

Correspondence

Anesthesiology
46:230, 1977

Cataloging Medical Literature

To the Editor:—After several years' experience with the "Personal Cross-reference Filing System for Anesthetic Literature" devised by Doctors Petty and Carden (ANESTHESIOLOGY 38:498–510, 1973), the convenience of its design caused me to despair that similar lists were not available for more detailed aspects of anesthesia, *e.g.*, pain management, or indeed, unrelated areas of information. The creation of such a system requires a considerable breadth of knowledge of the field to be referenced. Lacking this, the compulsive tyro will be pleased to know that a cataloging program is available in any well-indexed text that has a thorough table of contents. The table of contents an index may be copied and modified so that page numbers become section numbers. When more than one subject occurs on a page, the cataloging

problem may be resolved by assigning the awkward subjects a more specific section (page) number from the table of contents or index. Serendipitous juxtaposition of related papers and automatic cross-referencing are goads to creative learning and encourage organization from the time of one's introduction to a new subject.

I envy the taxonomist who develops the index indicum for the convenience of those who have already indexed several areas of knowledge.

BERNARD S. MILLMAN, M.D.
*Department of Anesthesia
Stanford University School of Medicine
Stanford, California 94305*

(Accepted for publication November 3, 1976.)

Anesthesiology
46:230, 1977

Hazard of Thiopental Bottle Cap

To the Editor:—I am concerned by the improper design of the 5-g thiopental bottle dispensing cap (Abbott #6680). The withdrawal port is topped by a free, unattached blue cap that may be removed repeatedly, handled by unsterile fingers, dropped, and often placed on unsterile surfaces, while the solution is being withdrawn. To correct this, I have designed a plastic flapped hinge that attaches the blue cap to the cover unit so that the cap hangs free when removed. I have observed other col-

leagues use tape for the same purpose. I would hope that the manufacturer will develop a new design that will minimize handling and potential contamination.

HERZL KATZ, M.D.
*Section of Anesthesiology
Saint John's Hospital and Health Center
Santa Monica, California 90404*

(Accepted for publication November 8, 1976.)

Anesthesiology
46:230, 1977

The First Endowed Chair

To the Editor:—I was pleased to read Dr. Nicholas Greene's excellent memorial to Dr. Henry Beecher, published in your October issue. I feel constrained, however, to point out that Dr. Greene has erred in the statement that "in 1941 Dr. Beecher was appointed Henry Isaiah Dorr Professor of Research in Anesthesia at Harvard University, the first appointment to the first endowed chair in anaesthesia in the world." In fact, the Nuffield Endowment at Oxford and the appointment of

Sir Robert Macintosh to that chair antedated the Harvard chair by four years (1937).

R. A. GORDON, M.D., F.R.C.P. (C)
*Professor and Chairman
Department of Anaesthesia
University of Toronto
Toronto, Ontario, Canada M5G 1L7*

(Accepted for publication November 8, 1976.)