

RPA Heritage News

VOLUME 4, ISSUE 1

JULY 2013

Excellent team work gets patients back “on the table”



The new Steelco washer-disinfectors being installed.

To the unknowing eye, nothing had changed in the orthopaedic operating suite over Christmas, but for staff, there was a world of difference.

During the 2012-13 summer break teams of RPA staff demonstrated incredible teamwork by organising the installation of brand new equipment in the IRO (Central) Sterilising Department on level 7 of the QEII Building. The camaraderie and co-operation of the sterilising team, cleaners, builders, and installers ensured that theatres were only closed for six weeks and ready to go in record time.

What sterilising equipment has been taken away?

**The original 1982 Hobart tunnel washer.*
This was a type of dishwasher, modern in its day, but was really only ever intended as an in-

dustrial kitchen utensil cleaner, not for surgical instruments.. It has been replaced with three Steelco washer disinfectors.

**Two sterilisers.*

One was so ancient it had come from Rachel Forster Hospital. The sterilisers were so outdated that replacement parts could not be found anywhere. They were replaced with brand new pre-vacuum sterilisers.

What work needed to be carried out?

It was a huge ‘operation’. Once the theatres were closed, core drilling through the floor was undertaken for drainage. Contract builders familiar with the RPA site gyprocked, removed doors, and changed all the window ledges which had swollen due to the Christmas rain. Because some of the machinery was so large, pieces were

brought through the Recovery Ward. No part of the Operating Suite was spared. The RPA cleaning team were on double duty, as there was a great deal of dust everywhere. Some areas of the theatres were compromised so a ‘terminal clean’ with special antimicrobial solutions was necessary. This took several days.

How much did it cost? \$600,000

The whole operation was planned beforehand down to the minute by Lynne Norring and Bob Harding, the managers of the sterilising and cleaning departments, respectively. Our hats go off to the amazing staff of these departments who worked so well together and caused no disruption to patients.

Dr Vanessa Witton, RPA Museum

A Radiologist remembers...Vietnam in 1967



South Vietnam was not a tourist destination in 1967. The escalating military conflict in Vietnam wreaked havoc on the country's medical services: New medical graduates were seconded to the military, and hospitals were left to decline. Ad hoc

teams of Australian surgeons and doctors volunteered now and again but with the increase of Australia's military presence, the South East Asian Treaty Organisation (SEATO) asked Australia's Department of External Affairs to organise an official programme. As a result, three teams from Australia were sent to assist staff at hospitals at Long Zuyen in the Mekong Delta region, Bein Hoa to the north of Saigon and the seaside port of Vung Tau. Our team travelled to Vung Tau in May 1967, replacing another team from the Prince Henry and Prince of Wales Hospitals.

We were there to 'win hearts and minds' and our first task was to

revive the Le Loi Hospital at Vung Tau.

Drs Don Sheldon and Bruce Clifton and the senior theatre sister, Mair Jones arrived first and a week later the rest of the team arrived: Drs Doug Baird,

Charles Sharpe, Sisters Helen Besley, Simone Reynolds, Lorna Finnie and Marie Townsend. The Medical Technologist was Diana Wright and I was the radiologist.

The Le Loi Hospital in Vung Tau was a sixty bed hospital, a wing of which was built in 1939, another wing in 1945 and an air conditioned operating block in between the two wings. There was an Obstetrics wing at the back of the hospital. Electricity was provided during day time by a US Army-maintained large diesel generator in the grounds, as the local supply was inconsistent, unreliable and could not cope. Night rounds were done with a torch.

The team made use of limited material resources but there was never a shortage of patients. At 8am, there could be 100 people waiting to be seen. Public holidays, thankfully, were less busy.

Patients would arrive by any means of conveyance, even carried by a family member. The people were mainly from the local fishing villages, but spread across the whole gambit of Vietnamese society. The nature of the patient's problems was often indicative of long term untreated diseases, particularly pulmonary tuberculosis (TB). Some cases were of the (rare to western populations) medical text book examples, such as

TB eroding through the chest wall, TB glands in the neck and TB bone and deformed and infected spines in children. As these were among those who actually reached hospital, how many neglected unfortunates passed away at home?

The heat was incredible, as was the humidity. By 8am the temperature was already about 35C. The Operating Theatre was air conditioned, as was a recovery "ICU" area. We worked until mid-day when most of the country closed for a siesta. We returned at 2.30pm and usually ended work at 5pm. We also offered a Saturday morning service.

One side of the hospital was staffed by the Australian nursing staff, with some Vietnamese nurses, The 'Australian side' contained a general clinic and casualty department staffed by Australian doctors and interpreters, and a centrally positioned operating block with a recovery area with 'intensive care' status. The operating theatre and recovery area were air conditioned.

(continued...)

Sisters Marie Townsend, Mair Jones & Helen Besley



Vale Kay Stone, RPA trainee & Museum volunteer

It is with great sadness that the staff of the Heritage Centre mourn the loss of Mrs Kay Stone after 19 years as a volunteer.

Kay Stone (nee Newton) a P.A. Trained Nurse (1959), joined the Museum and Archive staff in 1993 in response to a request for volunteers by Helen Croll of the RPAH Graduate Nurses As-

sociation, and Manager of the Museum from 1983-2007. In 2002 Kay helped to relocate the collection from the Queen Mary Nurses Home to the heritage listed KGV .Operating Suite. She was involved with identifying and conserving artefacts, and identified and arranged the extensive photographic collection—no mean

feat. She generously donated a display case which now holds the nurses' Military and Service Medals. Kay's great delight was welcoming and showing visitors around the museum's extensive collection.

Tom with the interpreter and the radiography assistant.



(...continued)

We spent much time showing the Vietnamese nurses new techniques and practices.

Most patients had a relative-juvenile or senior-to attend. It was not uncommon for orthopaedic patients to go home at weekends and leave their traction tied up, then return on Monday to have their traction reconnected. With the Orthopaedic patients we had to decide how many bricks to use for the traction by going outside to find any suitable ones.

We never knew how many patients would remain in the ward overnight until we checked on our first morning round.

After their visit to the Outpatient Clinic, patients would sit around a tree and swap pills.

While not officially responsible for the maternity patients we were called several times, mostly during the night, to the maternity ward. As there was no electric power we had to manage with torch or lantern light. The situation only improved when the patient was transferred to theatre for Caesarian Section using sterile equipment.

Three times per week the Australian Civil Affairs unit would deliver a truckload of patients from the villages of the Phuoc Tuc province for treatment. Some of the Aus-

lian Army Training Team would bring patients from their areas too. Many of these people from a village would be meeting a “real” doctor for the first time in their lives.

An American ophthalmic surgeon came once a week to perform cataract surgery. He asked his mother in America to send as many spectacles as she could. The good lady rallied her friends and eventually a box of spectacles, with very elaborate 1950s and 60s frames, arrived. The locals really loved them and could be seen sitting under a tree and swapping styles. (Dame Edna would have been proud!)

One major hiccup was that the supply base at Phu Tho, near Saigon, was wiped out by fire in May 1967, just when we arrived. To try and do your job, any job, without the right tools can be difficult, and even in those days of minimal automation, “hands on” took a new meaning. This medical supply problem affected most of the country, not just Vung Tau.

As a radiographer, my needs were for x-ray film and photographic chemistry, as well as an available water supply. The last need was a bit of a gamble when the dry season arrived. A major problem was an available supply of x-ray developer. The 36th Evac Hospital could not assist, as their supply was very low also. A “mysterious American civilian” turned up one day asking me if I needed x-ray films available from “out-of-country”. It almost resembled a Friday night sale in an inner city pub, such was my doubt on his (genuine) concern. To try him out, my request was for three cartons of film, and only one week later, a truck pulled up at my door with three crates of film-about three years supply. He never reappeared for me to thank him.

Processing of films was always manual, with no automatic machine and a block of ice was obtained every morning from the ice works in town—Kodak would have been proud of their product in such conditions.

The ambulance driver from the 8th Field Ambulance would often come down for a visit and sometimes would bring his x-ray operator for

some technical advice. On finding out about the shortage of developer a search of the 8th Field Ambulance revealed that their dental store had enough for years. A deal was organised—they were short of x-ray films, on which Le Loi Hospital now had plenty and they had the needed chemistry. This co-operation at grass roots level worked wonderfully-no requests, no forms to fill in, no orders, just personal contact. These were the days before computers could track down, and account for every sheet of paper used, and query the usage. The Korean staffed hospital in Vung Tau was also helped by this source of chemistry.

In another building the “Radiology Department” comprised an interpreter (when available), a dark room attendant (who was excellent and trained by my predecessor) and me. My middle-aged dark room assistant would be called away sometimes in the late afternoon with the hospital truck driver. If this was in Australia my thought was that they were off for an early mark and a few ‘cold ones’ However, eventually my interpreter informed me that the driver and my assistant were classed as labourers and doubled as the hospital-municipal gravediggers. This duty earned them a bonus of 1000 piastres a month. That was about 1AUD in 1967, but no doubt purchased a lot of meals at the local rate. Digging trenches, filling sandbags or general labouring in the high temperatures and high humidity was real ‘hard yakka’ in the days before back hoes.

One official piece of paper always caught my attention. To satisfy the clerks and statisticians, there are lists made up for hospitals in Australia of ‘admissions’, ‘discharges’ and ‘deaths’: this is quite normal. In Vietnam a fourth column was added listed ‘escapes’.

By Tom MacNamara, RPA Radiology April 1962 to October 2000.

Additional comments were submitted by Sisters Helen Besley Marie Townsend and Mair Jones (dec.).

More photographs and videos of this time can be viewed in the RPA Museum.



A patient removing his own plaster, outside the Recovery Room

The Royal Prince Alfred Hospital Museum and Archive is freely open to all staff and public on Mondays, Tuesdays and Wednesdays from 10 am to 2 pm. Please let patients and visitors know.

We are located on Level 8 of the King George V Building in the former gynaecological theatres.



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Web: <http://www.sswahs.nsw.gov.au/RPA/Museum/>

Susman Library celebrates 50 years

RPA's medical library, known as the Susman Library will celebrate its 50th Anniversary on 12 August of this year. Planning for the library began in the mid-1950s, but lacked funding,- a problem solved by Dr Eric Susman. In February 1956, on the eve of his retirement from the active Honorary medical staff, Dr Susman handed the Board of Directors a £5,000 cheque to be used for a library. Another donation of £2500 was received from Mr GBS Falkiner.

Planning for the library continued over the next seven years. Additional donations arrived from the Sydney University Medical Society. In 1959 RPA approached the NSW Hospitals Commission asking for permission to appoint a librarian and in June 1960 Miss B James was appointed. In the early years, she divided her time between the Susman Library and the Medical Records Department.

On the opening day in 1963 Dr Rex Money spoke fondly of Dr Susman, (who had died suddenly in 1959)

recalling that "[Susman] was a man of ideas, he organised and conducted Sunday morning medical rounds, which formed the beginnings of the post-graduate school in medicine...an avid reader himself, not only in English but also in French and German, he dreamed of a superlatively good library for this Hospital...which had now become a reality and a fine and lasting tribute to a colourful personality."

Modern day visitors to the Susman Library will enjoy the atmosphere. The librarians have made it a welcoming and beautiful place to work: there are many sculptures and paintings, as well as interesting displays about Dr Susman. A portrait of him in his naval uniform as well as his medals are displayed. (Dr Susman had a distinguished military career in both World Wars.) Less conventional are the quotes attributed to Dr Susman, that have been reproduced. They are worth a laugh.

For example:

On receiving a technical sales pitch for a car: *"I don't understand anything about*

all that, but we could try the horn"

Addressing a patient with a child in tow: *"Come in madam, leave the brat outside"*.

On talking about himself: *"I may not be the best Physician in Sydney but, by God, I am the most expensive."*

Current users of the library invariably use computers, the internet and books in their studies. The library continues to cater to modern styles and needs. It will be interesting to see what the next 50 years hold.



The Susman Library in 1974: A groovy place to study!