A MODERN PUBLIC HEALTH PIONEER



VOLUME TWO OF THE AUTOBIOGRAPHY OF

WILFORD E. PARK M. D.

A MODERN PUBLIC HEALTH PIONEER

Volume Two of the Autobiography of Dr. Wilford E. Park

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WILFORD EDISON PARK, M. D.

(1901-1985)

This summary was prepared for the memorial service for Dr. Park held at Hennepin Avenue Methodist Church in Minneapolis, Minnesota, April 2, 1985.

Dr. Wilford E. Park was born on March 27, 1901 in Fair Ground, Ontario, Canada. He died on February 19, 1985 in Phoenix, Arizona and was buried in Sun City, Arizona.

He is survived by his wife, Dr. Evelyn Hartman Park, of Prescott and Sun City, Arizona; daughter Betty Ponder, of Fredericton, New Brunswick, Canada; and sons Douglas Park, of Cupertino, California; Robert Park, of Poynette, Wisconsin; James Park, and Warren Park, both of Minneapolis, Minnesota.

He is also survived by a brother, Rev. Clifford G. Park, of London, Ontario, Canada.

His eleven grandchildren are: Linda Neilson, Jennifer Scott, Kevin Park, Renee Mahan, Donavon Park, Robin Park-Doob, Mischa Park-Doob, Ian Park, Catherine Park, Jonathan Park, and Daniel Park.

His seven great-grandchildren are: Jason Rhinelander, Leta Scott, Michael Scott, Jennifer Park, Carrie Park, Danielle Mahan, and Charise Mahan.

Dr. Park earned his medical degree from the University of Toronto in 1927. He was elected to membership in the Alpha Omega Alpha Honorary Medical Society in 1925.

After being in general practice in Brownsville, Ontario for thirteen years, he moved his family of 6 to Whitby, Ontario in January, 1942 and joined the medical staff at the shell filling plant at Ajax, Ontario. While there he did pioneering work in the prevention of TNT poisoning. From 1945-1949 he was Director of Health Services for the Atomic Energy Project at Chalk River and Hospital Administrator for Deep River, Ontario.

In late 1949, he moved his family (now seven in all) to Minneapolis, Minnesota and became Director of Industrial Health in the Minnesota Department of Health. From 1952 until his retirement in 1972, he served the Minneapolis Health Department first as Chief, Occupational Health Service and later as Director of Adult Health. His duties included protecting workers' health in the workplace and the evaluation and inspection of nursing homes in Minneapolis. He also served as Lecturer in the School of Public Health at the University of Minnesota. He was one of the founders of the Minnesota Academy of Occupational Medicine and Surgery, an organization of physicians specializing in occupational medicine, serving as its first president. In 1973, he moved to Arizona with his wife, Evelyn.

Dr. Park was a member of many professional organizations and served on numerous community organizations on the city, county and state levels in Minnesota. He was listed in Who's Who in the Midwest and Who's Who in the West.

PREFACE

by the author's son

After my father's death in 1985, I assumed responsibility for the publication of his autobiography, which is divided into two volumes about Dr. Park's career in medicine. Volume one, From An Ontario Farm, covers the period from early childhood and his early days as a country doctor in rural Ontario, through his work as chief medical officer at Canada's Chalk River Atomic Energy plant, one of the world's first. The second and concluding volume of his autobiography covers the period from December, 1949, when he moved to Minnesota to assume a position with the Minnesota Department of Health, through his many years as Director of Adult Health for the Minneapolis Health Department until his retirement in 1972. This second volume, A Modern Public Health Pioneer, outlines in some detail his professional career in the protection of the individual's health and safety in the work place and health care for the elderly through inspections and maintenance of high standards in Minneapolis' nursing homes. The original title of his autobiography as a whole was Autobiography of a Pioneer in the Two Fields of Occupational Medicine and Active Nursing Care.

Dr. Park regarded as major accomplishments in his professional life his two federally funded projects through the Minneapolis Health Department for the promotion of nursing care for the elderly. The second project, entitled "Active Care Satellite Project," is reviewed carefully in the final portion of this book. The term "active nursing care" refers to an approach to nursing care in which the patient's mental and physical capacities are actively maintained and encouraged, with the hope that in some cases actual improvement and return to full capacity is possible. Here are two excerpts on this subject from his writings:

The modern concept of nursing incorporates the philosophy that retention of self-respect and personal dignity, and even the will to live, are somehow bound up with a patient's ability to take care of himself and to participate in activites with other people. In this concept, nursing does not mean turning away from tender loving care, when it is needed, but it does mean turning its back on coddling, pampering and fostering of self-pity. The emphasis on patient activity inherent in "active nursing care" gives the practice of medicine a dynamic revitalizing element which may make the difference between dependent chronic invalidism and a self-sufficient satisfying retirement.

The term "active nursing care" is synomymous with rehabilitation nursing. It is used to describe that phase of nursing which is directed toward assisting and motivating the patient to develop, or preserve, his physical and mental abilities to the maximum, within the bounds of safety, and his personal limitations.

The reader should be aware that Dr. Park chose to concentrate almost entirely on his professional career rather than his personal life. This memoir represents the chronicle of the achievements of an important pioneer in the field of public health. The background of his early years and his medical work in Canada are all preliminary preparation for the major accomplishments of his medical career in protection of worker's health and improvement of nursing home standards in the care of the elderly. Dr. Park believed in the importance of preserving a record of his life and hoped that his work might benefit others in the future. His writing is occasionally technical; here he is speaking mainly to his peers in the medical profession. I am pleased to have played a role in enabling his autobiography to reach the public.

INTRODUCTION ...

These reminiscences are being recorded chiefly for my children, other relatives, colleagues and everyone else who may be interested.

They necessarily will not document all of the events and influences which have happened during my lifetime. Neither will they contain much information about other members of my family. They will essentially chronicle some possibly unique developments in my adult life.

W. E. P.

Note: Dr. Park makes reference to several of his written reports which are stored "in his files." The files are now in my care and copies of those reports are available to anyone interested. Write to: Warren Park, 3339 15th Ave. So., Minneapolis, Mn. 55407.

United States Senate

WASHINGTON, D. C.

November 10, 1953

Dr. W. E. Park 1804 Humboldt Avenue South Minneapolis, Minnesota

Dear Dr. Park:

My congratulations to you as the first president of the newly organized Minnesota Academy of Occupational Medicine and Surgery. It goes without saying that there is a decided need for the group and you must derive great satisfaction from the knowledge that you were instrumental in its formation.

I think this may be the opportune time to say that for a man who has resided relatively few years in our community you have done a rather remarkable job of making a place for yourself. I know our community is a better place for your being a part of it, we are proud and grateful of your many efforts.

With all best wishes.

Sincerely yours,

Hubert H. Humphrey

enc.



Physician, nurse and patient confer on an industrial health problem.

Dr. Wilford Park, left (1957 photo)

Some Additions of a Personal Nature

...

Minneapolis.

Before closing this chapter there are some items of a personal nature which should be mentioned for the record because they took place during my sojourn in

As mentioned earlier, from my college days I was afflicted with recurring attacks of a cardiac malady called paroxysmal tachycardia. In Minneapolis a specialist in internal medicine prescribed for me quinidine sulphate to control it. This I used for quite a number of years with satisfactory results, until I became allergic to it.

Another specialist in internal medicine, by the name of James Myhre, attended me for my bouts of rheumatic fever. He thought that I might be benefitted by taking either of the two drugs, penicillin or sulfadiazine, and suggested that I choose which one. I chose the sulfadiazine and took it, as he prescribed, for about 17 years. After taking it for about six months all evidences of rheumatic fever, in any active form, had disappeared. Of course I continued to have the established signs of heart damage caused earlier, but no new signs developed. So in early 1956 my health had improved so much that I was able to undertake more strenuous work than I was previously able to do.

Also in the nineteen-sixties I was having some trouble with gout, and the specialist I consulted about it put me on regular doses of allopurinol, which I took for many years in addition to the sulfadiazine.

In the latter part of May 1972, I began developing a fever every day without any other symptoms. For this I consulted my medical internist, Dr. James Myhre. After several days with no other manifest symptoms, Dr. Myhre had me admitted to Northwestern Hospital for further investigation. I was in the hospital, except for a short time at home, for most of the next eleven weeks.

During that period in hospital an intensive investigation was carried on in an effort to find the cause of the fever. Dr. Myhre and some of his associates thought the most probable cause was subacute bacterial endocarditis, which is a serious infection inside of the heart which might occur on top of rheumatic

fever. He was constantly looking for the clinical symptoms of this disease and taking blood cultures almost every day. However I never showed any of the classical symptoms of the disease and no proven bacterial organisms were ever found in my blood cultures. A bone marrow culture also was negative. There were some positive organisms found in a few blood cultures but in all cases they were proven to be contamination. Near the last of these blood cultures the hemolytic steptococcus was identified in the culture being incubated. Dr. Myhre was quite certain that here was the organism he had been looking for in my blood, and he wanted, right away, to begin giving me a long series of treatments with penicillin to be given intravenously.

Before I would consent to this treatment I asked him to see if the organism cultured was resistant to sulfadiazine, because I knew that no organism of any kind unless it was resistant could survive in my blood stream when I was taking sulfadiazine so constantly for all those years. He did give the bacterial culture some sulfadiazine and it killed the hemolytic steptococci very thoroughly. So it was established that the organisms did not come from my blood.

During my stay in hospital many other medical specialists were called in and all possible fields of infection were investigated, and a great many X-rays taken. Conditions looked for included, malaria, parasites, chest conditions, sinus infections, kidney and urinary infections. Also studied were gall bladder, stomach, colon, lymphatic system, mediastinal glands, and tests for many skin conditions. All of these failed to show any disease.

I had told Dr. Myhre that I was allergic to quinidine and that I also might be allergic to sulfadiazine and allopurinol which I had taken so long. He apparently did not believe it, because when I had an attack of paroxysmal tachycardia, while in the hospital, he ordered doses of quinidine sulphate to be given

to me every four hours. After the third dose I developed a tremendous chill and a higher fever than I had ever had in my life.

It was a very trying and critical time for everybody but after considerable time my chills subsided and some hours later my temperature went down.

After this experience Dr. Myhre had Dr. Cecil Watson, Professor of Medicine at the University of Minnesota to see me, in consultation. Dr. Watson did not indicate that he thought that sulfadiazine and allopuranol were causing my fever, but he suggested that all drug treatments be stopped, for a while, to see what happened. This was done.

Slowly over many days my daily temperature began to become lower and I was discharged from hospital. In about two more weeks I was feeling better and my temperature returned to steady normal levels.

For some reason Dr. Myhre did not accept that the fever was caused by the drugs. On the hospital papers he certified that I had <u>Fever from Unknown cause</u>. He did say however privately to me that if I had been receiving the intravenous penicillin which he wanted to give me, the recovery would have been registered as a successful treatment with penicillin.

After the experience with quinidine it was admitted that I should never take it for the rest of my life. $\dot{}$

Stopping the sulfadiazine also seemed reasonable because of the recovery I made when not taking either the sulfadiazine or the allopurinol. The doctors however feared that I could not go long without allopurinol, or I would risk a return of gout. So I was put on penicillin by mouth as a substitute for the sulfadiazine, and the allopurinol was started again at the same time.

After a time I again began having a low fever. So both of these drugs were also stopped and the fever disappeared. Instead of continuing the allopurinol

the drug benemid was substituted and I have taken a small dose of it, daily, ever since and have had no recurrence of gout, and no such fever as before.

I have also since taken penicillin alone with no adverse effects.

So it is my intention to consider myself allergic to the three drugs quinidine, sulfadiazine and allopurinol and not dare to take any one of them for the rest of my life.

It will be noted, by the careful reader, that I stopped taking sulfadiazine completely, and have not, since 1972, taken anything whatsoever to prevent a recurrence of rheumatic fever symptoms.

This in itself, may be <u>medically significant</u> because in all of the last 12 years (now 1984) I have not had the slightest hint of the return of rheumatic fever symptoms. This may mean that taking sulfadiazine daily, over many years, may bring about a cure for rheumatic fever.

After the prolonged illness described above, it was obvious to me that it was time for me to retire so in the middle of Octover 1972 I submitted my resignation to the Minnesota Department of Health, and retired completely at the age of 71 years and 7 months.

Since retirement I have had the common things which afflict elderly men and some operations but the only malignancies found were two skin lesions which were succeffully removed without recurrences.

I should note here that, while in hospital during those many weeks in 1972, the almost daily drawing of blood for blood cultures had lowered my hemoglobin level considerably, and afterward I had to take ferrous sulphate tablets, prescribed by Poctor Myhre, for several weeks which did restore it to normal.

Soon after moving to Minneapolis from Canada I became a member of Hennepin Avenue Methodist Church and remained a member until I moved away from Minneapolis in 1973.

I was quite active as a member of the church and participated in the Methodist Men's Organization, the various meetings of groups involved in religious studies in depth, led by one of the pastors, and activities of one of the couples clubs. These were either social, or instructive in nature. I also attended some two-day retreats at the Church's campsite on a lake.

Hennepin Avenue Methodist Church was such a large church, with so many members and diversified activities, that it employed five full-time ministers and two female church workers, each of which served specific areas or functions. For ten years I was a member of the church's Commission on Education and its Chairman for my last two years on that body. The Commission on Education consisted of 12 or 15 church members chosen by the congregation. One of the church's five ministers served exclusively in the areas of the jurisdictions controlled by the Commission on Education. He was not a member of the Commission nor its Chairman but he was in a sense subject to the Commission.

The areas of church activities under the responsibility of the Commission on Education, and its minister, were the Sunday School, the Young Peoples Organization, and all educational activities of the youth of the church.

One of the distressing things we on the Commission on Education had to deal with during the period when I was its Chairman, was a growing dissatisfaction with the Minister of Education. The complaint was that he was devoting all of his time to the promotion of enjoyable social activities among the young people and doing nothing to bring them to any personal commitment to Jesus Christ. The Commission agreed that this was a part of the responsibility of the minister in

the field of Christian Education. So the Commission on Education took action which ultimately, in a quiet way, did result in a change of ministers serving this area for the church.

Since at this point in the narrative of my life, and in relation to some of its religious aspects, I had an experience which, although more personal than I intended to mention, I will introduce here. In 1955, being a widower, I married a medical associate of mine, Miss Evelyn Hartman, M.D. Although she was born in Michigam, U.S.A., her father took his family to his native Finland where his daughter Evelyn received her high school and university education. During the World War II years, just as she was about to graduate in Medicine, Evelyn was pressed into a medical practice among civilians near the Russian border on the east of Finland, because most of the male civilian doctors were in the army. She has written a book entitled "Survival From Hopelessness" about her ordeals there. I will not go into that except to mention that she was a part of the Finnish population which had to flee from that part of Finland, toward the western part of the country, when the Russians invaded and took over Karelia in 1944.

In subsequent years, from time to time, the displaced Karelians met together to commemorate that very trying pilgrimage. On one of these occasions, when we were in Finland together in the early 1960's, we attended one of these huge gatherings. As a part of the rejoicing and festivities there was a gathering in the city's large church where a service of thankfulness was conducted which included communion at the altar railing in a kneeling posture. Evelyn and I went to that communion ceremony together, which of course was conducted in the Finnish language of which I did not understand a word. At that time, with all of these thankful people around us who had escapted from the hands of the Russians, we

both felt an intensity of emotion and a closeness to God we had never before, nor since, experienced. It seemed to us that everyone of them, in their hearts, were thanking God for their survival and that we, among them, were being blessed by his presence.

Before closing this chapter there are some things which should be mentioned in connection with my retirement.

Technically, when I became 65 years of age near the end of March 1966, I was, as required, retired as an employee of the Minneapolis Health Department. The Municipal Employees' Retirement Board therefore, at that time, took the usual action required of that Board, and issued to me the required document putting me on my retirement monthly pension allowance for the rest of my life. This document was dated 30th day of April 1966.

So during the years from the end of March 1966 until I retired in October 1972 I received both that retirement pension and my monthly salary as an employee of the Minnesota Department of Health. Even so my office was still in the Minneapolis Public Health Center and I continued to use the title Director of Adult Health for the Minneapolis Health Department. I continued to give much service to the City of Minneapolis in the field of industrial health and I continued to carry the responsibilities of the City Health Department in respect to nursing homes.

During the years from April 1, 1966 until I resigned from the Minnesota Department of Health, I received a monthly check from the Minnesota Department of Health, from which was deducted the usual amount and paid into the Federal Social Security Program. A small amount was also deducted from my monthly check and paid into the State of Minnesota Employees Retirement Fund. When I retired

from the Minnesota Department of Health in 1972 I chose <u>not</u> to go on the State's Retirement Program, so I was refunded the total amount of money which I had paid into it, but without interest. Of course on retirement in October 1972 I began afterward receiving my Social Security checks monthly for the rest of my life.

When I retired in 1972, at a party at the Minneapolis Health Department, I received an Award of Merit from the City of Minneapolis signed by Mayor Charles Stenvig which read "in recognition of outstanding and meritorious Service as a Member of the Minneapolis Health Department the award of merit is gratefully presented to WILFORD E. PARK, M.D. Date, October 1972."

Also in May 1969 I received a small envelope addressed to Dr. and Mrs. Wilford E. Park. Inside was the little card from the President of the University of Minnesota saying Mr. and Mrs. Malcolm Moos cordially invite you to attend a Retirement Tea, Wednesday, the twenty-first of May from three to five o'clock, at 176 North River Blvd; St. Paul. RSVP. We of course accepted and attended.

During the afternoon I was called to the front and the President of the University presented me with a beautiful dark red folder bearing the Seal of Regents of The University of Minnesota. Attached inside was the official document signed by the President and Secretary of the University in large black print which stated as follows.

The Regents and the President of the University of Minnesota in recognition of devoted service express their gratitude and high esteem through the presentation of this CERTIFICATE OF MERIT to WILFORD E. PARK lecturer School of Public Health College of Medical Sciences 1950-1969 whose name is inscribed in official records for all time as one who has contributed to our university and our state. (Note - the capitalized letters and dates are in large red print)

Given at Minneapolis, Minnesota, This Twentieth Day of May in the Year of Our Lord, the One Thousand Nine Hundred and Sixty-ninth, and of the University of Minnesota the One Hundred and Eighteenth.

At the time of my retirement, I notified the many Committees I was still associated with and submitted my resignation from active participation.

Also I notified all of the professional organizations of which I was a member of my retirement. All of them recognized the importance of my relationship by changing my status to one in which I was no longer required to pay any membership dues for the rest of my life. In each instance, I am still being carried in the status stated below.

- 1) An Associate Member of Hennepin County Medical Society.
- 2) An Associate Member of the Minnesota Medical Association.
- 3) A Non-dues paying member of the American Medical Association.
- 4) An Emeritus Member of the American Conference of Governmental Industrial Hygienists.
- 5) An Emeritus Fellow of the Industrial Medical Association, the name of which is now changed to American Occupational Medical Association.
- 6) An Emeritus Fellow of the Minnesota Academy of Occupational Medicine and Surgery, the name of which is now changed to North Central Occupational Medical Association. It is a component of the national organization mentioned in 5) above and one of the largest components in the U.S.A.
- 7) An Emeritus Fellow of the American College of Preventive Medicine.

I have long been a member of the Parke Society, Inc. which originated in North Stonington, Connecticut. My membership began in 1961 and since that time I have received issues of the Park/e/s Family News. In one of the 1977 News Issues it was stated that I had been honored by issue of the Society's Distinguished Service Award. The February 1977 issue of the Family News carried a write-up about me and a picture of me and my wife.

ADDENDUM

Some Reminiscences

It is with a degree of trepidation and awe that I reflect on what has happened to me in my adult life. How did it all come about? I am, myself, amazed at how it developed, and at how little I had to do with planning it.

I entered university in a haze of faith that it was my destiny to become a medical missionary. I then didn't realize how costly would be six years of medical school and one year of hospital internship, and how difficult would be the mastery of medical education. I finished my first academic year with no special distinction and only then, with sinking heart, did I realize that no one, and no generous foundation, would ever step forward to help me, in any way, with my future educational expenses.

I chose to sell Wear-Ever Aluminum Cooking utensils, door to door, during the summer, because nothing else opened up for me. At that time, I had no reason to expect that I could become a successful salesman. That I was able to develop into an outstanding salesman for the company, and, through my own earnings, to completely finance my seven years of medical education, is in itself something of a miracle.

As described in chapter 8 in the first volume of this Autobiography, I became sick with rheumatic fever which incapacitated me completely for about eleven months, and left me with such heart damage that the prospects that either I might die at any time or that I would be so handicapped as never to be able to practice my profession were never far away. The reader will recall that in chapter 8 I accepted the illness as a sign that God did not want me be become a medical missionary. At the same time I committed my life to Him to be directed in whatever way He chose.

I entered into general practice of medicine with no expectation of becoming anything else than a general practitioner. It was only in late 1941 that I began to feel that I was being impelled into a new field of medicine. I did not recognize this for what it was, but it did result in my transferring my activities to serving Defense Industries at Ajax, Ontario in January of 1942. It was only in 1982, in the American Lutheran Church in Sun City, Arizona, that this feeling which I experienced was interpreted to me as a call of God, by Rev. Clifford Swanson of St. Olaf College, Minnesota, when he said "When you discover who and what you are, it is God speaking to you."

As I look back again now, having written this Autobiography, I realize how appropriate it is that I have entitled Section Two of Volume I (chapters 8 and 9) "Years of Preparation" because they were just that: preparation for what lay ahead, which at that time was completely unknown to me and not even visualized.

Not long after I started working at Ajax, Ontario, 'out of the blue' I was asked by top management to solve the problem of T.N.T. poisoning, which was that vast plant's paramount health problem at that time. I had no prior experience in anything of that kind, and I did not know if I could do it. However, I accepted the challenge, and was given top-management's unqualified support. That I succeeded in controlling the problem dramatically is an historical fact. In doing so, I drew upon latent forces which I didn't know I possessed. I learned to direct a scientific research program. I learned how to make and evaluate careful plant inspections and to separate important findings from inconsequential ones. I learned how to work with people, and when to stand firm when changes in common practices were vital. I learned how to keep accurate records and how to

write easily understood scientific papers. All of these accomplishments were things I had never done before and didn't know I had the capacity to do.

Again, 'out of the blue' I was selected by the Head Office of Defense Industries of Canada to become Chief Medical Officer of Canada's only Atomic Energy Plant, which was then in its early stages of construction at Chalk River, Ontario. I accepted the position although I had no prior experience in that sort of thing. Here again I was able to do a commendable job in formulating and establishing a medical service for the Plantsite, and for the Townsite of Deep River, ten miles away. Both places needed a hospital and medical office facilities and other services. These I was able to plan with the architects involved. I also selected the doctors, nurses and technicians required and directed their activities. At the apex of my administrative activities, I was directing a staff of 70 people including the Health Physicists who were responsible for radioactivity safety. In addition I carried the responsibilities of Public Health Officer for the whole area. Again most of these activities and responsibilities were entirely new to me but I was able to draw upon unknown personal resources which enabled me to do a satisfactory job in all of these areas.

The circumstances of my transfer to the U.S.A. are detailed in Chapter Eleven. Through this move a whole new area of responsibilities opened up to me, which permitted far greater opportunities than I could ever find anywhere in Canada.

Soon after taking up my responsibilities with the Minnesota Department of Health I became attached to the University of Minnesota as a Lecturer in the School of Public Health and participated in the privileges of the Campus Club. I soon became well known as a public speaker and began writing scientific papers for publication in the field of Occupational Medicine.

Then, strangely enough, I became suddenly ousted as an employee of the Minnesota Department of Health and this too turned out to be better for me. It was not directed at me at all, but this is how it happened. The State of Minnesota Legislature passed a law requiring all employees who were serving the State in the limited status of temporary employees to be either given permanent status after two terms of temporary employment or be discharged. In my case, not being a citizen of the U.S.A., by law I could not hold anything other than a temporary position. Furthermore, being a foreigner, I was prohibited from becoming a citizen until five years of residency in the U.S.A. were completed.

My problem was solved by the State Department of Health arranging for me to be transferred and carried by the Minneapolis Health Department as a temporary city employee, because that new State law did not apply to employees of the city. The State of Minnesota had no trouble granting the City of Minneapolis the finances to pay my salary.

This meant another change for me but did not require me to change my domicile because I was already living in the city of Minneapolis. This transfer of my activities to the city did not change my relationship with the University of Minnesota, but it did open up for me a more concentrated field of activity which eventually proved to give me the most productive years of my life.

Here, in the Minneapolis Health Department, I was pushed into, or led into, spheres of influence which may have an impact on the practice of medicine which will probably extend into the next century.

In looking back over these <u>changes</u> in my career, which began with my move into industrial medicine in January 1942, it seems that all of them took place <u>without</u> any initiative on my part. How can anyone doubt that my career was

controlled by a power beyond my own? This seems the only explanation when it is realized that <u>every</u> step of the way led to something better for me personally, and at the same time, led to some <u>new</u> developments in the practice of medicine, in my hands. These new developments were largely associated with the two demonstration projects financed and supported by the United States Department of Health, Education and Welfare in Washington D. C., and later assigned to the Health Care Institutions Branch, National Center for Health Services Research and Development.

Also as I look back on the professional recognitions and honors which came to me, <u>not</u> one of them was the result of any solicitation by me. They are relisted below:

- 1) Alpha Omega Alpha in 1925.
- 2) Fellow of the Industrial Medical Association, April 27, 1955.
- 3) Certified as a Specialist in Occupational Medicine, November 18, 1955 by The American Board of Preventive Medicine.
- 4) Fellow of the American College of Preventive Medicine, November 2, 1956.

So it seems in following the leadings of my destiny I may have started some ripples in the great sea of time. Their true impact I will never know, and strangely enough I find I am content not to know, because the outcome is no longer in my hands.

And so, at this point, we reach the end of this Autobiography. I have no aspirations for the future. I am content in my retirement, grateful for friendships and the loyalty of my co-workers and associates which I have had down through the years. I am also thankful for the tolerance, understanding and companionship of my loved ones.

I do not know what the future holds, but I am comforted by the words of an old familiar $\ensuremath{\text{hymn}}$ -

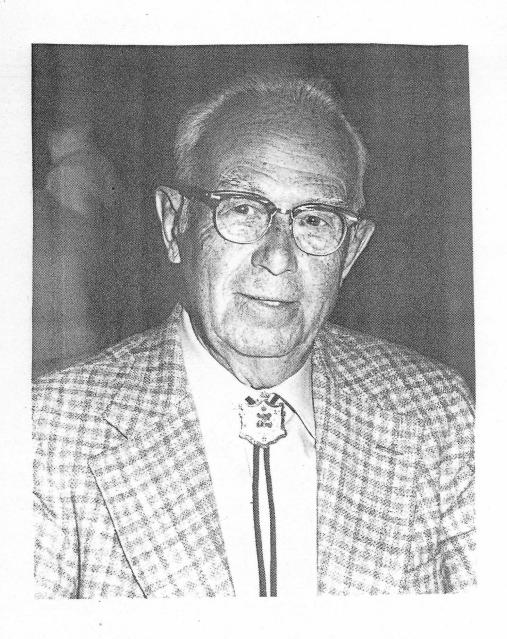
"Amazing grace, how sweet the sound."

"Through many dangers, toils and snares,

I have already come,

T'is grace has brought me safe this far,

And grace will lead me home."



DR. WILFORD E. PARK in his early 80's