

Historical Happenings

Newsletter of the Physician Assistant History Society



Message from the President

Deborah Gerbert, MS, PA-C

It is an understatement to say we are experiencing a year like no other in modern history. There are so many challenges facing us every day, which

makes me proud to say that through it all the work of the History Society has continued and flourished. We have seen an unexpectedly high level of support from PA programs across the country that themselves are in the midst of uncertainty. I want to sincerely thank every program that supports our mission to share the history of the development of the PA profession and to illustrate how PAs continue to make a difference in our society. Making history accessible to students is one of the primary goals of the History Society.

I want to encourage everyone to collect your own memories and experiences of working during this pandemic and submit them to the Society so that we can chronicle the profession's contributions to health care in this unprecedented time. If you have questions about how to do this, reach out to our staff and they will help you. We are also maintaining a list of the PAs who have lost their lives to COVID-19. This information is posted on our website.

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"23-45" - What is This?

Carl M. Toney, P.A.

It is the 23 hours and 45 minutes our patients <u>are not</u> with us, in our offices or examining rooms, for that hallowed 15-minute medical encounter. 23-45 are the hours each day in people's lives that we often know little, or nothing, about. It is the "Veil of

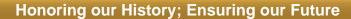
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Ignorance" that we as clinicians [individually and collectively] so often work behind.

At first glance, this focus on "time" might seem an odd topic to appear on the pages of this newsletter; but this publication is all about "history" and that is what I would like to draw our attention to. There was a time in the history of America when, as a society, we knew each other in our small towns and our neighborhoods within our cities. Similarly, those of

("23-45" – What is This? continued on page 2)





(President's Message, continued from page 1)

This fall we expect publication of a new book that has been in the works for over two years. Over 20 authors have contributed chapters. The work has been coordinated by Board member Leslie Kole and Managing Director Lori Konopka-Sauer. It focuses on aspects of the PA profession not covered in our previous illustrated history book and updates our contributions and history to the present time. I am looking forward to reading this and hope many of you will as well.

I know we all look forward to the days when we can meet again in person, whether at the AAPA national conference, PAEA conferences, or your state chapter meeting. Even a classroom would be nice right now! Whenever that is, your History Society will be there. We miss seeing everyone and sharing our enthusiasm for the work we do. We miss not being able to host our PA Historian Boot Camps, which educate participants on preserving your university's or organization's history. They have been very well-received so far by all who attended.

I wish everyone a healthy remainder of summer.

Be well.



("23-45" – What is This? continued from page 1)

us who provided medical and health care knew our patients. They were our friends, neighbors, the people who worked in the shops and banks we frequented or taught our children. They were the communities we served, we knew, we were a part of. For some of us today this is still true, but sadly for most of us it is not.

All too often now, we see patients in our various [out-patient/in-patient] clinical settings where we come to know their names, ages, race, gender, conditions, symptoms and signs. What we often fail "to know" is anything of substance about: Who they are? What they do? Where they come from? What their lives are like? What they hope for? What they fear? In the past, these personal "bits and pieces" that

make us uniquely who we are as individuals were secured as part of our interactions with our patients and incorporated into their "Social History." Today it seems that this critical [human] information has been all but abandoned in substance or import.

Today we find ourselves in the midst of a global pandemic, a disease that appears to honor no geographical boundaries/age ranges/gender and appears most deadly to those who make-up our [historically and newly arrived] socio-economically "at-risk" communities. And our ignorance about the 23 hours and 45 minutes of our patients' lives becomes, itself, yet another "risk factor" they must contend with.

If we are to help our patients prevail against this disease that stalks them and their loved ones, we must look back to our collective history when we knew each other, when we were caring for (and about) our friends and neighbors in our communities - not just being health professionals providing care to strangers.

"23-45" ~You can't help the patient, if you don't know the person~

Guest Contributor:

Carl M. Toney, P.A.
Health Care Planning Consultant/
Charter Member & Past President
Association of Clinicians
For the Underserved (ACU)

PA History Society

Mission: To share the history of the development of the PA profession and illustrate how PAs continue to make a difference in our society.

Vision: The PA History Society brings PA history to life by inspiring the next generation of PAs, patients and policymakers.



Thank you PAs and Healthcare Providers!

The PA History Society is collecting the stories and photographs from PAs, PA students and faculty during this global pandemic to preserve these unprecedented times in the history of the profession. Every story matters and how the virus has impacted your school or practice is important!



Image: Former PAHx Student Trustee, Sunny Pydah suits up to help the fight against COVID-19

For a sampling of what the Society has already collected, please visit: https://pahx.org/news/thank-you-for-your-care-during-the-covid-19-fight/

Please email your stories, photographs, and the names of any PAs you know who have passed due to COVID-19 to the Society at: contactus@pahx.org

No matter where you are or what you are doing in this fight, the **PA History Society THANKS YOU** for your dedication to continuing to provide quality health care and for your loyal service to your patients.

The Society wishes to honor and remember those PAs who have fallen to COVID-19. If you know of a PA who lost their life to the pandemic, please share their name, age, and location with the Society by emailing our office at: contactus@pahx.org

In Memoriam:

- * Madhvi Aya, 61, Brooklyn, New York
- * Alex Bass, 53, Brooklyn, New York
- **❖ Capt. Douglas Linn Hickok,** 57, East Stroudsburg, Pennsylvania
- **❖ Ana Lizeth Maldonado Franco,** 21, Zacatepec de Hidalgo, Mexico
- Rabbi Yaakov Meltzer, 60, Brooklyn, New York
- **♦ Ken Whitney,** 59, Mineola [Long Island], New York

"Beautiful memories silently kept, of one that we love, and will never forget."

We've Seen This All Before: The 1918 "Spanish" Influenza

Henry Heard, DHSc, PA-C Emeritus

According to the Centers for Disease Control and Prevention (CDC), the ancestor of the 1918 "Spanish" flu first infected humans sometime between 1900 and 1915.1 The virus was naturally occurring and made its way initially from birds, into pigs, and finally into humans. This virus went on to cause an estimated 50 million deaths worldwide between 1916 and 1920, with 675,000 deaths in the U.S alone. This particular virus was so deadly it lowered the average life expectancy in the U.S. by more than 12 years and went on to become the deadliest flu pandemic in modern history. 1 It was the random combination of eight different genes, from these three different sources, that made the virus so virulent. Patients would develop a fever and mild cough. These symptoms would rapidly progress into cyanosis, frothy bloody sputum and death, sometimes within 2-3 days. An unusual characteristic of this particular virus was the fact that young adults between the ages of 15 and 34 years old were particularly susceptible, and this age group made up a large percentage of influenza deaths.¹

The pandemic was made worse by the fact that between 1914 and 1918, the world was embroiled in its first "world war." Men who had little natural immunity to diseases, being born and raised on relatively isolated farms, were placed in close proximity to one another in huge military training bases across the globe. One of these training bases was in Etaples, France.² This particular base housed up to 100,000 men at any one point in time and contained large food processing areas for poultry and swine to feed the soldiers. The Etaples base noted an outbreak of a respiratory illness that killed hundreds of soldiers during the winter of 1916-1917. The patients all had similar symptoms, fever, cough, with some progressing to cyanosis, and death. Mid-1918 brought another round of illness to the Allied armies in Europe. This time it came in three different waves,

("We've Seen This All Before", continued on page 4)



("We've Seen This All Before", continued from page 3)

not only affecting the soldiers, but the civilian population all over the world. Spain alone reported eight million cases of this influenza, hence the name "Spanish flu." The medical staff at Etaples recognized this new 1918 wave as the same condition they had seen in early 1917.² The "Spanish" flu spread around the world again and again finally ending in 1920.



America entered the fight on the side of the Allies in 1917 and began to build an Army to fight "over there." A medical hospital unit from Emory University's Medical School was formed from volunteers around the Atlanta area, which became known as Base Hospital No. 43.3 They deployed to France, leaving Atlanta, GA in June 1918 for Hoboken, New Jersey, where they boarded the S.S. Olympic bound for Europe. The physicians on board held "sick call" twice daily for the 6,000 men each day. The official unit diary documents that the medical team treated 113 cases during their transit, five of them being diagnosed with influenza. Little did the Emory Unit know they were transporting the virus back to Europe.

A home town newspaper from east Alabama, *The Randolph Star*, documents the time when the virus made its passes through the area. According to the *Star*, in October 1918, the Roanoke, AL City Council required all citizens to wear anti-influenza masks when off their own property. Failure to do so resulted in a \$100 fine. There was a ban on public gatherings and schools and church services were suspended. School teachers lamented the loss of education for their young students because of school shutdowns.

During the summer, the ban was lifted, but reinstated in February 1920. In *The Roanoke Leader*, another area newspaper editor Olin Stevenson wrote, "There is reason for the most rigid precautions being observed by everyone. The life or health of many may depend upon the conduct of a single one." In February 1920 the Gay family, living in the area, was hardest hit, loosing eight of its family members in just seven weeks. Among them was my grandmother, Willie, age 25. The virus only left three brothers in the family.⁴

We have seen this all before, but last time it was worse...we hope.

References:

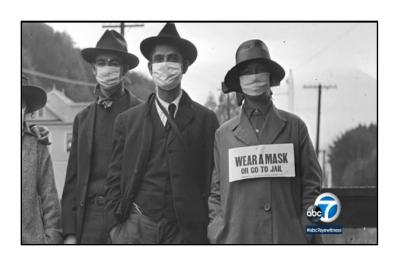
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https://www.cdc.gov/flu/pandemic-resources/reconstruction-1918-virus.html. Accessed 8-19-2020

Killer Flu: Secrets of the Dead. PBS Home Video, DVD. SEDE642. 2003.

History of the Emory Unit, Base Hospital 43, U.S. Army, 1917-1919, American Expeditionary Forces. Emory University Medical Library. Class D629. Book #U8F615.

Pandemic of the Past: Randolph County Faces the Spanish Flu. The Randolph Leader. April 15, 2020.





Student Reflections

Maha B. Lund, DHSc, PA-C, DFAAPA

The COVID-19 pandemic has changed our lives, providing challenges as well as opportunities for reflection and building resilience. At Emory, as at most PA programs, clinical year students were pulled from their rotations earlier this spring. They have now returned, but during this time away we asked that they reflect on their personal and professional limitations in the face of the pandemic and suggested they consider questions such as:

- ✓ Are providers obligated to care for the sick during an epidemic regardless of their own circumstances?
- ✓ Is potentially getting infected by patients a professional risk we should accept?
- ✓ How do you feel about the public who cheer daily for providers?
- ✓ What are your thoughts on providers who refuse to go to work for fear of infection, either of themselves or family members?
- ✓ Are these thoughts different for providers who may have underlying health issues themselves or may have family members with underlying health issues?

The following is a reflection by Taylor Nagel, a clinical year student in the Emory University PA program. She is originally from East Hampton, NY and plans to stay in the Atlanta area to practice internal medicine after graduation this December.

Responsibilities as a Provider During an Epidemic or Pandemic

Taylor Nagel, PA-S Emory University PA Program

It is both terrifying and exhilarating to think one day those who are spending countless hours studying for exams, reviewing patient cases, or preparing for the next day of surgeries may be eventually called to help fight a global pandemic as part of a healthcare team. We enroll in these healthcare programs hoping to one day help others and further increase access to medicine. I feel that working in medicine is a calling. It is not for the faint of heart or those who lack empathy. Having the privilege to take care of a stranger's loved one is quite an honor. I do feel that those who are sufficiently qualified and able to find employment should be obligated to care for the sick during an epidemic. As healthcare providers, we should understand the risk but never be afraid of the potential for infection from a patient. Those healthcare providers with underlying medical conditions or living with ill family members are at an

even greater risk. manufacturers, local officials. and even national leaders should make certain we have access to effective personal protective equipment (PPE). PPE is not a privilege but a right and an expectation for those who put their own health on the line for the greater good of the population.



Taylor Nagel, PA-S

The outpouring of gratitude and love for all healthcare workers during this pandemic of COVID-19 further proves that those on the frontlines are modern-day heroes. There have been hundreds, if not thousands, of viral videos shared on social media platforms during this time that depict citizens standing on balconies and applauding workers during shift change. While this is not required or expected, it is nice to know that essential workers are fulfilling their calling to help others. It is even more humbling to see citizens following the advice of the Centers for Disease Control and Prevention and their medical providers, such as staying home when possible, social distancing, and wearing masks in public spaces. I only wish I had been a few more months along in my physician assistant training when the United States reached peak infections so that I could have made a larger impact on the outcome. As I await the day I can return to clinical rotations, I will remember every day that I am lucky to have my health, I am thankful for such selfless essential workers, and I am proud to again work in healthcare in the near future.



In His Own Words: Robert Wooten, PA-C, DFAAPA

Marilyn Fitzgerald, Honorary PA

Robert Wooten, PA-C grew up in Brooklyn and moved to Greensboro, NC in 1972. After graduating Bowman from School of Medicine of Wake Forest University in 1981, he worked in family practice, public health, and PA education. Since 1990. he has worked in emergency



medicine at Forsyth Medical Center in Winston-Salem. An esteemed and popular leader, Robert has served in many positions, including president of the North Carolina Academy of PAs, president of the American Academy of Physician Assistants, president of the African Heritage Caucus, state and national committees, commissions, task forces, and the PA Foundation Board of Trustees. At the end of 2020, Mr. Wooten will complete a six-year term on the PA History Society's Board of Trustees. His PAHx biography may be found here. HH has asked Robert more personal questions. His answers follow in his own words.

What attracted you to a medical career, in particular to the PA profession?

I saw an ad in the newspaper for an ambulance driver. I was working a night shift at United Parcel Service and going to college during the day. For some reason, I decided that I could drive an ambulance, so I applied for the job. I did not expect to be hired, but I was. I became an EMT and a paramedic. During the same period of time, I worked in an Emergency Department as an ED tech. That is where I found out about the PA profession. I was thinking about my future, because I wanted to do more with patient care. I had a few on-the-job injuries and did not think that I was going to remain a paramedic until retirement. I

shadowed a PA in orthopedics, whom I had met through my work in the ED. I was very impressed with his work and responsibilities. Plus, his patients loved him. I knew then that I wanted to be a PA. He encouraged me to apply to PA school, and I did. The rest is history.

You've worked in Emergency Medicine throughout your career. What has kept you in that field?

I have been in Emergency Medicine for a total of 35 years -- the past 29 years as a PA and five years as an EMT/ Paramedic. I enjoy the challenges of the work. There is a wide variety of illness, injury, mental health issues coupled with socioeconomic factors that keep me engaged. I also recognize that everything that comes into the ED is not an emergency. So I don't lose my composure when I am taking care of people who have to use the ED because they do not have access to primary care and use the ED for their care.

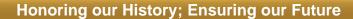
What PA leadership position that you have held has been the most fulfilling, and why?

This is a difficult question. I have enjoyed my leadership positions, whether they were local, state, or national. If I have to choose, I would say being the President of the AAPA was the most fulfilling. I had the opportunity to travel throughout the country, meet with PAs and PA students, and interact with local and national leaders in medicine, education, and the legislative arenas. It was the chance to explain to all what the PA profession was all about. When I met with students, they would have such enthusiasm and appreciation that the President of the AAPA came to speak with them. This was always a rewarding experience. It was great to work with the incredible AAPA staff who did so much to provide whatever information, materials, and guidance that I needed.

You have seen lots of American history intertwined with PA history in your almost four decades of health care. What stands out as the most historic?

1981-First cases of AIDS were reported; 1983- First Martin Luther King Day; 1991- The World Wide Web Internet Service; 2001- September 11 terrorist

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("In His Own Words", continued from page 6)

attacks; 2007- the introduction of I-Phones; 2009-President Barack Obama - the First Black President; 2019- COVID-19

Who is your hero?

My parents are my heroes. They did not go to high school, but had to work in order to help their families. They raised six children (I am the oldest), and they stayed on us about getting an education. They instilled a hard work ethic in all of us so we had no problems with working. Times were hard because we did not have a lot of money. We learned how to make do with what we had and to share with others. My parents did not tolerate whining. They taught us to accept responsibility. My father served in the Army and was in World War II. I know that in today's terms he had PTSD and leaned on alcohol to ease the pain. They challenged each of the children to be their best.

If you were granted two wishes, what would they be?

Rid the world of COVID-19 and end healthcare disparities.

What is your secret talent?

Being a calming force in the midst of chaos.

What makes you laugh?

My grand and great-grandchildren. My foster daughters. Patients, especially those who come under the category of "What were you thinking?"

What is your favorite thing to do on a day off?

As little as possible. Having time to spend with family is great. I like to watch sports, particularly baseball and football. I enjoy reading, so having a good book or two is a nice thing.

How do you describe home?

Home is very busy. I have three foster daughters, age, 19, 14 and 7. The challenges and the fun never end. There is always something that has to be done. Some very interesting dynamics are presented with their education, currently being done online due to COVID.

If you could change something about today, what would it be?

That we could all be gainfully employed, have the freedom to travel, have family and friend gatherings, and have school live and in person.

What is the most valuable personal lesson you ever learned and why?

When I was about nine years old, I was complaining to my grandmother about having to do something. She asked me, "Did you wake up this morning, and were you able to take nourishment?" I replied, "Yes, ma'am." She then responded, "Good, you are ahead of the game because there are others who have not. Don't whine but learn and make something of yourself." I hope that I made Grandma proud.

What is the most interesting thing about you that we wouldn't learn from your biography alone?

Back in the day, I was a radio announcer for a college station. I have always wanted to do voice-overs, but never have.

Now that you are rotating off the PA History Society Board of Trustees, what will you do in your spare time?

I don't know for sure, but I am certain that "home" is waiting to put that spare time to use.







From the Archives: The Value of Losing a Nickel

Michelle Schabowski, MSIS, PAHx Archivist

The Stead Family has donated a variety of items belonging to Eugene Stead to the PA History Society, most of which are displayed at the Stead Center in Durham, North Carolina in a replication of Dr. Stead's office. Visitors might have been puzzled by a certain piece that hangs on the wall: A plaque with a buffalo surrounded by nickels. This plaque was



presented to Dr. Stead in 1967 from doctors who had worked under him the Duke Medical Center. While training students on rounds. Dr. Stead would point out certain patients and bet the students a nickel what the ailment was. A metal plate

on the plaque reads: "To Dr. Eugene Stead Jr. – For teaching us the profit in losing a nickel."



The COVID-19 pandemic might hamper a visit to the Stead Center to see the PA Veterans Garden and the PA History Society's displays, but you may take a virtual tour anytime! The PA History produced a video tour of the Garden and displays, which you may access here: https://vimeo.com/348886067

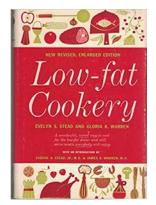


Dr. Stead's Wife, Evelyn, Was an Innovator Also

Reginald D. Carter, PhD, PA, PAHx Historian Emeritus

Dr. Stead and I would talk about a variety of things when I visited him and his wife Evelyn at their lake home in Bullock, NC. I don't recall how we got on the subject of money, but he said, "I never made much money doctoring, Mrs. Stead is the money maker in our family." This puzzled me since I knew

that Mrs. Stead had been a stayat-home mother and wife for most of their marriage. He "She continued saying, coauthored a cookbook that became a best seller, went through several editions and was even translated into other languages." I learned later that Mrs. Stead had invested the earned from she



royalties in the stock market. Since they were frugal spenders, the money accumulated over time.

(Low-fat Cookery, continued on page 9)





(Low-fat Cookery, continued from page 8)

We have several different editions of the cookbook in our collection of items donated to the PA History Society by the Stead family. The book coauthored by Evelyn Stead and Gloria Warren is titled Low-Fat Cookery and was published in 1956 by the McGraw-Hill Book Company. In addition to the cookbooks, we also have a scrapbook that contains newspaper clippings, photographs, advertisements and other related items about the cookbook. Collectively, they tell an intriguing story about a cardiologist and his wife working together to prevent heart disease.



Mrs. Gloria Warren (left) and Mrs. Stead in Kitchen

About a year before the cookbook was published, Dr. Stead and his Duke colleague, Dr. James Warren, approached their wives about "devising a new way of cooking that would satisfy the entire family and at the same time drastically reduce the fat content of meals." Mrs. Stead, a former copy editor, and Mrs. Warren, a former dietician, took up the challenge. Using their kitchens as a laboratory and their families as guinea pigs, they formulated enough recipes to be published by McGraw-Hill in November 1956. Drs. Stead and Warren wrote in the cookbook's introduction, "Many doctors believe that the large fat intake in the average American diet plays an important role in hardening of the arteries and that persons of normal weight should derive less of their calories from fat." They believed that "lifelong changes in cooking and eating habits are needed ... and a philosophy of cooking must be evolved which offers the same variety of tasty dishes to which we are accustomed."

Being the first cookbook of its kind, McGraw-Hill's marketing department went into full swing with an article ready for publication in the Ladies' Home Journal in January 1957. Book reviews (all positive) and advertisements were published in a variety of publications including popular magazines, trade magazines and newspapers. The cookbook was even advertised in the Journal of the American Medical Association (JAMA). In addition, Mrs. Stead was invited to cook recipes and promote the book on several local TV stations. According to a bulletin board poster, Mrs. Stead was a guest speaker at a seminar titled "Low Fat Cookery Clinic" held in Charlotte, NC on May 18, 1961. The seminar was "For heart patients, their wives, husbands, mothers, aunts, grandmothers, daughters - and anyone else who is interested in learning about low-fat, lowcalorie cooking and eating." The poster noted that "Evelyn Stead is co-author of this well-known cookbook, which is now recognized as the classic in its field. She had18 years of practical experience at keeping happily and healthy fed a family that likes to eat. Her husband is a well-known physician and heart specialist at Duke." Recipes from the book were to be demonstrated and Mrs. Stead was scheduled to appear at 1:00 PM on the Betty Feezer Show, WBTV, Charlotte, NC. Feezer's show was one of the toprated TV cooking shows at the time.



Mrs. Stead (left) with Hostess Cordelia Kelly on What's Cooking WFMY-TV Greensboro, NC April 11, 1961

(Low-fat Cookery, continued on page 10)



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(Low-fat Cookery, continued from page 9)

By December 1958, the cookbook had sold 40,000 copies and Mrs. Stead and Warren were asked to create an additional 90 new recipes for a second edition, published in 1959. In 1961, the Warrens moved from Duke University to Ohio State University where Dr. Warren took over as chair of Medicine. So, it became difficult to work on additional editions of the book. Even so, the cookbook remained best seller for McGraw-Hill for many years. Used copies of the cookbook are still available on the Internet (Ebay, Amazon, etc.)

Resources include:

1. Nelson, Norman, Duke Wives Publish New Book. Duke Hospital Intercom (newspaper)December 1956;1(2):5-6

2. Stead Family Scrap Book Photographs and Bulletin Board Poster.

PAHx Archives Needs YOU!

Help us complete our collections.

Advance for Physician Assistants (Journal)

- Vol. 7, no. 6 (June 1999)
- Vol. 11, no. 9 (Sept. 2003)
- Vol. 12, no. 1-3, 9-10 (Jan.-March, Sept, Oct 2004)

Physician Assistant, Health Practitioner (Journal)

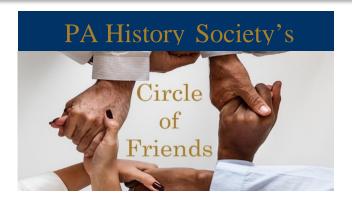
- Any issues from Volumes 1 and 2 (1978, 1979)
- Vol. 4, no. 1-5, 7-9 (1980)
- Vol. 5, any issues (1981)
- Vol. 6, no. 1-6, 8, 9 (1982)

If you have intact, clean copies of these missing editions, please contact the PAHx Archivist at contactus@pahx.org

You may read all of the editions of *Historical Happenings* on our website here.

Stay up to date on "all things PA history" by visiting the PAHx website regularly: www.pahx.org





Join your colleagues and become a "Lifetime Friend in the Circle of Friends"

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Help preserve PA history by becoming a *Lifetime Friend* of the Society. "Lifetime" Circle of Friends Giving Levels: a one-time donation of \$2,000 or more from individuals under the age 65 years, OR a one-time donation of \$1,000 or more from individuals retired or age 65 years and older.

If you're not in the "Lifetime" category ... don't worry, you can still support the work of the PAHx and join the "Annual" Circle of Friends with a donation of \$100 or more each year.

2020 Annual Circle of Friends: Debi Gerbert, Rea Katz, Sharon Luke and John McElligott





By planning your future gifts now, you are helping to ensure that the history of the PA profession is never forgotten. Legacy gifts – whether large or small – combine to create a vision for the future of the PA History Society, ensuring continued vitality of its mission. Types of planned giving: Bequest specified in your will or trust; qualified retirement plan; or life insurance policy

All donations to both of these PAHx giving programs assist the PA History Society with:

- Preserving the Archives collection
- Developing educational materials (history books, toolkits)
- Scanning materials for digital use
- Expanding our biography and oral history collection
- ❖ Providing student scholarships to attend PAHx educational programs (example: PA Historian Boot Camp)

For more information about these programs, please visit our website www.pahx.org or send us an email contactus@pahx.org.



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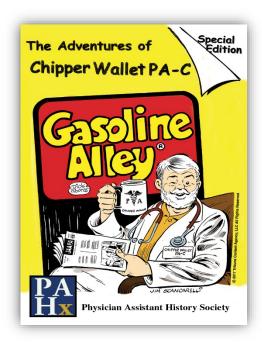
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