, the decision to release him rests with the treatment team. The patient is conditionally released for

a twelve-month period and until this time is up, he may be readmitted to the hospital at the recommendation of the superintendent without going through the court procedure.

Inebriates, whether they come voluntarily or not, become court commitments, and cannot leave until their doctor feels they are ready. They usually remain for about six weeks. The new Mental Health Act would eliminate such court commitments. This could make treatment difficult because inebriates might decide to leave the hospital before they are ready.

CAN YOU LOSE YOUR DRIVER'S LICENSE IF COMMITTED TO THE HOSPITAL AS MENTALLY ILL?

A patient's driver's license is taken for safe keeping when he is admitted. This does not mean that the patient is not capable of driving. The license is returned when he leaves the hospital. When an ex-patient applies for a license for the first time or for a renewal, he is asked whether he has ever been mentally ill. The Motor Vehicle Department might decide to write to the superintendent of the hospital to find out whether there are any mental or physical problems that could impair his driving. But the final decision is made by the Motor Vehicle Department.

WHY ARE SOCIAL SECURITY CHECKS MADE OUT TO THE SPOUSE RATHER THAN THE PATIENT?

Social Security checks are not made out to the spouse in all cases. It depends on whether or not the patient is judged capable of handling his own financial affairs.

CAN A PATIENT, ON HOME LEAVE, DRIVE A CAR?

Usually not because most of the patients are on medication that could interfere with their eyesight.

IS IT AGAINST THE LAW TO DRIVE WHILE ON MEDICATION?

No.

(Continued on Page 7)

LEGAL QUESTIONS

(Continued from page 6)

MAY A PATIENT REQUEST A CHANGE OF DOCTORS OR SOCIAL WORKERS?

A request for a change is possible. However, such requests are only rarely granted, and then only in very unusual circumstances.

CAN A JUDGE EXTEND A PATIENT'S PERIOD OF OBSERVATION WITHOUT COMMUNICATING WITH THE HOSPITAL OR WITHOUT A PATIENT'S CONSENT?

Theoretically it is possible, but usually the doctor or other interested parties request the extension and it is okayed by the judge.

CAN A MAN BE DRAFTED WHILE A PATIENT HERE?

Yes, the hospital acts as an advisor by sending a final summary of the patient's condition. This helps the draft board decide whether the person is an acceptable candidate.

IF A PATIENT IS WORKING OUTSIDE THE HOSPITAL, IS HE ALLOWED TO SPEND HIS MONEY AS HE WISHES OR MUST IT BE TURNED IN TO THE BUSINESS OFFICE?

The hospital prefers to have the money placed in the patient's account for safe keeping. It is available to the patient through ward requests on Sunday, or through a special-request slip signed by the patient and the doctor and presented to the business office during the hours of 7:45 to 11:55 a.m., and 12:45 to 4:15 p.m. Please note these hours as no money can be released after the cashier's window is closed.

CAN YOU GET MARRIED WHILE YOU ARE A PATIENT?

Yes, if the doctor decides you are legally competent.

CAN YOU GET A DIVORCE WHILE HERE AS A PATIENT?

Yes, if the doctor decides you are legally competent.

WILD ROSE TRIP

On June 17, 14 patients from the geriatric unit along with Roxanne Huxley, Art Cuisinier, Sandy Larson, and bus driver Tom Mulvey of the AT staff, traveled to the Fish Hatchery at Wild Rose.

Before actually touring the grounds the group was served a lunch consisting of sandwiches, long johns, oranges, angel food cake, Kool-Aid and lemonade.

The hatchery itself was very interesting. We saw Brown and Rainbow Trout as well as a Sturgeon at least 3-1/2 feet long. Too bad we forgot the rods and reels.

Who says we cannot have fun and education on the geriatric unit!

k

ANSWERS TO "WHEN WE WERE KIDS" PUZZLE

Anagrams	Jackstraws
Authors	Jump Rope
Bean Bag	Leapfrog
Blindman's Buff	London Bridge
Blocks	Lotto
Blowing Bubbles	Marbles
Button, Button	Musical Chairs
Catch	Old Maid
Checkers	One-O-Cat
Coloring	Painting
Cops and Robbers	Post Office
Cowboys and Indians	Red Light
Croquet	Ring Around the Rosy
Dominoes	Simon Says
Drawing	Sledding
Egg Hunt	Skate
Embroidery	Statues
Erector	Steps
Flinch	Tag
Follow the Leader	Tic Tac Toe
Giant Step	Trades
Hide and Seek	Tug-O-War
Hopscotch	Wink
Jacks	

INTRAMURAL PLAY OPENS 2nd ROUND

The 2nd round of play in the Men's Intramural Softball League began on Wednesday evening, June 30. Hughes Hall and Sherman Hall both posted victories over Kempster and ATU respectively.

Sherman, First Round Champs, knocked out 27 hits on their way to an easy 35-12 win. Hughes Hall and Sherman Hall each homered for the winners, while Kempster and ATU went 3x3 for ATU.

Hughes' win over Kempster was a squeaker, 17-14. Sherman Hall homered for Hughes. Sherman Hall and Hughes Hall each had 4 hits for Kempster.

FROM OUR GRAVEYARD

On The Care and Treatment of Horses

(This is a repeat of an article from the August 30, 1968, issue of the CUE)

While there are some dramatic differences between the care and treatment of horses and of people, there are some interesting similarities as well. The aims are at variance with one another, however. To be a domesticated animal, the horse must become dependent and obedient to his owner, at least to some degree. Generally, in our society, people are expected to become independent and self-determining.

For that reason, it is not possible to make too close a relation between the two as to aims and purposes, but some general characteristics of similarity are undeniable. When a horse is young and weak, he cannot be expected to carry the burdens of an older and stronger animal, and he is not expected to behave with the same control and ease as an older and more experienced one. When an ill-advised trainer starts trying to make a colt do things that are beyond him, he can very well render the animal useless for the rest of his life. And in this considerably more than the skill of the trainer is involved: he must be sensitive to the animal enough to sense when the animal can follow his lead and to sense when he is pushing his relation to the animal beyond what it will bear at that time. When he strains his relation to the point that the animal cannot follow his lead, to blame the animal and become aggressive toward him is absurd. It works both against the relationship he will have with the animal in the future and against the extent to which he can make the animal effective to whatever it is being trained for.

Should a trainer be faced with a very spirited race horse, he is pegging for trouble and grief should he decide to make a plow horse of the animal. If he takes stern measures such as riding him on a saddle that is seated too tightly or pulling him back repeatedly, the horse is still more likely to throw his rider than he is to become docile. To approach the an-

imal in a menacing fashion with the saddle is the best way to make the animal rear and perhaps dangerously strike the trainer with a hoof. A race horse is a very temperamental animal. Ordinarily, he will either be a race horse or he will be turned into glue or dog food. No power of force or intimidation will change that. Some animals are just born to be race horses. That is the way things turn out.

Now there are some animals who are born to be dray horses or plow horses. Generally, they are considerably less spirited and to some degree more easily controlled. The greatest problems in handling them come not from too much spirit but from the opposite. They tend to be stubborn and resistive under certain circumstances. This may be because they lack the speed and the verve of the race horse. Now, it is difficult for us to determine just how a plow horse feels about a race horse and the freedom that is necessary to the swifter animal, but luckily, horses cannot communicate these feelings to us in words. If a plow horse feels that all horses should be treated in the same way and that no distinction should be made between them, we are spared such comments because of this very happy inability of horses.

But these characteristics of horses are not unique to them among the animals. Some dogs are very happy to be house dogs and some need a lot of room to roam about. To coop up a spirited dog leads to the same result as cooping up a spirited horse. It makes him mean and difficult to handle. From what has been said so far, it is evident that caring for animals requires much sensitivity and tact. But the requirements are even greater than we have mentioned, because, in reality, every animal is different from every other, so that no two of them can ever be handled in exactly the same way. That is why people who deal with animals all the time develop skills at approaching and handling them. The secret of the process is easy for any of us to understand, however. A man can teach an animal control and discipline only if he possesses it himself. He must appreciate and respect the real characteristics of the beast if he is to have success with him.

Indeed, in many ways, animals are like people!

FRIENDSHIP

By St. Augustine

Time is not idle; its revolution is not without effect. Through our senses it works great changes in our minds. For me too time came and went and, as day succeeded day, gradually it implanted in me new hopes and new memories, and slowly I was patched together again with pleasures of the old familiar sort. My grief for my dead friend was displaced by them, but to it succeeded, if not fresh griefs, conduct which could not fail to cause them. For why was it that grief had pierced so easily to the depths of my being? Was it not simply that, in loving one subject to death as though he would never die, I had poured out my soul like water on the sand? And now what most restored and refreshed me was the comfort I found in new friends, with whom I loved what after friendship I loved best: the great Manichaeian myth,* a huge lie from beginning to end, which gained access through our itching ears to tickle and seduce our minds. This myth did not die for me just because one of my friends had died.

But friendship itself had other greater charms: the talk and the laughter together; the mutual kindnesses and compliances; the common study of favorite books; and shared enjoyment of frivolity or seriousness; the occasional disagreement without hostility--like that of a man with himself--which adds a spice to frequent and fundamental agreement; the teaching and the learning that pass between one friend and another; the happiness of meeting which follows the unpleasantness of separation; the thousand and one welcome signs--a word, a glance, an expression of the face, any little impulse--which spring spontaneously from those who love and are loved, and act like tinder to set their hearts ablaze and fuse them into one.

This it is that we prize in friendship, and prize so highly that our human conscience feels guilty if we do not return love for love, demanding from the loved one no satisfaction beyond these instances of affection. And this is why the death of a friend brings mourning and the darkness of grief, turning joy to bitterness and drowning the heart in tears, so that the lost life of the dead is the death of the living....

*The belief that things material are

evil because they are created not by God but by a Demiurge hostile to God. Mani called himself an apostle of Christ, but lived in Zoroastrian Persia; he is a Zoroastrian rather than a Christian heretic.

CONFIDENTIALITY

(Continued from Page 4)

What are some guidelines for reviewing the records of our own relatives or neighbors or friends who might be in the hospital?

Dr. Treffert. There is no specific policy on that; the same general guidelines apply to that situation as to any other.

Should information deliberately be omitted from hospital records?

Dr. Treffert. Yes, that information that might be subject to misinterpretation could be deleted from the record.

In conclusion, Mr. Stein observed that (1) patients have the right to protection of personal information about themselves and their relationship with the hospital during and following the process of obtaining service, and this right may be superseded only in exceptional situations.

(2) The client should be used as a primary source of information about himself, and information sought from him should be limited to that which is essential to provide the service.

(3) Within the hospital, information regarding the patient should be revealed only to those persons, and to the extent necessary to provide service.

(4) Other agencies and individuals should be consulted only with the client's consent and within the limits of the consent.

(5) Only that information should be recorded and those records maintained that are essential to provide the needed service.

Communication is important, but so is confidence and trust.

We know the truth, not only by the reason, but by the heart.--Pascal.

Readers' Rhymes

From Seniors to Seniors

Hail, Seniors brave and fearless!
 Hail, children of our land!
 Bright beacons of the future,
 Upon your soil we stand.

Stand fast in all your efforts,
 Keep your shining goals in sight
 To enthuse all nations working
 To change their wrongs to right.

We thank you for your growing,
 Maturing as we'd hoped;
 For knowing more than we did--
 (Yet caring that we "coped.")

Mistakes we've made aplenty
 As captains of our crew,
 For we are humbly human
 (As you'll discover, too!)
 We've handed you our problems
 Unresolved, to mend or break,
 But too, we've tried to give you
 Our faith in what's at stake.

Let ecology be our watchward,
 May peace be yours to find;
 Make equality of race and creed
 The love-wrought chains that
 bind!

We pray you'll smile at
 memories
 While we shed a thoughtful tear,
 Because we pass our torch
 along
 To you we hold most dear!

The Stranger

He came with love
 He came to stay,
 then he left
 the same old way.
 With heavy heart
 to tread the road
 He spread his love
 to young and old.
 With words of love
 and deeds of wisdom
 He let us know
 his love was in us.

Wrong and Right

"If it's right it is RIGHT;
 If it's wrong, it is WRONG!"
 Poor old Maggie McKnight
 Always chanted that song.
 On dark days or fair--
 No matter what came--
 In joy or despair,
 Her song was the same.

"Big or small," she would
 say,
 "Any lie is a LIE.
 Sin is SIN any way
 It may try to get by.
 Black is BLACK; white is
 WHITE;
 Short is SHORT: long is
 LONG!
 What is right must be
 RIGHT--
 What is wrong must be
 WRONG."

It is hard to decide,
 Oftentimes, what to do,
 When wrong's on the side
 That appeals most to you.
 But, when Doubt comes
 along,
 Think of Maggie McKnight
 "If it's wrong, it is WRONG;
 If it's right, it is RIGHT

Ballad

His name was Jim,
 He "rode" a roan.
 To everyone's dismay
 The colors of the roan and him
 Were all the same. Olé.

Jim rode to town
 One day; the next
 He croaked and with a neigh
 The roan hee-hawed and ran, for he
 Had lost his load. Olé.

Nobody saw that
 Jim was gone for
 One week and a day.
 The moral: Wreak your vengeance but
 Don't press your luck. Olé.

SING-A-LONG

A pleasure to hear was the Country Trio from Neenah who entertained at Sing-A-Long, Thursday, June 24. Dressing like country gentlemen and singing western, the basic group of three and their guitars were joined for the evening by two guests, one on drums, the other (Bob Yost) on trumpet. The band kept listeners' attention for an hour of music not confined to country tunes but which included numbers like the popular Knock Three Times, a polka In Heaven There Is No Beer, and the romantic In The Misty Moonlight.

A crowd of two hundred very obviously enjoyed the quintet's singing and playing, which was marked by contagious vigor. Loud applause with whistling accompaniment greeted every number. Folsom Prison Blues, fast-paced and in minor key, prompted lively dancing by the boys from Hughes. The trio also sang, among others, the Wreck of the Old Ninety-seven, Okie from Muskogee, Jambalaya, and Is Anybody Going To San Antone.

HIGH CLIFF STATE PARK OUTING

Tuesday, June 22, was the day chosen by Helen Lanco and Chuck Radtke, our occupational therapy advisors at Sherman Hall, to take a bus trip to High Cliff State Park. It was a beautiful day for such an excursion as 28 patients got onto the bus at 9:30 a.m. ready to proceed to the park just five miles outside of Appleton. A picnic lunch was served which consisted of sandwiches, cookies, kool aid and egg-cooked coffee made over the campfire.

We all enjoyed such recreation as hiking, listening to radios, sunbathing and a leisurely stroll through the park area.

A day of fun and relaxation was enjoyed by all. We returned to Sherman Hall at 3 p.m.

BALLPLAYERS VIEW BREWER WIN

On June 24, twenty-eight ballplayers from the men's Intramural Softball League were guests of the Milwaukee Brewers and viewed a 6-0 Brewer victory over the California Angels.

The trip to Milwaukee has been established as an annual mid-season treat for hospital softball players, and, as in the past, was thoroughly enjoyed by all participants.

A LAUGH OF A WOLF

"I didn't come to be told I'm burning the candle at both ends," said the patient to his doctor, "I came for more wax."

Housework is what a woman does that nobody notices unless she doesn't do it.

The stewardess passed out chewing gum to passengers while the airliner was flying over the Rocky Mountains, explaining, "It's to keep your ears from popping at the high altitude."

When the plane landed one of the passengers rushed up and said, "I'm meeting my wife right away. How do I get the gum out of my ears?"

A couple visiting New York City decided to take their 12-year-old son to a hit musical for his birthday. They began to feel a little uneasy when in the opening number a line of chorus girls appeared clad only in scanty green and white ribbons.

As the dance ended, the boy leaned over and said to his mother, "Did you see that?"

"Did I see what?" the mother asked apprehensively.

"Those girls," said her son. "They're wearing our school colors."

The older a man gets, the farther he had to walk to school as a boy.

A worker was a dollar short in his pay envelope and complained to the cashier. She looked at the records and said, "Last week we overpaid you a dollar. You didn't complain about that mistake, did you?"

"An occasional mistake I can overlook," replied the worker, "but not two in a row."

The best way for a wife to have a few moments alone at the end of the day is to start doing the dishes.

People who cough never go to the doctor; they go to movies and concerts.

The teacher was trying to make the pupils think, so she asked some tricky questions.

"Johnny, give me an example of 'nothing'."

Without hesitating, Johnny said "Nothing is a balloon with its skin off."

BASEBALL AND PARADE OUTING

Monday, June 21, 30 female patients from 2 West in Kempster Hall attended Local 48's baseball game against Wisconsin Telephone Company in Oshkosh. Mrs. Krings, a 2 West aide, capably drove the bus to the game.

Local 48 started out way behind, then caught up later in the game. The score was tied for 3 innings until Wisconsin Telephone Company made the winning run.

Following the game we went to the Miss Wisconsin Parade. There were several good bands playing in the march, and girls representing different towns from all over the state for the beauty pageant rode by in convertibles. It was a lovely parade.

MISS WISCONSIN PAGEANT

The Miss Wisconsin Beauty Pageant had its first program Wednesday evening, June 23, at Oshkosh High School. Several female patients from 2 West in Kempster attended. Also a few of the Hughes Hall girls attended.

The girls from many areas of the state were introduced by M.C. Miss Michigan of 1970. They wore evening gowns of many lovely colors and styles. Swim suit competition and talent competition were held that night. There was a wide variety of talent displayed, including ballet, piano solos (such as one number of Debussy's), a flute solo, and guitar and folk music. There were several songs from Broadway productions sung by the contestants and also by the men who worked with the girls.

It was a very enjoyable evening. Our thanks go to those who provided the tickets.

MILWAUKEE TRIP

Many patients from 2 West Kempster Hall went on a bus trip to Milwaukee Tuesday, June 29. Mr. Skruby did the driving. Originally the plans were to visit the Milwaukee Zoo, but due to the hot weather it was decided that we should go somewhere cooler. Therefore we went to Mitchell Park and the Milwaukee Public Museum.

We had a picnic lunch at the park. Sunken Gardens is located there. These are flower gardens located quite a few feet below the level you walk on. There are also 3 big domes with

on. There are also 3 big domes with gardens in them.

One contains tropical plants. Another has a setting of cactus plants as there are in desert areas of the United States. The third dome has baskets of flowers hanging in it. The flowers in this dome are ones that are more familiar to Wisconsinites.

After touring Mitchell Park the bus took us to Milwaukee Public Museum. It is a very large museum with many interesting displays, including scale models of Old Milwaukee; the history of the earth and its people.

The whole trip was very interesting for us, and our thanks go to the staff for taking us.

DIRECTORY FOR VISITORS

A directory of the hospital buildings has been erected in front of the Administration Building. A map of the grounds has been posted on the directory. This should prove to be of great assistance to our visitors, especially on week-ends when the information offices are closed.

Because the hospital is so large it is very confusing to visitors who are visiting for the first time. If patients will inform their families as to which building they are in, as soon as they arrive, the directory will be of invaluable help to them.

CANTEEN HOURS

Monday	9:00 a.m. - 4:15 p.m.
Tuesday	9:00 a.m. - 4:15 p.m.
Wednesday	9:00 a.m. - 8:00 p.m.
Thursday	9:00 a.m. - 8:00 p.m.
Friday	9:00 a.m. - 8:00 p.m.
Saturday	12:00 noon - 8:00 p.m.
Sunday	12:00 noon - 8:00 p.m.
Monday (July 5)	9:00 a.m. - 4:15 p.m.

BINGO PARTY

DATE : July 10

TIME : 6:45 PM

PLACE : Canteen

Prizes -- FOW

THE WEEK AHEAD

HOSPITAL ACTIVITIES FOR THE WEEK OF JULY 5 - JULY 11, 1971

July 5
Monday

HAPPY HOLIDAY

9:00 am - 4:15 pm

CANTEEN OPEN*

July 6
Tuesday

9:00 am - 4:15 pm
2:30 - 4:00 pm HH Music Rm.
3:45 pm SH 5-7-8
4:30 pm GH-AT Area
7:00 pm KH
7:00 pm 2-W

CANTEEN OPEN
RECORD LISTENING
Book Cart
Canteen Social Chair-
men Dinner Meeting
Kempster Choir
Gray Men

July 7
Wednesday

9:00 am - 8:00 pm
1:15 pm 1-W
1:30 pm GHS
2:30 - 4:00 pm HH Music Rm.
3:45 pm SH 1-3-4
6:15 pm Softball

CANTEEN OPEN
Appleton Red Cross
Lutheran Ward Service
Rev. Winter
RECORD LISTENING
Book Cart

KH vs ATU
SH vs HH

Kempster Field
Main Ball Park

July 8
Thursday

9:00 am - 8:00 pm
2:30 - 4:00 pm HH Music Rm.
7:00 pm Canteen

CANTEEN OPEN
RECORD LISTENING
Sing-A-Long

July 9
Friday

9:00 am - 8:00 pm
2:30 - 4:00 pm HH Music Rm.
3:45 pm 2-E

CANTEEN OPEN
RECORD LISTENING
Book Cart

July 10
Saturday

10:00 am GHS
11:45 am - 8:00 pm
2:30 pm HHA-3

Favorite Hymn Recital
CANTEEN OPEN
Women of 1st English

July 11
Sunday

8:45 am Chapel
11:45 am - 8:00 pm
7:00 pm Chapel

PROTESTANT SERVICE
Rev. Windle
CANTEEN OPEN
CATHOLIC MASS
Fr. Pierce

*ALL activities in Capital letters are for all patients.

Patient Library, SH Basement: 9:00 - 4:00 M-T-W-F
9:00 - 2:00 Thurs.

Mrs. Fulaine Farrow
Nursing