



The above item from the U.S. Patent Office was researched for us by Sandra Miesel.

YANDRO #259 is the Feb. 1986 issue, I think; I'm not sure exactly when it will appear, but I hope sometime in February. It's going to be sloppy looking because I'm in charge of everything this time; Juanita is busy writing. Also because a few pages are being rushed into print because I only discovered yesterday that the company copier is being removed tomorrow, and anything I don't get now has to be paid for. Published by Robert (Buck) and Juanita Coulson, 2677W-500N, Hartford City, IN 47348-9575. British Agent is Alan Dodd, 77 Stanstead Road, Hoddesdon, Herts. EN11 OQA, England Price, U.S. \$1.00 per copy. Price, England, 75 pence. No subscriptions accepted at the present time. I'm almost positive that one more issue will appear; after that, it all depends.

#### DIFUGALTY #33

#### column, by Dave Locke

By the time you get to these words you'll already know that The Heart In Hartford City suffered a heart attack on June 27th while mowing his *field* lawn. Buck claims he had this attack only to prove to the world, or at least to fandom, that he actually <u>has</u> a heart. I don't know whether to believe this or not. Possibly he just had an attack of gas.

On the other hand, there's circumstantial evidence to support a theory that Buck's problem was brought about by a severe deprivation of fanzine publishing. For one thing, the last issue of YANDRO was in December of 1984. This used to be a monthly fanzine, after all. I mean, Lee Hoffman can go five years between issues -- and, come to think of it, so can many of us -- but Buck's system was geared to a monthly fix for years and epochs and aeons. Has to be a big shock to the system, no doubt. And look what Buck is doing for therapy while recuperating at home: he's working on another issue of YANDRO. These little clues add up, you know.

But, Buck Coulson, a heart? Hard to believe. I've heard a rumor that he <u>used</u> to have a heart, but that a few decades ago he passed it as though it were a kidney stone. As the story goes, afterward he commented: "Phew! I'm glad that was a small one."

Well, whatever the problem was, it will give Buck something to write about in his editorial. Actually, it will provide him with a pain story. Pain stories are normally my responsibility here in YANDRO, you know, but I don't want to become too territorial about this so I'll let Buck see what he can do with one this time. Besides which, I've already done a sort-of heart-attack story for YANDRO (it turned out not to be a heart attack; in fact, the doctor didn't know what it was. I asked if he had any advice for me and he said no, how can he give me any advice when he didn't know what it was? I got up to leave his office and then he did come up with one piece of advice. Oh, there is one thing, he said. What's that?, I asked. If it happens again, he told me, let me know).

As long as we're talking about health care, I might mention that I've changed fields. Makes it sound like I was in control of the decision, right? Wrong. My old field, materials management, kind of dried up and blew away on me out here in the Wimpy Zone. Suddenly you needed a college degree to get an interview, which is interesting because they don't give degrees in materials management. Any degree would do. A B.S. in Sandbox would be fine. But I didn't have one, so I started at the bottom (as a temporary) in a new field: health care. Specifically, a Health Maintenance Organization, or HMO for short. A little over three months later I got hired at the bottom, and a little less than a year after that I got promoted to (Acting) Member Services Manager, and half a year later I got confirmed in that position and dropped the (Acting) from my title.

Now, this is interesting because there isn't anyone in the known universe who possesses less knowledge about the field of medicine than I do, unless it's some of the people who go through college and get to add an "M.D." after their names. I think some of them know less than I do. Or, if they do know more about medicine, they're keeping it to themselves.

For example there is the woman whose spine is almost completely eaten away by cancer and about to collapse. Her doctor checked her out and spent months trying to figure out what she was allergic to which would cause these strange symptoms, and he isn't even an allergist.

There's a doctor who treated a small child for leukemia for months and months and months, and never told the parents what was wrong.

Then there are the doctors with a sense of humor, which to some patients is even worse than malpractice. Forinstance, there was the chocolate morsel complaint. One of our female members phoned to protest the demeanor of her physician. She had stripped down to the waist for a breast examination and noticed that her doctor was staring fixedly at her right nipple. "What's that?", he asked her, and pointed. She looked down and saw a chocolate morsel partially melted and draped around her nipple. She got all red and felt she had to explain about how she bakes chocolate chip cookies while in the nude. The doctor nodded through the story, continuing to stare at the chocolate morsel. When she was done he asked: "Do you want it?" "Er, no," she responded. Then he said: "Do you mind if I have it? I missed lunch."

We've got about 80,000 members signed up with this HMO healthcare plan, and they cover the spectrum. We get all types. I'm working on a theory which postulates that the first member phone call in the morning sets the pace for the rest of the day. The more bizarre the call (and/or the member), the more bizarre the day. My work in correlating this data may later contribute toward a unified field theory, but for now let me just give you some examples. I'll tell you about the first phone call received on each of three bizarre days.

A woman called and said: "Hi, my name is Strange. Peggy Strange. My family has a long history of epilepsy and insanity. We just joined your HMO and I wanted to call and say howdy."

A young man, who had a sense of urgency in his voice, called and inquired about finding a physician in the downtown area who could see him that day. It was Friday, and he needed help before the weekend. When I asked the nature of the emergency he disclosed that he needed a vasectomy. If he had plans for a big weekend, I'll bet he was highly disappointed.

A young woman called to inquire about her coverage, and I asked for her member ID number. She didn't have her card, so I said "okay, what's your name?" She said "hold on and I'll check" and put the phone down.

This kind of call is a chilling harbinger for the day, but what's worse is encountering it before my first cup of coffee. As a rule, I generally don't like to drink liquor or get calls from The Twilight Zone before high noon, but definitely not until after morning coffee.

It may be comforting to know that it's not necessary to my job for <u>me</u> to know hardly anything about the field of medicine. This is good, because I don't. The most important thing I do know is that medicine is something which doctors are still 'practicing'. This is not only an important thing to know, it's an important thing to understand. My favorite M.D., who is also the "Physician Consultant" for this HMO, stated the case very succinctly when he noted that medicine is more of an art than a science. It bears many of the trappings of a science, but is still at such a stage of general ignorance that intuition can be of more value than just knowledge of the current state-of-the ... art.

Of course, there's more to medicine than art and science. There's also management. Usually bad management. This explains why there's a popular book available on how to survive as a hospital inpatient. Having already documented a hospital's repeated attempts to kill me, having encountered such things via the experiences of friends and acquaintances and, through the various media, strangers, and now encountering it on a day-to-day basis, I'm here to report the obvious: bad management crosses all lines. In my present knowledge about but not of the state of medicine -- doctors, patients, physician associations local and county and state and national, hospitals, hospices, skilled nursing facilities, pharmacies and their associations, medical supply houses (durable and disposable medical equipment providers), skilled nursing agencies (nurses for home health care), optical stores, and diagnostic laboratories -- a knowledge which is extensive but not thorough, the view is that the effective interaction of people (to accomplish the job which they're being paid for) can be just as bad here as anywhere else I've ever been. The difference is that here the consequences are of more vital importance, plus you have to pay more to incur them.

There are a lot of good people in this field, people who see a purpose to it which is greater than they are, and who at best can only hope to do their part. Competent people, and better. As a profession, even they have trouble getting along and managing their affairs. Add in all the sometimes and ofttimes incompetents (does Sturgeon's Law apply here?), and you can get a real mess.

Being part of a member services function means I often don't get to see something before it's already well on its way from mess to disaster. Trust me that this is

#### only sometimes amusing.

At any rate, now that I'm loosely associated with the health care field -- as

### assist Buck with his rehabilitative therapy.

Dr. Locke here, with a prescription for one column installment. Please insert this in the usual manner, Buck.

Heart attack, indeed...

#### NATILAILGS.

### Lindsay

Scottish Country Dencing is quite different from Highlard Dancing-there is no involvement with naked swords! Highland Dancing which does use swords I quite like to watch as the whole body dences. I dislike Irish Dancing because there the body is kept rigid whilst the feet fly and I think it looks joyless. Americans who like square-dancing would enjoy our Country Dancing as it is also done in sets. I became interested in ourCountry Dancing through my cousin Allson. Shortly after she came to Carnoustie she was suddenly widowed and as a result met another widow, June, who was a dance teacher and who persuaded Allson along to her class. Buch intrigued, I followed. The class is held under the Royal Scottish Country Pancing bociety which has meetings all over Britain. There are men who are members but this is mainly in the big cities and, paradoxically, often more so in England. There is nothing more Scottish, sometimes, that the Scotsman in England!

1 found that the women there had been attending for years and thought nothing of taking the man's place- the main sim of the class was to teach new dances. When 1 asked how many, there were, to my dismay I was told - thousands. Defore each dence the teacher would give a "walk-through". As a beginner I found many of the expressions used hard to sort out. By first priority was to discover what was meant by "your first corner". It did not seem to occur to anyone that this needed some explanation. I had to figure out for myself that my first corner was the person on my right and my second corner the person on my left. ha! thought 1, light dawns. However then they dame up with other expressions such as a "petronella turn'... "a three-cuarter turn"..."a diagonal figure of eight". I soon discovered that to get, say, the figure of eight wrong landed everyone else up in a heap. The fact that everyone laughed and seemed to repard this as great fun still did not help my confidence. I began to look forward to the class with the same feelings that I'd had on examination monpings.

Then one night as 1 was dencing 1 felt as if 1 had been kicked at the back of my leg. Very indignant I had to sit down proclaiming that someone had kicked me. Trene rushed over to tell me that she had experienced the same sensation when she tore a ligament and evenphe else assured me I had not been kicked. When my foot started to turn black and blue - 1 belkived them. This had me out of the dancing for quite some time and gave me a good excuss to sit and watch. Even when 1 re-started at first 1 only danced the slow strathspey which gives you time to think what comes next. Hy watching time was a great help as by dint of closely following the first\_lady[L\_began to see the various patterns and to appreciate the mathematical workings which moved each couple through the pattern.

Some of the patterns are very complicated and even the old-timers can get it wrong. When everyone ends all tangled up this wan be very funny to watchers and dancers alike. There is a lot of laughter and good-humoured chaff, so that at last I relaxed and did not feel that when I made a mistake it was the end of the world.

Some of the names of the dances are fascinating...HAME CAME THE GUIDMAN...A MAN'S A MAN FOR A' THAT...COME UNDER MY PLAIDIE...AUTUMN IN AFFIK...LAMB SKINNET...POSTIE'S JIG...WILL GREESE...CADGERS...CLUTHA.

1 was amazed at the enthusiasm, there is no hanging about when a dance is announced. In seconds everyone is up on the floor, a far cry from the ballroom dancing of my youth where everyone hung back to let someone else be first up. The usual programme is two fast dances -reels or jigs--and one slow strathspey. This is a help when 1 am feeling out of puff and Bella who is 72 puts me to shame.

i suppose I feel the benefit is the fact that I have to use my brain as well as my body in this activity. It encourages you to think quickly as well as move correctly. Most of all, though...it is fun!

# CORPORATE FANTASY: LETTERHEADS

by Maydene Crosby

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This publication is in the nature of a time capsule. It's not even close to the Feb. 1986 issue, as stated; call it March, 1991, since that's when some hundred copies will be distributed with Tom Sadler's RELUCTANT FAMULUS. There are three reasons for this gap. First, Twill-Tone mimeo paper became scarce, and we lost our supplier and could find no other place to get it. I got one issue out on the office copier at work, but then my employer laid off about 75% of its personnel, including me, and also got rid of the copier. By the time the company

decided it couldn't function without a copier and I learned that retirees were allowed to use the office copier for the cost of the paper, I had been out of work for several years and I couldn't afford to publish. Before the collapse, I ran off this much of an issue, expecting to finish it when I had a new job and access to a publishing method, and it sat in boxes until I finally gave up on the idea of ever doing any more publishing and prevailed on Tom to let at least some fans see the already-copied material. There was also a not-quite-fatal heart attack, which didn't hold things up all that much because they were already held up. I now have medical evidence that I have 2/3 of a heart, which as Dave Locke mentions, is more than most of my friends ever credited me with. (The cardiologist told me that one of the three major arteries supplying the heart is totally blocked, "but there's no point in a bypass because that part of the heart is dead anyway." Cheery.)

Juanita and I have become primarily convention fans and hucksters. Fanzines seldom make profits, though YANDRO broke even during its last 15 or 20 years, while hucksters frequently make profits. This year we're scheduled for Confabulation, Wiscon (both over with by the time you read this), Grandcon and Millennicon in March, Marcon in April, X-Con in June, Inconjunction in July, Rivercon and probably Chicon V in August, Juanita alone will be at Con-Chord in September, Context in October, Ohio Valley Filk Fest, Constellation, and Chambanacon in November. Barring further heart attacks or other problems, of course. Come and say hello, and bring money. I keep my fanzine contacts by letterhacking and doing columns for ANVIL, and TFF MENTOR.

TANDRO began publication in Feb. 1953, under the name FISFA, as it was a newsletter of the Eastern Indiana Science Fiction Association. Juanita Wellons and Reverly Amers were editors, though Pev dropped out of active participation early on. When Juanita and I were married in August 1955, she insisted that I had to be editor and she would be publisher, because she hated to write rejection letters and liked to run the mimeo. Things stayed that way until the last two issues, which I published as well. Publication was monthly for the first fifteen or twenty years, but then the magazine gradually added pages and occasionally missed issues, which meant more pages were added the next time, and... Still, 259 issues isn't a bad total for a general circulation fanzine. Contributors at first were mostly Gene DeWeese and myself, writing both individually and combining our supposed talents as "Thomas Stratton". Well, Stratton eventually wrote a couple of "Man From U.N.C.L.F." novels, and Gene and I did a few other books together under our real names. Juanita, of course, has written more books than both Gene and I, and Gene has written considerably more than I have.

We did get a few other contributors, eventually; George Barr, Marion Zimmer Bradley, Algis Budrys, F. M. Fusby (yes, I'm bragging), L. Sprague de Camp, Roger Ebert, Alexis Gilliland, Joe Hensley, Richard Lupoff, Alex Panshin, John Rackham, George Scithers, who started as a cartoonist, Bob Tucker, Ted White, Foger Zelazny, and nuite a few people who <u>didn't</u> gain any professional fame. If I had room I'd list all of them. And I missed Terry Carr. (Names were picked out of an index done by Denny Lien and never published.) It was a lot of fun. RSC ۰. ۲.

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