Clarke M. McColl M.D. In Memoriam 1898-1976

Dwight C. Ensign
CLARKE M. McCOLL, M.D.
IN MEMORIAM, 1898-1976

OUR late friend and colleague, Clarke McColl, will surely live on in the memories of all who had association with this gentle soul—not only those of us still at HFH, staff, students, nurses, secretaries, ancillary personnel, but especially his former patients. Clarke carried on in a remarkable way the concept of the holistic approach to the practice of Internal Medicine, considering the patient as a whole person, body, mind and spirit. This concept, emphasized by Frank J. Sladen, HFH’s first physician, also influenced many of the senior physicians who were introduced to it in the training program of our Department of Medicine.

When Clarke McColl began to make plans for gradual “retirement” (few doctors can really retire!) he referred many of his old patients to other staff physicians who, in his judgement, could best meet the needs of the individual person. It was not easy for the succeeding physician to live up to the expectations of patients accustomed to the thoughtful and comprehensive care which Clarke had always provided.

While fulfilling the role of the traditional family physician, he approached patients’ problems with an excellent scientific background. A native of Michigan, Clarke McColl was the son of a Port Huron doctor who lived into his 100th year. He graduated from the University of Michigan Medical School in 1922, then came to Henry Ford Hospital for a year’s internship followed by a year in gastroenterology training. He then spent a year in private practice with his father before he returned to Henry Ford Hospital to take charge of the Diagnostic Clinic. He also became responsible for the emergency room, ambulance and externes offered at that time.
In memoriam: Clarke M. McColl, MD

McColl’s enthusiasm and quiet patience helped to make the Clinic (which was renamed the New Patient Clinic) a useful and acceptable learning experience for the dozens of young physicians and surgeons regularly assigned there. But during World War II, when it was particularly difficult for the Hospital to obtain interns and residents, McColl proposed that the new patient service be split up into four medical clinics. These would provide not only the diagnostic examinations but followup care and a continuous doctor/patient relationship.

Thus were born Medical Clinics One, Two and Three in the Department of Medicine. Gradually three more medical clinics were added. For the graduate in training, these clinics, staffed by able senior specialists, provided more exposure to the practice of medicine than mere history taking and physical examinations. The clinics remain as one of Clarke McColl’s significant contributions to the Hospital’s progress from the early “diagnostic clinic” to the organization of specialties in internal medicine, freely consulting with other disciplines.

Dr. McColl was chief of Medical Clinic One from 1952 until 1963 when he became chairman of the Department of Medicine, succeeding the retired Dr. John Mateer. This was a critical period in the Department’s history because of Dr. Mateer’s illness and death. However, Dr. McColl’s organizational ability was immediately apparent as chairman. His luncheon meetings with the entire medical staff brought a more unified type of service and good working relationships between the divisions.

Despite his relatively short tenure as chairman or physician in chief of the Department of Medicine, Dr. McColl was not just an interim chief. In an earlier tribute, a colleague said of him: “His was a task of translating the department from ‘old school’ to new objectives... The mere recounting of the facts of his life leaves too much untold about Dr. McColl. It fails to emphasize how much of himself he put into the development and functioning of the Henry Ford Hospital... As a physician, Dr. McColl has epitomized so many virtues that listing them risks creating an image of a paragon, and he is not that. However, his inexhaustible patience and equanimity must be singled out.”

Three years after reaching retirement age, he stepped down as chairman of the department but continued to carry a full clinical load as a senior consultant. His aggressively loyal group of patients continued to fill his appointment calendar until his final retirement in 1971.

Dr. McColl was a Fellow in the American College of Physicians, a Diplomate of the American Board of Internal Medicine and a member of the American Medical Association, American Society of Internal Medicine, Michigan State Medical Society, Wayne County Medical Society (serving on the Ethics Committee for several years); Detroit Academy of Medicine, American Rheumatism Association; The Prismatic Club, Royal Society of Medicine (Officiate) and Phi Rho Sigma.

His death on the 19th of May, 1976, occurred at the Hospital, the result of lymphoma. Burial was private. A Clarke M. McColl Education Fund for physicians in training at the Hospital remains as a memorial to his service. The sincere condolences of Dr. McColl’s many friends and associates are extended to his family: daughter, Mrs. Mary Prentice; a sister, three grandchildren and one great grandchild.

Dwight C. Ensign, M.D.
Susceptibility of clinical isolates of bacteria to cefamandole, cefoxitin and cephalothin
R. del Busto, MD; A. Suarez, MD; E. Quinn, MD, and D. Pohlod, MS

A screening, referral, and followup program for high blood pressure screening at Henry Ford Hospital: Part I. Results of screening
Andrea Foote, PhD; John C. Erfurt, BA, and John R. Caldwell, MD

Sideroblastic anemias
Louis D. Saravolatz, MD

The association of acute cerebellar encephalopathy and neuroblastoma
M. Reza Jahadi, MD; John G. Whitcomb, MD; Ratnakar Kini, MD, and Robert H. High, MD

Immunological aspects of neoplastic diseases
V. Radhakrishna

Productivity of the roll-streak method to perform anaerobic bacteriology in the routine clinical laboratory
Thomas R. Neblett, PhD

Publications of the staff — Titles and selected abstracts

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