

NOVA SCOTIA SANATORIUM

VOL. 50

DECEMBER 1969

No. 11

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HEALTH RAYS

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NOVA SCOTIA SANATORIUM

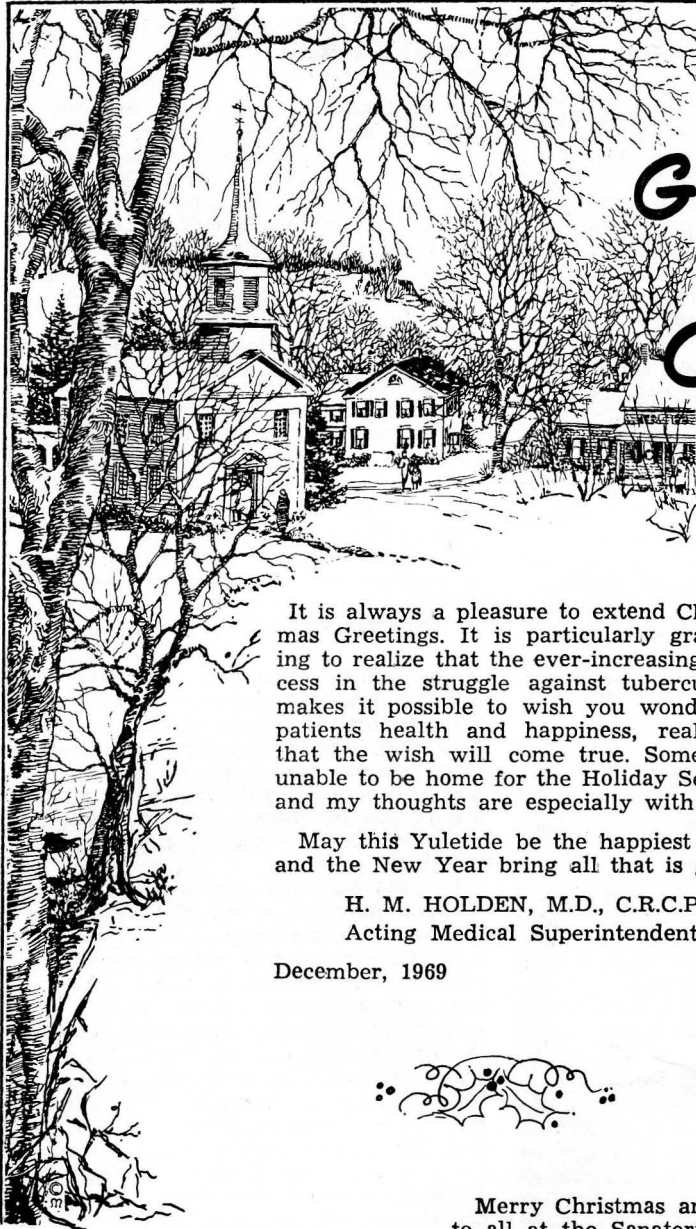
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With all Good Wishes for Christmas

It is always a pleasure to extend Christmas Greetings. It is particularly gratifying to realize that the ever-increasing success in the struggle against tuberculosis makes it possible to wish you wonderful patients health and happiness, realizing that the wish will come true. Some are unable to be home for the Holiday Season and my thoughts are especially with you.

May this Yuletide be the happiest ever and the New Year bring all that is good.

H. M. HOLDEN, M.D., C.R.C.P.(C),
Acting Medical Superintendent

December, 1969



Merry Christmas and Happy New Year
to all at the Sanatorium.

May the holiday season bring you
peace of mind and the new year bring you
restoration of health.

Sincerely,

RICHARD A. DONAHOE
Minister of Public Health

Halifax, Nova Scotia
November 28, 1969

The Story of the Christmas Seal

This is of special significance to us this year at the Sanatorium because we have recently received an outstanding collection of Christmas seals from the estate of the late Dr. C. A. Herbin.

Dr. Herbin, a well-known philatelist and coin collector, made his collection of seals within a five-year period. He had contacts in eighty countries and the collection was regarded as one of the most complete in existence.

Dr. Herbin practiced medicine in Lockport and Arichat, where he spent ten years preceding his retirement to Kentville just over a year ago. Jack Herbin, son of the late Dr. Herbin, reported that his father had been given excellent cooperation by all of the foreign tuberculosis associations contacted by him.

Most of us had not been aware that Christmas seals were collectors' items until we viewed this collection. Since then we have asked questions and have consulted journals and find that Green's Catalogue of Tuberculosis Seals of the World shows that a considerable value is placed upon the seals of former years. Some examples are the Saint John Association for the Prevention of Tuberculosis seals of 1911, the list price of which is now \$30. Seals of similar age, issued by the Halifax County Anti-Tuberculosis League, the British Columbia Anti-Tuberculosis Society and the London Free Sanatorium are now valued at \$25.00 each.

It will be most interesting to have someone place an estimated value on our collection at some time.

The history of Christmas seals dates from 1903, the country of origin being Denmark. The story goes that a postman named Einar Holboell was working late in a post office on the outskirts of Copenhagen. Pausing in his work of sorting Christmas mail he saw through the window two little waifs before they disappeared again into the swirling snow. It was then that the idea came to him—suppose that every letter or parcel carried an extra stamp, and the money from tens of thousands of such stamps went to help unfortunate children. The next day his fellow workers were enthusiastic about the idea. Realizing that there was not time to design and distribute seals for that Christmas they worked out the details in readiness for 1904. King Christian gave his full support and it was his suggestion that the first seals would have

Queen Louisa's picture as a sign that he and the queen fully endorsed the idea.

In 1904 the seals went on sale and the campaign was even more successful than the postmen had thought possible. Four million stamps were sold that year. The question then arose of how the money should be used. Which unfortunate children should be helped? It was decided that the children in most distress were the hundreds, perhaps thousands, who were crippled by tuberculosis of the bone and spine.

With the funds from the first two Christmas Seal Campaigns they started building two hospitals for treatment of tuberculous children. This was a turning point in the world history of this disease because it was the beginning of the movement to get ordinary citizens to take part in fighting an infectious disease, one which at that time was the leading cause of death, outstripping even wars and famines.

Denmark's neighbours, Norway and Sweden, were the first to see what a great power the people would be and the next year they offered Christmas Seals to their people, pointing out how in this way anyone could help. It was found that the people in their countries were also ready to take this way of fighting tuberculosis.

In 1907 the idea crossed the Atlantic. A little Sanatorium on the Brandywine River in Delaware was about to close for lack of three hundred dollars, sending the patients, all of whom were infectious, out among others where they would spread their disease. The idea horrified the doctors and one of them, Joseph P. Wales, appealed to his cousin, Emily Bissell, to try and think of something to raise three hundred dollars. Miss Bissell thought of a magazine article telling of the success of the Danish campaign. She decided to see if Americans would buy Christmas seals to keep the little Sanatorium from closing.

An artist friend helped her to design a seal—a simple wreath of holly in the brightest possible red. Two interested women gave her twenty dollars each to

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ward the cost and a friendly printer, Charles Storey, agreed to go ahead and trust that the rest of the cost would be forthcoming.

At first Miss Bissell's idea did not catch on. Officials who could have helped said they did not like linking Christmas to a dread disease. Postal authorities would not let postmen sell seals as they did in the Scandinavian countries. Then by chance, Miss Bissell told her story to a young newspaper columnist, Leigh Mitchell Hodges, who enthusiastically tossed a sheet of seals on his editor's desk saying, "Here's a way to wipe out tuberculosis. Just look at them—a penny a piece—within everyone's reach—think how they will carry the news of what people can do for themselves—what a slogan. 'Stamp out tuberculosis!'"

When the whole story was told the editor, Mr. VanValkenburg, said, "Tell Miss Bissell the **North American** is hers for the holidays. Drop everything else and put all of your time on this." This was exactly the type of backing that was required and the success of the Christmas seal was in this way assured.

In 1908 the news of the success of the Christmas seal campaign had reached Canada. Interested people in Toronto and Hamilton embarked on Christmas seal campaigns for the sake of struggling hospitals being built for tuberculosis patients. The old Toronto **Globe** came promptly to their aid. Early in December it began running a daily story on the front page giving news of the campaign. The column was bordered by holly so that readers could easily spot it. One day the story told how the children of fifty-eight Toronto schools had sold ten thousand Christmas seals. Another issue announced that out on the prairies a new paper, the **Regina Leader**, had written to say its staff would sell the seals and send the money back to the Sanatorium being built at Muskoka. The Toronto campaign brought in \$6,114.00.

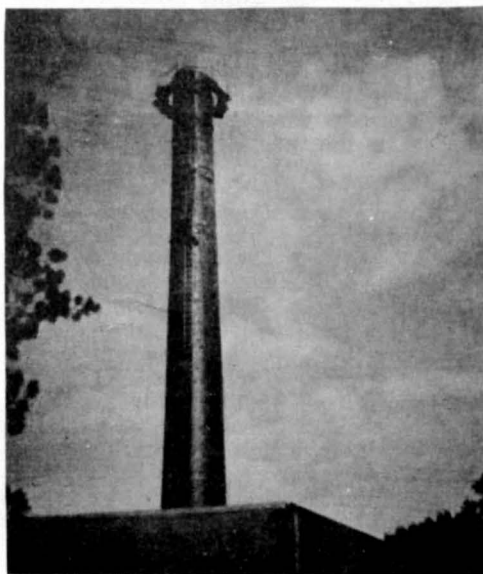
Year by year other cities across Canada tried the Christmas seal campaign as a means not only of raising money but of getting the general public aware that tu-

berculosis could be controlled. Finally, in 1927, it was agreed that the Christmas seal campaign was to be the official method for tuberculosis associations to appeal to the public for funds.

At first the money was used for the new and badly needed sanatoria. When these were established it became the rule that funds would be used for tuberculosis prevention. The seals have paid for millions of Canadians to have chest x-rays or tuberculin tests and in this way thousands of cases have been found before the disease spread to others.

In recent years the associations have been expanding their scope to include the other respiratory diseases: emphysema, bronchitis, asthma, pneumonia, and lung cancer. Christmas seal funds are now used for research into ways and means of preventing and treating these diseases and it is hoped that they will be as powerful an instrument against them as they have been against tuberculosis.

(See Photo, Page 13)



Above photo shows the Sanatorium 'stack' with the finishing touches on the recent retopping. It is 115 feet high and 5 feet in diameter at the top. Material, red radial brick.

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WHAT! Leaving So Soon?

DAVID D. FIELD, M.D.

Why patients leave the sanatorium against medical advice is often hard for the staff to understand. By staff I mean the medical, nursing, and social service staff. And this is a subject I'd like to discuss with each of you.

If, at the very beginning of your sanatorium stay, you will try to realize that tuberculosis cure means rest plus drugs and in some cases surgery; and that your body's response to this treatment determines the length of time to complete the cure your stay will be a much happier one, and you won't be so impatient to leave against your doctor's advice.

Let us analyze some of the reasons given for leaving. I think then that we can argue our case about leaving the hospital against medical advice more effectively.

To those who stay for a week or two and are ready to leave then because of impatience, let me say that you haven't given us a chance to do anything for you. After all, you are here because you have tuberculosis although you may feel perfectly well. If you don't like your room or your room-mate, speak up to your doctor, and reasonable changes will be made to satisfy you. Try to be happy in the thought that if you must have tuberculosis, you at least have it in a day and age when excellent sanatorium care, drug and surgical treatment are obtainable and extended to you.

The individuals who become homesick constitute a considerable number leaving against medical advice. Don't think we are so hardboiled that we can't appreciate your feelings. But we must try not to be too sentimental in taking and prescribing the cure. Look ahead when you'll return home well — not to returning home in your present sick state of false convalescence. Turn your attention to study, reading, radio, O.T. work, and later, if your condition should warrant it, you may be granted a short leave of absence.

One of the reasons for homesickness is that shortly after you enter, you set your own date for release—one month, three or six months, and then when the time is up you become restless and start feeling sorry for yourself. You talk yourself into leaving, actually knowing you are doing the wrong thing. How much wiser to stay and be discharged when the time is ripe, and with our good grace. Remember, tuberculosis doesn't heal in a few week's time.

There are two major reasons why the staff makes every effort to prevent your leaving. The first is that those patients leaving with a positive sputum constitute a definite hazard to those with whom they come in contact. Remember that someone gave tuberculosis to you because that someone had positive sputum. It does not make much difference whether you are persistently positive or only occasionally so. The hazard still remains. We know you tell us devoutly that you will be more than careful—you know how to take care of yourself. That your intentions are good we are aware, but even the most careful patient will cough, sneeze, and laugh unexpectedly, and fail to protect himself or those about him. Not only is positive sputum dangerous to others, but also to yourself. The main object in treatment of tuberculosis is to turn a positive case into a negative case.

The second big reason why we try to persuade you not to leave us against medical advice is because home curing does not compare in any way to sanatorium care. This has been proved to us over and over again. Repeatedly, you tell us how rigidly you will carry on your treatment—"just like here." That may be true for the first few weeks. Then, lo and behold! You find yourself occasionally skipping an afternoon rest period, then staying up just a little later at night. From then it's on to your first movie then church, then a party or two or three, until finally—yes, finally—you come back to the sanatorium to have the real cure. You have proved to yourself that it didn't pay, and now, if it is not too late, you are willing and glad to accept our treatment, before the results are disastrous.

Why gamble? Accept our decisions, even if they do mean you must remain in the hospital longer than you expected. Is it any wonder, knowing from experience and knowledge drawn from hundreds, yes, thousands, of cases, that we don't wish you to leave against our advice? When we try to convince you to remain, it's for your own good, not ours.

You've heard that statement often, but it still remains true. If you will give more thought to the disastrous consequences and less to your immediate unhappiness, you will remain here with us until we give you your walking papers and then walk out with your "diploma" and a new lease on life. —Town Crier

Everybody Needs a Hobby

Thomas A. Edison once said, "I am long on ideas but short on time." Yes, it is very true that just small ideas and hobbies lots of times lead to big business.

It may be that your next door neighbour has had an interesting hobby—but do you know about it? Many hobbies not only serve as interesting diversions but also may become highly developed businesses. Like Jack's beanstalk, they start in a very small way—any then they grow!

No matter how young or how old, it's never too late to start a hobby. But when you start one, don't think that it must develop into financial dividends; some hobbies are worthless so far as monetary gain is concerned, but they are fun and they do help to pass the time. Many a lady has won prizes on crocheting, cake baking, flower arranging or solving crossword puzzles. It has been said that a boy learned a great deal of geography by collecting matchbooks. Collecting stamps and coins are also educational teachers. Some hobbies, such as saving paper clippings, may many times be sources of information—to settle arguments about happenings long ago, if for nothing else. And proving a point is always satisfying! These are but a few ideas . . . the possibilities are endless.

Everyone should have a hobby of some kind, whether it be large or small. On a rainy day, stormy or shut-in days, it's always nice for a child or younger person to have a hobby to turn to, while for an older person it may well help to while away what otherwise might be many lonely hours. For anyone, a hobby is relaxing—and at the same time stimulating.

A man was walking across a field one day, when all of a sudden he fell into a deep hole. It was dark down there, and he was bruised and sore from the fall. He yelled for help. Nobody came and he yelled again—and again. Between yells he felt around him and found some hard round objects in the earth. He couldn't see them, but they felt like coins. While he called for help, he picked the objects up and put them in his pockets. Finally someone heard his cries and came with a rope to pull him out. When he reached the surface he found that his pockets were filled with gold pieces!

That man is like a person who gets tuberculosis. The tuberculous patient wants to get out of the hospital, and who could blame him? But while he is there, waiting to get well, he can fill his pockets

with gold. This is no joke. There is gold all around him. It is called education. He has the time to get more education than he had when he came into the hospital. Suppose he came in with an eighth grade education. With just a little effort he can walk out of the hospital with a high school diploma. Or, if he had a fifth grade education, he can raise it to an eighth grade level. The difference will help him to get a better job and to make more money when he leaves the hospital.

Your hospital has teachers, librarians and a well-stocked library to help you get more education while you are here. Why not let them fill your pockets with gold?

(The Firland Magazine)

Cigarette Filters

Some cigarette filters don't work.

That's the studied opinion of Dr. George E. Moore, a noted cancer authority and director of Roswell Park Memorial Institute, who said Sunday that research showed that some filtered cigarettes pass more of the medically harmful elements in smoke than nonfilters of the same brand.

Moore commented on a study carried out at Roswell Park, the state's cancer research and treatment facility, of the amount of tar and nicotine passed on to the smoker by nine brands of cigarettes.

The researchers said it was up to the cigarette industry to "accept its responsibility for protecting the smoker's health.

"The current results destroy the myth that all filters are helping to protect the smokers against the deadly effects of cigarette smoking," Moore said.

—Contact

The mistress was showing her new maid around the house. As they came to the dining room the mistress said, "This dining table goes back to Louis the Fourteenth."

"That's nothing," replied the new maid, "my whole living room set goes back to Sears the fifteenth."

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Question Box

By J. J. Quinlan, M.D.



Q. What are pulmonary function tests?

A. The purpose of pulmonary function tests is to determine whether the lungs are performing properly their task of ensuring that oxygen reaches the blood stream and that carbon dioxide is eliminated from the blood. For this to occur,

atmospheric air must be brought in to the deepest recesses of the lung and, when the oxygen-carbon dioxide exchange has taken place, expelled from the lung. At the same time, oxygen from the inspired air must pass across the membrane of the air sacs and the wall of small blood vessels into the blood and carbon dioxide simultaneously must go the other way. This entire process is called respiration, and pulmonary function tests will therefore measure, first of all, how effectively the body is moving air in and out of the lungs and, secondly, whether or not there is any interference with the passage of oxygen and carbon dioxide between the air sacs of the lung and the blood stream. The movement of air in and out of the lungs is measured by the patient performing several inhaling and exhaling tests and the transport of gases to and from the blood is estimated by obtaining a sample of arterial blood, usually by inserting a needle into an artery in the arm, and then calculating the partial pressures of oxygen and carbon dioxide in this blood sample.

Q. Is there any particular part of the day when rest is more beneficial than other times?

A. It goes without saying that a good night's sleep is of particular benefit to the individual and, for the person who should get additional rest, the middle of the day is the most rewarding. The fathers of sanatorium treatment who prescribed a quiet rest period shortly after the lunch hour knew whereof they spoke.

Q. Why is the tuberculin test given to persons who are known to have tuberculosis?

A. In such cases, the tuberculin test is carried out for somewhat the same reason that the sedimentation rate of the blood is measured. The tuberculin test gives the doctor an indication as to how aller-

gic the patient is to the products of the tubercle bacillus and at the same time tells him whether this allergy has changed since the previous test. I feel that this is of particular importance in these days of very effective drug therapy supplemented, when necessary, by pulmonary resection. In some cases, it is possible that the tubercle bacilli may be completely eliminated from the body. When this happens a previously positive tuberculin test will become negative. As long as the test is positive it means that living germs are still present in the body.

Q. What are air pockets and where are they located?

A. It is not quite clear as to what is meant by "air pockets" in the above question. Possibly, the reference is to the chest in which case the air may be pocketed in the pleural space or in a lung cyst. In the days when artificial pneumothorax was used for the treatment of tuberculosis, in some cases where the lung was mostly adherent to the chest wall the air given was totally confined in a small pocket in the pleural cavity, thus making the procedure ineffective. Artificial pneumothorax is not used today and such air pockets in the pleural space usually occur during the absorption of a spontaneous pneumothorax or following pulmonary resection. In the lung, certain cysts can contain air under pressure and probably are sometimes referred to as air pockets.

Q. How long after being pronounced an arrested case of tuberculosis would it be advisable for a woman to marry? If she should have children would it be likely to renew her trouble?

A. May I point out first of all that the term "arrested" is no longer used. It is assumed that the question refers to the case of the individual who has inactive tuberculosis. This, in turn, refers to the case of the patient who has undergone adequate treatment which must include effective drugs given for a sufficient length of time. If the tuberculosis is inactive, it is not necessary for the woman to wait any specific length of time, and there is no reason why she cannot have as many children as she desires. However, during pregnancy, she should be under the observation, not only of her obstetrician, but also the chest physician so that careful examination of the lungs may be carried out during the pregnancy and in the weeks following delivery.

Editorial Comment

December is a few days away as we write this and it is still difficult to get into the Christmas spirit. To most of us it doesn't seem like the Santa-and-reindeer season until the weather is more wintry — not that we motorists are that eager to have good sledding conditions.

However, lest you should think that we have forgotten the season, take heart—for we have been making up lists for old Santa and for the various church groups and tuberculosis associations. Must remember to ask old Santa for a crystal ball so that we may know who is to be here over Christmas, who will be discharged, or home on pass—as well as who will be the new admissions between now and Christmas. Of course we hope that everyone who wishes to be home will be able to go, but we know from past years that there will be a fair number remaining.

In our Rehab. workshop there is a bustle of activity and it is hard to keep up with the demand for handcraft materials. The two ladies say that they find it nigh impossible to instruct in hand-rafts because of the volume of goods being sold over the counter. They derive a certain satisfaction from seeing quality handcrafts turned out and much of this is lost in mass production. Ideal, would be a system of having beginners starting off together in classes so that they could learn each stage before going on to the next. However, when things are back to normal it may again be possible for the ladies to instruct on the wards, as well as in the workshop.

Along with our other activities we have been busy in getting Health Rays material ready. The November issue was a bit more complicated than usual and is late in reaching our readers. The December one will probably get caught in the pre-Christmas postal rush and for many may be equally late. For those of you on our mailing lists, please let us know of any changes in address. The post offices seldom re-address now and return the cover to us marked something like “undelivered due to incorrect address.”

We have been busy, too, in arranging a few pre-Christmas activities. First on the list is a variety show presented by the affiliating student nurses and scheduled for the Recreation Hall on December 4th. Next, there is a patients' party sponsored

by the Knights of Columbus for December 16th. On the 17th the Salvation Army will sing carols and deliver sunshine packages to the patients. On the 18th an Explorers group will sing carols and on the 19th and 20th two other groups are tentatively scheduled to sing carols. It is expected that we will be hearing from other groups as well and these activities will be written up in the January edition.

* * * * *

We wonder how many of you noticed in the daily paper Education Minister Gerald Doucet's report on the results of the first General Educational Development Test results. He reported that 157 people have already written these tests and that 138 will soon be receiving Grade XII equivalency certificates. Mr. Doucet expressed his pleasure with the first results of this program and said, “This reinforces our belief that many adults who did not finish high school have since acquired, through formal and informal educational experiences, educational maturity at the high school level and often far beyond.”

Of 83 who wrote in Halifax in late September '75 achieved the Grade XII level; 4 Grade XI; one Grade IX; and three failed to achieve the required standard.

These initial results have shown a very high percentage of successful candidates. It is hoped that any patients and staff at the Sanatorium and Point Edward Hospital who have been considering taking these tests will feel encouraged to make application. Applications may be obtained from one of the six regional offices of the Adult Education Division, located in Bridgetown, Halifax, Truro, Sydney, Yarmouth, and Antigonish.

* * * * *

All of us in the Rehab. Department, and all of us on the staff of the Health Rays magazine, wish to extend to all of our readers our very best wishes for the Christmas season. Our special good wishes go to the patients at the Sanatorium and at Point Edward Hospital. We know that everything possible will be done to make this a pleasant and memorable Christmas for those who will be remaining in hospital over the holiday season. To all of you, a very Merry Christmas!

Your Outlook on Life

"A person with a negative outlook on life is bad for himself and everyone with whom he associates"

BY DR. REX H. WILSON

Medical Director, The B. F. Goodrich Co., Akron, Ohio

Your outlook on life has a great deal to do with your health. A healthy person is cheerful and optimistic. Certain diseases, especially those involving the nervous system, seldom occur in a happy, aggressive individual. Stomach upsets and headaches are more common in the dour pessimistic person. The really sick patient who tries hard to get well, always has a better chance to do so.

The beginning of a New Year is an ideal time for everyone to conduct an evaluation of himself. Is your life dull and dreary; If so, why? Do you have a sense of well being? Do you look forward to each day? Resolve to make each day a pleasant profitable one. Become an optimist and have faith in yourself.

POSITIVE MENTAL HEALTH

Being healthy is to be free of disease at the moment. You are not really healthy if you drag yourself to work, feel sorry for yourself, and are a chronic complainer. You have an illness or you are mentally upset. A person with a negative outlook on life is bad for himself and everyone with whom he comes in contact. A cheerful person seldom has to take pills for minor ailments.

The attitude of a person plays an important part in his getting well. Some people have remarkable powers of recovery; others complain when they have very little, if anything, wrong with them. The healing process depends upon the skill of the physician and the "will" of the patient. If the patient wants to get well and has faith in himself that he can, he probably will. Some people feign illness as a means of getting rid of a vexing problem.

The human body has the power to combat disease. Your vitality can prevent or cure many illnesses. For example, your digestive system slows down when you become worried or anxious, and a stomach upset results. Nervous tension and frustration cannot be cured with medicine. The cause must be determined and corrected. Continuing frustration leads to severe illness.

Many people are too self-centred. Each ache and pain is a cause for worry. We live in a world that is full of reasons for

nervous irritation if we succumb to them. The only means of combating the stresses and strains of daily living is to rationalize them. A definite purpose in life, enjoyment of other people, being happy to be alive, and having faith in one's own ability to get along, are the ways we have to avoid nervous disability. Maintaining a proper outlook on life, along with maintaining good physical health, is our only means of survival.

The downcast person who believes no one cares, tries to compensate for his loneliness by over-smoking, over-eating and over-drinking. Self-indulgence is the escape mechanism for the pessimist. The alcoholic is trying to get away from his problems. Some people try to alleviate their tensions by smoking and eating. All they get is body deterioration and no solution to their problems. The happy healthy person does not require a crutch or an alibi.

Hard work and long hours never hurt anyone. People who amount to anything work hard and enjoy it. The successful person is in control of his emotions. Proper diet, adequate rest, regular exercise and an optimistic outlook on life is the prescription one should take for health and happiness. Sleep when you are tired, eat when you are hungry, and exercise for the sheer satisfaction of being able to do it. Do not waste your energy by getting angry for no good reason. But for just reason, allow yourself to get angry and upset. This is a normal healthy reaction. Keeping irritation pent up inside yourself is harmful.

KEY TO HAPPINESS

Do you enjoy being you? Is your life pleasant and worthwhile? Are you contributing something of yourself to others? Do you enjoy other people? Do they enjoy you? Do you have any real friends? If your answers are "yes," you are happy, healthy and successful. If your answers are "no," you have a problem and need to readjust your outlook on life.

To have faith is so wonderful. It produces happiness, contentment, and even miracles at times. All of the great miracles have been products of sincere faith.

(Continued on Page 9)

Nursing Notes

Mrs. Audrey Hansen, R.N., has returned from extended sick leave. We are pleased to have her back with us.

Mr. Allan McKinnon, C.N.A., is on sick leave. Our best wishes for a speedy recovery.

The affiliate student nurses will not be with us over the Christmas period. The next group will arrive January 7th, 1970.

Eight Student Nursing Assistants class '70A are presently on affiliation at the Payzant Memorial Hospital, Windsor.

A tea was held in the Nurses Residence for Mrs. Lilah Bird, C.N.A., who retired in November after ten years on the Nursing staff.

Miss Diane Redden, C.N.A., and Miss Jeanne Churney, C.N.A., Nurses Residence, entertained at a miscellaneous show-er for Miss Jane Harding, N.A., on November 11th. The room was tastefully decorated for the occasion and refreshments were served by Miss Redden and Miss Churney. We extend best wishes to Miss Harding who was married later in November.

YOUR OUTLOOK ON—

(Continued from Page 8)

Your outlook on life is really based upon the faith you have in yourself. So, this Christmas, give yourself the priceless gift of happiness. Wish for yourself a healthy, prosperous New Year. It will come true if you will have faith in you!
—Health

The feet of the humblest may walk in the field

Where the feet of the Holiest trod,
This, then, is the marvel to mortals revealed

When the silvery trumpets of Christmas have pealed,

That mankind are the children of God.

—From "Christmas Carol"
by Phillips Brooks

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EPSTEIN, SPARE THAT YULE LOG!

When I was but a boy,
'Twas my once-a-yearly joy
To arise of a Yuletide morning,
And eagerly behold
The crimson and the gold
Of the messages the mantlepicee adorning
There were angels, there were squires,
There were steeples, there were spires,
There were villagers, and mistletoe and holly,

There were cosy English inns
With the snow around their chins,
And I innocently thought them rather jolly

I blush for me, but by your leave,
I'm afraid that I am still naive.

Oh, give me an old-fashioned Christmas card,

With mistletoe galore, and holly by the yard,

With galmptious greens and gorgeous scarlets,

With crackling logs and apple-cheeked varlets,

With horses prancing down a frosty road,
And a stagecoach laden with a festive load,

And the light from the wayside windows streaming

And a white moon rising and one star gleaming.

Departed is the time

Of Christmases sublime;

My soprano is now a mezzo-basso;

And the mantlepicee contains

The angular remains

Of a later representative Picasso.

There are circles, there are dots,

There are corners, there are spots,

There are modernistic snapshots of the city;

Or, when the artist lags,

They are livened up with gags.

You must choose between the arty and the witty.

I blush for me, but I must say

I wish you'd take them all away.

Oh, give me an old-fashioned Christmas card,

With hostlers hostling in an old inn yard,
With church bells chiming their silver notes,

And jolly red squires in their jolly red coats,

And a good fat goose by the fire that dangles,

And a few more angels and a few less angles,

Turn backward Time, to please this bard,
And give me an old-fashioned Christmas card.

—Ogden Nash



Chaplain's Corner

MRS. HAROLD KENNEDY,
CAPTAIN, SALVATION ARMY

The fever of excitement prevails at this season of the year. Merchants proclaim their wares and the reasonableness of their prices; children (and older folk too) dream of the items to be found under their trees on that morning of mornings, and around the free world the message of the birth of the Christ child peels forth. But what comfort can all this be to you who are hospitalized? To you who are lonely because loved ones are gone or you are neglected by others? To you, too, this message is one of such hope and promise that as you consider it, the joy and wonder of God's love for you will flood your heart and mind and body and you'll find yourself saying as did Gen. Evangeline Booth—"No, not I, but Christ, 'tis He Who lives and loves and works through me."

The gift of God to sinful mankind shows how much we're loved. How wonderful it is to realize that scarcely a child in our nation can claim not to have been told who Jesus is! The lovely manger scene is reenacted at every concert; is seen again in the words of Martin Luther's "Away in a Manger." But how much do we really know of this person of Whom the angels sang and man anticipated since the sin in the Garden of Eden? Do we really know Him as the Perfect Example for our lives?

Do we really know the lessons that this, the world's greatest Teacher taught? It seems that oft times we would ignore much of this. The world does not love its brother. Man does not put God first. We are a Christian civilization, so historians declare, but one sees much that is anti-Christian about.

The people of His day ridiculed Jesus; they mocked Him; they falsely accused Him and they crucified Him. They did not really know Who He was and they did not bother to find out. Are we a little guilty of not attempting to learn more of Him? He came into the world in poverty, so He understands us in our needs. He saw life through the eyes of a man and the Bible tells us He was tempted, even as we are, so He understands our struggles. He was acclaimed King as He rode into Jerusalem, and King He was, yet He rode humbly the colt of an ass. This was not the means of transportation of a King, but of a judge! Palm branches and shouts of "Hosanna in the Highest"

were not the noise of a conquering hero! Before their eyes, rode not just any man, but the Victor over Sin, the Son of God Himself. This Jesus Who only lived a short life span; Who travelled only a relatively small distance; Who Himself wrote no books; this same Jesus not only changed the history of the world but also the history of man for He became man's own personal Saviour.

The gift of Jesus to mankind was, and is, salvation and this gift cost Jesus all that He had, His life. It was given once, yet it is an everlasting gift. By taking on Himself the punishment for sin, He made it possible for those penitent ones to be re-instated with God; to regain the oneness Adam shared in the Garden; to enjoy close fellowship with Him. This gift is for all, regardless of the station in life, or the language upon one's tongue, or the color of the skin. The wrong we have done will be forgiven and the past wiped from His memory, says the Bible, and we become brothers and sisters together with our Saviour and children of our Heavenly Father. The work of Jesus to make us happy went one step further. He died, and He rose again! He returned to the Father but He did not leave us alone for He sent His Holy Spirit.

The gift of the Spirit is in reality, His ever presence with us. He comes to live in the life of those who believe in the gift of Jesus. He comes, not as a transient guest, but as the Master of our life. As we learn to listen more to Him and to obey Him, we find His graces growing and developing in our lives. We become kind, patient, all loving, as the gifts of the Spirit are allowed freedom to be shown in our lives.

All this we should remember on the 25th. The motivation was God's love for sinful you and me. The answer to all our problems is found in Christ's love. The need in every life is for the guidance and blessing of God's spirit. May this Christmas bring you all your heart's desire and the blessing of our great Triune God upon you and yours.

When every fear
And doubt shall cease,
And may thy home
Such glory know
As did the stable
Long ago.

—Edgar Guest

A Christmas Prayer

HENRY VAN DYKE

Lord God of the solitary,
Look upon me in my loneliness.
Since I may not keep this Christmas in
the home,
Send it into my heart.

Let not my sins cloud me in,
But shine through them with forgiveness
in the face of the child Jesus.

Put me in loving remembrance of the
lowly lodging in the stable of Bethel-
hem,

The sorrows of the blessed Mary, the
poverty and exile of the Prince of
Peace.

For His sake, give me a cheerful courage
to endure my lot,
And an inward comfort to sweeten it.

Purge my heart from hard and bitter
thoughts.

Let no shadow of forgetting come be-
tween me and friends far away;

Bless them in their Christmas mirth:

Hedge me in with faithfulness,
That I may not grow unworthy to meet
them again.

Give me good work to do,
That I may forget myself and find peace
in doing it for Thee.

Though I am poor, send me to carry some
gifts to those who are poorer,

Some cheer to those who are more lonely.

Grant me the joy to do a kindness to one
of Thy little ones:

Light my Christmas candle at the glad-
ness of an innocent and grateful heart.

Strange is the path where Thou leadest
me:

Let me not doubt Thy wisdom, nor lose
Thy hand.

Make me sure that Eternal Love is re-
vealed in Jesus, Thy dear Son,

To save us from sin and solitude and
death.

Teach me that I am not alone,
But that many hearts, all around the
world,

Join me through the silence, while I
pray in His name.

—Amen.



RELIGIOUS SERVICES AT THE NOVA SCOTIA SANATORIUM

PROTESTANT

Worship Service (Chapel)

Sunday: 10:00 a.m.

Vesper Service (Station San)

Monday through Saturday: 6:25 p.m.

Sunday: 5:45 p.m.

This Is My Story (Station San)

Tuesday 7:00 p.m.

Communion is served quarterly in the
East and West Infirmaries.

ROMAN CATHOLIC

The Sacrifice of The Mass (Chapel)

Sunday: 7:00 a.m.

The Rosary (Station San)

Monday through Saturday: 6:45 p.m.

Sunday: 6:15 p.m.

The Hour of the Crucified (Station San)

Sunday: 6:30 p.m.

Everywhere, everywhere, Christmas to-
night!

Christmas in lands of the fir-tree and
pine,

Christmas in lands of the palm-tree and
vine,

Christmas where snow peaks stand
solemn and white,

Christmas where cornfields stand sunny
and bright.

Christmas where children are hopeful
and gay,

Christmas where old men are patient and
gray;

Christmas where peace, like a dove in his
flight,

Broods o'er brave men in the thick of the
fight;

Everywhere, everywhere, Christmas to-
night!

For the Christ-child who comes is the
Master of all;

No palace too great, no cottage too small.

—Phillips Brooks

OLD TIMERS

"Friendship! Mysterious cement of the soul! Sweetener of life, and solder of society."

Thus wrote Robert Blair, and so it is that December will find many old friends and new friends exchanging greetings. Such greetings and visits will be too late for mention in the December issue of Health Rays and our column looks a bit lean this month.

Anne Marie and Pat, as well as several others, report that Verna Mason, R.N., from Tangier was recently visiting at the San. She is remembered by many as a patient in 1946, and also as a former staff member, during part of which time she acted as "strep nurse". She is now in charge of the Sheet Harbour Hospital.

Anne Marie drew our attention to the picture in the daily paper which shows Miss Lillian Romkey, Halifax, Supervisor of Adoptions for Nova Scotia. Miss Romkey was a patient at the San in 1952 and has continued to maintain an interest in the Sanatorium. The occasion for the meeting was the Second Annual Foster Parents Conference in Truro and in the picture she is flanked by Dr. Carl Griffin, Truro, and Mr. J. R. Bourgeois, President of the Children's Aid Society of Colchester County.

The Jubilee Fund recently received a donation from Miss Hazel Tipert who was at the Sanatorium several times between 1935 and 1948. Hazel is still employed at the USAF base, Goose Bay, Labrador.

Stan Robichaud reports that Lew Dakin recently visited the Sanatorium, is looking well and is still employed with the D.A.R. in Digby. He was a patient at the San in the late 40's.

Mrs. Frances MacDonald, Sydney, now a patient at the San, tells us that she recently talked with Mrs. Cecilia McPhee. Mrs. McPhee was radio operator at the Sanatorium until early 1955 when she joined the staff of Radio Station CJCB, Sydney. We were told that she left this job some three years ago and is now involved in social and recreational planning in Sydney.

Mrs. MacDonald also tells us of having talked with Amos Stevens who was at the San in 1954 and is now assistant coordinator of the N. S. Committee on Human Rights. We recall that Dr. Hiltz made mention of this appointment in the January 1969 issue.

And so, until next time when we expect to have many items of interest, we wish our readers of Old Timers a very Merry Christmas!

HEALTH RAYS GOLDEN JUBILEE FUND

As a reminder to our readers, this Fund has been established to commemorate **Health Rays** 50th birthday in 1969 and to endow it so that it may continue to serve its readers during the years ahead. Donations have been continuing to come in from patients, ex-patients, staff members, former staff members and other friends.

Our hope, as stated previously, is to establish an Endowment Fund so that the annual interest will offset our ever-increasing costs. Your help in this is greatly appreciated.

Contributions to this Fund may be addressed to:

Health Rays Jubilee Fund
Nova Scotia Sanatorium
Kentville, N. S.

An official receipt will be sent to all contributors. Your donation will help **Health Rays** to continue publication.

The standing of this Fund as of November 25, 1969:

Previously acknowledged:	\$1,699.29
Recent contributors:	
Century Patrons (\$100. or more):	
Halifax County Anti-Tuberculosis League	100.00
Other Patrons:	
Hazel Tipert	
Miscellaneous	
Total	20.25
Grand Total	\$1,819.54

What was the first angelic word
That the startled shepherds heard?
'Fear not!' Beloved, it comes to you
As a Christmas message most sweet and true,

As true for you as it was for them
In the lonely fields of Bethlehem;
And as sweet today as it was that night,
When the glory dazzled their mortal sight.

—Frances R. Havergal

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Ross Carey, James Marshall and Rod Hurley, patients at the Nova Scotia Sanatorium, examine a frame of TB Christmas seals, part of a collection bequeathed to the San by Dr. C. A. Herbin. One of the finest collections of seals

known, the late Dr. Herbin formed it in about five years. A well-known philatelist and numismatist Dr. Herbin maintained the seal collection for publicizing charitable projects, including TB seal campaigns. Photo by McMurdo

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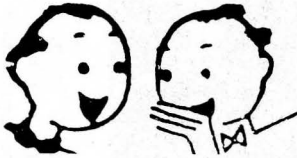
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Just Jesting



A new lighthouse was erected offshore in the wild northwest. A couple of Eskimos watched every detail and when it began functioning they were constantly on hand to watch operations.

One night a heavy fog blew in. One of the Eskimos turned triumphantly to another, "I told you white igloo builder no good," he exulted. "Light shine, bell ding-dong, horn woo-woo, but fog come rolling in just the same."

* * * * *

Two teenagers on a tour of a modern art gallery found themselves alone in a room full of modern sculpture. Staring at the twisted pipes, broken glass, and tangled shapes, one of them said, "Let's get out of here before they accuse us of wrecking this place."

* * * * *

The owner of a small cross-roads store was appointed postmaster. Over six months went by and not one piece of mail left town. Deeply concerned, postal authorities in Ottawa wrote to the postmaster to inquire why.

His explanation was short and simple: "The bag ain't full yet."

* * * * *

Visitor: "I do hope you keep your cows in a pasture."

Milkman: "Yes, Madam, of course we keep them in a pasture."

Visitor: "I'm glad to hear that. I have been told that pasteurized milk is much the safest."

* * * * *

A virus is what people get when they can't spell pneumonia.

* * * * *

Child: "I'd like a quarter's worth of bird seed, please."

Merchant: "What kinds of birds do you have, little boy?"

Child: "Oh, I don't have any yet — I just want to grow some."

Two old ladies were enjoying the music in the park. "I think that's the minuet from Mignon they're playing now," said one.

"I thought it was the overture from LaBoheme", said the other.

So the first old lady went over to what she thought was the board announcing the program.

"We're both wrong," she said when she got back to their bench. "It's the 'Refrain from Spitting.'"

* * * * *

Mother: "Jimmy, there were two pieces of pie in the pantry this morning and now there's only one. How is that?"

Jimmy: "I don't know. It was so dark I guest I didn't see the other piece."

* * * * *

Man (rushing into store): "Quick! Give me a mousetrap."

Clerk: "One minute, sir."

Man: "Don't stand there wasting time. I have to catch a bus."

Clerk: "Oh, sorry, sir, we don't have a trap that big."

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BEAUTY

Beauty is found—

in the palms of a hand,
in the passing of fall,
in the sheer dreams of art,
in the twinkling stars,
in the murmuring brooks,
in the fashioning of books,
in the laughter of children,
in the shadow of mercy.

—Della Dorcas Gillem

* * * * *

For patience when the rough winds blow,
For patience when our hopes are fading—

When visible things all backward go,
And nowhere seems the power of aiding
God still enfolds thee with His viewless
hand,

And leads thee surely to the Fatherland.

—N. L. Frothingham,
from the German

* * * * *

Love never looks to see what it is giving
to get in return.

Ins And Outs



NOVA SCOTIA SANATORIUM

Admissions: October 16 to November 15

ARTHUR CHARLES BRUNDAGE, Amherst; DOUGLAS CHARLES DOHERTY, Westphal; MRS. MADELINE PAULINE FERGUSON, Dartmouth; MISS EVELYN MARION FREDA, Dayspring Home for the Disabled, Lun. Co.; MRS. MARY JOSEPHINE GLENN, Heatherton, Antigonish Co.; WILLIAM ANDREW GRAVES, Port Williams; JAMES VICTOR JEFFERSON, Wilmot, Anna. Co.; GEORGE LEROY MURPHY, Auburn; MRS. ANNA CONSTANCE MACCARTHY, Truro; ALEXANDER CAMERON MACINNIS, West Bay, Inv. Co.; MRS. LIZZIE MAY MACLAREN, Petite Riviere; MRS. ANNE COSGROVE MACLEAN, Shelburne; MRS. MARY OSMOND, Dartmouth; MRS. MURIEL LUCILLE POTTER, Auburn; MRS. LOUISEA POTTIE, Spryfield; GEORGE ALFRED RAFTER, Fall River, Halifax Co.; MRS. KATHLEEN PATRICIA RANDALL, Upper Canard, Kings Co.; JAMES FRANCIS RICHMOND, Oakville, Ontario; MISS BESSIE EVELYN SHAW, Port Williams; WILLIAM ALEXANDER SMITH, Goshen, Guys. Co.; CHARLES LEWIS SPERRY, Eureka, Pictou Co.; ERNEST FRANKLIN STEPHENSON, North Kingston; JANET FLORENCE SWINAMER, Western Shore, Lun. C.

Discharges: October 16 to November 15

DAISY MERLIN ARTHUR, Country Home Nursing Home, Kentville; ELIZA VICTORIA BROOKS, Halifax; GEORGE WHITMAN BROWN, Dartmouth; ROY ALBERT CARMICHAEL, Baddeck; BASIL BLISS CASEY, Springhill; LUPEAN LEON CONRAD, Conquerall Mills, Lun. Co.; GERARD COOK, Dayspring Home for the Disabled, Lun. Co.; JOSEPH DOMINIX, Lunenburg; CECIL FULTON FOX, Tangier, Halifax Co. (deceased); MRS. ELGRADY FOX, New Glasgow, (deceased); MRS. MARY MAGDELINE IRVING, Conway, Digby, Co. (deceased); DANIEL MURDOCK ALLEN KENNEDY, Westville; FRANKLYN SIMEON LANGILLE, Blockhouse,

Lun. Co.; MRS. SOPHIE LAPIERRE, Grand Desert, Halifax Co.; OWEN FRANCIS LOVETT, Dartmouth; NINA MARIE MEUSE, Halifax; EARLE FOSTER MULLEN, Easton, Digby Co.; MRS. MARTHA CHRISTINE MACDONALD, New Waterford; RAYMOND JOSEPH MACKINNON, North Grant, Antigonish Co.; HERBERT CAMERON MACQUARRIE, Stellarton; EDWARD STANYON FAIRBANKS PIERS, Halifax; OSCAR ROLAND REID, Kentville (deceased); MARGARET MARY SAXTON, Halifax; MRS. MABEL VIVIAN SCHAFFNER, Lawrencetown; ERNEST FRANKLYN STEPHENSON, North Kingston, (deceased); GEORGE EDWARD THOMPSON, Coldbrook, Kings Co.; LESLIE EMERSON TUCKER, Bramber, Hants Co.

POINT EDWARD HOSPITAL

Admissions: October 16 to November 15

JOHN BASQUE, Barra Head; FREDERICK JOSEPH CORMIER, New Waterford; MARY MADONNA ELLSWORTH, Dominion; MRS. NANCY GOOGOO, Eskasoni; WALTER JAMES MacPHEE, Glace Bay; MATTHEW MORRIS, Eskasoni; MARY ELLEN MUISE, Sydney; MRS. MARY AGNES PAUL, Eskasoni; MRS. MARY ANN PAUL, Membertou Reservation.

Discharges: October 16 to November 15

MRS. LILA ISABEL BRELIEGH, Sydney; ANNE MARIE FITZGERALD, Dingwall; ALLAN ANDREW MacLEAN, Reserve Mines; STEPHEN MAYDANSKY, Dominion; PAUL DOUGLAS O'NEIL, Dartmouth; MRS. ANNIE MAY SMITH, Inverness; MRS. EILEEN SOBOL, South Bar; MYLES ANDREW YOUNG, South Bar.

What do the angels sing?
 What is the word they bring?
 What is the music of Christmas again?
 Glad tidings still to thee,
 Peace and good-will to thee,
 Glory to God in the highest!

—Frances R. Havergal

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PETERS' LUNCH



Seated: Mrs. Hope M. Mack, R.N.; Standing, (l. to r.): Vilda Skerry, R.N.; Dr. Helen Holden; A. G. Buchanan; Jean Dobson, R.N.

The scene was the San Christmas Party, at which time Mrs. Mack was honored on the occasion of her retirement as Director of Nursing. This will be written up in the January issue of **Health Rays**. Miss Jean Dobson, R.N., has been appointed as Director of Nursing, effective January 1, 1970.

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F. J. MISENER, M.D.	Radiologist
A. LARETEI, M.D.	Physician
MARIA ROSTOCKA, M.D.	Physician
G. A. KLOSS, M.D.	Physician
E. W. CROSSON, M.D.	Physician
V. D. SCHAFFNER, M.D., C.R.C.S. (C), F.A.C.S.	Consultant Surgeon
D. M. MacRAE, M.D., C.R.C.P. (C)	Consultant Bronchoscopist
B. F. MILLER, M.D., F.R.C.S. (Ed.), F.R.C.S. (C)	Consult. Ortho. Surg.
P. GEORGE, M.D.	Consultant Psychiatrist
D. H. KIRKPATRICK, M.D.	Courtesy Consultant in Anaesthesia
C. E. JEBSON, M.D., C.R.C.S. (C)	Consultant Urologist
MRS. HOPE MACK, R.N.	Director of Nursing
MISS EILEEN QUINLAN, B.Sc., P.Dt.	Senior Dietitian
DONALD M. BROWN, B.A., B.Ed., M.S.W.	Director of Rehabilitation

Point Edward Hospital

D. S. ROBB, M.D.	Medical Superintendent
T. K. KRZYSKI, M.D.	Physician
W. MacISAAC, M.D.	Consultant Bronchoscopist
D. B. ARCHIBALD, M.D.	Consultant Urologist
MISS KATHERINE MacKENZIE, R.N.	Director of Nursing
MISS JOYCE LEWIS	Dietitian
MRS. A. WINNIFRED PROTHEROE	Supervisor of Rehabilitation

Church Affiliation

NOVA SCOTIA SANATORIUM

ANGLICAN

Rector—Archdeacon L. W. Mosher
Sanatorium Chaplain—Rev. W. A. Trueman

Co-ordinating Protestant Chaplain

Rev. Dale MacTavish

BAPTIST

Minister—Rev. A. E. Griffin
Lay Visitor—Mrs. H. J. Mosher

ROMAN CATHOLIC

Parish Priest—Rt. Rev. J. N. Theriault
Curate—Rev. G. E. Saulnier

SALVATION ARMY

Capt. H. L. Kennedy

CHRISTIAN REFORMED

Minister—Rev. H. Vander Platt

UNITED CHURCH

Minister—Rev. K. G. Sullivan
Sanatorium Chaplain—Dr. (Rev.) Douglas Archibald

PENTECOSTAL

Minister—Rev. Robert Cross

The above clergy are constant visitors at The Sanatorium. Patients wishing a special visit from their clergyman should request it through the nurse-in-charge.

POINT EDWARD HOSPITAL

ANGLICAN

Rev. Weldon Smith

ROMAN CATHOLIC

Parish Priest—Msgr. W. J. Gallivan

UNITED CHURCH

Rev. Robert Hutcheson

PRESBYTERIAN

Rev. E. H. Bean

SALVATION ARMY

Mr. William Brewer

The above clergy are visitors at this hospital. Besides the above named many other protestant clergy from the surrounding areas alternate in having weekly services for our patients.



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