

THE VIEWPOINT OF THE UNION

HARRY READ
WASHINGTON, D. C.

MOST unfortunately, the average worker entertains a mental picture of the plant medical office that is distinctly uninviting. As a rule, he sees in his mind's eye a cold, repellent, scientific gentleman in a white gown, who rasps out his comments in a bored tone. Hovering in the background is a prissy-looking female who is envisioned as being even more forbidding than the industrial physician.

This mental aversion is rather deeply seated; much of it is based on the general attitude of the public toward hospitals. People dislike hospitals and the atmosphere of hospitals. I suppose it is a psychological proposition that part of this feeling of the general public underlies the attitude of the industrial worker toward the plant medical department. As I say, this is unfortunate, and it is most definitely something that belongs on the agenda of this symposium.

I believe that the medical staff at any industrial plant can do a job in improving the relationships between the medical department and the worker.

I would put first in the various steps which I shall suggest this necessity of improving the whole approach to the injured or ill worker who is seated beside your desk. The workers in the plants cannot be expected to reason these relationships out on a philosophical basis. To them the plant's medical department is closely analogous to the charity clinic, and too often the attitudes of the medical personnel supports that concept.

It might even be helpful if you could talk to your worker callers in a restful office shut off from bottles of pills, gleaming instruments and other technical equipment.

Above all, you should carefully avoid treating plant patients as so many case numbers. The man who is injured or who becomes ill while on the job would welcome from you subconsciously the same sympathy and attempted understanding he usually gets from his personal physician. I know, of course, that you are busy men, and that this procedure would take a little more time in each case, but I am convinced that in the long run it would pay excellent dividends.

Here and there, with the detached, scientific attitude on the part of too many industrial physicians goes an air of suspicion. Of course, an industrial physician has to be on the lookout for the malingerer and the chiseler. That is part of his job. It is not, however, the main part of his job. His principal mission is to serve faithfully and sympathetically those who really are injured or ill. These comprise the tremendous majority of those who apply to the industrial medical office for treatment and advice. It is far better, so far as human relations are concerned, to

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