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Beacon Light: October 1951

St. Cloud Hospital

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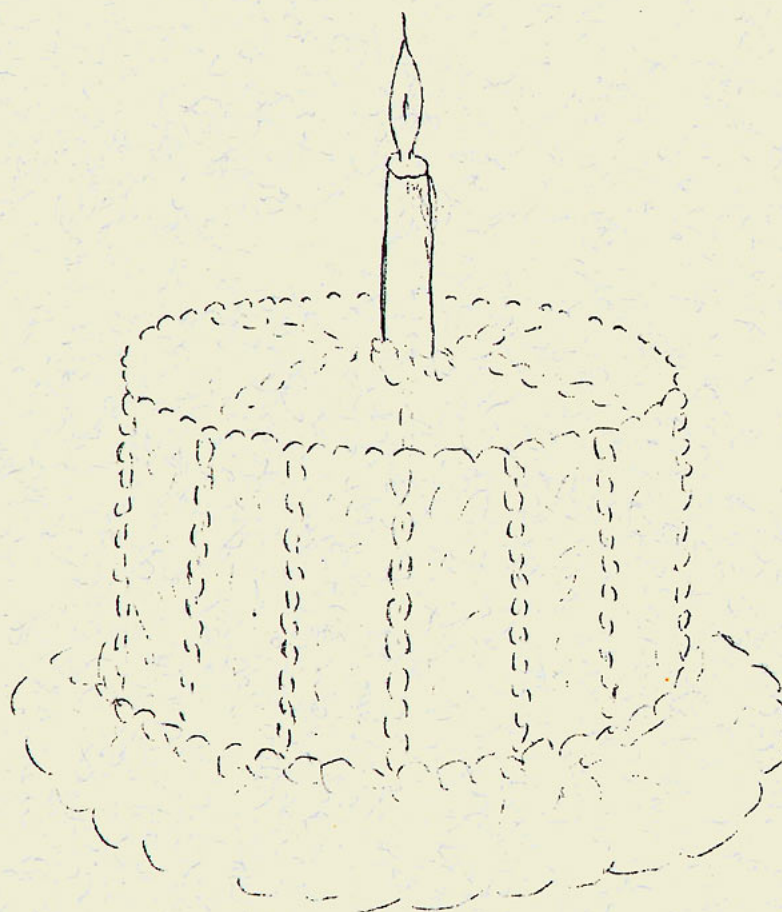
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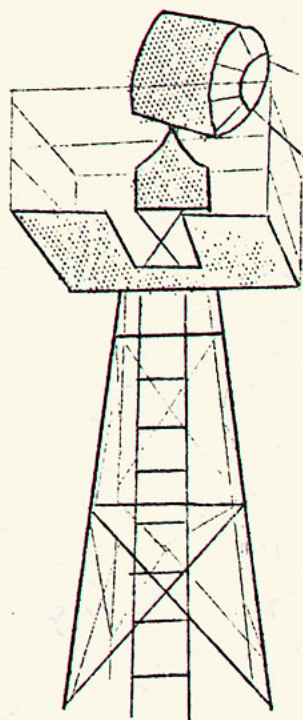
BEACON LIGHT

Volume II Number 2

ST. CLOUD HOSPITAL

October, 1951





Dear Readers:

Everybody likes to celebrate anniversaries. So it is with us now -- we are celebrating the first anniversary of the BEACON LIGHT. It appears that up to this time the script has been prepared almost exclusively by the editors -- we need assistant editors -- and lots of them!

We would like all of you, employees and friends, to feel free to contribute material to your paper. We like to hear your comments on how you like things that are done for you. We like to get your suggestions on how to improve our present facilities or how to expand what we have. We like to know if the service given is what it should be. We are eager to get news regarding employees as that is interesting to all our readers. If you like something we are doing for you, tell us. If you don't like it, tell us also.

As we begin our second year in the publication of the BEACON LIGHT, may God's grace be ever the "beacon" that signals us back to His friendship, and may His "light" ever guide us.

Sister Francis Xavier

WHAT MAKES A HOSPITAL CATHOLIC?

Because of the important place the Catholic hospital has in each community, it is necessary that we analyze the impact of religion on the community through the hospital. We must remember that our religion is not to be identified solely through the name of the hospital, nor through the religious habit of those who care for the sick, but by the Christ-like charity that is extended by those of us who work in the hospital to those in need.

If we in the world today have suffered from the inroads of the godless secularism, it is largely due to the fact that we have not been Catholic enough. We have, in many instances, done too much imitating of the world that is in our midst and not enough imitating of Christ. Consequently, we have forgotten our heritage, and the impact of our religion upon ourselves and upon others has amounted to little or nothing.

It is necessary in talking about the effect of religion on the community to make it clear what we mean when we speak of religion. We are not referring to classes on that subject or even to the religious exercises in the hospital chapel. No, we are thinking of the ideals, the habits, the attitudes that should be thoroughly Catholic in everything we do or say, such as for instance the importance of thinking, judging, and acting constantly and consistently in accord with the good reason God has given to us, with the supernatural help of the example and teaching of the Good Samaritan, Christ Himself.

It is a mistake to believe that we can make our hospital truly Catholic by merely furnishing it with crucifixes and holy pictures. IT MUST BEGIN IN THE HEARTS OF THOSE WHO WORK IN THE CATHOLIC HOSPITAL. If the ENGINEER, the BAKER, the LAUNDRY MAN, the KITCHEN HELP, the X-RAY PEOPLE, the LAB TECHNICIANS, the DOCTORS, the NURSES, the SISTERS, the CHAPLAIN -- if these people are not sanctified in the service to which they are

dedicated, there will be little or no impact of religion on the community, or among those with whom they work.

There was a time when the Catholic hospital stood apart from the community. That day has passed long ago. We are losing a great opportunity for the Church if our Catholic institutions today do not become a part of the community. RELIGION WILL BE INEFFECTIVE IF WE ARE INEFFECTIVE AS THE EXAMPLES OF THE RELIGION THAT WE BELIEVE IN. There will be no impact of religion on a community if those who pretend to be animated by the principles of that religion are passive. A truly Catholic hospital must have an environment that is truly Catholic. Besides a religious atmosphere, the personality, the character and example of every workman, every technician, every Sister, every nurse, and chaplain play an important part. THE HOSPITAL MUST REFLECT CHRISTIAN PRACTICES THAT ARE IN CONFORMITY WITH THE CHARITY, LOVE AND MERCY OF CHRIST. The manner in which we practice that charity indicates what we stand for -- the hospital, the people who work in the hospital, the religious order that sponsors the hospital, the priesthood of the chaplain, the Church.

When people come to our hospital they are usually in great trouble, and in most instances it will be the greatest trouble they have ever experienced in their lives. What is our attitude towards these people as we come in contact with them, as we render service to them? Are we conscious of the impression that our words or our attitude leaves on these people?

THE APOSTOLATE OF THE CATHOLIC HOSPITAL IS FAR-REACHING, THEN, IN EVERY COMMUNITY. It should not be a negative influence. It should be positive. We cannot advance the cause of the Church merely by being opposed to communism, to materialism, secularism, etc., but more than any-

thing else by living up to the principles of our religion. In the apostolate of hospital care we must teach the value of suffering for Christ. We must show the patient how to imitate Christ by the example of our religious lives. For that reason OUR ATTITUDES MUST BECOME CHRISTIAN ATTITUDES. We must become perfect in the service of the Master. We must show to the patients, to their friends and relatives, that our lives are centered on Christ's own words: "Seek first the kingdom of God and all things will be added to you." We must make clear to them that we believe that the work of saving souls is the GREATEST WORK that we have, and that we are cooperators in that work regardless of what we do. We must show them that we believe the sick are the dearest friends that Christ has on earth, and that we are the most privileged people because we serve Christ's dearest friends.

In our day there is a great danger that we may forget the ultimate aim of our lives. The patients quickly sense that. They know whether we are thoroughly Catholic ourselves and also whether we are following the Good Samaritan in the world. One of the saddest realities in life is to behold a Christian - a man, Christian in name only - who imitates everyone except Christ.

Father Riley

WE CANNOT PUBLISH NEWS
UNLESS WE KNOW IT!
PLEASE KEEP US INFORMED!



STATISTICS

from

DIETARY

DEPARTMENT

Average number of special diet trays served per meal:

1944	19.4
1945	27.2
1946	21.6
1947	24.4
1948	27.8
1949	31.3
1950	46.3

Total number of special diet trays served:

1948	30,534
1950	50,568

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PRAYER TO MARIA GORETTI

To increase our love of
OUR BLESSED MOTHER

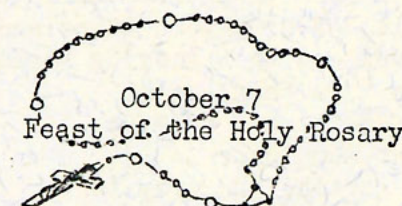
Dear Saint Mary Goretti! Once again I turn to you, and beg of you in the words of Our Holy Father, Pius XII, that "serenity of spirit and deep joy which is the heritage of those who are pure of heart." Help me to turn to our Blessed Lady, confident in the hope that she will take my hand as she did yours, and lead me on to Paradise, my heavenly country, there to enjoy with you and her the company of God the Father, Son and Holy Ghost for all Eternity. Amen.



HERE AT LAST!

Both Dr. Clark and Dr. Phares are especially happy that we now have a new cystoscopic table. We have waited a year and a half for this piece of equipment and can now really appreciate it. The table cost \$2335.00, it being one of the many pieces of hospital equipment that is very expensive and yet is made available because of its need. Often we hear people say that the charges of the operating room seem high. We must remember that the charge includes the services of many people and the use of equipment, linens, sponges, surgical silk, catgut, bandages, rubber gloves. Many of these materials cannot be used again. The room must be scrupulously clean. There are hours of work before the operation and hours of work after.

Emergency operations require that a staff be in readiness, or subject to call, at all hours of the day or night. Again, it is a case of the unseen services and costs.

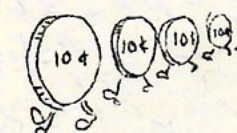


This feast is celebrated in veneration of Mary because of the protection which she grants to the Church through the Rosary. On October 7, 1571, the Christians won a decisive battle over the Turks at Lepanto.

In the early years of the Church the Christians did not have prayerbooks - they repeated over and over the few prayers they knew from memory. To keep track of the prayers, they used to pass small stones from one pocket to another - later on they took string, tied knots

NATIONAL FOUNDATION HELPS

Mrs. Gladys Nelson, whose home is at Wadena, has been with us as physical therapist from August 30 to October 1 to assist in treating polio patients. Mrs. Nelson comes to us through the National Foundation for Infantile Paralysis. Your local county chapter of the National Foundation - a volunteer group with locally elected officers - is responsible for foundation activities within its territory. Each county chapter retains one-half of its March of Dimes funds while the other 50% is sent to the National Pool. Soon your Stearns county chapter will sponsor a March of Dimes campaign. Since four out of every five polio patients need and receive direct March of Dimes help, won't you help this worthy cause?



MARCH of DIMES

in it and fingered the knots as they repeated their aspirations. The mechanics of the Rosary is an outgrowth of this practice. It is made up of the most beautiful prayers of the Church, the Our Father and the Hail Mary. Even when every other prayer seems to fail us - prayer with the rosary in hand still succeeds.

When we pray the Rosary we recall the whole life of Christ and His Blessed Mother. The joyful mysteries remind us especially of Christ's birth. The sorrowful mysteries recall the bitter sufferings and death of our Lord, and the glorious mysteries point out the glorification of Jesus and Mary.

DIETARY DEPARTMENT

"You may live without wine
You may live without books,
But civilized man cannot
Live without cooks".....If this
limerick has any bearing to everyday
life, it surely has significance when the
services of a hospital are considered,
for the dietary department is one of the
major ones.

The problem of feeding the patient
is a challenging one. The sick person
very often does not care to eat or wants
only specified items, some of which un-
fortunately are denied him. Who has
heard of the diabetic who does not crave
sweets? and yet those sweets act as
poison to him. Or the emaciated person
who must eat and yet cannot! These same
individuals are the ones who go out of
the hospital favoring it in so far that
their appetites have been satisfied with-
out those sweets, or that they can now
enjoy a full meal. And so with the
others. No matter how excellent the
nursing care, the food service that does
not satisfy the patient will long be
remembered.

The whims and tastes of the people
do not control the menu. Proper diet
can sometimes be as effective a tool as
drugs, and in some cases can do a job
medicines cannot. St. Cloud Hospital,
fully conscious of the import of proper
nutrition, has in its dietary department
three full-time dietitians whose concern
centers about the nutritional welfare of
others.



In the kitchen, staffed by
a supervisor, SISTER HILDE-
BRAND, and two chefs, JEROME
KNUESEL and CLYDE STOFFEL,
and 13 full-time workers,
the menu is prepared for the
entire hospital. When one
considers that during one
month 930 dozen eggs, 1000
pounds of butter and almost
a ton of beef were used, one need not
stretch his imagination very far to

comprehend the amount of work which
must have been accomplished to give
those items the shape, form and flavor
that folks will enjoy.

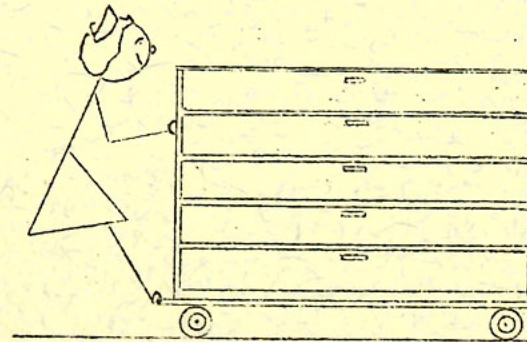
The institutional kitchen is not
only larger than a home kitchen but
it differs also in other aspects.
Kettles, ovens, and machines are scaled
in size to quantity preparation. Cook-
ing kettles are of a size that a care-
less or inattentive worker could be
fatally burned. Meats with bone are
portioned to sizable servings by the
use of an electric saw; others are cut
to standard servings on a slicer.
Potatoes are pared by a machine by
being thrown against a carborundrum
surface by which the skins are rubbed
off. (If the workers neglects to time
the operation, there may be very little
left of the original potato.) But
the pared potatoes need to be "de-eyed"
by hand. Girls accustomed to seeing
their mothers add a pinch of salt gasp
to see whole cupfuls added here. A
teaspoon is used in the kitchen only
for tasting.

At specified times during the day,
food carts are taken from their storage
places, loaded with menu items and sent
by dumb waiters to 8 serving stations.

The trays have there been
readied for the hot food so
that there should be no
delay in getting the tray to
the patient. There is
little justification for
obtaining high quality
raw food and expert pro-
duction, if the patient
gets it cold and un-
palatable or served on
grimy plates or
messy trays. It
is highly important
that each and everyone in line, whether
it be the potato girl, the dishwasher,
the server or the nurse who carries the
tray, that EVERYONE be conscious that
his or her part is essential and an
important one for the patient.



Individuals needing special diet
consideration are brought to the
attention of the therapeutic dietitians,
MRS. JEROME STRACK and DOROTHY SULLIVAN,
who together with the doctor form a
team to speed the recovery of the patient.
There is an ever-increasing interest in

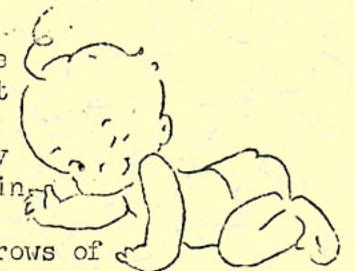


diet therapy. During 1948 an average
of 27.8 trays per meal were served from
the Diet Kitchen whereas only 2 years
later the count had increased to 46.3 -
an increase of 60%. The patient who is
on a diet of long dura-
tion has an educational
program planned for
him so that his hospital
stay will carry bene-
fits for a longer time.
During 1950, 290 diet
instructions were given.
Fifty-nine were given
to diabetics who require
2, or 3, or even more, consultations
to be sure they are letter perfect in
their understanding. Others commonly re-
quested were gall bladder, ulcer, and
low sodium diet instructions.



The nutrition of the patient is not
the only concern of the dietitian. The
student nurse during her Special Diet
Kitchen service is taught the principles
of nutrition, how the special diet is a
modification of the normal well-balanced
one, the psychological importance of
serving a neat, attractive tray, and the
approach to use in visiting and in-
structing the patient.

The babies are
not forgotten - not
one whit!! Each
morning the orderly
hustle and bustle in
the Formula room
with the rows and rows of
bottles proves that each
baby is considered an individual and
not just ANOTHER baby.



The dietary service is important
to the patient, but what is it to those
who care for the patient?? The line
to the Cafeteria at
opening time and con-
tinuing on during serving
hours (ssh! and after
too!) indicates that the
worker needs sustenance
too. More than 20,000 persons are
served during the month. It seems
that the coffee pot is always on!



All in all, the food service in
a hospital is a complex business beset
with many challenging and time- and
energy-consuming problems. (Just ask
SISTER GLENORE, chief dietitian in
charge of the department.) The dietary
department of your hospital keeps
striving toward a two-fold goal: the
serving of palatable nutritious food to
the patient according to his needs, and
the offering of equally nutritious and
palatable food to the personnel. An
attempt is made to keep the cost as
low as possible for the patient as
well as for the employee with satis-
faction to everyone.

The individual worker in the
dietary department may seem lost in
the detail of her task; but in doing
her work well, she performs one of
the corporal works of mercy. She helps
feed the hungry and in this way she par-
ticipates in the great Christian work
of caring for the sick.

St. Cloud Predicts 22 - or 23 Projects?

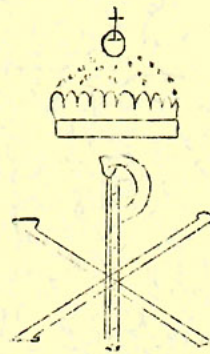
Last month the St. Paul Sunday Pioneer Press carried an article by Don Spavin in which they looked ahead to the year 2000 and listed things that the Chamber of Commerce hoped would be done and things that must be done, the number amounting to 22.

If you read it, you no doubt noticed that St. Cloud Hospital was not listed at all. No doubt this was an oversight, for surely they couldn't miss us all, since there are between 700 and 800 people here in this building, over 500 people on the staff and between 250 and 300 patients.

They did mention the existence of the School of Nursing. Again we feel sure that they did not know of our anticipated plans of expansion. However, we want all of our employees to know of our plans. We are eligible for federal funds in the completion of our Nurses' Home. The plan is to add four stories to the present building and to build out one wing (basement and first floor) at the north end of the building, extending west. This project is estimated at \$600,000, the government paying 45%. The original plan had included another wing consisting of an auditorium and a recreation room. This was abandoned because of the increased cost in labor and materials. If the present plans materialize, bids are to be let in March, 1952. If you know of any way we can raise \$300,000, please contact us.



October 30 Feast of Christ the King



On the last Sunday of October we celebrate the feast of Christ the King, which was instituted by Pope Pius XI during the Jubilee Year 1925.

Christ does not wish to rule like other kings of this world, over lands and provinces, with the sword and the power of arms. His is a spiritual and supernatural rule. He wishes to rule over our reason, our will and our heart. The words of the psalmist appear to have been spoken for our own time:

"Why have the Gentiles raged and the people devised vain things?

The kings of the earth stood up, and the princes met together against the Lord, and against his Christ.

Let us break their bands asunder: and let us cast away their yoke from us."

Great sections of the modern world have become godless. Kings and rulers in great part acknowledge no spiritual realm above themselves. Wherever we are and whatever be the times, let US faithfully serve Christ, our King!



October 18: Feast of St. Luke

This day is of special importance to us in our hospital work for St. Luke is the patron of physicians. He is more widely known as the author of one of the Gospels. He is symbolized by the head of an ox because in his Gospel he stressed Christ as the Priest, and the ox has been considered a sacrificial victim.

ST. LUKE, PRAY FOR US.

SCHOOL OF NURSING

With the matriculation of this large class of student nurses, we are reminded of the aspirations and ideals which should motivate, not only the student nurses, but all nurses, and all hospital personnel. We might say that we can glean from this occasion a double incentive, the first being one of self-betterment, one of rejuvenation.

These young girls are filled with the exuberance of youth; an exuberance which we might well imbibe. In their zeal they strive for the summit. It is well for all of us at times to recall the hopes and ideals of our own youth, to renew our intention of reaching the goal we have set out for. We are apt to grow old in spirit -- an old age which is neither graceful nor becoming.

The second incentive is the application of the first. It is the duty of all personnel to assist in the instruction of new members. The mystery of the Mystical Body of Christ can very well be applied to our institution. It exists through our unity. We must function corporately -- as ONE. By cooperation, all progress; by dissention, all suffer.

Yes, remember 1911? That was the year that the seed was planted from which would spring the vine -- the vine which has stretched out its branches and embraced humanity in the sick. The spirit of Christ, of the Mystical union of all men in Christ, has touched all with whom we have come in contact. Our patients are our chief concern. They must be our chief ambassadors also. Our contact with them should make them better Christians so that they in turn show Christ to others after they have returned to normal living.

All personnel share in this spreading of the good life. We could no more function without heat and light supplied by the boiler room, or clean environment maintained by the house-keeping personnel, than we could without doctors or nurses. We function as ONE -- and each one's part is important.

We might well look to our beacon-light for inspiration. A single shaft of light, it pierces the darkness night after night. It fails only if the driving force which gives it energy fails. So it is with us. By our faith, hope and love we pierce the darkness which covers the world today. We fail to exemplify our Christian principles only if we allow our driving Force to become depleted, the driving Force which is Christ Himself.

As ONE we welcome the new students into our house of Christ's beloved sick. United, we seek together everlasting unity in God.

*** **

1951 ENROLLMENT

Freshmen	61
Juniors	41
Seniors	<u>41</u>
	143

COMPARATIVE ENROLLMENT

1911	13
1921	32
1931	52
1941	79
1951	143

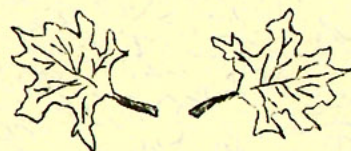
PERSONALS

TO ST. BENEDICT'S

On September 12th, three members of our staff entered the Scholasticate at the Convent of St. Benedict: DONNA KUEBELBECK, one of our student nurses; MARY LOU SAUER, graduate nurse from our own school, who had been working in the nursery for the past year; and JOYCE FLAHERTY, graduate nurse from St. Benedict's School of Nursing, Ogden, Utah, who had been working on 4 North the past summer.

Pray to Mary that she be their strength and guide in their new vocation!

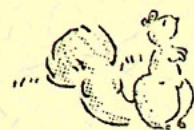
.....and, during the past summer four young ladies who formerly belonged to our hospital family entered the Novitiate of the Convent of St. Benedict. They are: ADELLA JOHNSON, now Sister Mathias (daughter of Nick Johnson, elevator operator here); MARY KRIPPNER, now Sister Rachel; BETTY MAE BISCHOF, now Sister Loraine; and MARY ANN HENN, (student nurse), now Sister Maurus!



SISTER CAMILLE is now attending classes at the College of St. Benedict. SISTER MICHAEL is replacing her as supervisor of the clinical laboratory. EILEEN ROERING is now convalescing from the measles. She hopes to be back to work very soon



KAY McENROE graduated from the School of Medical Technology the sixteenth of September. She is continuing on as a member on the staff of the clinical laboratory..... DR. ROBERT BRIMI is now in Knoxville, Tennessee, in the Department of Internal Medicine associated with the Acuff Clinic



The four recent graduates of the School of X-Ray Technology have successfully passed their National Exams and may add R.T. to their name.....

KATHLEEN FLYNN is working at Our Lady of Mercy Hospital at Fort Dodge, Iowa; JEAN HINTGEN is working at the Dakota Clinic, Fargo, North Dakota; IRENE SAUER and CLARE BUSCHEN are employed here at our hospital.....

FATHER MINETTE'S ADDRESS:

(Ch) Major James J. Minette 0554366
Hq. 9th Inf. Regiment
APO 248, c/o Postmaster
San Francisco, California

LEAVE FOR ARGENTINA

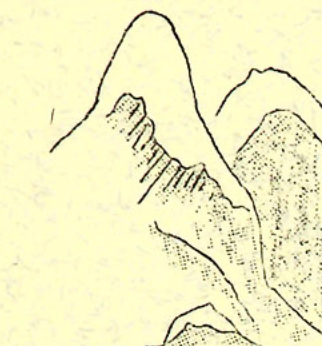
Sister Inez, teacher of psychology in the St. Cloud Hospital School of Nursing, left for Argentina several weeks ago to complete her study on the Araucanian Indians. Sister Inez was accompanied by Miss Margaret Mondloch, a graduate nurse from our own school. The two expect to be gone for about nine months. They made a similar expedition to Chile several years ago. They both ask for our prayers that they may have a safe and worthwhile trip.

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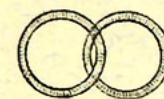
VISIT

TO

OGDEN



HENRY LUTGEN spent several days at St. Benedict's Hospital in Ogden, Utah. Henry's sister, Sister Philomena, is in charge of the main kitchen there. Henry can't decide if the West is nicer than Minnesota!!



CONGRATULATIONS to the following who were married during September:

VIOLA ROBERTS to Gerald Barthelemy;
LUCILLE HOPPE to Herbert Meyer;
GLORIANNE HOFMANN to Richard Hyneman.

NEW ARRIVALS



Girls to:

MRS. EDWARD PORNOLL (Mary Lee Flory)
MRS. EDMUND SAND (Bernadette Otto)

Boys to:

MRS. DANIEL MOLINE (Ruth Jacobs)
MRS. CLIFFORD KNIER (Theresa Bronson Schenkel)
MRS. DUFFLETT DANE (Virginia Caven)
and to MRS. LEO CROTEAU and MRS. MATHEW HALL.

Congratulations to all our new mothers!



SMILING CHERUBS??

What do we think of when we try to visualize an angel? A tiny cherub with a chubby face? and dimpled cheeks? Very often we find that idea depicted in angels. Yet, what are angels? They are beings, superior to man in power and intelligence. And yet we picture them as tiny cherubs. Why not think of them as strong warriors who can protect us? At the moment of our birth we are given a guardian angel to watch over us. How many times doesn't that angel keep us from harm in our childhood days? Do we no longer need such protection as we grow into adolescence and adulthood? Indeed, we do!! October 2nd is the feast of our Guardian Angels. In spirit we can all say:

"Angel of God, my guardian dear,
To whom His love commits me here,
Ever this day be at my side,
To light, to guard, to rule and guide."

St. Raphael, not a guardian angel but one of higher rank, an archangel, is a special patron of the sick. Let us ask him on his feast, October 24th, to help all sick, especially those in our care.



ALL EMPLOYEES

If you haven't had your chest x-ray yet, please attend to this as soon as possible. This service is free to all employees as part of the hospital's Personnel Health Program.