

Vol. VII

AUGUSTA, GA., OCTOBER 5, 1951

No. 1

THE FACULTY SPEAKS

IS AN INTEGRATED MEDICAL COURSE POSSIBLE?

A much respected teacher of the past generation is said to have remarked, as he reluctantly tore away from his research microscope to meet a class, "Teaching would be a bearable profession if it weren't for those damn students!"

This epigram has been referred to by almost every academic veteran, and has been quoted by nearly everyone who has ever heard it. It must therefore express something deep in the subconscious of most medical teachers. There seems to be something disappointing about students. One is disturbed because handsome, earnest, and seemingly intelligent people simply do not get the point, and one is chagrined because an occasional C-student of whom no good can be said in the classroom makes a spectacular success in after life.

What is the reason for this attitude of reluctant toleration which student feels for faculty and which

(Continued on page 2)

PHI CHI NEWS

The Phi Chi's have turned up with a good deal of news this month. In addition to the rush week data, they have elected a new set of officers and are duly excited about their new house, at 2242 Pickens Road, in the annex of which several of the freshmen are already living. Their new pledges are Grayson Adams, Jim Kitaif, Jim Lambert, George Dunbar, Morris Dalton, Tony Heffernan, Paul Tumlin, Billy Sutlive, Billy North, Jim Dudley, Kenneth Conoley, Billy Sibbett, and Jim Shanks, a grand total of thirteen.

The new officers are Roy Ray, President; Frank Rizza, Presiding Junior; Dan Bateman, Treasurer; Clarence Rawson, Secretary; and John Madry, Sergeant-at-Arms. The Cadaver offers its congratulations to the new Phi Chi's and their new officers, with the hope that they will have a prosperous year.

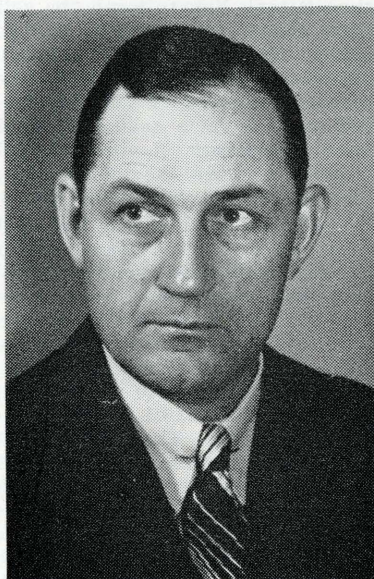
FIVE YEARS AGO

PAID ADV.

Will the thief who stole my radio the other night please return the bottle of 4-Roses I had hidden in the cabinet.

—James B. Kay, Jr.

We Salute



DR. HOKE WAMMOCK

"Professor of Oncology and Surgery, Medical College of Georgia—" is the impressive title of the CADAVER'S "We Salute" honoree for this first issue of the school year.

More familiarly known about the campus as Dr. Wammock, our oncologist is a true product of Georgia, in three senses of the word: born in the state, he is a product of the University of Georgia and a graduate of this Medical College. In his birthplace, Soperston, Dr. Wammock went through the inevitable grammar and high schools "about the equivalent of graduating from kindergarten," he says; and believes that his only outstanding achievement during

(Continued on page 3)

ALPHA KAPPA KAPPA PLEDGES 18

After a grand and glorious rush week, albeit a bit too gay, the AKK's finally came to and found themselves the proud possessors of eighteen pledges. Those who had pledged themselves were: Dabney Brannon, Ray Evans, Charlie Little, George Gowder, Luther Travis, Irvin McLendon, Jimmy Metts, John Clack, Dan Cabiniss, Pepper Hague, John McCranie, Bill Airiel, Jim Segars, H. K. Heath, Ernest Pund, Jim Morris, Henry Lucas, Robert Rogers. Congratulations fellows and good luck!

STUDENT INJURED

Aaron Dolinsky, senior student at the Medical College of Georgia, was injured and a companion, Irving Ghitler, was killed when the car in which they were riding overturned three miles south of Thomson, early in the morning, September 22nd. Mr. Dolinsky states that Ghitler, who was driving at the time, swerved in an attempt to avoid hitting a dog. Dolinsky was first carried to the Washington, Ga., hospital and then transferred to University Hospital. He suffered only bruises and minor lacerations. Dolinsky's car was completely destroyed.

The "Greens" Entertained At Greenes'

The five freshman girls were entertained at a shrimp supper at Greenes' Restaurant on Monday night, Sept. 17th, by Alpha Epsilon Iota Women's Medical Fraternity. The new girls are Martha Gordy, Betty Ann Hogan, Janet King Johnson, Ruth McMinn, and Agatha Moody. Other guests were Dr. Ethel Peters, Woman surgeon at Paine College and her daughter, Dr. Margaret Evans.

During the business meeting following the supper these officers were elected for the coming year: President, Sarah Clark; Vice-President, Martha Goddard; Recording Secretary, Marie Heng; Corresponding Secretary, Betty Thompson; Treasurer, Betty Morgan; Custodian, Yvonne Cordray; Rep. to Interfraternity Council, Flora Hicks; Rep. to Student A. M. A., Nancy Thornton.

Marie Heng proposed two projects for the fraternity. It was agreed that the girls would send groups to Oliver General and Camp Gordon each week.

Phi Delta Epsilon Pledges

After an extensive and elaborate summer offensive, Phi D. E. terminated the official rush period by roping in two new pledges. The privileged ones are Paul Lavietes, Atlanta and Benny Pike, Savannah. A combination buffet supper—bull session at the home of Brother Sanford Shmerling concluded the hectic rush season, on Sunday night, September 16.

Phi Rho Sigma Pledges

Phi Rho Sigma is pleased to announce the results of an unusually brilliant rush season. At the end of the annual three-day orgy which this year included a lawn dance complete with orchestra and a fountain of beer, a lake party at Dr. Pepper Martin's country retreat, and the Annual Alumni Dance at the newly refurbished house, the brothers got around to counting heads and found that nineteen new pledges had been added to the fold. These are Fred Allman, Atlanta; Hubert Anthony, Danielsville; Joe Bailey, Augusta; Lloyd Davis, Ellijay; Bill Fleming, Augusta; Harry Foster, Summerville; Jack Fries, Savannah; Reid Gullatt, Cochran; Bill Hagler, Augusta; Ray Hodges, Brinson; Quentin Lawson, Hahira; James Lodge, Whigham; Tom Montgomery, Athens; Joe Nixon, Augusta; Lowell Peacock, Vidalia; Lane Reeves, Savannah; Roger Rowell, Vidalia; and Bill Thompson, Fairmount. We are particularly happy that Dr. Fred Denton is sporting a little red pin. We are proud to have these men as new members of our fraternity, and are confident that they will prove to be an asset not only to Phi Rho but to the school as well.

Theta Kappa Psi Pledges

The Thetas announce their rush week results; seems they got twenty-five freshmen and two sophomores. These men are: Bob Ansley, Bill Bailey, Wilbur Baugh, Harvey Beall, Bill Bradley, Jim Burnham, Wilbur Campbell, Turner Edmondson, Paul Garcia, John Harrison, Jess Hunt, Charles Johnson, Martin Johnson, Pete Lampros, Earle Lewis, Louis Leopold, Joe Miller, George Sessions, Tad Taylor, Bill Tippens, Jack Whitworth, Leonard Willis, Lamar Colie, Jr., Mickey Middleton, and Roy Webb. The two sophomores who finally came through are Gordon Walters and Bill Eubanks.

JUNIORS ELECT

The junior class elected new officers Monday, September 21. Roy Duncan was named president; Murray Arkin, vice-president; Jim Moss, secretary and treasurer. Congratulations to the new politicians!



Published monthly by and for the students, nurses, and doctors associated with the Medical College of Georgia.

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Jack Birge, Jim Kilpatrick, Harry
Foster.

FEATURES
David T. Smiley, Yvonne Cordray,
Jim Adams.

EDITORIAL

It is unfortunate that everyone connected with the Medical College of Georgia hasn't had the opportunity to read John Harris' "Reflections on the Eve of Graduation." More than one editorial this year will be devoted to some of his excellent suggestions and comments. One of these well-taken suggestions is quite clearly brought out by one Junior student's recent experience, noted in this month's Vertebral Column. In John's words:

"We feel that a well-taught first aid course would give the pre-clinical students something in which to 'sink their teeth', while also filling a real need, for once a student enters medical school he is a 'Doctor' in the eyes of the public and is expected to act the part should an emergency arise, perhaps even before he has learned that the radius is not only half the diameter of a circle but is also one of the bones of the forearm."

The staff feels that a course given, perhaps during the freshman year, would be well worth the effort to all concerned. Basic emergency treatments and instructive for such cases as accidents, burns, fainting, etc., would serve a real need. We hope this matter may be taken up seriously by those in charge of planning curricula.

Another of Dr. Harris' suggestions also deserves repeating here. "In gross anatomy, the basic aspect of reading X-rays and the observation of fluoroscopy would show the freshman that learning the bones of the ankle is of importance for something other than passing Osteology. And the Junior would have at least a vague idea of what was present the first time someone flashed an X-ray film before his eyes."

This was tried last year on the sophomores during cross-section anatomy, and was well received. Let's put it on a more official basis, and try to incorporate it into the freshman schedule.

CHIVALRY—A man's inclination to defend a woman against every other man except himself.

ORCHIDS AND SKUNK CABBAGES

This issue we shall attempt to rejuvenate an old feature of THE CADAVER by bouquets and bitches, praises and condemnations of those individuals or groups who we believe are so richly deserving of their respective copy. Our praise is wholehearted and written with the earnest hope that the status quo be maintained; our condemnations are also sincere, not being noted to raise the ire of the recipients, nor merely to fill space, but in an honest desire to correct bias or change existing, possibly deplorable, conditions.

Orchids: To Miss Martha Dreyer for finally making registration, at least for the upper classmen, something less than an all-day chore. Let's have more of this.

To the Surgery Dept., for its excellent planning and execution of the TEACHING conferences. In these small classes, students are able, willing, and inspired to learn from the fine presentation of patients by well-informed men who know how to teach.

To Dr. Nathan DeVaughn for his apparent turn-about-face. He is a GRAND lecturer—when he lectures!

Skunk Cabbage: To the IFC, for its weakness and timidity in formulating a workable, agreeable, manageable rush week, with definite penalties, etc., for violating its set regulations.

To the Administration for its formulation of the present senior schedule—10 hour hospital days and no vacations.

THE FACULTY SPEAKS

(Continued from page 1)

faculty feels for student? The faculty is as earnest, industrious, and dedicated a group as can be found, and one's heart is warmed each year by the enthusiasm, sincerity, and altruistic outlook of the incoming class of students. There should be complete sympathy between these two groups—students and faculty—and if such sympathy is not complete, it is important to find out why.

A major contributing factor is the compartmentalization of the preclinical departments. Each department demands the accumulation of a great deal of detailed knowledge by the student. If two departments set their tests on the same day, students become frantic and rebellious. They are convinced—and rightly in some cases, alas—that they must cram to the last moment and walk to class in a somnambulistic trance lest some essential feat of memory be lost. After the test they are either in the depths of despair over obsessions of failure, or in a manic state of elation in the belief that they will never have to "think about that stuff again."

The gist of it is that the student feels that the faculty of each department demands unduly specialized learning and the faculty feels that a large proportion of the student body is rather lost at the end of the course.

It seems to me that the basis for this is that the members of the pre-

clinical departments have usually received specialized training. They have each received introductory courses, containing much esoteric detail. The courses are aimed at preparing the student to become a specialist in one of the particular branches of biological sciences which is traditionally regarded as introductory to medicine. Specialization is too often simply the accumulation of more detailed information about more facts.

It is natural, of course, that one trained in this manner, when confronted with the job of teaching his subject, should do as he has been done by. He often uses the notes he has accumulated in graduate school. He reads industriously about still more facts and, lecturing with breathless rapidity, regurgitates these facts at his students in one-one hundredth the time it took him to learn the self-same facts. In addition, he requires his students to purchase ponderous reference books—mis-labeled texts—which are crammed full of more facts and more detail on a framework of theory which might have been the subject of an interesting controversy in 1935.

The result of all this is that each class contains half a dozen unformed and embryonic specialists, 50 men who hope that they will remember the right words at test time, and 20 men who just hope. Of these only an occasional student ever really expects to use or apply the jumbled chaos of words he had just "learned". The average student, having by the grace of providence and the exigencies of the curve "passed the course", tries to forget the painful experience as soon as possible. He hopes naively that this may make "room" in his head for next year's facts.

It is said that the pre-clinical sciences are the foundation for the edifice of medical education. This is an inept analogy. We are dealing with poor ground if we need to spend two years constructing the foundation for a building that is functional in another two years of lesser labor. It would seem better to pour a modest concrete footing, and use the cement left over to hold things together upstairs.

To leave the analogy, which is inept, would it not be interesting to organize a medical teaching program with it in view to present facts and other content only as fast and only in such order as will give rise to immediate interest, comprehension, and use by the student?

In order to understand an introduction to pathology, physiology, medicine and the less specialized branches of surgery, the anatomy of the head, neck, and extremities is not necessary. Let us put these things back into the tank until they can be studied (not memorized by rote and forgotten) in the context of orthopedics and the surgical specialties that deal with the head and neck. Let us shorten this introductory course in viscerology to 2 or 3 half days per week for half a year. Let us teach physiology in the same way—running over elementary things as we do now, but not immediately trying to bring out the application to disease. This may better wait until the name of a disease is no longer an empty word. Let us come later when the name brings to mind a patient lying

stricken and possessed of a history and a set of signs and symptoms, each of which can be shown to have meaning in physiology and pathology.

With this approach, all of the pre-clinical subjects would be presented in synopsis, eliminating uncompromisingly detail that can be postponed, and can be grasped better in later years. The introductory panorama could be presented in less than a year. Room in the first year could be made for a preliminary course in physical diagnosis. The student would then be ready to be introduced into the hospital. It might be well to assign students to work in groups in both in and outpatient work. Each group could consist of one or two second, third, and fourth year men, and as a group be assigned time from the staff. The older men could be encouraged to develop an attitude of helpfulness that would aid the younger men. At the same time they would be stimulated by the act of teaching and expressing their ideas and skill to learn these things better and more comprehensively.

It might be well to assign half the students time to cooperative group work with patients, and half their time to work which would be in either the lecture room, the laboratory, or the library. A second year man would take courses in the pre-clinical sciences that would parallel each other and the clinical courses in content. A student would find himself studying the changes wrought by disease in the respiratory system from the structural, chemical, and functional point of view, while he was being presented with the bedside characteristics of respiratory disease. The kidney, the circulation, and the gastrointestinal tract could be correlated in the same way. One could learn about the bacteriology, the immunology, and the clinical course of infectious diseases at one time rather than years apart.

The third year man would continue a similar program, with less didactic work and more time in the ward and library to work up the patients assigned to his group. This will be needed if he is to maintain his proper position as assistant leader of the group. The fourth year man should probably have very little didactic work, and it is to be hoped that he may take over the diluted duties of an interne—since this category is scarce these days—and in addition assume the guidance of his group under the leadership of a faculty member.

The detailed scheduling of a program so glibly set forth would be difficult. There are many compromises to engineer, if the advantages of such a course are to be realized. Scientific principles and clinical application should come with little lag in either direction and the teacher's time should be programmed so that he has large blocks of free time available for research. His total teaching time should not be increased, but it should be so distributed that his students have the background to understand and be interested in the material presented to them.

—W. F. Hamilton.

DECOY—A pipe in trouser's pocket.

WE SALUTE

(Continued from page 1)

those days was basketball; in addition to playing the game, he refereed the girls' team and was promptly thrown out for rendering the wrong decision at the end. Since then Dr. Wammock has left politics and basketball strictly alone.

After a two-year stint at the University of Georgia—"In at the side door and came out the same way . . ."—Dr. Wammock entered the Medical School at Augusta in 1924, with what was at that time the largest class ever to enroll, with 52 members. At the end of the four years, 33 of the original number remained to graduate. (What happened? "Physiology, Pathology, Anatomy, and few drunken drivers. . .") The reason for the lowered mortality today, believes Dr. Wammock, lies in the fact that students are better prepared for medical school and that there is a much greater demand for M. D.'s than in those days of the "family doctor." Graduating in 1928 at the ripe old age of 22, Dr. Wammock interned at St. Luke's Hospital in Jacksonville—but not by original intention. "Just to show how little things can change your life," commented the doctor. "I was almost a surgeon." He was offered a junior internship at a Boston children's hospital in 1927, and hoped to use this opening as a springboard into the Boston surgical world, then the most outstanding in the country; but the hospital burned before he could take his place on its staff. From Jacksonville, Dr. Wammock went to Jeanes Hospital in Philadelphia, where he remained until 1945; entering as resident in cancer, he progressed upward to Assistant Surgeon in 1932, and became Chief of Staff in 1942. Jeanes at that time was one of the ten institutions in the country devoted exclusively to cancer. Next came a postgraduate course in surgery at the University of Pennsylvania Postgraduate School of Medicine at Philadelphia; then a teaching position ("Low man on the totem pole . . .") in the same place. He served as Visiting Surgeon to Underwood Hospital, in Woodbury, N. J.

In 1948 Dr. Wammock came to MGG as Professor of Surgery and Oncology, and has been here ever since ("But I didn't live happily ever after . . .") that date. He is a Diplomate of the American Board of Surgery; consultant to the Veterans Administration at Lenwood and The Augusta Annex; consultant to the Oak Ridge Institute of Nuclear Studies; oncological consultant to the Milledgeville Hospital; member of the Executive Committee of the Georgia Division of the American Cancer Society; and co-chairman of the Richmond County Unit of the Georgia Division of ACS. This last group has had its local office only since 1950, and this was developed through the efforts of Dr. Wammock. Dr. Wammock has prepared several exhibits for the AMA and the American Roentgen Ray Society, which presented him with a prize for his exhibit on cancer of the cervix in 1935. His list of publications is too lengthy to be set forth here, but includes representation in many of the leading medical jour-

nals of today.

In 1936 Dr. Wammock was married to Virgene Marie Scherer, a physician in her own right and a graduate of the Woman's Medical College at Philadelphia. She received her training in dermatology and syphilology and was Assistant Director of the Institute of Venereal Disease of the University of Pennsylvania for several years. The Wammocks have two children, a girl of nine and a boy eleven.

"My philosophy?" Dr. Wammock lit a cigarette in his characteristic manner. "You've caught me off guard, but it seems to me . . ." and leaning back in his chair, the good professor went on to tell us that the most helpful thing a medical student can give himself is a full appreciation of the values of the basic science courses during his days as a student—rather than being awakened rudely to their usefulness after leaving school. "The better the foundation the student has," Dr. Wammock went on, "the simpler general practice or a specialty becomes; a good foundation lightens the physician's burden considerably." While in medical school, the student develops a student-patient relationship, and for that reason he must consider the patient as a human being, and the body as a whole, rather than as a series of diseased parts.

"I am fundamentally interested in having students learn to recognize cancer early," concluded Dr. Wammock. But even where this is impossible, the student "has an opportunity to sustain the eternal hope of the distressed patient against adversity and, at the same time, further his own knowledge of pathological and physiological responses."

HOUSE-HUNTING

A young couple about to be married were looking for a house in the country. After satisfying themselves that they had found one, they started home.

During the return trip the young lady was thoughtful, and when asked the reason for her silence, she replied, "Darling, did you notice the W. C.?" (meaning water closet)

Not having noticed it the prospective bridegroom wrote the landlord asking where it was located. The landlord did not understand what W. C. meant, and after thinking it over for sometime, came to the conclusion that W. C. meant Wesley Church. His reply was as follows:

Dear Sir:

I regret very much the delay in answering your letter, but I now have the pleasure of telling you that the W. C. is located about 9 miles from the house and is capable of seating 200 persons. The distance is unfortunately far, but if you are in the habit of going regularly, you will be glad to know that a great many persons take their lunch with them and make a day of it. Others that cannot spare the time, take cars arriving just in time. The last time I went was 6 years ago, and we used to stand up all the time. I may mention that it pains me not to go more often. It may also interest you to know that a bazaar is to be held to furnish the W. C. with plush

seats, as this has been a long felt need.

DON'T BE MISLED

He tried me on the sofa;
He tried me on the chair;
He tried me on the window sill,
But he couldn't get it there!

He tried me lying on the couch.
I stood against the wall.
I even sat upon the floor—
It wouldn't work at all.

He tried it this and that way
And Oh, how I did laugh—
To see how many ways he tried
To get my photograph!!

The Vertebral Column

By

PERRY RENAL and TIM PANIC

Flash! Dixon drops Dexedrine! It seems in a recent orthopenis class this chief patron of the Smith, Kline & French Product had given out of said drug and was caught by Dr. Peter B. with short-circuited Betz cells. The question was on the anatomy of the leg and the foot. Said Gloria when the dust had cleared, "I only made a B+ in Anatomy."

* * *

Daffinitions:

Chiropractor—One who kneads patients.

Osteopath—One who works his fingers to your bone.

Barium—What you do to dead people.

Pretzel—A biscuit with rickets.

Red Corpuscle—A Russian non-commissioned officer.

* * *

What's coming over this institution? Dr. Phillips has retired from teaching sophomore pathology. Dr. Bowles is announcing 'pop' quizzes, there is at last a decent Physical Diagnosis textbook, and Tom Weaver has a job.

* * *

The following are investigator's remarks found at the bottom of some poor relief applications:

1. "Man has diabetes and is insulated twice a day."

2. "Man recently had operation, but is able to hold any position he assumes."

3. "Woman says husband a paralytic . . . can't make ends meet."

* * *

Announcing the "Red Dog" Williams enterprises: AMA Journal subscriptions and parley cards cheap. Also making money hand over fist, working for Dr. Greenblatt.

New developments in Surgery: The W. T. Williams continuous-interrupted stitch for surgeons who can't make up their minds.

* * *

Six Juniors almost suffered cardiac embarrassment in Dr. DeVaughn's class when asked to discuss a subject of the same name. Hypertension filled the first row, while sighs of relief filled the others.

* * *

The other night one of your reporters had occasion to come upon an automobile accident where a woman was lying in the street. Since the spectacle presented nothing but confusion and excitement, your embryonic "doctor" quickly took command of the situation, and

remained with the injured woman until an ambulance arrived. The extent of injury being merely two broken legs with no apparent complications, this writer suffered no embarrassment, but had there been hemorrhage, shock, internal injuries, etc., the Medical College of Georgia might have been represented in a rather bad light.

Sure wish we had a short course in First Aid in the Freshman or Sophomore year.

THE PARTY LINE

By MARK TRAIL

Public Health men have dropped, for the moment, their intensive research on devising the ideal dimensions of the new Know Atomic Outhouse and have turned all-eyes on the disease plaguing the Med. College of Georgia. The incidence is damned high, and incidentally so were most of the cases.

We feel that the features of this disease would be a worthy addition to Anderson's Pathology.

Rushman's Syndrome

Occurrence: Seasonal, early September, to be exact, although an acute case was noted last spring at the Theta Barbecue.

History: Pt. complains of a progressive weakness, the onset being closely related to his return to Augusta, Ga., several days prior to the beginning of rush week. As the new freshman arrives and partying begins, these the affected individuals resort to various stimulants hoping that this might "keep them going 'till it's all over."

Head: Inspection of the face reveals flaccid paralysis of the muscles of facial expression. Jaw hangs loosely about the transylvoric line. Pt. resembles a cocker spaniel with leprosy.

Eyes: Eyes are quite hyperemic; you might even say blood shot, only the sclera, mind you. Lid lag is present, sometimes nystagmus. There is a collection of lacrimal fluid, beer foam, and blood under the lower lid.

Nose: 15% of cases observed had rhinophyma.

Mouth and Throat: Mucosa of mouth is absent in places, also fillings. Gin laryngitis present in 20 individuals.

Chest: Numerous pin point pledge pin puncture wounds were present on left anterior chest wall.

Abdomen: Tenderness in upper left quadrant probably related to acute alcoholic gastritis. Growls, howls, bowels, and towels frequent.

Extremities: Reflexes practically nil. Right hand of 98% of individuals examined was quite edematous, from hand shaking, not boxing, and back slapping. Pin point pledge pin puncture wounds were also present on many upper classmen's fingers.

Prognosis: Prognosis is good if patient maintains stiff upper lip and tight anal sphincter.

Public Health officials have just reported that this disease seems endemic in four main foci: 15th, Troupe St., Kings Way and John's Road. After about two weeks quarantine and no rushes this disease is guaranteed to be eliminated.

The first campus party is soon coming, so let's everybody turn out and get real fraternal. Follow the lead; "Raulston was here!"

MEDICINE BALL

By McSCRIBBLE

Football! Does anyone at the Medical College want to start the Inter-fraternity Touch Football season? Apparently so, because this department has been approached by persons, too numerous to mention, with the question, "When does Touch Football season start"? In answering that question we say that the season will start October 6, if nothing happens. This season the Cadaver is offering a new method of handling the football games. Here is our proposal.

1. The inter-fraternity touch football league should use the National Federation Rules for nine man teams with certain modifications to adapt them for playing at Allen Park Field.

2. The touch football league should use officials from the Augusta Trade District Officials Association. The expense would be \$9 per fraternity for the season. There will be two registered officials for each game.

3. Games will be played at Allen Park field 6 October, 12 October, and 20 October. If there is a tie it will be played off the 27 October. Games will begin at 2:30 p. m., with teams on the field by 2:15.

If this proposal is accepted by the Fraternities we will hold rules discussions and get all the details covered next week. The season would start with the first games being played Saturday, 2:30 p. m., October 6, at Allen Park Field.

Looking ahead to the basketball season, this department thinks that there should be a different arrangement about entrance into the City Basketball League. The fraternities

I Was Never a Communist With the FBI

By RED WILLIAMS

To be truthful, I was never with the FBI. Furthermore I would like to go on record as saying that the entire Cadaver Staff has taken the Anti-communist pledge. Rhodes Haverty has discontinued eating pumpkins sent him by his uncle, Whitaker Chambers. Jim Adams states that Communist parties couldn't be nearly as much fun as Medical School parties (the former has changed its stand for free love). Martha Goddard has ceased blushing, although there is considerable doubt as to whether it is connected with her anti-communist activities or not. Dave Smiley has discontinued using red ink. D. J. Lipham has foregone wearing her red dress of last year's Freshman skit fame, at least until Gromyko behaves himself. Sanford Shmerling states that even though he possess a scythe nose and a hammerhead, he has no love for Uncle Joe. One Freshman has refused to learn the origin and insertion of the Extensor Digitorum Communis. Harry Foster, new addition to the Cadaver Staff relates that he is no longer Secretary of International Relations Club of which Alger Hiss was President.

It is the Cadaver's hope that all students with red cell counts over 3,000,000 be expelled immediately. The wives club is now using un-ironed curtains in their homes. And last but not least, Yvonne Cordray has denounced all "isms" except, of course, eroticism.

do not have sufficient player personnel to compete with such teams as Camp Gordon, P. & P. Motors, etc. However, collectively the fraternities could have a very good Medical College Team. In the past there has been a team representing the Medical College and we believe if enough people are interested the College could have one this year. Those interested in having a Medical College Team should contact the Sports Editor about the arrangements to be made. Interfraternity basketball could then be played on a fraternity level on familiar lines of the football games. Then our basketball season would not be so long and interfere with our exams as it did last season.

PASSION—A feeling you feel when you feel you are going to feel a feeling you never felt before.

PREGNANCY—A woman all swelled up over her mate's handiwork.

COMPLICATIONS—A confused situation that makes it hard to get at the works. For example, a knock-kneed virgin.

CONTENTED ROOMMATES—Patrick Fitzmaurice and Maurice Fitzpatrick.

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PUBLIC NOTICE

Dr. Martha Goddard takes pleasure in announcing to her PUBLIC that she will continue her brilliant political career by running for the office of Garbage Commissioner of the Medical College of Georgia in the forthcoming election, to be held during the first exam week. "I will do my best," says Dr. Goddard, "To fulfill the exacting duties of this high, inspiring and demanding office. I will endeavor to remove all garbage from the surroundings of this our beautiful institution—picking up the litter of old bones under the windows of the Anatomy Lab, disposing of dead dogs for Dr. Gordon Kelly and Dr. Volpitto, and sweeping up kymograph karbon in the physiology department after Dr. Hamilton's sneezes. Any support which the student body can throw my way (no, not tomatoes) will be remembered with my undying affection. If elected, I propose to reward all my constituents with jobs around the school sweeping up the crap that is thrown out, of which I feel sure there will be an abundance.

YOUR SUPPORT AND INFLUENCE WILL BE APPRECIATED.

(This is a paid political advertisement).

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