

## NOTES AND NEWS

### NEW APPOINTMENT FOR DR. THOMAS J. RADLEY

Dr. Thomas J. Radley, an Orthopedic Surgeon, was named to head the VA's prosthetics program at Central Office in Washington, D.C., on October 1, 1973. Dr. Radley was previously Chief of Orthopedic Surgery at the Columbia, S.C., Veterans Administration Hospital.

As Deputy Director for Prosthetics, Prosthetics Division, Surgical Service, he is responsible for professional and technical programs involving the furnishing of prosthetics devices and sensory aids to disabled veterans treated at VA's 169 hospitals and more than 200 outpatient clinics.

In addition, Dr. Radley is Acting Director, Prosthetics Research Service. In this capacity he is responsible for the Prosthetics Research and Development program to maintain an integrated program with the Prosthetics Division.

A native of Cincinnati, Ohio, Dr. Radley was in private practice and was Chief of the Orthopedic and Prosthetic Appliance Clinic Team at the VA hospital there. He also served as consultant in orthopedics at that hospital and was Assistant Clinical Professor of Surgery at the Cincinnati General Hospital of the University of Cincinnati Medical College. He joined the Columbia VA Hospital staff in October 1971.

Dr. Radley is a 1942 graduate of the University of Cincinnati College of Medicine. He is a member of the American Academy of Orthopaedic Surgeons, the American Board of Orthopaedic Surgery, the American College of Surgeons, and the American Medical Association. Dr. Radley has attended a number of courses in prosthetics at the University of California at Los Angeles, New York University, Northwestern University, and at the Prosthetic and Sensory Aids Service. He has recently become a member of the newly established Committee on Government Health Legislation and Veterans' Affairs of the American Academy of Orthopaedic Surgeons, and he also serves as a member of the Committee on Rehabilitation.

**INTERNATIONAL SOCIETY FOR PROSTHETICS AND ORTHOTICS  
1974 WORLD CONGRESS**

The ISPO 1974 World Congress will be held in Montreux, Switzerland, on October 8–12, 1974. This scientific Congress will be held in conjunction with the triennial assembly meeting of the ISPO which will incorporate the 6th annual international meeting of the International Association for Orthotists and Prosthetists (INTERBOR) and the 8th international course of the Swiss Association for Prosthetics and Orthotics (APO). It will review progress, identify patient needs, and offer guidelines for future developments in the fields of prosthetics and orthotics.

An extensive scientific and commercial exhibit is planned. Opportunities for discussion through the medium of workshops, round table seminars, and private sessions will be provided. Film showings will also be included.

During the plenary sessions, facilities for interpretation into English, French, and German will be available as well as for additional languages should the registration warrant it.

The proceedings will include review papers by leading authorities, symposia, and free papers from all professions involved in management of patients requiring prosthetic and orthotic devices.

The subject areas will include:

Amputation and related surgery

Congenital deficiencies

Prosthetic and orthotic devices

Flaccid paralysis

Cerebral palsy

Stroke and spinal cord lesions

Lesions of the spinal column

Feet and footwear

Education

Rehabilitation engineering

Patient training and acceptance

Technology, administration, and management

The conference is open to all professionals concerned with prosthetic-orthotic restoration—doctors, surgeons, prosthetists, orthotists, technicians, physical and occupational therapists, engineers, educators, etc.

Programs will be arranged to meet the specific needs of interested professional groups. Registration information follows:

<i>Registration Fees</i> <i>(including Social Event)</i>	<i>Until</i> <i>June 30, 1974</i>	<i>After</i> <i>June 30, 1974</i>
Full Members of ISPO, INTER-BOR or APO	sFr. 225.00	sFr. 275.00
Non Members	sFr. 300.00	sFr. 350.00
Accompanying Registrations (wives, families, etc.), available only in conjunction with full registration	sFr. 75.00	sFr. 75.00
<b>SINGLE DAY REGISTRATION</b>		
Full Members	sFr. 45.00	sFr. 55.00
Non Members	sFr. 60.00	sFr. 70.00
Rate of exchange per July 2nd, 1973: sFr. 1.00 = US \$0.34		
= £ 0.13		
= dKr. 1.89		
= sKr. 1.36		

For information write to: R.F. Baumgartner, M.D., Secretary-General, 1974, ISPO World Congress, P.O. Box, CH-8126 Zumikon/Zurich, Switzerland.

#### **THE STEREOTONER RECEIVES IR 100 AWARD**

Mauch Laboratories, Inc., working under VA contract, developed the Stereotoner reading device for the blind. This device received the IR 100 award on September 20, 1973. The IR 100 awards are given for the one hundred most significant new developments for a particular year.

The Stereotoner is portable and consists of a hand-held probe, an electronic circuitry case hung from a strap worn around the neck, and headphones through which the varying tones are sent.

#### **HOWARD FREIBERGER RECEIVES BVA AWARD**

Mr. Howard Freiburger, Electronics Engineer, Research Center for Prosthetics, was awarded a Certificate of Appreciation from the Blinded Veterans Association during its annual convention. During the convention, he also conducted a seminar on new developments in the sensory-aids field as they relate to blinded veterans.

The award, recognizing special contributions to the welfare of blinded veterans, was presented by Robert C. Ward, retiring president of the BVA (Fig. 1). Also honored by similar awards were

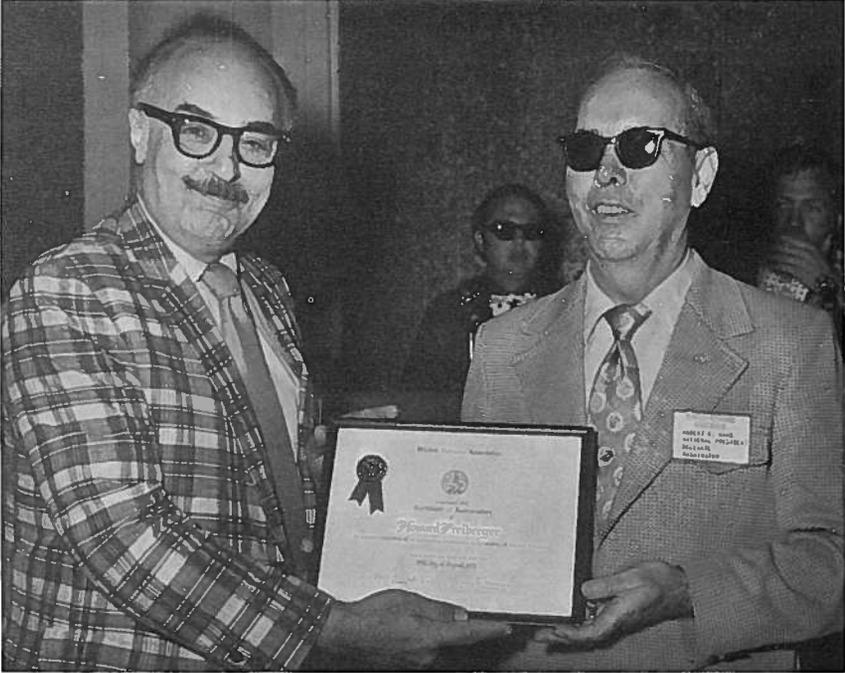


FIGURE 1.—Howard Freiberger, Electronics Engineer, Research Center for Prosthetics, receives award presented by Robert C. Ward of the Blinded Veterans Association for "grateful recognition of an outstanding contribution to the welfare of Blinded Veterans."

Santy Sacco of Albuquerque, N.M., Ken Wiley of Hines, Ill., and Stanley Stocker and Jerry Moore of Baltimore, Md.

#### **RAW DATA AND CORRELATIONS ON "LOWER-EXTREMITY AMPUTATIONS FOR ISCHEMIA" PUBLISHED**

A substantial volume of raw data and correlations on lower-extremity amputations for ischemia has been recently obtained for the Prosthetics Reference Collection of the Research Center for Prosthetics. The book, entitled "Draft Monograph -R-45, Lower Extremity Amputation for Ischemia, a Two-Year Clinical Follow-up Study," by Kihn, Warren, and Beebe, is a comprehensive collection of data and information on U.S. war veterans with amputations performed in VA hospitals. The topics covered relate chiefly to healing, stump breakdown, further amputation, receipt of a pros-

thesis, walking status, self-care, and survival, with a strong emphasis on the identification of factors associated with prognosis in these areas.

The Prosthetics Reference Collection at 252 Seventh Avenue, New York City, is open to the public for reference and reading on the premises only. The collection is a unique source for rare reports and classic texts on prosthetics, orthotics, sensory aids, and related fields. Numerous reports, reprints, books, patents, films, and other materials in these fields are also contained in this specialized collection.

### **INTERNATIONAL COURSE IN PROSTHETICS AND ORTHOTICS HELD IN POONA, INDIA**

On November 5-16, 1973, an International Course in Prosthetics and Orthotics was held at the Artificial Limb Centre, Poona, India. This was the first course of its kind to be offered in India.

Sidney Fishman, Ph. D., Coordinator of Prosthetics and Orthotics at New York University Post-Graduate Medical School, in his capacity as Chairman of Education for the International Society of Prosthetics and Orthotics, was coordinator of the program along with Dr. Balu Sankaran of the Central Institute of Orthopedics in New Delhi. Of the 13 members of the international faculty, the seven from North America represented the United States Veterans Administration, New York University, and the Ontario Crippled Childrens Centre. The other participating specialists were from India, The United Kingdom, Canada, and Denmark.

During the 2-week course, approximately 80 doctors, therapists, prosthetists, and bioengineers received classroom instruction and practical training in lower-extremity prosthetics and orthotics. The course was a joint effort of the Government of India (Ministry of Health and Family Planning), the International Society of Prosthetics and Orthotics, and the New Delhi Regional Office of the World Health Organization.

### **EASTER SEAL SOCIETY SEEKS UNAIDED DISABLED**

The national statistics on how many Americans are handicapped or disabled are worth noting. According to the National Center for Health Statistics' most recent survey of the civilian population living in households (1970), there are 23.6 million people or 11.8 percent in this group limited in their activities due to chronic conditions. The limitation applies not only to a person's major activity—work, housekeeping, or school—but to participation in recreational, civic, or church activities.

In addition, the Social Security Administration in 1967 found another half million persons between the ages of 18 and 65 in institutions for the physically and mentally handicapped.

The National Center's findings are used for funding and planning by congressional committees and by voluntary and government agencies as the most authoritative indicators of disability in the U.S.

One problem in determining the number of disabled persons in the population is the variation in usage of terms such as "handicap," "disability," and "limitation of activities" by various organizations.

The terminology and criteria of disability reflect the objectives of surveying organizations, and their data are limited to selected populations. The Social Security surveys, for example, include only working-aged people and define their ability to be employed or do housework. If a person does not respond to questions on work limitation, he is not defined as "disabled," although he may have functional limitations in other kinds of activity.

Regardless of the criteria, the survey methods used, or the populations sampled, statistical data still do not tell the struggles or extensive professional and personal resources necessary to overcome disabilities and handicaps. They do not tell the individual efforts of the 16 million persons over 45 who experience activity limitations because of chronic conditions.

When it comes to locating the cerebral-palsied child, the middle-aged woman with rheumatoid arthritis, the retired stroke victim, the young man with the spinal cord injury—and countless other disabled persons in need of rehabilitation—local Easter Seal societies must go beyond statistics. They must reach out to extend services by identifying community priorities and unmet rehabilitation needs.

So they cooperate with other agencies and in some cases use health consultants and house-to-house searches for handicapped people with problems not being helped by other agencies. It is a case study approach of personal advocacy which simultaneously locates individuals needing help and seeks to update information on community needs and resources. It works in conjunction with Easter Seal information, referral, and follow-up programs to direct people to the best help resources. Such methods as mobile information units, liaison with neighborhood health centers, and—an increasingly used tool—computerized data banks are employed.

Easter Seals says through these methods it is trying to reach more individuals needing rehabilitation and reduce the "numbers" on the disability rolls.

Anyone needing help for a physical impairment or for a disabled friend should contact his local Easter Seal Society. It will either offer

him the necessary service or refer him to a local agency which can best help with the problem.

**MRS. RANALD H. MACDONALD AND FINIS E. DAVIS SELECTED AS MIGEL MEDAL WINNERS FOR 1973**

Presented annually for outstanding service in work for the blind, the Migel Medal this year is being presented to Mrs. Ranald H. Macdonald, founder and honorary chairman of Recording for the Blind, Inc., and Finis E. Davis, vice president and general manager of American Printing House for the Blind. They will receive their awards at the American Foundation for the Blind's headquarters in New York on October 25, 1973. Mrs. Macdonald is receiving the layman award and Mr. Davis is receiving the professional award.

**"ENGINEERING IN ORTHOPEDIC REHABILITATION" COURSE SPONSORED BY AAOS**

The American Academy of Orthopaedic Surgeons sponsored a postgraduate course on "Engineering in Orthopaedic Rehabilitation" at the Marriott Motor Hotel, Newton, Massachusetts, October 27-29, 1973.

The 2<sup>1</sup>/<sub>2</sub>-day session for the Academy's Committee on Rehabilitation was directed by Dr. Donald S. Pierce, Associate in Orthopedic Surgery, Harvard Medical School, and former Chief of the Department of Rehabilitation Medicine, Massachusetts General Hospital. The 29 member faculty included lecturers from nine states.

Designed for orthopedic surgeons, physiatrists, orthotists, prosthetists, physical and occupational therapists, and graduates of orthopedic physicians assistants programs as well as rehabilitation nurses, the course covered recent developments and applications of implantable biomaterials and their clinical uses in rehabilitation of patients with disorders of the neuro-musculoskeletal system.

**NEW AFB PROGRAM PROVIDES CENTRALIZED SOURCE OF INFORMATION ON SENSORY AIDS FOR THE BLIND**

A new American Foundation for the Blind program provides a centralized source of information on sensory aids for blind persons which has never before been available.

The recently appointed director of the program, Ira Kaplan, stressed the need for this program as a way of insuring that sensory

aids now lying dormant in commercial laboratories will be made available to the general public.

The three main segments of the program consist of:

1. Market research to develop information and market data on the number of visually handicapped persons who might need or want new sensory aids and the potential for sale or distribution of the aids.

2. Market development, which will assist developers and manufacturers of sensory aids with problems in securing funding, manufacturing, market development, advertising, sales, and services.

3. Product information and distribution, which will serve as a source of information on commercially available sensory aids.

In addition, this year for the first time the Foundation has published an International Catalog of Aids and Appliances which lists devices and aids being manufactured around the world. The catalog includes not only a description of the devices but their prices and information on where to order them.

#### **NATIONAL RETINITIS PIGMENTOSA FOUNDATION FORMED**

As a result of raising \$300,000 to sponsor research for the cure of Retinitis Pigmentosa (RP) the National Retinitis Pigmentosa Foundation was born, and a laboratory at the Massachusetts Eye and Ear Infirmary opened in January 1974 for the study of retinal degenerations.

The work of the National Retinitis Pigmentosa Foundation, however, is only beginning. An additional \$1,500,000 is needed to fund the laboratory research for a period of 5 years.

The objectives of the Foundation are: 1. To inform the public of the magnitude of RP and its symptoms. 2. To inform RP victims nationwide of the existence of and progress from a laboratory for the multi-disciplined research on RP and allied diseases. 3. To solicit funds for the construction and operation of the laboratory, to coordinate fragmented research efforts throughout the country and abroad, and to underwrite other research proposals to find a cure and/or method to retard RP.

#### **DR. ROBERT E. STEWART RETIRES**

Doctor Robert E. Stewart, Director, Prosthetic and Sensory Aids Service, Department of Medicine and Surgery, Veterans Administration, retired on June 30, 1973, after 27 years of service. During the last 17 years, he was the Service Director, in charge of the clinical

and research aspects of a unique nationwide program providing a steadily broadening range of replacements for human parts or functions.

Dr. Stewart was born in Sutton, Nebraska. He graduated from Creighton University Dental School in 1929. After some years of private practice, he entered the Army in World War II. After early service in the Dental Corps, he joined a group of Army dentists in developing plastic artificial eyes and other maxillofacial restorations. Using agar or alginate molding techniques, waxes, dental stone models, and acrylics adopted from dentistry, and new polyvinyl chloride plastics, they replaced the former hand-blown, fragile glass eyes and developed new artificial noses, ears, and other facial parts. These methods and designs have since become widely used.

After the war, in January 1946, Dr. Stewart was assigned directly from the military to VA Central Office as Chief, Ophthalmoprosthetic Division, of the then-new Prosthetic Appliances Service.

Doctor Stewart's transfer to the Veterans Administration resulted in the establishment of VA Plastic Eye and Restorations Clinics in 13 cities throughout the country where veterans are still being served for their artificial eye, facial, and body restoration needs.

In September of 1953 he was promoted to Assistant Director, Prosthetic and Sensory Aids Service. Because Dr. Augustus Thorn-dike, a prominent Boston surgeon who was the Acting Director was reluctant to move to Washington, Doctor Stewart essentially managed the entire Central Office prosthetics operation for several years. In July of 1955 he was appointed as Director of the Service.

Under Doctor Stewart's dynamic leadership, events unparalleled in the history of prosthetics began to take shape. These include the establishment of the VA Prosthetics Center, with results reported in detail in every issue of the Bulletin of Prosthetics Research; enthusiastic support of the postgraduate prosthetics medical school programs of New York University, Northwestern University, and the University of California at Los Angeles, which are the only institutions providing university level training for physicians, therapists, prosthetist, and orthotist practioners, both in the private sector and in government; and the development and establishment of VA Prosthetics Treatment Centers which provide highly specialized prosthetics care on a referral basis for patients whose prosthetics needs cannot be cared for at their original VA hospital.

Among the countless other innovations developed during Doctor Stewart's tenure which directly and indirectly have beneficially affected the lives and rehabilitation of disabled veterans, while also generating savings, there are the centralized distribution of stump socks, hearing-aid batteries, aids for the blind, hydraulic knee

mechanisms for above-knee amputees, elastic hose, lumbosacral belts, and a centralized method for hearing-aid repairs.

Doctor Stewart has continually demonstrated a keen perception of the needs of the Veterans Administration's research program, and an imaginative and resourceful capacity to develop programs to meet these needs. He has recognized the advantages accruing from a balanced intramural and contractual program involving integration of research, development, evaluation, and education. He has utilized effectively the specialized talents of the relatively small body of research personnel knowledgeable in the unique fields of prosthetics, orthotics, and sensory aids.

The concept of VA amputee management has been revolutionized largely as a result of Doctor Stewart's efforts. Recognizing promptly the tremendous advantages inherent in immediate postsurgical management, he arranged in 1964 for a research program in Seattle to refine and clinically demonstrate the techniques developed abroad and to disseminate information for use by clinicians in both the Veterans Administration and the private sector. Three films have been produced; two monographs have been made available for thousands of clinicians; and courses have been given by three universities. The techniques of immediate postsurgical management, when properly used, have brought great benefit to the newly amputated individual. These techniques have been utilized in many parts of the world with much praise redounding to the Veterans Administration for refinement and clinical validation of the procedures and for their dissemination in the interests of amputees.

An example of Doctor Stewart's planfulness and foresight is the establishment of the VA Prosthetics Center in New York. Primarily because of his efforts, the Center was established in 1956 and since then has been a worldwide leader in prosthetics and orthotics activities. The Center brought together a number of research and clinical organizations previously functioning essentially as separate entities. The effectiveness of having research and clinical personnel working cooperatively in the same setting has been admirably demonstrated at the VA Prosthetics Center. Of particular note is that the Center was one of the early groups to utilize engineering capability in the resolution of orthotics and prosthetics problems at the clinical level. In the past several years this work has expanded rapidly in the solution of problems in management of spinal-cord injury and in automotive adaptive equipment.

Doctor Stewart has been consistently zealous in assuring that the results of research not only aid veterans through VA medical policies and supply contracts but become available meaningfully and systematically to clinicians for use with disabled people in the non-veteran

population. He has been an enthusiastic supporter of the educational programs in prosthetics and orthotics offered by three universities—New York University, Northwestern University, and University of California at Los Angeles. He has arranged for the production of training films and the design and construction of scientific exhibits. His authorization of a variety of clinical application studies has reflected an appreciation not only for the effectiveness of such procedures as the final step in systematic transition from research to clinical use, but for the critical role which clinic teams play in prosthetics and orthotics management. Under his leadership as Chairman of the Editorial Board, the *Bulletin of Prosthetics Research* has become one of the most important journals in the field for effective dissemination to clinicians of the results of research. During this period, it has been selected for inclusion in the *Engineering Index* and *Index Medicus*.

His recognition of the importance of international exchange of information is exemplified by his service as a consultant in Laos and on the Scientific Program Committee to plan the First International Congress on Prosthetics Techniques and Functional Rehabilitation held in Vienna, Austria, in March 1973, under the auspices of the World Veterans Federation, the International Society for Prosthetics and Orthotics, and the Vienna Academy of Medicine. He has arranged numerous foreign lectureships for experts from VA projects, both intramural and contractual.

The Chief Medical Director, in further recognition of Doctor Stewart's outstanding contributions to the Prosthetic and Sensory Aids Service programs, has appointed him as his Consultant so that his services will not be completely lost to the Veterans Administration efforts in behalf of the seriously disabled. He and Mr. William M. Bernstock, former Editor of the *Bulletin of Prosthetics Research*, will work on a history of the VA prosthetics program.

Dr. Stewart has received several awards and honors. In July 1958, he received the Chief Medical Director's Commendation. Some of his international efforts were recognized by a citation from the People-to-People Committee of the President's Committee on Employment of the Handicapped. He was a founder and the second President of the American Academy of Maxillofacial Prosthetics, a specialty group within the dental profession, which recently honored him by best award of its Life Membership. Just before his retirement, he received at the Administrator's Staff Conference the VA Distinguished Career Award, consisting of a gold medal, an enamelled gold lapel button, and a citation (Fig. 2).



FIGURE 2.—Donald E. Johnson, Administrator of Veterans Affairs, presents the VA Distinguished Career Award to Dr. Robert E. Stewart, retiring Director of the Prosthetic and Sensory Aids Service.

### WILLIAM M. BERNSTOCK RETIRES

Mr. William M. Bernstock, founding Editor of the *Bulletin of Prosthetics Research*, Assistant Chief of the Research and Development Division, Prosthetic and Sensory Aids Service, and Project Leader or Director of numerous specialized activities, retired June 30, 1973, though he was promptly appointed a Central Office Consultant. He will work with Dr. Robert E. Stewart on a history of the VA prosthetics program.

Mr. Bernstock was born in New York City in 1913. He worked his way through college and graduate study, graduated from College of the City of New York in 1937, and received a master's degree in counseling psychology from Columbia University in 1942. Though he completed all course work toward a Ph. D. from Columbia, the pressure of his VA duties prevented him from completing a proposed dissertation on rehabilitation of upper-limb amputees.

After various jobs while a part-time or evening student, he was appointed a counselor at the New York State Employment Service in 1938. This position was transferred to Federal Civil Service January 1, 1942, beginning his federal career. He served in the Army during World War II.

After the war he joined the Veterans Administration New York Regional Office as a Counseling Psychologist for seriously handicapped veterans eligible for rehabilitation, supervising some 16 counseling psychologists. He was chairman of the Rehabilitation Board, a pioneering interdisciplinary group bringing the combined talents of medicine, therapy, psychology, and vocational counseling to the aid of disabled individuals.

In 1951, he transferred to the Research and Development Division, Prosthetic and Sensory Aids Service, a Central Office element located in the building of the New York Regional Office. In addition to a major role in the operation of the Division, especially during the frequent prolonged travels of its Chief, Dr. Eugene F. Murphy, Mr. Bernstock devoted special talents, efforts, and experience to educational and informational aspects. He selected VA personnel for details to extramural postgraduate courses, organized intramural courses for specialists and for interdisciplinary teams, helped draft the curricula for the early international courses, and served as member or liaison representative with the National Research Council Committee on Prosthetic-Orthotic Education, the Social and Rehabilitation Service's Educational Advisory Committee, and the University Committee on Prosthetics Education. He was appointed to the Committee on Education of the International Society for Prosthetics and Orthotics and participated in the ISPO First World Congress in Vienna, Austria, in March 1973. He was also elected to the Board of Directors of the U.S. National Committee for ISPO.

Mr. Bernstock was repeatedly appointed by the Chief Medical Director as Project Director for a variety of clinical application studies on fluid-controlled prosthetic knee mechanisms, orthoses, wheelchairs, and similar aids. Each involved design of an experiment, development of forms and protocol, selection and indoctrination of clinic teams in VA field stations, frequent communication with field stations, VA Prosthetics Center, manufacturer, and Central Office during the study, and development of a report. These studies not only provided the final large-scale evaluation of a device but allowed feedback to the research laboratories and the manufacturer, educational opportunities for all concerned, and experience for private prosthetists who were later more confident in providing similar devices to private patients.

Mr. Bernstock was also Project Director of the VA Qualification Program for Prosthetists. This unique effort to assure upgraded prosthetics services to veterans provided three routes by which a prosthetist might become qualified to provide basic prosthetic fitting and alignment services for veterans under VA contracts with prosthetics facilities. During Mr. Bernstock's equitable but firm administration of the program, over seven hundred prosthetists qualified, though some others were rejected.

Mr. Bernstock also supervised maintenance records of prosthetists eligible by special education or experience for specific types of prostheses—originally the suction socket, later a variety of devices and techniques such as PTB, its variants, fluid-controlled knee mechanisms, etc. These records influenced eligibility of the employing facility for those items on its VA contract. He also kept over 15,000 individual training record cards on all participants in all forms of prosthetics education programs.

Mr. Bernstock was particularly effective in developing the Bulletin of Prosthetics Research as an interdisciplinary journal covering a great variety of aids yet emphasizing the underlying principles common to all attempts at replacement of parts or functions for otherwise severely handicapped people. The primary goal, in accordance with Section 216, Title 38 U.S. Code, is to disseminate results of VA prosthetics research so all disabled may benefit. His own sensitivity and his psychological training made him acutely conscious of the psychological and emotional factors, the importance of motivation, and the value of well-trained interdisciplinary teams in these areas beyond the scope of a single conventional specialty. Though he admired solid scientific research, he appreciated the value of early reports to stimulate more work and the difficulty of control of human clinical research. One normally cannot provide a placebo in place of a prosthesis or run a double-blind experiment in which neither the subject nor the experimenter knows whether a genuine operating aid has been issued. Within these limitations, Mr. Bernstock attempted to advance the literature on research, development, and evaluation related to a variety of aids—prostheses, orthoses, sensory aids for the blind and the deaf, wheelchairs, canes and cane tips, and environmental controls. His success is indicated by acceptance for indexing by Engineering Index and Index Medicus, by cataloging in an increasing number of libraries, and by a steady growth in sales.

During his career Mr. Bernstock received several awards. At a retirement dinner, Dr. Robert E. Stewart, Director, Prosthetic and Sensory Aids Service, presented on behalf of the Administrator the Distinguished Career Award (Fig. 3). Mr. Charles Fryer, Director,

Prosthetics-Orthotics Education, Northwestern University, presented a special plaque.



FIGURE 3.—Dr. Robert E. Stewart, Director, Prosthetic and Sensory Aids Service, presents the VA Distinguished Career Award to William M. Bernstock, retiring Assistant Chief, Research and Development Division, Prosthetic and Sensory Aids Service.