DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

March 8, 1982

PHS INDIAN HOSPITAL
PINE RIDGE, SOUTH DAKOTA 57770

IN REPLY REFER TO:

Dr. C. Everette Coop, Surgeon General Humphrey Bldg.
716 G 200 Independence Avenue, SW
Washington, D. C. 20201

Dear Dr. Coop:

This letter is coming to you by way of introduction of both myself and to make you aware of a few problems of the facility that I am currently working at.

I doubt if you will remember me even though we met approximately 27 years ago. At that time I was a three to four year old fellow who was losing weight and had problems with a little bit of pyloric stenosis. I distinctly remember you as you were the one in the operating room with the beard and also the one telling the resident not to steal the case with a retractor. However I, thanks to you, begin to grow and eventually over the years have ended up as a physician in an Indian Health Service facility as a member of the Commissioned Corp.

The facility I refer to is Pine Ridge Indian Hospital at Pine Ridge, S.D. Though the hospital has been here for years, I certainly have not been a physician for years. My training was as an undergraduate at Penn State University. From whence I went on to medical school in Hershey, PA at their school of medicine. At the time I wanted to be a surgeon; however, the Indian Health Service told me that they would pull me after one year of residence so I decided to take a one year mixed medicine and Pediatrics residency at the University of North Carolina, Chapel Hill. And from there I came out to Pine Ridge in the summer of 1981. I have been here for approximately eight months now and as you are my ultimate superior in the Commissioned Corp.,I thought you might be interested in what one of your underlings feels is going on here at Pine Ridge.

In a few short words, it is nigh impossible to practice 20th century medicine here at this facility. The limitations are both amongst the medical staff as of the currently five physicians who are here, none of us are board certified in anything. However, the greater deficits lie in para-professional positions. We need more nurses. I know this is a cry heard across the country but we do need more nurses. We need more Lab Techs. We have three working in the laboratory that is doing the work of eleven people according to JCAH. We need more Radiology Techs. We have two for this month. One will be leaving at the end of this month and there are no new ones in sight, therefore leaving the hospital without x-ray coverage approximately half of the nights and evenings on Call. For the volume of trauma and truly ill people that we see here this is unacceptable. I am low man on the totem pole around here and certainly don't know the actual statistics of the number of outpatients and inpatients that we take care of. However, it certainly seems like alot. For what we see here in the way of pathology, across the board we need more nurses, we need more para-professionals, and we need more physicians, preferably board certified in something.

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The above paragraphs reflect a certain degree of frustration as I am sure you have picked up. I would not be so frustrated if I was living in say, Bangladash where with this current facility and people we would be labeled as the Univ. of Pine Ridge and would perhaps be training residents and nurses and leading the whole country in the standard of medical care but such is not the case. Pushing aside the arguments that our medical care system in this country is already over-inflated and too costly set your sights a few nothces lower in terms of the quality of medical care and you would still need to lower a ladder down to us and help pull us out of the ditch in terms of the level of care that we are able to provide here. The Pine Ridge Reservation is essentially a [redacted] microcosm of its own and the types and numbers of pathology that we see are absolutely astounding.

What are the answers? In a few words, we need more people and we need more money. Those things that we feel as physicians that are beyond our capabilities of our little hospital or capabilities as physicians, we have to send out on a Contract Care basis. We are told by our Area Office in Aberdeen that we are running out of money, that we need to cut back on all funds. Ultimately, the only folks that suffer are the Indian people here that we are trying to serve. If you would be interested in more specifics I can certainly list them in detail. However, at this point, I thought simply a letter of re-introduction, as I had met you many years ago though I think I only babbled out a hello at that time, making you aware of a few of the general problems here at Pine Ridge would be indicated.

I will look forward to your answer and thank you for your time and consideration in reading through this letter. Until later I remain,

Most Sincerely Yours,

Chris

C. A. Yeakel, M.D.
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