

Tingley comments on Health Center

Dear Editor:

Out of concern for the feelings of the students who attend the Student Health Center; out of concern for parents of students; and out of a genuine respect for the staff at the Health Centre; I feel I must respond to the letter written by Ruth, Carol, and Arlene, which appeared in the 3 Nov. 78 issue of The Brunswickan.

There are many feelings and issues raised which deserve comment.

1. About our service
Each weekday, between 50 to 80 students come to our Health Center. Those with appointments (35 per cent) see the doctor. Those who do not have an appointment (65 per cent) see the nurse first. Based on the symptoms and feelings of the student, and observations made by the nurse, the "drop-in" patient is then (a) given appropriate advice, (b) given an appointment later, or (c) seen by the doctor.

In order to try to be on time with the "booked" patients, we schedule several blank appointment times to accommodate "drop-in" patients who need to be seen right away.
During evenings (until 11 p.m.) and on weekends (from 10 a.m. until 6 p.m.) a nurse is on duty and a doctor on call to handle urgent cases.
This is the best approach we can think of to meet the demand for service in a situation where it is impossible (and indeed unnecessary) for the doctor to see every student who comes to our center.

2. About our philosophy
a) We strive to adhere to a conservative approach to medical problems, using as little medication as possible.

b) Preventive medicine is important to us. Much of our health teaching occurs when the doctor is seeing the patient in his office. In addition, we have a health education co-ordinator (nurse) who has organized many discussions and presentations (upon request) in the residences and elsewhere.

c) We are aware of the importance of the emotional aspect of medical illness. Many (if not most) medical problems have accompanying worry, fear, frustration or anxiety. We are not always successful in identifying nor alleviating these feelings, resulting in unsatisfied patients. Hopefully, they will come back to talk.
3. About the health care system
Since medicare was introduced in Canada (1970) several changes have occurred in the health care system. The two most obvious changes are that some patients go much more often, and some much earlier, to see the doctor. In fact, some patients arrive so early in their illness, that it is impossible to make a definite diagnosis on the first visit.
It becomes the patient's responsibility to return for reassessment should the symptoms change significantly, worsen, or persist.
It is the doctor's responsibility to have "a high index of suspicion"

for various serious illness and injuries.
Early diagnosis is not necessary (nor is it possible) for many medical problems. Much more important is a good and continuing communication between the patient and the health professional.
4. About the letter of student nurses Ruth, Carol, and Arlene . . .
a) It's O.K. to question a doctor's approach to a problem. In fact, many nurses experience periods of disillusionment with the medical profession. These feelings can be resolved by sharing them with the appropriate individuals.
b) It's O.K. to question the role of the nurse in initial assessment of the patient. However, as 3rd and 4th year student nurses, you must realize that the UNB School of Nursing strongly supports this concept.

the situation. When necessary, you could come over the health center and talk to the doctor to reassure yourself; then you could go back to the patient and pass on the information and reassurance.

d) The most important aspect of your letter involves the matter of professional ethics. Is it fair to publicly accuse a doctor or a health service as being negligent without at least communicating with the accused? I cannot believe you fully understand the implications of what you have done. After all, you had the courage to identify yourselves.

Why don't you come over and talk about the feelings that made you write this letter? Maybe we all would benefit.

Sincerely,
R. Tingley, M.D.
Director, Student Health Center

c) It's O.K. for student nurses to help their friends understand their illness and deal with their feelings; but first, you, the student nurse, must feel comfortable with

the situation. When necessary, you could come over the health center and talk to the doctor to reassure yourself; then you could go back to the patient and pass on the information and reassurance.

d) The most important aspect of your letter involves the matter of professional ethics. Is it fair to publicly accuse a doctor or a health service as being negligent without at least communicating with the accused? I cannot believe you fully understand the implications of what you have done. After all, you had the courage to identify yourselves.

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Unions: (continued)

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can only effect a change for the better in the way power is exercised at UNB. The faculty, after all, is in more direct contact with us than the administration, and in large part our concerns about UNB are identical (i.e. the quality of education here). The fact that the education never tackled this issue is, to my mind, a disservice to the students it seeks to inform.
The statement that a faculty union would weaken the position of students vis-a-vis the administration seems to me to be looking for a scapegoat. As Ms. Murphy seemed to show in her "Mugwump" last week, our faults are in ourselves, not our stars. Students must put their own union in order before we come down on profs. for doing the same thing we should be doing. Again, I stress, that increased power for faculty and students in relation to the administration can only be good for us.

In regards to the comments about adversary relations and strikes I agree with the editorial's concluding paragraph that the "drama" described is "somewhat overstated". I think the Bruns editorial is confusing things a bit here, but I think that I as a student in 1981 would be more happy to lose even a year because of a faculty strike than if UNB becomes a junior college which will force students to either get an inadequate education or go

elsewhere in mid-stream. Profs and students have common concern here, and after all, people don't go on strike for fun, but when things get really bad. The fact that faculty strikes are big news events point out that this is true.
Not to sound like too much of a Bruns heretic, I do agree that the one union plan would be best for all concerned. But I don't necessarily see three unions as being any more disruptive than one. Profs aren't going to want to

shut the campus down all year in a series of strikes. Also if, say the Engineering and foresters faculty had a big enough grievance to go on strike by themselves, I think that even in one union this sizeable grievance could also lead to a strike.
Anyway, I just wanted to sound-off, to raise some issues I think students should be considering. Sorry to find myself an "outsider on the inside" on this.
Thanks,
Gerry Laskey

More about Health

Dear Editor:

In reference to the "letter to the Editor" in the Bruns Nov. 3, 1978 "Negligent Health Services", we would like to make a reply.

We also feel that the Student Health Centre is an essential service and vitally important to the health of the student body. It is our contention, however, that a letter such as was published last Friday could only ultimately harm, rather than improve, the campus health situation, as the authors had hoped.

Such criticism will undermine confidence in the doctors and nurses more effectively than any seeming assessment or diagnostic oversight. The lack of confidence that such an article might precipitate could mean a student's

avoidance of health care when it was needed.
In our experience we have received good care at the centre, and been referred to appropriate sources when indicated. Perhaps oversights happen but doctors and nurses are people too, and people do make mistakes now and then. Without substantial facts. To call any behavior 'negligent' is a serious accusation and constitutes libel. It is also a serious breach of professional ethics and such a statement should have been considered more carefully.
Admittedly, there is room for improvement in any situation but negative criticism without any constructive comment has never been known to help.

Also Concerned Students

Winter Carnival Committee (79)
General Meeting
Room 6 SUB
Wed. Nov.15/78
7:00pm

Attention Graduates
All graduates who wish to have their grad pictures included in the '78 yearbook must have their pictures taken by Dec 31
This deadline applies to all faculties except Education Students who have their deadline extended to Jan 31/79.

Health Center revisited

Dear Editor:

I am writing this letter in regard to the complaints made by Ruth, Carol and Arlene about our Campus Health Center. I have been a student at UNB for four years and during that time I have had many occasions to call upon the staff of the Health Center. In every instance I have received prompt personal attention and expert advice for my problems.
Because the Health Center handles between 50 and 90 ailing students a day, I do not always expect to see a doctor. There are many simple problems that do not require extensive medical attention and the nurses at the Center are fully capable of handling them. But it has been my experience that any serious problem is immediately referred to one of the doctors on duty and handled in the best possible way.

Perhaps we should stop for a Barbara Hughes

moment to imagine what our situation would be if this service were not available. Few Fredericton area doctors are taking new patients and none are so conveniently located. The services of a doctor on call would be totally inadequate for the large number of students involved. And anyone who has had to take an irritating but minor health problem to a busy public hospital's emergency service will realize the frustration that can entail.
The medical personnel at the Student Health Center are not only competent and well qualified to do their job — they are also genuinely interested in the well being of the individual students on this campus. After the slap in the face they received last week, we can only hope that they will realize they were hearing a valuable minority and not the satisfied majority.



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