

**FIFTY YEARS AGO, SEPTEMBER 1959**

Meyer Saklad, MD, Chief, Department of Anesthesiology, Rhode Island Hospital, praised the first Chief of Anesthesiology at the hospital. In "Albert H. Miller – Physician," Dr. Saklad explained: "Modern-day anesthesia is indebted to him." In particular, Dr. Miller insisted on examining patients before their operations, noting: "Some surgeons considered it a personal affront that the patient should require a physical examination before ...an operation." He recorded patients' ages and postoperative complications, so that he could classify patients as to operative risk.

Leo Vincent Hand, MD, the President-elect of the American Society of Anesthesiology, and an intern under Dr. Miller, contributed "Arthur H. Miller: The Art of Anesthesia." He noted Dr. Miller's lesson: "the proper practice was for the anesthesiologist to establish rapport with the patient."

The Journal printed "The Life of Arthur H. Miller: A Factual Account of Dr. Miller's Life Based on Data Furnished by his Wife, Mrs. Ada Holding Miller, to Dr. Alex Mr. Bur-

gess, Sr." Born in Maine, Dr. Miller graduated from Bates (1894), from the School of Science at Bowdoin (1895), and received a medical degree from Columbia (1898). At one point he headed departments of anesthesiology at Rhode Island, St Joseph, Memorial, Providence Lying-In, Butler, South Country, Truesdale, "and other" hospitals. The article highlighted his first major decision: "to do away with the old, closed-cone method of giving ether." He substituted an open cone he had invented: the patient didn't choke, and the procedure used less ether. The author reported: "The method is still used."

Bencil L. Schiff, MD, in "Kaposi's Sarcoma," discussed the unusual occurrence in the lower left ankle and leg of a 24 year-old man.

Richard B. Knowles, MD, in "Acute Massive Digitalis Intoxication," discussed a 33 year-old housewife whose symptoms cleared within four days after "therapy with pronestyl, potassium chloride and a low-carbohydrate diet."

**TWENTY-FIVE YEARS AGO, SEPTEMBER 1984**

Bruce C. Kelley, PhD, David M. Gute, PhD, Peter P. Potthoff, MS, and William J. Waters, PhD, all from the Rhode Island Department of Health, discussed "Health Promotion Activities at the Worksite: A Rhode Island Business Perspective." The Department of Health had conducted a sample survey of all private-sector firms (with 20 or more employees). The results were similar to those from a study of workplaces in California. Of 952 employers, results showed a positive correlation between size of firm and medical program. Many respondents cited positive benefits of health programs. More than 40% "believe that health promotion programs increase worker productivity."

Elizabeth Conklin tracked key legislative issues for the Rhode Island Medical Society. In "Rhode Island General Assembly Adjourns in May," she reported on those issues; e.g., medical malpractice, optometric drug use, physician assistants, living wills, mental health, worker's compensation, legal drinking age (raised to 21), emergency telephone system (\$5 million bond referendum to finance the 911 system was put on the ballot), and physician participation in insurance programs (law requires physicians to make known their Medicare assignment policy).

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